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BELPER RURAL DISTRICT COUNCIL

ANNUAL REPORT

on the

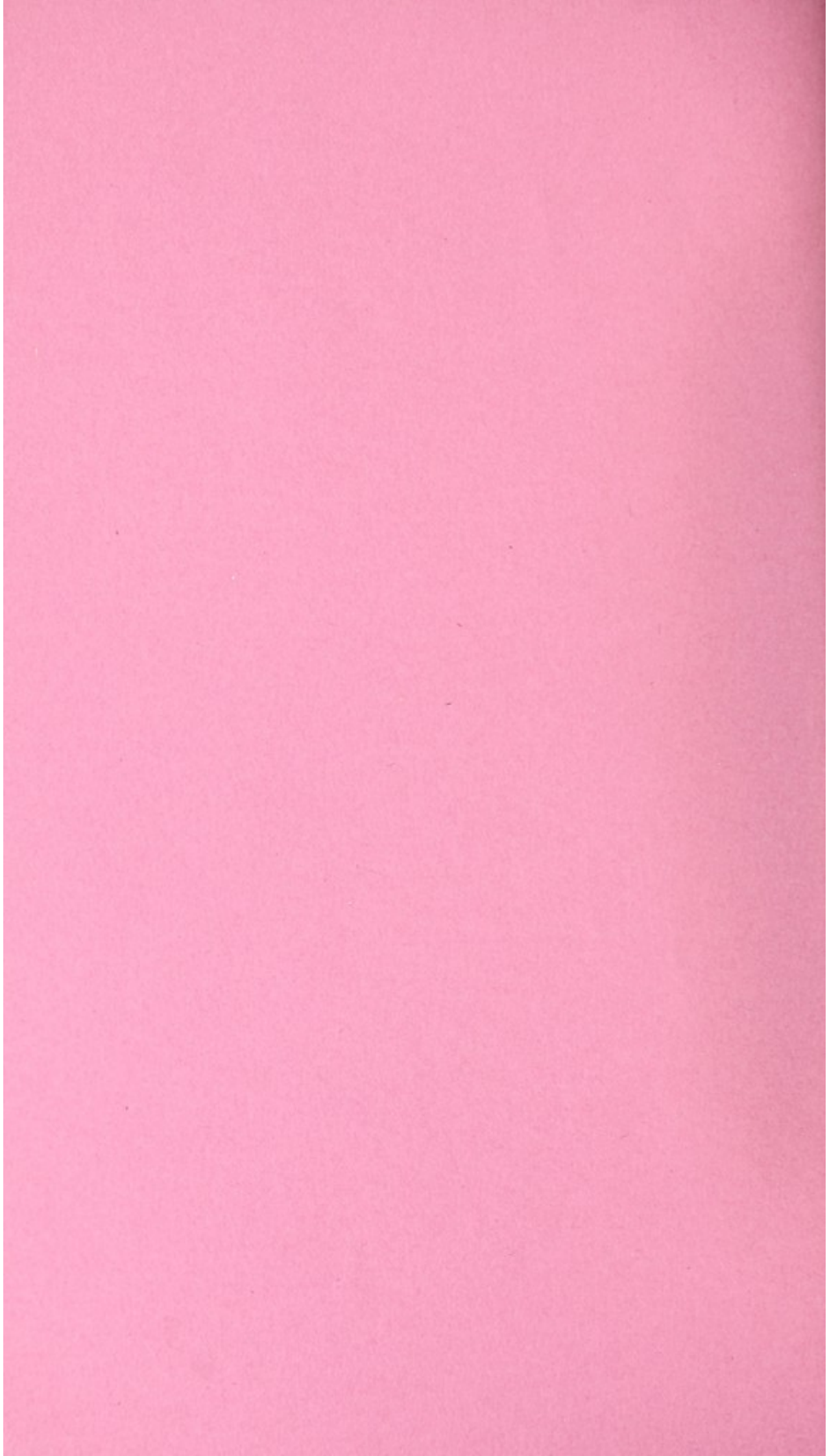
HEALTH OF



THE BELPER RURAL DISTRICT

for the year

1962



BELPER RURAL DISTRICT COUNCIL

BELPER RURAL DISTRICT COUNCIL

Chairman..... J. G. Wright, J.P.  
 Vice-Chairman..... Mr. H. A. H. Fairweather, J.P.

ANNUAL REPORT

Presented to the Council  
 on the  
 15th day of December 1962

MEMBERS

J. G. Wright, J.P.  
 H. A. H. Fairweather, J.P.  
 J. G. Wright, J.P.  
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THE BELPER RURAL DISTRICT

for the year


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 Vice-Chairman..... H. A. H. Fairweather, J.P.



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# BELPER RURAL DISTRICT COUNCIL

1962 - 1963

Chairman.....B.O. Wright, J.P.  
 Vice-Chairman ... ..Mrs. H.E.B. Pulvertaft, J.P.

<u>Parishes</u>	<u>Councillors</u>
Alderwasley.....	P. J. Chadfield (A. S. Morrell)
Allestree.....	(P. Sims T. Neave W. Oates)
Ashleyhay & Idridgehay.....	Dr. G.F. Keatinge
Crich.....	(J. Briggs W. Bowmer)
Darley Abbey.....	T. Taylor
Denby.....	(F. Brown B. O. Wright, J.P.)
Dethick, Lea & Holloway.....	T. B. Thorpe
Duffield.....	(W.M. Cockain E.S. Hanbury)
Hazelwood.....	Mrs. H.E.B. Pulvertaft, J.P.
Holbrook.....	Miss. E.A. Sheldon
Horsley.....	Mrs. O.M. Dawes
Horsley Woodhouse.....	G.P. Smith
Kedleston & Quarndon.....	W.G. Sanderson
Kilburn.....	(Mrs. E.E. Bown E.E. Bown)
Kirk Langley.....	W.J. Urwin
Mapperley.....	J. Wood
Pentrich.....	Mrs. O.M. Walters
Ravensdale Park & Weston Underwood.....	Rev. E. Richardson
Shipley.....	W.H.E. Thorpe
Shottle & Postern.....	A.G. Busby
Smalley.....	H.H. Dix
South Wingfield.....	(L. Walker A.F. Lineham)
Turnditch & Windley.....	Capt. E.V. Lees, D.S.O. R.N. (retd.)

## PUBLIC HEALTH COMMITTEE

All members of the Council  
 Chairman.....W.H.E. Thorpe  
 Vice-Chairman.....E.S. Hanbury



PUBLIC HEALTH OFFICERS OF  
THE BELPER RURAL DISTRICT  
COUNCIL

Medical Officer of Health

W.J. Morrissey, M.B., B.Ch., D.P.H.

Chief Public Health Inspector

H.D. Stanworth, M.Inst.Mun.E., M.R.S.H.  
Chartered Municipal Engineer

Deputy Public Health Inspector

S.M. Carruthers, M.R.S.H., M.A.P.H.I.

District Public Health Inspector

E.N. Morgan, M.A.P.H.I.

Senior Clerk

R.W.G. Whitmore, A.C.C.S.

General Clerk/Shorthand Typist

Miss J.M. Crooks.



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CITY OF BOSTON

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Chief Public Men of the City

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Chief Public Men of the City

The City of Boston, 1800-1850

Chief Public Men of the City

The City of Boston, 1850-1880

Chief Public Men of the City

The City of Boston, 1880-1900

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH  
TO THE BELPER RURAL DISTRICT COUNCIL

Public Health Department,  
Council Offices,  
Field Head House,  
Chesterfield Road,  
Belper, Derby.

17th September, 1963.

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present to you my Annual Report on the health and sanitary circumstances of the Rural District for the year ended 31st December, 1962.

The Registrar General's estimate of the population of the district as at June 1962, was 35,150, an increase of 1560 over that for 1961. In estimating the population, the Registrar General states that account has been taken of the figures produced by the Census carried out in April 1961.

The total number of live births registered during the year was 606, an increase of 67 on the 1961 figures.

Deaths occurring in 1962 amounted to 386 (i.e. 191 males and 195 females), exactly the same number as last year when the total was made up of 203 males and 183 females.

Deaths from Cancer of all sites numbered 60, 17 less than last year, and lung cancer was classed as being responsible for 11 deaths, a decrease of 2 on the previous year's figures. Heart diseases caused 140 deaths, that is 36.27% of the total deaths registered, and vascular lesions caused 60 deaths, 10.36 of the total, the same number as for 1961.

A total of 62 notifications of infectious diseases were recorded during the year. When viewed against the figures for the previous year when a total of 513 notifications were received, this presents quite a bright picture. It must be remembered, however, that the bulk of the notifications received in 1961 were of cases of measles (477 notifications of this disease were received during that year) and in 1962, only 25 cases were notified. This is typical of this particular disease which seems to come in cycles of 2-3 years, hitting a peak in one year and then remaining at a low level for a year or so, repeating itself at a high level in the 3rd year.

For the remainder of cases of infectious diseases notified, these remained at about the same level as for the previous year. Pneumonia notifications fell from 13 in 1961 to 6 in 1962. Scarlet Fever notifications rose from 2 in 1961 to 9 in 1962. One case of Paratyphoid Fever was notified during the year. The patient was admitted to Derwent Hospital, Derby. The origin of this case was not traced, but several sporadic cases occurred in neighbouring districts about the same time.

Although no cases of Smallpox occurred in the district during the year the numbers of cases occurring in other parts of the country gave rise to some concern about the spread of the disease. Persons came forward in quite large numbers to be vaccinated. Several members of the office staff were vaccinated by me at the office. It has been stated since, that vaccination should only be used in the future, in outbreaks of the disease and that routine vaccination of persons is not necessary. Control of Smallpox outbreaks in this country is by ascertainment and isolation of Smallpox cases, the identification, vaccination and surveillance of contacts and effective concurrent and terminal disinfection.



This control policy has been extremely successful over a number of years in a country with a partly immune population. There is no evidence to justify the suggestion that epidemiological control would prove as effective in a totally non-immune population. It is still important that routine primary vaccination of infants should be encouraged. This is best done between 1½ years of age and routine re-vaccination at aged 8 and 12 years.

The whole concept of disease notifications is at present undergoing a change in outlook. Scarlet Fever, Whooping Cough and Measles are no longer regarded with such seriousness as they were 50 years ago. Due to the march of progress in medical science, none of these diseases are any longer the large scale killers they were. It may be fairly stated as well that cases of these diseases are now nearly always mild cases. The diseases causing the greater number of deaths in the present age are Cancer, Heart Diseases, Bronchitis and Diabetics, all of which are not notifiable. The facilities built up by the Local authorities over the years for the investigation of and prevention of infectious diseases could be adopted to meet the needs of the diabetic, the "Heart" patient, the Bronchitic and the Cancer patient. Admittedly, excellent work is at present being carried out by various bodies but the local authorities have facilities which could undoubtedly be of enormous assistance. The time is approaching when there must be a revision of the classes of diseases termed "notifiable". Several surveys have already been carried out in various parts of the country into diseases such as Bronchitis and Diabetes and these have yielded surprising results and have brought to light a number of circumstances where persons are suffering from disease of which neither they nor their private doctors have been aware. An enormous amount of work could be carried out if local authorities were given the powers to assist with the investigation of those diseases not notifiable at the moment.

Another subject which raised a controversy in the country during the year was that of fluoridation of the water supplies. The very great cost of dental treatment, the shortage of dentists and the increasing dental decay particularly among children has given rise to the question of whether some precautionary action to prevent dental decay could be taken. In general, the Medical and Dental professions are in agreement that something must be done in this and are in favour of the addition of fluoride to the water supplies to achieve this end. The National Pure Water Association are against fluoridation because of "the right of the individual to have a say in his own medical treatment".

The whole subject is further discussed in the body of the Report.

I have, once again Ladies and Gentlemen, to place on record my thanks to the Chairman and Members of the Public Health Committee, and of the Council for their help and for their sympathetic consideration of proposals laid before them during the year. I have also to express my gratitude to the General Practitioners, Health Visitors and District Nurses for their help and co-operation, to the Clerk of the Council and the Chief Public Health Inspector for their support and assistance and to the staff of my Department for their untiring efforts during the year.

I have the honour to be, Ladies and Gentlemen,

Your obedient Servant,

W.J. Morrissey

Medical Officer of Health.



## PHYSICAL CHARACTERISTICS AND COMPOSITION OF THE AREA

The Rural District of Belper lies in the South of Derbyshire and is bounded on the north by the Urban District of Matlock and the Chesterfield Rural District, on the south by the County Borough of Derby, the South East Derbyshire Rural District and the Repton Rural District, on the east by the Urban Districts of Alfreton, Ripley, Heanor, and Ilkeston Borough, and on the west by the Wirksworth Urban and Ashbourne Rural Districts. The altitude of the area varies considerably from 150 O.D. at Darley Abbey in the south to 1,000 O.D. in the north at Ashleyhay. The River Derwent, entering the rural district at Lea Wood on the 260 feet contour, flows from north to south, dividing the area fairly equally into east and west. The eastern parishes are where the industries are found, and the residential and agricultural parishes are sited, chiefly on the west bank of the river.

A circle of approximately 10 miles radius, struck from the Council offices, encloses the 28 parishes which are under the Council's administration.

Representation on the Rural District Council varies, one parish sending three councillors and in another instance one representative sits for two parishes. The total representation is 31 councillors.

### PRINCIPAL LOCAL INDUSTRIES

The principal local industries are Deep Coal Mining, Wire Drawing, Colour Pigment manufacture, Pottery and China ware making and decoration, Aluminium Smelting, Agriculture, and Cotton and Knitwear manufacturing.

### STATISTICS OF THE AREA

Area of District	48,074
Population, 1961 Census	33,362
Estimated Mid-Year Population 1962	35,150
Number of houses, flats, shops with houses, hotels and boarding houses	12,296
Rateable Value at 31.3.63	£471,156
Sum represented by penny rate	£1,906. 1. 8.
Rate in the £ Common Charges	1. 0. 6.
Total loan debt.	£2,076,450.17. 7.
Debt for housing only	£1,728,820
Loan debt for sewerage	£58,334. 1. 4.
Houses erected during the calendar year :-	
by Council	33
by Private Enterprise	373

### VITAL STATISTICS

<u>Live Births</u>	<u>Males</u>	<u>Females</u>	<u>Total</u>
Total	280	326	606
Legitimate	273	317	590
Illegitimate	7	9	16

Crude Birth Rate per 1,000 estimated population 17.24

Comparability Factor 0.99

Adjusted Birth Rate 17.06

England and Wales Birth Rate for 1962 18.00

Illegitimate live births formed 2.64% of the total live births.

<u>Still Births</u>	<u>Males</u>	<u>Females</u>	<u>Totals</u>
Totals	7	9	16
Legitimate	7	8	15
Illegitimate	-	1	1
Still Birth Rate per 1,000 Live and Still Births			25.72
Still Birth Rate, England and Wales for 1962			18.1

<u>Total Live and Still Births</u>	<u>Males</u>	<u>Females</u>	<u>Totals</u>
Totals	287	335	622
Legitimate	280	325	605
Illegitimate	7	10	17

<u>Deaths</u>	<u>Males</u>	<u>Females</u>	<u>Totals</u>
	191	195	386
Crude Death Rate per 1,000 estimated population			10.98
Comparability Factor 1.13			
Adjusted Death Rate			12.41
England and Wales Death Rate for 1962			11.9

Infant Deaths (deaths under 1 year)

	<u>Males</u>	<u>Females</u>	<u>Totals</u>
Totals	-	11	11
Legitimate	-	11	11
Illegitimate	-	-	-

Infant Mortality Rates

Total Infantile Mortality Rate per 1,000 total Live Births	18.15
Infant Mortality Rate England and Wales for 1962	21.4
Legitimate Infant Mortality Rate per 1,000 legitimate Live Births	18.64
Illegitimate Infant Mortality Rate per 1,000 Illegitimate Live Births	Nil

Neo-Natal Mortality (deaths under 4 weeks)

	<u>Males</u>	<u>Females</u>	<u>Totals</u>
Totals	-	10	10
Legitimate	-	10	10
Illegitimate	-	-	-
Neo-Natal Mortality Rate per 1,000 total Live Births			16.50

Early Neo-Natal Mortality (deaths under 1 week)

	<u>Males</u>	<u>Females</u>	<u>Totals</u>
Totals	-	9	9
Legitimate	-	9	9
Illegitimate	-	-	-

Early Neo-Natal Mortality Rate per 1,000 total Live Births 14.85



Perinatal Mortality (Still Births & Deaths under 1 week combined)

	<u>Males</u>	<u>Females</u>	<u>Totals</u>
Totals	7	18	25
Legitimate	7	17	24
Illegitimate	-	1	1

Perinatal Mortality Rate per 1,000 total Live and Still Births 39.56

Maternal Mortality

Number of Deaths Nil

Maternal Mortality Rate per 1,000 Live and Still Births Nil

Deaths from Cancer (all forms)

	<u>Males</u>	<u>Females</u>	<u>Totals</u>
	37	23	60

Deaths from Cancer of Lung and Bronchus

	<u>Males</u>	<u>Females</u>	<u>Totals</u>
	11	-	11

## DEATHS

During the year 386 deaths were registered (191 Males and 195 Females). This is the same number as for 1961.

The crude death rate therefore stands at 10.98 per 1,000 population. The figure must be multiplied by the comparability factor supplied by the Registrar General to make allowances for the way in which the sex and age distribution of the local population differs from that for England and Wales as a whole. In addition, the death rate comparability factor has been adjusted specifically to take account of the presence of any residential institutions in each area. When crude death rate is multiplied by the appropriate area comparability factor, it is comparable with the crude rate for England and Wales or with the corresponding adjusted rate for any other area.

The comparability factor for this area is 1.13 and the Crude Death Rate when multiplied by the factor, gives an adjusted death rate of 12.41

Cancer was responsible for 60 deaths (37 Males and 23 Females), vascular lesions of the nervous system was classed as responsible for 60 deaths (23 Males and 37 Females) and coronary disease and angina caused 87 deaths. Taking all heart diseases together the total number of deaths from these diseases was 140 (68 Males and 72 Females). The deaths from heart disease were high in the first quarter of the year, no doubt due to the severe winter. Paradoxically, in spite of the severe winter, deaths from Bronchitis and Pneumonia were down on 1961's figures. Bronchitis was the cause of 9 deaths (17 in 1961) and Pneumonia caused 18 deaths (25 in 1961).

There were no deaths from influenza as against 16 in 1961 and deaths from "other diseases of the respiratory system" were 5, the same number as in 1961.

There were 5 deaths from Tuberculosis of the respiratory system (all males), the first recorded deaths from this cause since 1958. This is a reminder that we are not entirely free of the danger of this disease and early treatment with the assistance of diagnostic x-rays must still be paramount in the thoughts of the medical profession and laymen alike.



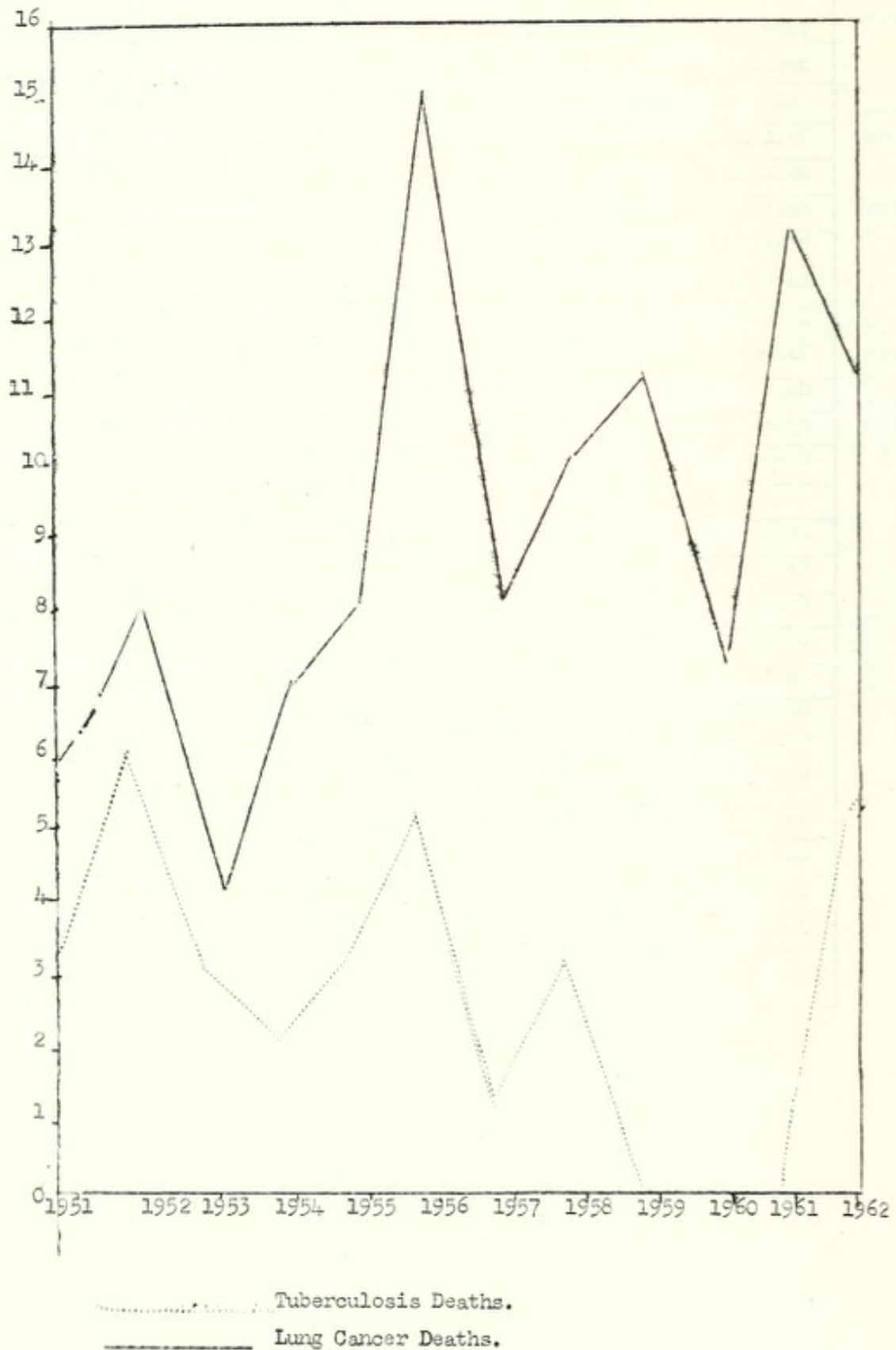
CAUSES OF DEATHS REGISTERED DURING 1962

The following table shows the causes of deaths registered during 1962 :

<u>Causes of Death</u>	<u>Males</u>	<u>Females</u>	<u>Total</u>
Tuberculosis, respiratory	5	-	5
Syphilitic disease	-	2	2
Malignant neoplasm, stomach	10	2	12
Malignant neoplasm, lung, bronchus	11	-	11
Malignant neoplasm, breast	-	6	6
Malignant neoplasm, uterus	-	3	3
Other malignant & lymphatic neoplasms	16	12	28
Leukaemia, aleukaemia	3	-	3
Diabetes	-	2	2
Vascular lesions of nervous system	23	37	60
Coronary disease, angina	53	34	87
Hypertension with heart disease	1	6	7
Other heart disease	14	32	46
Other circulatory disease	16	12	28
Pneumonia	8	10	18
Bronchitis	5	4	9
Other diseases of respiratory system	3	2	5
Ulcer of stomach and duodenum	2	1	3
Gastritis, enteritis and diarrhoea	2	-	2
Nephritis and nephrosis	-	1	1
Hyperplasia of prostate	3	-	3
Congenital malformations	-	3	3
Other defined and ill-defined diseases	5	21	26
Motor vehicle accidents	2	1	3
All other accidents	5	1	6
Suicide	4	3	7
Total	191	195	386

DEATHS FROM PULMONARY TUBERCULOSIS AND LUNG CANCER

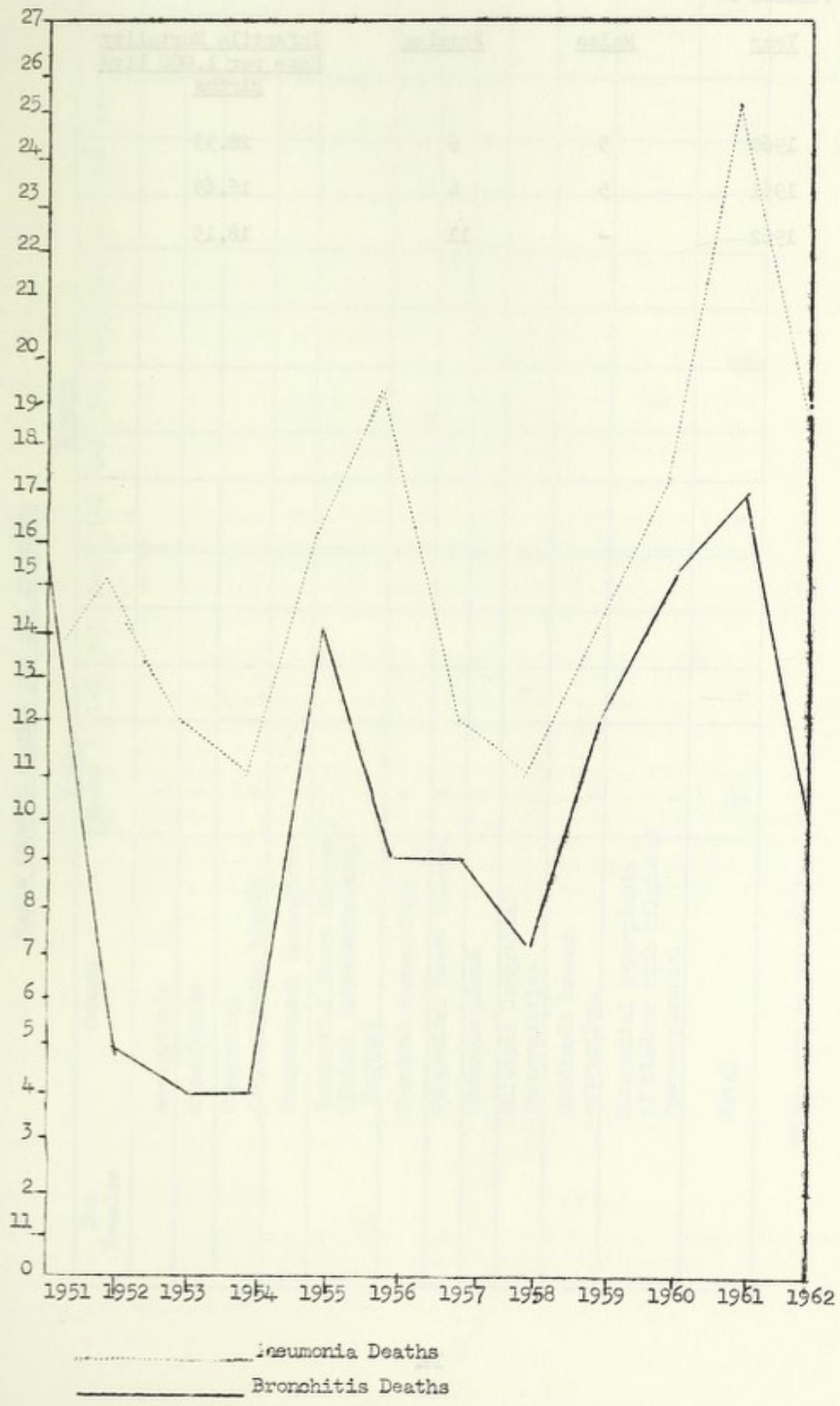
This graph shows the rise and fall in the number of deaths from pulmonary tuberculosis and lung cancer during the past 12 years.



OTHER CHEST DISEASES

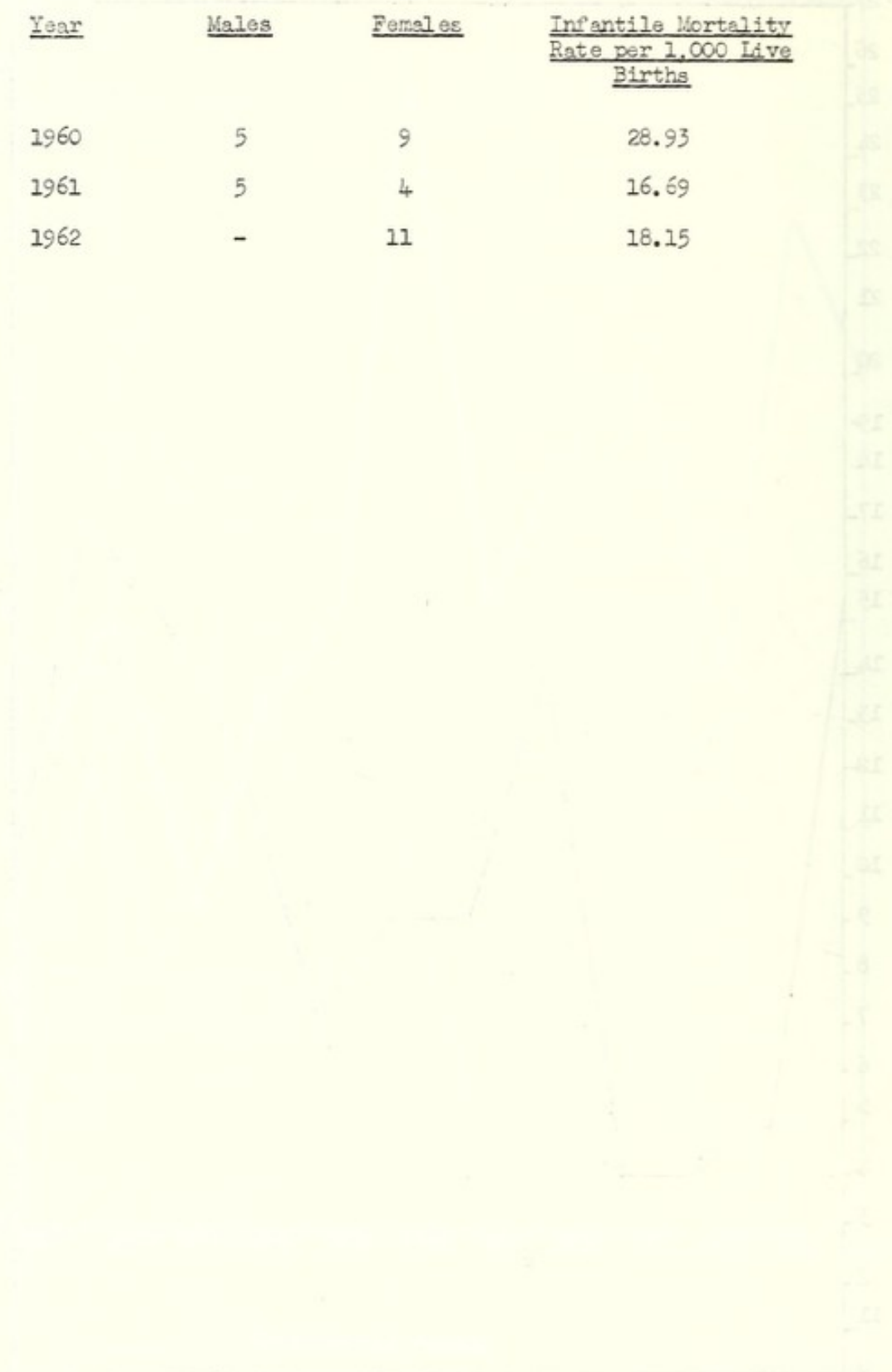
This graph shows the variation in the number of deaths from Bronchitis and Pneumonia over the last 12 years.

During the past 12 years the number of deaths from these two diseases has been as follows:-





During the past 3 years the number of infantile deaths have been as follows :-



INFANTILE DEATHS 1962

TABLE SHOWING CAUSES AND AGE AT DEATH

Sex	Causes	Weeks				Months								Total				
		Under 1	1-2	2-3	3-4	1-2	2-3	3-4	4-5	5-6	6-7	7-8	8-9		9-12			
Females	Atelactasis	1															1	
	Prematurity	1															1	
	Congenital diaphragmatic hernia	1															1	
	Pneumococcal Meningitis					1											1	
	Congenital Heart Disease (Patent Intra-ventricular Septum)	1															1	
	Cerebral Haemorrhage	1															1	
	Congenital Heart Disease	1															1	
	Meconium ileus	1															1	
	Multiple Congenital Abnormalities					1												1
	Difficult breach extraction.	1																1
	Congenital hyperplasia of bladder with bilateral hydronephrosis.	1																1
Total		9	1			1											11	

There were no male deaths under the age of twelve months.



## BRONCHITIS

As will be seen from the graph on Page 11 of the Report, the number of deaths from Bronchitis have been increasing over the past few years. What exactly is this complaint that causes the deaths of over 30,000 people each year and causes suffering to over 2 million people in this country in each year? Bronchitis is the name given to the condition of inflammation of the two branches of the windpipe before they enter the lungs. The causes of this condition are not yet fully understood. The disease usually starts with a morning cough and over the years gradually makes slow persistent progress and may spread to the air cells of the lungs. Later still the patient suffers from shortness of breath and "Wheeziness" and this sometimes results in extra strain being placed on the heart.

Bronchitis is sometimes known as "The English Disease" because it is far commoner here than in America or in European countries and it has been calculated that over 26 million working days are lost each year through it. Men usually suffer more than women.

The smoking of cigarettes and the resultant inevitable irritation of the bronchial tubes is possibly the greatest cause of bronchitis. Those people who do smoke - who have coughs, should be persuaded to give up smoking as not only does this habit harm the bronchial passages but also is believed to affect the lungs and the heart. Older people should set an example to younger people in this connection.

Fog is also known to aggravate bronchitis, in fact most forms of pollution of the air we breathe have the same effect. People who have to work in smoky or dusty atmospheres need special help if they are chest sufferers.

The habit of people in this country which aggravates chest troubles is that of spending the evening in a warm sitting room perhaps in front of the fire and on retiring to bed go into very cold bedrooms with little or no effective heating. This quick change from hot air to cold irritates the bronchial tubes and can result in bronchitis.

The answer to the problem is education. Education of persons with chest trouble, out of the cigarette habit, education of all persons into the habit of heating bedrooms, education of chest sufferers to try, if possible, to live on one floor and not have to undergo the exertion of climbing stairs.

Apart from scientific investigations into the disease, actual treatment of patients is a matter for the private doctors and the hospitals and special units could be provided in hospitals for bronchitis patients. The provision of dry, warm housing accommodation is a matter for the building trade and for the local authorities. With the cooperation of all concerned, much of the suffering resulting from bronchitis could be alleviated.



## INFECTIOUS DISEASES

A total of 62 cases of infectious disease were notified during the year. This is a very great decrease on the number notified during 1961.

The reason for this decrease was that Measles notifications totalling 477 in 1961 fell to 25 in 1962.

The total figure of notifications is too low to be accurately compared with the previous year but for diseases other than Measles the pattern of notifications remained roughly the same as in previous years.

### Scarlet Fever

9 cases of Scarlet Fever were notified. Once again the 5-9 year group was the most affected and the greatest number of cases (4) were notified in July and the parish having the highest number of cases (2) was Smalley. All patients were visited by either myself or the Public Health Inspector for the area concerned. All cases were mild.

### Measles

Only 25 cases were notified, roughly evenly distributed throughout the age groups except that 8 cases were notified in the 5-9 year group. The greatest number of notifications (4) were received in the month of July and the parish of Allestree had the greatest number of cases (8).

### Dysentery

7 cases were notified, 4 in June and 3 in July. All were from two different families without any apparent connection. The patients were spread throughout the age groups.

### Pneumonia

Of the 6 cases notified 4 were in elderly people, one each in the 10-14 and 15-24 year groups. The winter and early spring months were those in which notifications were received. Cases occurred at Smalley, Holbrook, Allestree and Denby.

### Food Poisoning

Only 3 cases of this disease were notified, 1 in September and 2 in October. 2 cases came from Duffield and 1 from Holbrook, one in the 5-9 year group, 2 in the 15-24 year group.

### Erysipelas

One notification of this disease was received in January of this year, the patient being in the over 25 year group, and being at Horsley Woodhouse.

### Paratyphoid Fever

The only notification of this disease was received in July relating to a patient in the over 25 year group at Darley Abbey.

### Tuberculosis Pulmonary

6 cases were notified, more or less evenly spread throughout the year from Smalley, Denby, Horsley Woodhouse, Allestree and Crich. The age group most affected was that for the over 25's.

### Tuberculosis Non-Pulmonary

4 cases were notified, one each in January, March, September and October. 2 cases were in the 10-14 year group and the other 2 were in the over 25 year group. Notifications related to patients living in Allestree, Crich, Darley Abbey and Dethick, Lea and Holloway.



## Parochial Distribution

The following table shows the parochial distribution of cases of infectious disease notified during the year :

Parish	Measles	Whooping Cough	Food Poisoning	Scarlet Fever	Dysentery	Pneumonia	Erysipelas	T.B. Pulmonary	T.B. Non-Pulmonary	Paratyphoid	Total
Alderswasley											-
Allestree	8			1	7	2		1	1		20
Ashleyhay											-
Crich								2	1		3
Darley Abbey									1	1	2
Denby						1		1			2
Dethick, Lea & Holloway											-
Duffield			2	1							3
Hazelwood											-
Holbrook	6	1				2					9
Horsley				1							1
Horsley Woodhouse	1			1			1	1			4
Idridgehay											-
Kedleston											-
Kilburn	1			1					1		3
Kirk Langley											-
Mackworth											-
Mapperley											-
Pentrich	1										1
Quarndon											-
Ravensdale Park											-
Shottle and Postern											-
Shipley	1			1							2
Smalley	6			2		1		1			10
South Wingfield				1							1
Turnditch	1										1
Weston Underwood											-
Windley											-
Total	25	- 3		9	7	6	1	6	4	1	62

No notifications of the following diseases were received :-

Smallpox, Diphtheria, Enteric Fever, Cerebro-spinal Fever, Ophthalmia Neonatorum, and Whooping Cough.

12 cases of infectious disease were removed to hospital.



Age Incidence of Cases of Infectious Disease

The following table shows the incidence of infectious diseases notified by age groups.

Disease	Under 1 Year	1-	2-	3-	4-	5-9	10-14	15-24	25 and Over	Total
Measles	1	4	3	3	2	8	3	1		2
Scarlet Fever				2	1	3	2		1	9
Pneumonia							1	1	4	6
Erysipelas									1	1
T.B. Pulmonary						1	1	1	3	6
T.B. Non-Pulmonary							2		2	4
Dysentery				1		3		1	2	7
Paratyphoid									1	1
Food Poisoning.						1		2		3
TOTALS	1	4	3	6	3	16	9	6	14	62

The following table shows the notifications of infectious diseases received month by month throughout the year.

Diseases	January	February	March	April	May	June	July	August	September	October	November	December	Total
Measles	1	-	2	1	2	-	4	3	-	-	1	11	25
Dysentery	-	-	-	-	-	4	3	-	-	-	-	-	7
Scarlet Fever	-	1	1	1	-	-	4	1	-	-	1	-	9
Pneumonia	1	2	1	1	-	-	-	-	-	-	-	1	6
Erysipelas	1	-	-	-	-	-	-	-	-	-	-	-	1
T.B. Pulmonary	1	-	-	-	1	-	1	1	-	-	2	-	6
T.B. Non-Pulmonary	1	1	-	-	-	-	-	-	-	1	1	-	4
Paratyphoid Fever	-	-	-	-	-	-	1	-	-	-	-	-	1
Food Poisoning	-	-	-	-	-	-	-	-	1	2	-	-	3
Totals	5	4	4	3	3	4	13	5	1	3	5	12	62



## B.C.G. VACCINATION

The two schemes in operation, that is the scheme administered by the Chest Physician on the one hand and the County Council Scheme on the other, continued to operate throughout the year. The Scheme administered by the Chest Physicians is limited to children who have been in contact with cases of Pulmonary Tuberculosis and the County Council Scheme is for School children of the age of 13 years and upwards. Visits were made to a Grammar School and a Secondary Modern School in the Belper Urban District during the year, and a number of children resident in the Rural District received skin tests, and were vaccinated with B.C.G. if this was found necessary on subsequent inspection.

## DIPHTHERIA AND DIPHTHERIA IMMUNISATION

No case of Diphtheria has been notified in this district since 1946

I am indebted to Dr. J.B.S. Morgan, County Medical Officer, who has kindly supplied the following details regarding Diphtheria Immunisations carried out during the year in this district.

Record cards received during the year in respect of children immunised during that year.

Primary Immunisation	-	441
Booster Injections	-	259

## POLIOMYELITIS AND POLIOMYELITIS VACCINATION

During the year 331 cases of poliomyelitis were notified in England and Wales, the lowest number for many years. This is probably due to a great extent to the immunisation campaign which occurred in 1956. This year the oral Salin Vaccine supplemented the Salk vaccine and there is no doubt that the absence of injections and needles make vaccination much more readily acceptable. Again there were no cases in the rural district, but freedom from infection can only be maintained if parents continue to bring their children for immunisation.

## IMMUNISATION AGAINST WHOOPING COUGH AND TETANUS

Arrangements for immunisation against these two complaints is available through the Derbyshire County Council and the same arrangements remained in force throughout the year. Injections are given at the County Council Clinic or by the General Practitioners and 'booster' doses are given after the recommended interval has elapsed.

## NATIONAL ASSISTANCE ACT 1948 - SECTION 47 NATIONAL ASSISTANCE (AMENDMENT) ACT, 1951

These two Acts give authority to secure necessary care and attention for persons who :

- (a) are suffering from grave chronic disease, or being aged and infirm or physically incapacitated are living in insanitary conditions, and
- (b) are unable to devote to themselves, and are not receiving from other persons proper care and attention.

It was not found necessary to take any formal action under these Acts during the year although the condition of 3 elderly persons living in the district were investigated.

I am most grateful for the help I received in connection with these elderly people from Mr. J.W. Walters, the County Welfare Officer for this area.



During theyear a total of 13 medical examinations were carried out on members of the staff prior to their being admitted to the Superannuation and Sick Pay Schemes. Of this number 1 was office staff and 12 were manual workers.

BACTERIOLOGICAL EXAMINATIONS

All Bacteriological Examinations in connection with milk, water, food supplies and infectious disease are carried out at the Public Health Laboratory (Medical Research Council) 121a Osmaston Road, Derby, (Telephone Number Derby 45597).

The following table shows the results of examinations carried out at the Public Health Laboratory of specimens submitted by the Department during 1962.

	Positive	Negative
Faecal Specimens - Paratyphoid B	1	5
Faecal Specimens - Salmonella	-	1
Faecal Specimens - Staphylococci	1	1
* Water	3	9
Total	5	16

\* Positive indicates an unsatisfactory sample.  
Negative indicates a satisfactory sample.

Specimens taken by Medical Practitioners are forwarded direct to the Laboratory, and the results are not communicated to this Department except when a positive result leads to a notification under the Infectious Diseases Regulations.

HOSPITAL SERVICES

Cases of infectious diseases occurring in the district may be removed to the Derwent Hospital, Derby.

Cases of Tuberculosis requiring admission to hospital are referred to the Chest Physician, Chest Centre Green Lane, Derby, (Telephone Number Derby 47866), and may be admitted to the Derwent Hospital, Draycott Hospital or to Walton Sanatorium, Chesterfield.

All admissions and discharges of cases of infectious disease including Tuberculosis, are notified to me as the District Medical Officer of Health.



## PREVENTION OF DENTAL CARIES BY FLUORIDATION

One of the penalties of a high standard of living is an increase in dental decay. The dental condition of British children has deteriorated seriously during the past 20 years and it has been estimated that their teeth are probably amongst the worst in the world.

More than 30 years ago it was noted that people brought up in certain areas of the U.S.A. often had mottled teeth. Investigations showed that this discolouration was associated with excessively high concentrations of fluoride in the water. It was noted, however, that the teeth of these people was remarkably free from decay. Widespread studies of water fluoride contents showed that areas with 3.5-5.0 parts per million of fluoride in water showed this discolouration and freedom from dental decay. With fluoride concentrations of 1.0-1.5 parts per million, teeth showed no discolouration, but had low decay rates. The maximum benefit was found in children who had ingested this water during the period of tooth formation from 1-8 years. Later it was shown that the benefit conferred in childhood was maintained well into middle age. Similar studies were carried out in England.

It was decided in America in 1944 to add fluoride to some water supplies to see if the same beneficial effect could be obtained. The ideal concentration of 1.0-1.2 parts per million was adopted. Detailed medical and dental studies were started in 3 areas with 3 similar areas as controls. The results of these studies were assessed after 10 years, and the findings were similar to those areas where the water had a naturally high fluoride content. No detrimental effect on general health was found in any of the studies. Even after the first five years the results were so impressive that interest was aroused in this country and the Government sent a mission to the U.S.A. and Canada to see Fluoridation in operation, to evaluate its effect in combating dental decay, to consider the effect on general health and to study the technical processes involved. The mission reported that it found no scientific evidence of danger to health from the prolonged consumption of water containing fluoride in low concentration and its mechanical addition to water supplies presented few difficulties. It concluded that fluoridation was a valuable health measure and that it be considered for this country. It recommended setting up of study areas before general adoption.

The results of the first five year studies in the U.K. published by the Stationery Office in 1961, were in line with the expected results.

Checks are made at the water works and at different parts in the whole distribution system. The results of the "water works" samples have been checked by the Government Chemist and independent samples taken by the Area Public Health Staffs. A concentration of 0.9-1.0 parts per million has been constantly maintained in the areas under study.

Most of the fluoride added to drinking water is wasted since only a small proportion is used by babies and young children. Fluoridation of part of a water supply, however, is impracticable. The cost however is small having regard to the cost of dental treatments and suffering caused by dental decay. Actual costs however vary from 4½d to 10d per head per annum. Equipment in this country has been imported or specially manufactured and it is likely they would be reduced if fluoridation was more widespread. An ultimate figure of 6d per head per annum has been predicted.



## Fluoride in Water and Food

Fluoride salts are widely distributed throughout the Earth's crust and fluoride element is present to some extent in all food stuffs. Although most drinking waters contain only trace amounts, it is present in substantial quantities in the widely consumed liquid beverages i.e. tea and beer. It would be surprising if man had not succeeded in coming to terms with one of nature's common elements with which he is in daily contact. Nevertheless, there are limits to the amounts of fluoride that can be consumed without harm. In certain parts of the world a hot climate leading to a high fluid intake coupled with a very high fluoride content in the drinking water has produced signs of chronic fluoride poisoning in the inhabitants. Such cases have been reported in India and South China.

A Ministry of Health survey of mongolism in high and low fluoride areas in the United Kingdom shows no association as had been alleged. Wherever investigations were undertaken to test the effect on health from consuming drinking water in optimal amounts, none have revealed any harmful effects at any age level. The most complete studies were those carried out at Newburgh-Kingston and Bartlett-Cameron in the United States.

From the foregoing, the following conclusions may be drawn.

- (i) Fluoride salts are widely distributed in nature and consumed in our daily diet throughout life.
- (ii) Where fluoride salts in optimal amounts are naturally present in drinking water they have a marked effect in reducing dental decay.
- (iii) Where fluoride salts are added to the water to raise the concentration to the optimal 1.0 parts per million, exactly the same effects are produced.
- (iv) Independently of the level of fluoride in drinking water or whether fluoride has been added, all individuals progressively store fluoride in their bones until middle age is reached. There is no evidence to suggest that in old age the ability to eliminate fluorine from the body is impaired.
- (v) There is now abundant evidence from numerous sources collected over many years testifying to the essential safety of controlled fluoridation as a public health measure.



ANNUAL REPORT OF THE CHIEF PUBLIC HEALTH INSPECTOR

To the Rural District Council of Belper

Public Health Department,  
Council Offices,  
Field Head House,  
Chesterfield Road,  
Belper, Derby.

17th September, 1963.

Mr. Chairman, Ladies and Gentlemen,

I submit herewith my annual report on the work undertaken by the Public Health Department during the year 1962.

The work involved in dealing with the day to day inspections of meat, drainage works, housing improvement grant works, petrol installations, reported nuisances, etc., has prevented any attempt at systematic periodical inspections of shops, food premises, houses, factories or caravan sites.

The pressure of the current problems in hand also continues to cause delay in dealing with any programme of declaring smoke controlled areas, and the longer the delay in dealing with this matter the greater the increase in survey work when the problem is eventually tackled. Fortunately we have no extensive area of air pollution and even the localised instances of emission of dark smoke are only intermittent and not excessive. Nethertheless, in fairness to the many householders who are already voluntarily observing the conditions governing smoke controlled areas, it would be advisable to deal with some of the rapidly developing districts in the near future. Recently reported instances of difficulty in obtaining approved fuels in smoke controlled areas have lessened the disappointment of not being able to proceed in this field, because such occurrences must add to the frustrations of the Public Health Department staff, who already have more than their share of complaints, protests, and objections.

The satisfying work of assisting house owners to improve their properties continues with greater impetus, with the additional publicity from government departments and the discussions as to whether or not the improvement grant standards should be adopted as a new compulsory Housing Act standard. The rateable value of this district must have been considerably increased due to the large amount of grant aided improvement work carried out since this Council was sufficiently far-sighted to approve grants when they were at the discretion of local authorities under the Housing Act 1949. The greatest benefit has gone and continues to go, to the owner-occupiers of houses, and with the change of the permissible rent increase for improvement works from 8% to 12½%, it would appear that landlords who have the capital to improve their houses with their tenants consent are missing the opportunity to take advantage of a sound investment.

The sections of my report giving certain tables which are returned to government departments and the County Council give some idea of the varied duties performed, and I have added material which outlines the services over which the Department's officials have to carry out supervisory duties.

I thank the members of the Public Health Committee for their sympathetic and helpful approach to the Department's work, the Council's staff generally for the assistance which is required from them from time to time and the Public Health Department staff in particular for their continued endeavour to carry out their duties with a minimum of supervision.

I am, Ladies and Gentlemen,

Your obedient Servant,

H.D.STANWORTH

Chief Public Health Inspector



## SCAVENGING

The Councils' direct labour schemes for the collection of house refuse and the emptying of pail closets and cesspools have continued to work fairly smoothly.

### House Refuse Collection

The eight districts into which the area is divided for the purpose of house refuse collection have varying sizes of teams, depending on the extent to which the districts are built-up. The western parishes team comprises two men only, with one lorry, because of the scattered nature of the properties served, whereas Allestree, Darley Abbey and part of Quarndon there are two teams, each consisting of a driver-loader and four collectors with the latest types of lorry which compact the load. The remainder of Quarndon with Duffield, employs one lorry with a driver-loader and two collectors but one additional loader divides his time between these three teams. The northern district employs eight men on one large capacity lorry and one smaller capacity lorry to facilitate the collection in the many steep and narrow lanes which have to be negotiated, and for this reason the district cannot be easily divided into two separate collecting areas. One other workman assists with refuse collection in the north, but he is also part-time tip attendant, paper baler and odd job man. The eastern parishes are divided into three separate areas employing three lorries, with three driver-loaders and seven collectors.

This gives a total labour force on house refuse collection of 34 men under the control of a general foreman, using 9 lorries with one spare lorry kept for emergencies, and the teams work from the three depots at Crich, Duffield and Kilburn.

### Refuse Tips

The lease of one tip at Kirk Langley terminated during the year, when it was full and was re-instated with top soil, grass seed and new fencing.

The Hilt's Quarry, Crich has continued to be a useful and unobtrusive tipping area, but the new owners of this quarry have not yet signed the agreement giving us permission to continue tipping, although the same half yearly rental is being paid to them as was paid to the former owners.

The Darley Abbey tip receives considerable quantities of refuse and involves the full time working of a tip attendant, but on many occasions he has to help out on the collection lorries when the teams are short staffed and at such times the tip levelling and sealing has to be done during hours of overtime.

The Council also rents a piece of land for tipping purposes at Sandy Lane, Horsley, but all the refuse from that area is at the present time being deposited on land at Brickyard Lane, Kilburn, where the owner is anxious to fill a former clay hole and affords the Council free tipping.

### Salvage Collection

All teams collect clean waste paper and other materials to recover as salvage. The use of a trailer considerably increases the cost of the road fund licence and insurance of a lorry, and in parts of the district the use of a trailer on the lorry is impossible, and for these reasons there are only three trailers in use, the remaining teams collecting in sacks.

A manual paper press at the Duffield depot keeps one man employed full time on paper baling and another manual press at the Crich depot is used by one man who is employed on a variety of jobs.

During the year 216 tons. 18 cwt. 1 qtr. of waste paper was collected and sold, realising £1,324. 10. 7d. and during the same period the sale of scrap metal and rags realised £196. 12. 11d, making a total of £1,521. 3. 6d.

### Pail Closet and Cesspool Emptying

The weekly emptying, by direct labour of just over 600 pail closets is carried out by a driver and two men, but these men also carry out cesspool emptying and also assist with house refuse collection for part of the week.



During the year, the Council decided to give a free cesspool emptying once every six months and any emptying done at a less frequent period must be paid for at the former rate of £1 for the first load of 800 gallons and 5/- for each subsequent load during the same visit. Most emptyings are now done on the free basis and the new arrangement has led to an increase in the number of requests for cesspool emptying.

#### Cost of Scavenging

The cost of the house refuse collection and disposal scheme, night soil collection scheme and cesspool emptying for the year ended the 31st March, 1963 totalled £35,682, the equivalent of a rate of 1s-9.3d. in the pound, or an average cost of £2.18.0. per house for the year.

#### SLAUGHTERHOUSES AND SUPERVISION OF FOOD SUPPLIES

##### Slaughterhouses

There are six licensed slaughterhouses in the district, one dealing with pigs only and being also a bacon and pork products factory, one used wholly for the wholesale trade but not now killing any large numbers, and one used for part wholesale and part retail business. The other three deal only with animals for the retail trade, and at one of the slaughterhouses four retail butchers kill animals for their own trade.

##### Meat and Food Inspection

The carcasses and organs of all cattle (bulls, bullocks, cows and heifers), calves and pigs killed in the district for human consumption were inspected at the time of or shortly after slaughter and there was also almost 100% inspection of sheep and lambs.

Carcases and Offal inspected and condemned in  
whole or in part

	Bulls	Bullocks	Cows	Heifers	Calves	Sheep and Lambs	Pigs	Horses
Number killed	-	327	629	664	24	Not Known	6142	-
Number inspected	-	327	629	664	24	1911	6142	-
Carcases condemned diseases except Tuberculosis Cysticerci	-	Nil	2	1	Nil	1	1	-
Cases of which some part or more was condemned	-	10	30	18	Nil	6	11	-
Percentage of the number inspected detected with disease other than Tuberculosis and Cysticerci	-	3.058	5.087	2.861	-	.366	.195	-
Carcases condemned Tuberculosis only	-	Nil	Nil	Nil	Nil	Nil	Nil	-
Cases of which some part or more was condemned	-	1	2	Nil	Nil	Nil	9	-
Percentage of the number inspected detected with Tuberculosis	-	.305	.318	-	-	-	.146	-
Carcases condemned Cysticercosis	-	Nil	Nil	Nil	Nil	Nil	Nil	-
Cases of which some part or more was condemned	-	Nil	Nil	Nil	Nil	Nil	Nil	-
Carcases submitted to treatments refrigeration	-	-	-	-	-	-	-	-
Carcases totalled and totally condemned	-	Nil	Nil	Nil	Nil	Nil	Nil	-

The following is a list of the meat and other foodstuffs found to be diseased or unsound and voluntarily surrendered :-

<u>Bullocks</u>	10 livers 1 mesentery
<u>Cows</u>	1 carcass and all organs 2 hindquarters 2 sides 29 livers
<u>Heifers</u>	1 carcass and all organs 1 set of lungs 17 livers
<u>Sheep and Lambs</u>	1 carcass and all organs 4 legs 4 loins 3 livers
<u>Pigs</u>	1 carcass and all organs 4 legs 4 heads 4 livers 2 plucks 8 sets of lungs
<u>Other Foodstuffs</u>	5 x 6 lb. tins of ox tongues 1 x 4 lb. 5oz. tin of cooked ham 1 x 6 lb. tin of corned beef 1 x 12 oz. " " " 1 x 7 oz. " " "

#### Disposal of Condemned Food

All condemned meat and offal is stained before leaving the slaughterhouse and removed to authorised premises for sterilisation and all raw knacker meat sold for pet's meat is stained before sale.

Other unsound foods are disposed of on the refuse tips where several loads of material immediately cover it.

#### FOOD AND DRUGS ACT, 1955

##### Sampling of milk and other foods.

The duty of sampling milk and other foods falls upon the County Council and I am indebted to Mr. R. W. Sutton, B.Sc., F.R.I.C.S., F.C.S., County Analyst, for the following report :-

"In this area 122 samples, including 65 Milks, were taken during the year.

One sample of T.T. Pasteurised Milk contained a small amount of added water. This was dealt with by caution notice. The remaining samples were classed as satisfactory."



(b) Preparation or manufacture of sausages, potted, pressed, pickled or preserved food intended for sale.

There are 13 premises registered under Section 16 of the Food and Drugs Act, 1955, 11 in connection with the preparation or manufacture of sausages or potted, pressed, pickled, or preserved meats intended for sale, and 2 fish friers.

FOOD HYGIENE (GENERAL) REGULATIONS, 1960

The conditions laid down in these regulations are observed in most food premises, and on inspection of new shops where it is often found that certain requirements are not complied with, the occupiers usually quickly cooperate when the shortcomings are pointed out to them.

Much useful work can be done in health education in this type of premises, and it would be desirable to make routine periodical inspections of all food premises but this cannot be done at the present time due to the amount of other work undertaken by the Department.

The following list classifies the food premises in the district :-

Hotels and boarding houses	10
Public houses and clubs	65
Restaurants	1
Cafes and snack bars	13
Works canteens	13
School canteens	26
Hospitals and Institutions	4
General Stores	76
Grocers	19
Greengrocers	8
Butchers	18
Fish friers and fishmongers	2
Bakehouses	2
Confectioners	1
Ice-cream manufacturers	2
Total	<hr/> 260 <hr/>

PETROLEUM (CONSOLIDATION) ACT, 1928.

There were five new premises licensed to store petroleum spirit for the first time during 1962, and altogether 76 premises were licensed for the year.

New installations require many visits of inspection and careful supervision, and on completion the site is surveyed in the company of the Fire Prevention Officer of the Derbyshire Fire Service, and all premises comply with the Home Office Code of Practice.

## MOVABLE DWELLINGS AND CAMPING SITES

During 1962 two new caravan site licences were issued under the Caravan Sites and Control of Development Act, 1960.

A number of temporary licences expired on the 31st December, 1962 and are now being followed up with a view to writing off or renewing.

The following table sets out the number of site licences in force at the end of 1962, parish by parish :-

### CARAVAN SITES AND CONTROL OF DEVELOPMENT ACT, 1960 SITE LICENCES GRANTED

Parish	Permanent Residential		Holiday Seasonal		Total	
	No. of Sites	No. of Caravans	No. of Sites	No. of Caravans	No. of Sites	No. of Caravans.
Alderwasley	6+	164	-	-	6	164
Crich	2	2	1	1	3	3
Dethick, Lea and Holloway	1	12	3	5	4	17
Denby	1	2	-	-	1	2
Hazelwood	2	2	-	-	2	2
Holbrook	2	2	-	-	2	2
Idridgehay	1	3	-	-	1	3
Kilburn	2	2	-	-	2	2
Kirk Langley	1	2	-	-	1	2
Mackworth	3	4	-	-	3	4
Mapperley	1	1	-	-	1	1
Pentrich	1	1	-	-	1	1
Shipley	1	1	-	-	1	1
Smalley	1	2	-	-	1	2
South Wingfield	2	4	-	-	2	4
Weston Underwood	1	1	-	-	1	1
Total	28	205	4	6	32	211

\* NOT included in this total is the site at Alderwasley which is licenced by the Caravan Club for 5 caravans and therefore exempted from the provisions of the Act.



PREVENTION OF DAMAGE BY PESTS ACT, 1949

The following table gives details of the number of inspections and treatments carried out during the twelve months ended 31st December, 1962.

	TYPE OF PROPERTY				(5) Agricultural
	Non-Agricultural				
	(1) Local Authority	(2) Dwelling Houses (inc. Council Houses)	(3) All other (including Business Premises)	(4) Total of Col. (1) (2) & (3)	
Number of properties in Local Authority's District	49	12082	1289	13420	552
Number of properties inspected as a result of					
(a) Notification	3	279	9	291	6
(b) Survey under Act	33	706	4	743	39
Total inspections carried out - including re-inspections	169	1366	33	1568	49
Number of properties inspected which were found to be infested by :					
(a) Rats (Major	3	-	-	3	-
(Minor	32	510	8	550	7
(b) Mice (Major	-	-	-	-	-
(Minor	-	14	1	15	1
Number of infested properties treated by Local Authority	35	527	9	571	7
Total treatments carried out - including re-treatments	141	1286	26	1453	22
Number of "Block" control schemes carried out.	-	6	-	6	-

HOUSE PURCHASE AND HOUSING ACT, 1959

During 1962 the Council paid 23 discretionary grants amounting to £4,764.16. 9d., and 47 standard grants amounting to £4,519.17. 5d., making a total of £9,284.14. 2d., three quarters of which is refunded by the Exchequer.

HOUSING

No clearance areas were presented to the Council during the year, but the confirmation of the Minister of Housing and Local Government of one clearance order involving 9 houses was received.

The following is a summary of the information submitted to the Minister of Housing and Local Government as to certain aspects of the Department's work during 1962 under the Housing Acts and the Public Health Act, 1936.

A.1. Houses Demolished	Number of Houses	Displaced during quarter	
		Persons	Families
In Clearance Areas			
(1) Houses unfit for human habitation	-	-	-
(2) Houses included by reason of bad arrangement, etc.	-	-	-
(3) Houses on land acquired under Section 43 (2) Housing Act, 1957	-	-	-
Not in Clearance Areas			
(4) As a result of formal or informal procedure under Section 16 or Section 17(1) Housing Act, 1957	3	7	1
(5) Local Authority owned houses certified unfit by the Medical Officer of Health	-	-	-
(6) Houses unfit for human habitation where action has been taken under local Acts	-	-	-
(7) Unfit houses included in unfitness orders	-	-	-
A.2. Number of dwellings included above which were previously reported as closed	-	-	-
B. UNFIT HOUSES CLOSED			
(8) Under Sections 16(4), 17(1) and 35(1) Housing Act, 1957	7	20	6
(9) Under Sections 17(3) and 26 Housing Act, 1957	-	-	-
(10) Parts of buildings closed under Section 18 Housing Act, 1957	-	-	-
C. UNFIT HOUSES MADE FIT AND HOUSES IN WHICH DEFECTS WERE REMEDIED			
	By Owner	By Local Authority	
(11) After informal action by Local Authority	9	-	
(12) After formal notice under (a) Public Health Acts	8	1	
(b) Sections 9 and 16 Housing Act, 1957	8	-	
(13) Under Section 24 Housing Act, 1957	-	-	



RENT ACT, 1957

During 1962 there were no applications for certificates of disrepair under the Rent Act, 1957, and only one application by a landlord for the cancellation of a certificate of disrepair issued previously. The necessary work had been carried out and the certificate was duly cancelled.

FACTORIES ACT, 1961

The following table is a copy of the information supplied to the Home Office in connection with factory inspections:

Part I - Inspections

Premises	No. on Register	No. of Inspections	No. of Written Notices
(i) Factories in which Sections 1,2,3,4 and 6 are to be enforced by Local Authorities	3	3	-
ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	61	39	-
ii) Other premises in which Section 7 is enforced by the Local Authority (excluding outworkers premises)	11	13	3
Total	75	53	3

Cases in which defects were found 3

Cases in which defects were remedied 3

t VIII - Outwork (Sections 110 and 111)

<u>Nature of Work</u>	<u>No. of Outworkers</u>
Wearing apparel	39

## GENERAL SANITARY ADMINISTRATION

In addition to the visits and inspections indicated in other tables in the report, the following information is given as to several other types of premises inspected during 1962.

Premises etc.	on Register	No. of Inspections
Bakehouses	2	2
Dairies	26	7
Milk distributors	74	8
Ice-cream Premises (a) Manufacturers (b) Dealers	2 113	3 13
Premises registered for the preparation or manufacture of sausages or potted, pressed, pickled or preserved food.	13	20
All food premises (including above)	268	-
Slaughterhouses	6	754
Knacker's Yards	1	6
Factories and Workplaces	80	53
Outworkers	37	37
Caravan Sites.	32	61

## WATER SUPPLIES

The following observations as to water supplies have been received from Mr. I. G. Edwards, the Engineer and General Manager of the South Derbyshire Water Board :-

- (a) The water supplied to the area has been satisfactory in (a) quality (b) quantity.
- (b) Regular examination is made of the raw water going into supply. As all water is treated, the majority of samples are taken after treatment. A total of 151 bacteriological and 9 chemical samples were taken both at the works and from various points in the Belper Rural District.
- (c) Only the proportion of the supply obtained from the Derwent Valley Water Board is liable to plumbo-solvent action. Under the Derwent Valley Water Act, 1899, water supplied by the Board is required to be treated by them for the prevention of such action before the water is delivered to any of the constituent Undertakings.
- (d) All water is chlorinated before being passed into supply.
- (e) The number of dwelling houses and the estimated population is shown on the attached list. I have no record as to the number of supplies by means of standpipes.



The following figures have been submitted to the Public Health Laboratory for bacteriological examination and to the County Council for chemical analysis:

Parish	No. of Dwellings Supplied	Estimated Population Supplied
Alderwasley	4	13
Allestree	2,918	9,221
Ashleyhay	-	-
Crich	896	2,831
Darley Abbey	1,126	3,558
Denby	599	1,893
Dethick, Lea and Holloway	356	1,125
Duffield	1,298	4,102
Hazelwood	81	256
Holbrook	539	1,703
Horsley	205	648
Horsley Woodhouse	426	1,346
Idridgehay	37	117
Kedleston	9	28
Kilburn	738	2,332
Kirk Langley	149	471
Mackworth	46	145
Mapperley	105	332
Quarnston	544	1,719
Ravensdale Park	-	-
Shipley	235	746
Shottle	33	104
Smalley	549	1,735
South Wingfield	544	1,719
Turnditch	69	218
Weston Underwood	38	120
Windley	39	123
Total	11,584	36,605



## WATER SAMPLING

The following samples have been submitted to the Public Health Laboratory for bacteriological examination and to the County Analyst for chemical analysis :-

	Submitted for Chemical Analysis			Submitted for Bacteriological Examination		
	No. of Samples	Satisfactory	Unsatisfactory	No. of Samples	Satisfactory	Unsatisfactory
Public supplies :- Treated	2	2	-	5	4	1
Untreated	-	-	-	-	-	-
Private supplies :- Treated	-	-	-	-	-	-
Untreated	-	-	-	7	5	2

## SEWERS AND SEWAGE DISPOSAL

I give below my comments on the sewers and sewage disposal works in the district in my capacity as Engineer and Surveyor.

During the year considerable extensions to the sewerage system have been made by private and speculative developers in the parishes of Darley Abbey, Allestree, Duffield, Quarndon, Denby and Holbrook to provide for the drainage of new houses. Most of these extensions will eventually be offered for adoption as public sewers and their construction has therefore to be carefully inspected at all stages. In addition to these larger diameter sewers, the house drains connecting to them have had to be tested and this important part of the building supervisory work has involved the inspection of approximately 10,000 yards of pipe.

The volume of sewage being treated at the Council's eighteen sewage disposal works has continued to increase and the production of a satisfactory final effluent is consequently harder to maintain. At Duffield and Allestree sewage disposal works, it has been found necessary to replace a total of four of the bacteriological filter beds and the provision of an additional filter bed at Duffield is planned. The whole of the pumping plant at this works has now been replaced with new higher efficiency motors and pumps and it is intended to reclaim two of the original motors for further service at Allestree pump house. The sludge drying facilities at two of the disposal works were extended and improved during the summer months by the use of direct labour.

Capital Schemes which were let to Contract during 1962 comprised the sewerage and sewage disposal schemes for Idridgehay and Turnditch and although both schemes are virtually complete the connecting up of private drains has been somewhat delayed by the recent bad weather.

Schemes which are now awaiting the approval of the Ministry of Housing and Local Government and the County Council respectively comprise the scheme for the drainage of the Shottlegate area to the Belper Urban District Council's proposed sewerage scheme at Blackbrook and the sewerage disposal scheme for Weston Underwood and Mugginton.

A further scheme for the provision of a 15" diameter relief outfall sewer at Duffield has now been prepared and it is anticipated that construction will commence in the summer of 1963.



DRAINAGEEstimated Population  
Involved

No. of houses in district connected to sewers (Estimated)	10,990	31,650
No. of houses in district not connected to sewers (Estimated)	1,306	3,500
No. of connections made during the year		
(a) existing houses	34	
(b) new houses	400	
No. of conversions of other closets to W.C.'s	66	





