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County Borough of Blackpool



ANNUAL REPORT

for the year 1950

By

GEORGE W. MURRAY

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

Medical Officer of Health and School Medical Officer





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County Borough of Blackpool



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Medical Officer of Health and School Medical Officer



MUNICIPAL HEALTH CENTRE,
WHITEGATE DRIVE,
BLACKPOOL.
September, 1951.

To the Charmen and Members of the Health Committee and the Related Health Services Simmittee.

Ladies and Gentletten, 80210

1201

I have the honour to submit for your perusal and consideration my Annual Report for the year 1950. As you will observe the report covers the whole field of the personal and environmental health services provided by the Corporation. Bearing in mind the need for economy I have made the report as abbreviated as possible but from time to time circulars on the subject matter to be included in the annual report are received from the Ministry and I am, of course, obliged to incorporate such matter.

The Registrar General has estimated that the population as at mid-1950 is 149,600, an increase of 300 over the previous year.

The Birth Rate again reveals a decrease on the previous year, 11·31 as compared with 12·18. An area comparability factor for births has been introduced for the first time this year, the object being that the resulting product of this factor and the crude birth rate, i.e. 11·54, offers a better comparison with the birth rate for England and Wales. I am pleased to record that the number of illegitimate births is lower than last year and considering the increase in Blackpool's population of child-bearing age the number bears favourable comparison with pre-war figures.

As a concomitant to the aged element in Blackpool's population one must expect a fairly high death rate and this is, in fact, the case. The rate for England and Wales is 11.6 whereas that for Blackpool is 15.7 or 13.5 when multiplied by the area comparability factor. The table in the report setting out the percentages of deaths in various age groups is of interest—even over such a short period as 11 years it is gratifying to note the progressive reduction in deaths under 65 years and the corresponding increase over 65 years. I have drawn attention in the body of the report to the increased infantile and neo-natal mortality rates. It is difficult to get at the root cause of this increase—there has been an increase in deaths from prematurity and congenital conditions over which, with present medical knowledge, there is little control, and an increase in deaths due to pneumonia and regurgitation of vomit which cases may or may not be the result of laxity on the part of parents.

Infectious diseases generally do not call for any particular comment here beyond the fact that this is one of the rare occasions when there have been no deaths from measles and whooping cough. Your attention is drawn to the reports on the six outbreaks of food poisoning and especially the one involving 58 people with symptoms. This demonstrates, better than any words of mine, the necessity for care in the preparation of food.

Although I have commented at some reasonable length in the body of the report on the personal health services provided by this Authority—a subject which perhaps engages the attention of most people—I must emphasise that the environmental health services provide the foundation stone on which a successful public health service is built. For a study of the latter services I invite your attention to the latter portion of the report prepared to a large extent by my Chief Sanitary Inspector. In particular, mention may be made of the parts dealing with Rodent Control and Disinfestation, General Food Supply, Manufacture of Meat Products and the Manufacture and Sale of Ice Cream.

In conclusion I would like to thank you, ladies and gentlemen, for your active interest in maintaining an efficient public health service in Blackpool. My thanks are also due to other Corporation officials who have supplied statistical data for inclusion to this report and to the members of my staff without whose loyalty and support the presentation of this report would not have been possible.

I am,

Yours faithfully, GEORGE W. MURRAY.

PUBLIC HEALTH OFFICERS OF THE LOCAL HEALTH AUTHORITY

Medical Officer of Health and School Medical Officer: George W. Murray, M.B., Ch.B., D.P.H.

Deputy Medical Officer of Health and Senior Assistant Medical Officer for Mental Health: JAMES BAXTER, M.B., Ch.B., D.P.H. (to 31.7.50)

Senior Assistant Medical Officer for Maternity and Child Welfare: Mary D. Banim, M.B., Ch.B., B.A.O., D.R.C.O.G.

Assistant Maternity and Child Welfare Medical Officer: Beryl G. Petrie, M.B., Ch.B., D.P.H.

Chief Sanitary Inspector: HARRY PRIESTLEY, M.B.E. (a)(b)

Chief Administrative Assistant: GEORGE E. FIELDING (a)

Superintendent Nursing Officer: Miss W. Barlow (c) (e) (f) (g)

Sanitary Staff:

Deputy Chief Sanitary Inspector, J. PICKARD (a) (b); District Inspectors, A. E. FITTON (a); E. SMITH (a); W. MOISTER (a); A. DANIEL (a) (b); T. W. LOMAX (a) (b); F. BURGIN (a) (b); E. W. BURROWS (a) (b); E. JACKSON (a) (b); J. PARKINSON (a) (b); Meats and Foods Inspectors, H. V. DIXON (a) (b) and L. H. SHEPLEY (a) (b); Abattoirs Superintendent, W. RILEY (a) (b).

Health Visitors:

C. HILL (c) (e); D. LEA (c) (e) (f); F. E. AINSWORTH (c) (e) (f); W. WALSH (c) (e) (f); M. I. FLETCHER (c) (e) (f); P. WROE (c) (e) (f); E. DEATON (c) (e) (f); M. GREENWOOD (c) (e) (f); Tuberculosis Nurses, M. PARKER (c) (e((f); D. HARRISON (c) (e) (f); K. WATSON (c) (d) (e); Infectious Diseases Nurses, B. McCormack (c) (d); M. Partington (c) (d) (e).

Midwives:

L. HILL (c) (e); G. DIXON (e); E. V. FISHER (e); F. H. C. SAVAGE (e); A. BRINING (c) (e).

Home Nurses:

A. B. White (c) (e) (to 1.7.50); I. Dewhurst (c); A. Myles (c); I. Hollingworth (c) (g); M. J. Hyde (c) (g) (to 30.9.50); F. Clews (c); L. Hall (c) (to 22.4.50); W. Emery (c); H. Hannay (c) (g); B. Aikman (c) (to 15.4.50); R. E. Scott (c); E. MacFarlane (c) (g) (to 31.3.50); E. E. Jopling (c) (g) (from 3.4.50); E. M. K. Garth (c) (from 11.4.50); G. A. Greatorex (c) (from 17.4.50); A. M. Lister (c) (g) (from 1.5.50); M. Henry (c) (from 22.5.50); M. Rossall (c) (g) (from 1.9.50); A. J. Blakemore (c) (g) (from 4.12.50).

Mental Health Staff:

Duly Authorised Officers, G. Ainsworth and D. Taylor; Mental Health Worker, Miss E. M. Dash; Supervisor, Occupation Centre, Miss E. Lees; Assistant Supervisor, Occupation Centre, Miss H. Hartley (to 29.7.50), Mrs. M. G. Griffiths (from 18.9.50).

Clerical Staff:

Senior Statistical Clerk, D. H. Taylor, A.C.C.S.; Senior Clerks, R. Pryar, H. R. Dowling, J. Richardson; M. O. H.'s Secretary, Miss N. Brown; Domestic Help Supervisor, Mrs. H. McClellan; Clerks, F. Curwen, H. S. Schofield, B. P. Battle, A. Nelson, R. Matthews, W. G. Sykes, T. M. Hargreaves, Miss M. Topping, Mrs. J. Horabin, Miss E. B. Robinson, Miss E. Fyffe, Miss A. Taylor, Miss D. Leigh, Mrs. D. M. Hirst (to 30.9.50), Miss J. Buck, Mrs. I. Foster, Miss R. Clarke (to 11.11.50), Miss C. M. Coups, Miss B. West, Miss A. P. Hodgson, Miss K. Hullah, Miss M. Barber, Mrs. M. Mackin (from 4.12.50), Miss B. Roberts (from 18.12.50); Telephonist, E. Fogell.

Physiotherapists:

Mrs. B. Chester, C.S.P.; Mrs. K. Thorpe, C.S.P. (to 17.6.50) and Miss J. Kelsall, C.S.P. (from 18.9.50)

Radiographer: Mrs. M. Easter (c) (d)

Public Analyst (Part-time):
T. R. Hodgson, M.A., F.R.I.C., F.C.S.

- (a) Holders of Certificate of Royal Sanitary Institute of Sanitary Inspectors' Examination Joint Board.
- (b) Holders of Certificate of Royal Sanitary Institute for Meat and Other Foods.
- (c) General Trained.
- (d) Fever Trained.
- (e) Central Midwives' Board Certificate.
- (f) Health Visitors' Certificate of Royal Saitary Institute.
- (g) Trained in District Nursing by Queen's Institute of District Nursing.

GENERAL STATISTICS, VITAL STATISTICS, INFECTIOUS DISEASES AND GENERAL PROVISION OF HEALTH SERVICES

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CILL	T D A I		ISTICS
C P. N	P. K. A.		

Area (exclusiv	ve of foreshore)				D.M H	8,512 acres
	nore and Crown Lands		B	7		2,068 acres
	Registrar General's Estim	ate)				149,600
	tated houses					44,218
	houses					138
Sum represent	e of the Borough					£1,817,920
Sum represen	ted by a Penny Rate				£1,	402 15s. 11d.
			2010			
	VITAL	STAT	ISTIC	cs		
				Male	Femal	e Total
Live Births:	Legitimate			787	796	1583
	Illegitimate	formed	107.L.	60	49	109
	Birth Rate (Crude) per 1	.000 por	pulatio	n:	11.31	
	Birth Rate (Standardise			1.4	11.54	
Stillbirths:		and the second	sens com	00	. 00	45
Stillbiltilis.	Legitimate				23	45
	Illegitimate			2	3	5
	Rate per thousand birth	hs (live	and sti	ill):	28.7	
Deaths				1141	1205	2346
	Death Rate (Crude) per	1,000 p	opulat	tion:	15.7	
	Death Rate Standardise		1000000	,,	13.5	
Number of we childbirth:	omen dying in or in con	sequenc	e of	Deaths		per 1,000 live and still)
(a) Puer	peral sepsis		Carrot .	1		.574
(b) Othe	r puerperal causes	,		2		1.148

BIRTHS

37.8

35.4

73.4

24.8

Death Rates of infants under one year of age:

(a) All infants per 1,000 live births ...

(b) Legitimate infants per 1,000 legitimate live births

(c) Illegitimate infants per 1,000 illegitimate live births ...

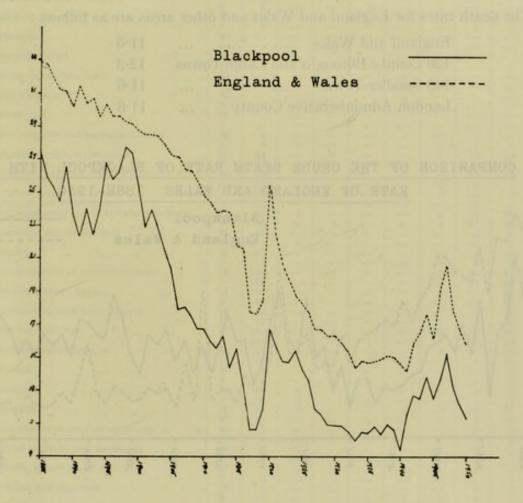
Death Rate of infants under four weeks of age per 1,000 live births

1,692 births were allocated to Blackpool for the year 1950—847 males and 845 females. This represents a crude birth rate of 11·31 per 1,000 population. This year, for the first time, the Registrar General has supplied an Area Comparability Factor; the product of this factor and the crude birth rate gives a standardised birth rate on the same lines as the standardised death rates. The Area Comparability Factor represents "weighting" based on the estimated age and sex distribution of the population. The object of a "standardised" birth rate is that it affords a better means of comparison with the birth rates for England and Wales as a whole. The standardised birth rate for Blackpool is 11·54 per 1,000 population.

The rates for England and Wales and other areas are as follows:

England and Wales	15.8
126 County Boroughs and Large Towns	17.6
148 Smaller Towns	16.7
London Administrative County	17.8

The graph below compares the crude birth rates for Blackpool and England and Wales since 1885.



Illegitimate Births. The following table shows the illegitimate birth rates for the past eleven years:

		1940	1941	1942	1943	1944	1945	1946	1947	1948	1949	1950
Per 1,000 population	 	- 69	-97	1.3	1.2	1-4	1.7	1.3	-98	1 - 1	-88	-73
Per cent. of total births	 	7-4	8-4	10.2	9.5	10-4	13-6	9.8	6-4	8.3	7.3	6-3

Stillbirths. 50 stillbirths were allocated to Blackpool during the year, giving a rate of ·33 per 1,000 population or 28·7 per 1,000 total births. This compares quite favourably with the rates for other areas.

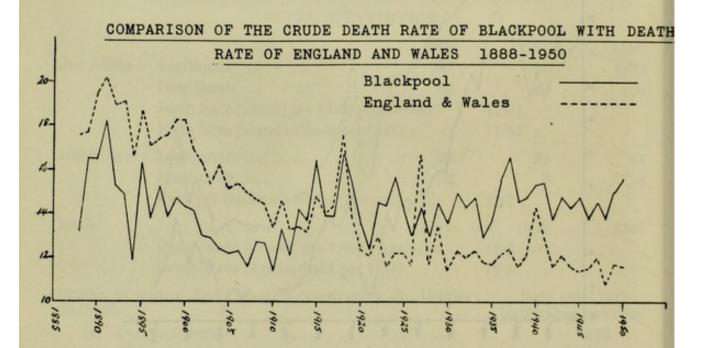
England and Wales	·37 per 1,000 population
126 County Boroughs and Large Towns	·45 ,,
148 Smaller Towns	.38 ,,
London Administrative County	·36 ,,

DEATHS

The number of Blackpool residents who died during 1950 was 2,346—1141 males and 1,205 females. This represents a crude death rate of 15.68 per 1,000 population which in association with the area comparability factor of .86 gives a standardised death rate of 13.5.

The death rates for England and Wales and other areas are as follows:

England and Wales	11.6
126 County Boroughs and Large Towns	12.3
148 Smaller Towns	11.6
London Administrative County	11.8



The percentage of deaths in the various age groups with similar figures for a number of previous years is as follows:

Age	1940	1941	1942	1943	1944	1945	1946	1947	1948	1949	1950
Under 12 months	3.4	4.5	6-3	5.3	4.0	3.1	3.7	4.5	3.5	2.1	2.7
1 year and under 5 years	1.0	1.5	1.3	-9	-5	-8	-9	-6	-2	•2	-4
5 years and under 15 years	38-9	35-9	37.3	35-1	36-4	34-1	34-0	32-2	32.3	20.7	-3
15 years and under 65 years		33.9	37.3	33-1	30.4	34-1	34.0	32.2	32.3	30.7	27.9
65 years and over	56 - 7	58-1	55-1	58-7	59-1	62-0	61-4	62 - 7	64-0	67.0	68-7

The Registrar General has furnished a list of causes of deaths, sub-classified in sex and age groups and this is set out below. The classifications do not agree with the statistics compiled locally but this will invariably occur when different persons allocate which of the certified causes of death should take precedence.

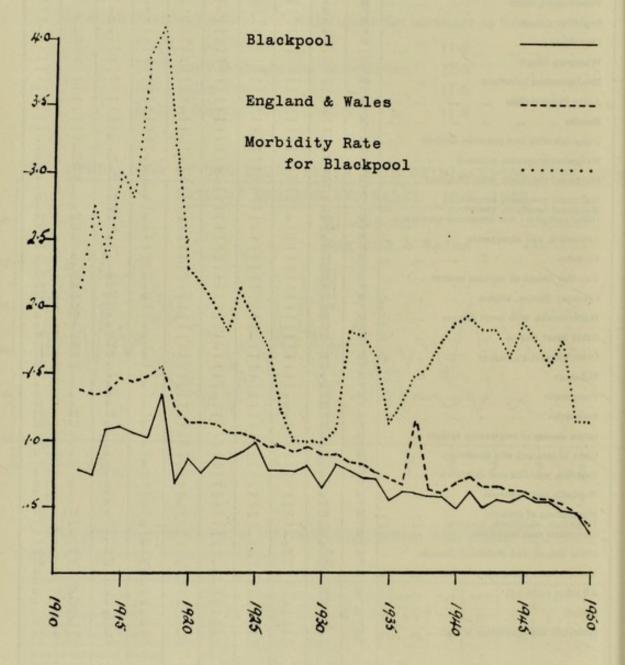
Causes of Death at Different Periods of Life in the County Borough of Blackpool

			AGE AT DEATH							
CAUSES OF DEATH	Sex	All	0-1	1-5	5-15	15-25	25-45	45-65	65-75	75—
ALL CAUSES	M	1141	32	6	2	6 7	36	328	374	357
Tuberculosis, respiratory	F M	1205	32	3	4	1	54	223 15	327	555
Tuberculosis, other	F M	10	_	=	=	1	5	3	2	-
Syphilitic disease	F	3	_	_	1	=	-	1 2	1	=
Diphtheria	F M	3	=	2	=	=	=	1 -	1	1
Whooping Cough	M	=	=	_	=	=	=	=	=	=
Meningococcal infections	F M	_	_	=	=	=	=	_	=.	=
Acute Poliomyelitis		=	=	=	=		Ξ	=	=	=
Measles	F M	1	=	=	=	1	=	=	=	=
Other infective and parasitic diseases	F	4	1-0	=	=	1	=	2	=	1
Malignant neoplasm, stomach		34	=	E	=	=	1	12	15	6
Malignant neoplasm, lung, bronchus		27 48	_	Ξ	=	=	1 2	7 24	11 18	8
Malignant neoplasm, breast	F	12 29	=	=	=	=	3	8	6	6
Malignant neoplasm, uterus Other malignant and lymphatic neoplasms	F M	93	1	=	=	=	2	12	8 28	18
Leukaemia and aleukaemia		90	=	1	=	=	4	31	28	26
Diabetes		11	_	=	=	=	=	4	5	2
Vascular lesions of nervous system	F M	133	=	=	=	=	5	30	7 40	5 58
Coronary disease, angina		186 164	=	=	=	=	3	28 70	55 65	99 26
Hypertension with heart disease		100	=	=	Ξ	=		6	10	34
Other heart disease	F M	18 240	=	1	=	=	1 2	32	74	131
Other circulatory disease		341 43	=	=	1	I	7 3	35 10	80 18	218 12
Influenza	F M	5	=	Ξ	=	=	=	5	10	29
Pneumonia		8 24	6	=	2	=	1	6	4	6
Bronchitis		22 82	3		=	1	1	3 25	33	11 22
Other disease of respiratory system		51	Ξ	=	=	=	3	2 4	13	33
Ulcer of stomach and duodenum		12	=		=		1	6	2 4	2
Gastritis, enteritis and diarrhoea		2	=	=	=	=	1	1	2	1
Nephritis and nephrosis	F	6 9	=	=	=	=	=	3	2 4	3 2
Hyperplasia of prostate		16 23	=	=	=	2	3	3	11	7
Pregnancy, childbirth, abortion Congenital malformations	M	5	1	1	=	=	3	2	1	=
Other defined and ill-defined diseases		105	23	2	=	=	3	15	23	39
Motor vehicle accidents		135	17	=	1	3	10 2	23	30	51
All other accidents		6	=	1	1	=	1	2	1 4	5
Suicide	F M	26 17	6	2	=	1	3	6	5	5 8 2 1
Homicide and operations of war		11 2	=	=	=	1	1	7	2	1
	F	1	-	-	-	-	-	7	-	-
	La Company				-			100		

Tuberculosis. 45 persons died from tuberculosis during the year—40 from respiratory tuberculosis and 5 from non-respiratory tuberculosis. These represent death rates as follows.

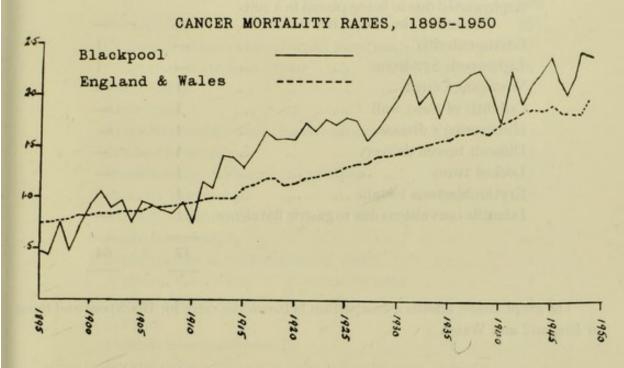
Total Deaths		 	 ·3 per 1	,000 population
Respiratory		 	 -267	,,
Non-respiratory	,	 	 .033	,,

The graph below shows the tuberculosis death rates since 1912 for Blackpool and England and Wales together with the morbidity rate for Blackpool based on notifications received in this department.



Heart Diseases. 882 persons died from various forms of heart diseases. This amounts to 37.6 per cent of total deaths or a rate of 5.89 per 1,000 population and is by far the largest single cause of death.

Cancer. This disease resulted in 355 deaths and represents a death rate of 2.37 per 1,000 population. The graph below affords a comparison with the rates for England and Wales. It is to be expected that the Blackpool rate would be higher in view of the preponderance of middle-aged and elderly people in the borough.

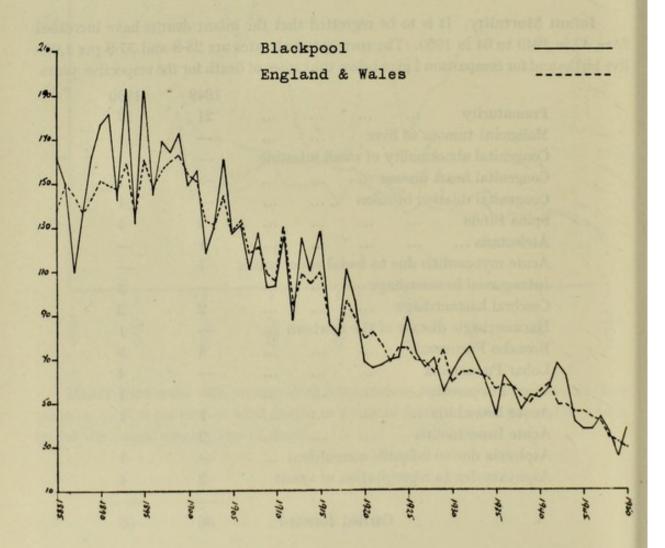


Infant Mortality. It is to be regretted that the infant deaths have increased from 47 in 1949 to 64 in 1950. The corresponding rates are 25.8 and 37.8 per 1,000 live births and for comparison I give below the causes of death for the respective years.

			1949	1950
Prematurity			21	27
Malignant tumour of liver			- N	1
Congenital abnormality of sm	all inte	estine	- 8	1
Congenital heart disease			1-1	1
Congenital dilation of colon			11-1	1
Spina Bifida			2	4
Atelectasis		15	1	_
Acute myocarditis due to foet		ocarditis	1	_
Intracranial haemorrhage			_	3
Cerebral haemorrhage			2	2
Haemorrhagic disease of the 1			_	1
Broncho Pneumonia			4	8
Lobar Pneumonia				4
Virus Pneumonia				1
Acute Bronchitis	•••		1	1
A 1 ! - 1! - 1! - 1!				1
			2	-
Asphyxia due to infantile con	vulsion	ıs	-	1
Asphyxia due to regurgitation	of vo	mit	2	4
Carried	forwa	rd	36	60

1950
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64

The graph below affords a comparison between the rates for Blackpool and those for England and Wales.



Neo-Natal Mortality. 42 children under the age of four weeks died during 1950, representing a mortality rate of 24.8 per 1,000 live births as compared with 18.1 the previous year. The causes of death for the respective years are given below.

				1949	1950
Prematurity				19	27
Congenital abnormality	of sma	all inte	estine	_	1
Congenital dilatation of	colon			-	1
Spina Bifida				1	1
Atelectasis				1	_
Acute Myocarditis due t	o foetal	endo	carditis	1	_
Cerebral haemorrhage				2	5
Haemorrhagic disease o	f the n	ewbor	n	HOLD TO S	1
Broncho Pneumonia				1	3
Acute Bronchitis				1	-
Acute Bronchiolitis				1	-
Asphyxia due to regurg	itation	of vo	mit	-	1
Asphyxia due to want of	of atter	ition a	at birth	_	1
Asphyxia while in cot				2	1
Cellulitis				1	_
Difficult breech delivery	y			1	-
Locked twins				1	-
Erythroblastosis foetali	s			1	-
					-
				33	42
				The state of the s	

Maternal Mortality. Three maternal deaths have been allocated to Blackpool—the causes of death were as follows:

- (a) Ruptured ectopic pregnancy.
- (b) Kidney failure due to self induced abortion.
- (c) Post partum haemorrhage. Pre-eclampsia.

The resulting mortality rate is 1.7 per 1,000 total births compared with a rate of .86 for England and Wales.

INFECTIOUS DISEASES

The overall picture of infectious diseases is reasonably satisfactory.

It will be noted that whooping cough, measles and chickenpox display their usual violent fluctuation in numbers—beyond complete isolation no method of controlling these diseases has yet been evolved and as the majority affected are children complete isolation from infected patients is virtually impossible. The number of cases of diphtheria recorded is the lowest since records of infectious diseases were first maintained in Blackpool, i.e. 1899. No deaths occurred during the year which could be attributable to diphtheria, measles or whooping cough.

Prevalence and Control of Infectious Disease. The following tables give details of (1) cases of notifiable disease recorded during the past ten years, and (2) cases notified and deaths attributable to the disease classified according to age groups.

		-	_											
Dise	ase				1941	1942	1943	1944	1945	1946	1947	1948	1949	1950
Scarlet Fever					460	435	566	530	219	148	140	269	280	239
Whooping Cough				***	721	325	513	322	280	463	267	331	326	290
Diphtheria					179	114	81	56	95	44	44	39	25	9
Measles					1388	1646	913	1526	715	883	975	1586	1089	698
Pneumonia					125	186	99	70	23	21	21	23	31	16
Cerebro Spinal Fever					134	114	18	12	4	8	5	13	5	3
Acute Poliomyelitis					2	2	-	_	_	2	10	4	7	8
Acute Encephalitis					-	-	-	_	-	-	2	-	2	-
Dysentery					-	-	19	2	-	11	1	53	33	12
Ophthalmia Neonatore	ım				9	9	11	7	1	-	2	25	16	4
Puerperal Pyrexia					69	55	56	65	34	8	34	33	41	25
Smallpox						-	-	=	-	-		-		-
Enteric Fever					38	2	3	7	17	9	1	3	16	1
Food Poisoning									not re	corded			44	66
Erysipelas					51	34	35	51	44	46	33	38	41	29
Chickenpox					1183	406	597	1376	361	523	672	934	333	625
Encephalitis Lethargic	a				1	1	_	1	-	-	-	_	1	1
Pemphigus Nenoatoru	m				21	30	28	5		7220	1	11	ME	

_																						
	Total	Deaths	1	1	-	-	1	1	1		-		1	1	1		53	1	,	-	1	1
		65 & over	1	1	1	1	1	1	1	1	-	1	L	1	1	1	1	1	1	1	1 -	1.
		45 65 65	.1	1	1	1	1	1	1	1	1	1	1	1	.1	1	01	1	1	1	1	1
		35 45 45	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
100		35 50	0	1	1	1	1	1	-	1	1	1	1	1	-1	1	1	1	1	-	1	1
		2002	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	10
	HS	150	1	.1	1	1	1	-1	1	1	1	1	1	12	1	1	1	1	1	1	1	1
HTX	DEATHS	200	1	1	1	0	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	-	400	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
	16.	e 24	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
		400	1	1	1	J.	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
S		-204	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
AGE PERIODS		Under	1	1	1	1	1	1	1	1	1	1	1	1	-	1	-	1	1	1	1	1
PE	1	& & over	1	1	1	1	7	1	1	1	-	1	1	1	1	1	16	7	1	1	1	1
AGE		555	-	1	-	1	7	-	1	1	01	1	1	T	1	1	19	7	-	1	1	1
22		35 45 45	60	1	1	60	20	1	1	1	01	1	04	1	.1	1	9	9	+	1	1	1
101		3228	8	63	64	+	1	1	64	1	-	1	55	1	1	1	12	64	13	-	1	-
	(ED	15 20 20	7	1	-	-	1	-	-	1	1	1	-	1	1	1	69	1	4	1	1	1
	NoTIFIED	505	33	3	-	3	1	1	01	1	1	1	1	1	1	-	01	1	46	1	1	1
		550	134	152	61	372	3	1	-	1	3	1	1	1	1	1	0	1	412	1	1	1
	CASES	400	28	31	-	88	1	1	1	1	-	1	1	1	1	1	-	1	35	1	1	1
	0	654	18	27	1	88	1	1	1	1	1	1	1	1	1	1	-	1	39	1	1	1
1919		00 to	00	31	1	70	1	1	64	1	1	1	1	1	1	1	1	1	38	1	1	1
		-20	60	20	1	56	1	-	1	1	01	1	1	1	1	1	-	1	20	1	1	1
	100	Under	-	22	-	91	1	1	-	1	1	4	1	1	-	1	1	1	13	1	1	1
144	nitted	Hos- pital	172	2	6	31	61	64	00	1	7	3	22	1	1	-	45	19	14	-	1	1
110		fied .	239	290	6	869	16	8	90	,	12	7	25	1	1	-	99	29	625	-	,	-
				-	:	1	1	1	1		:	1	:	1		1	1	1	1	-	:	
												am								ce		Malaria (contracted abroad)
1	0	0			0	-	1	ver	Acute Poliomyelitis	Acute Encephalitis	0	Ophthalmia Neonatorum		-	1		:			Encephalitis Lethargica	Pemphigus Neonatorum	d ab
73	CLO	DISEASES		ugh			1	Cerebro Spinal Fever	yelit	aliti	:	eon	Puerperal Pyrexia		:		60		:	eth	ona	acte
	0.0	ISE	ver	Cot	1			pina	iom	eph		ia N	Pyr		pid	ver	onin			tis I	s Ne	ontr
	-	9	r Fe	bing	beria	10	non	S o	Pol	Enc	tery	alm	eral	xox	rpho	c Fe	Pois	elas	odu	halit	ngin	a (ce
			Scarlet Fever	Whooping Cough	Diphtheria	Measles	Pneumonia	rebr	nte	sute	Dysentery	shth	perp	Smallpox	Paratyphoid	Enteric Fever	Food Poisoning	Erysiselas	Chickenpox	deon	mph	dari
1			Sc	N	Di	Me	P	Ce	Ac	Ac	D	0	Pu	Sn	Pa	En	Fo	Er	Ch	En	Pe	Ma
								_														

As in previous years I give below brief details of the recorded cases of poliomyelitis.

Patients	Age	Sex	Remarks
E.W.	10 years	Female	Admitted Infectious Diseases Hospital on 25.6.50. Slight involvement of arms. Respiration poor on admission and gradually deteriorated—within three hours of admission was placed in iron lung. Paralysis spread and patient could not move arms and legs. Still in hospital at end of year but there was some improvement in condition—patient out of iron lung for periods up to 10 hours.
J.S.	2½ years	Female	Admitted Infectious Diseases Hospital on 6.8.50. Visitor to Blackpool. Complete paralysis both legs. Paresis muscles of upper arms. Some neck rigidity. General condition much improved and discharged to Birmingham on 6.9.50.
н.н.	30 years	Male	Admitted Infectious Diseases Hospital on 5.8.50. Visitor. Paresis both legs. Slight paralysis of abdomen. Abesnce of bladder function. Discharged home 5.9.50.
R.L.	2½ years	Male	Admitted Infectious Diseases Hospital on 13.8.50. Paresis of both legs. Subsequently some neck rigidity. On discharge movement in both legs had improved but still some paralysis. Transferred to St. Lukes Hospital, Bradford 3.10.50.
J.S.	23 years	Female	Admitted Infectious Diseases Hospital 6.9.50. On admission there was paralysis of right hand and fingers. Subsequent paralysis of upper intercostal muscles and placed in iron lung 10.9.50. Patient collapsed and died 8.10.50.
D.B.	12 years	Male	Admitted Infectious Diseases Hospital on 5.10.50. Non-paralytic case and after initial isolation was discharged home recovered on 24.10.50.
B.R.	16 years	Male	Admitted Infectious Diseases Hospital on 10.10.50. After initial isolation transferred to Victoria Hospital, Blackpool, for continuation of treatment. Loss of power in both lower limbs and has difficulty in moving legs, particularly the right one. Attended baths for exercises. Still unable to walk at Christmas but considered well enough to have a week's holiday. Still undergoing treatment at end of year.
J.K.	9 years	Female	Admitted Infectious Diseases Hospital on 31.10.50. Paresis both legs and absence of bladder function. Discharged home recovered on 17.12.50.

Supervision and Care. As yet no Medical Officers have been appointed for full-time duty at the Infectious Diseases Hospital, Blackpool, and, assisted as necessary by my Deputy, I am still in clinical charge of this hospital. This arrangement between the Local Health Authority and the Regional Hospital Board effects a most satisfactory liaison between the Public Health Services and the hospital and is, in my opinion, essential if a Medical Officer of Health is to function as an epidemiologist.

Two Health Visitors have been seconded to infectious diseases work and they advise in the nursing of cases isolated at home.

FOOD POISONING

Outbreaks. Six outbreaks of food poisoning occurred during 1950, involving 54 notified cases. Details of the outbreaks are given below.

Number of persons with symptoms	Consumers at risk	Organisms or other agent responsible	Foods involved and comments on the outbreak
2	2	Salmonella typhimurium	The food causing the outbreak was not ascertained An attempt to trace the food was unsuccessful. A sample of cream was examined but with negative results. Boiled eggs were consumed but it is understood these were not duck eggs. Meat cooked one day was warmed and served on the following day. Unfortunately samples of this meat were not available. One of the ascertained cases displayed no symptoms—the other was only of a mild nature.
5	5	Salmonella typhimurium	The food causing the outbreak was not ascertained. A specimen of cream was examined with negative results. The husband of the deceased commenced to be ill with vomiting and diarrhoea two days before she was taken ill. Presumably, the deceased whilst nursing her husband picked up and transmitted salmonella typhi-murium to other members of the household; the food by which the bacteria was conveyed was not ascertained. Apart from the deceased, all cases were of a mild nature and symptoms cleared up within two or three days.
2	Not known	Salmonella typbimurium	The food causing the outbreak was not ascertained. Specimens of butter and cream were examined with negative results. Cooked meat, purchased from a local tradesman, was eaten but no samples could be obtained. No other complaints were received from customers of the particular shop. Although the symptoms persisted for approximately one week, one case was of a mild nature only. The other case displayed no symptoms but Salmonella T. Murium was isolated from faeces.
3	3	Salmonella typhimurium	The food causing the outbreak was not ascertained. Specimens of synthetic cream were examined with negative results. No other articles of food were available. Only two of the notified cases displayed symptoms; these lasted for three days. In the other case, Salmonella typhi-murium was isolated from faeces.
11	13	Salmonella typhimurium	The food causing the outbreak was not ascertained. Numerous specimens of foods and creams were examined with negative results. All cases were of a mild nature, but one was admitted to hospital as he was a member of H.M. Forces.
58	108 persons traced	Salmonella typhimurium	The articles of food involved in this case were meat pies manufactured at a local bakery. Investigations showed that the common article of diet was meat pies manufactured on the day before the outbreak. Specimens of these pies, both unconsumed portions from the various households and unsold pies from the bakery, were examined and from these salmonella typhi-murium was isolated. Gelatine, raw meat and duck eggs from the bakery showed no pathogenic organisms. Two of the seven food bandlers at the bakery gave positive specimens but it was not possible to point to this conclusively as the source of infection; both had consumed infected pies before specimens were taken. A possible source of infection might be the duck eggs used for glazing the pies and they also might have infected the gelatine prior to it being poured into the pies, as the bakery used the same utensil for the eggs and for preparing the gelatine. The main outbreak occurred at a Guest House in the southern part of the town where 32 people displayed symptoms. It was found the pies had been sold to 22 other households and these were followed up so far as possible. 108 persons were traced who had consumed portions of the pies. All shops supplied with pies were visited and attempts made to contact purchasers. The outbreak occurred during the holiday season and it was therefore impossible to trace the whereabouts of 23 pies. A conservative estimate of the number of consumers at risk would be 140. 31 persons, mainly visitors, were admitted to the Isolation Hospital for periods varying from 13 to 38 days. The majority were discharged between the 3rd and 4th week and conveyed home by ambulance. Most of the patients were elderly women and suffered fairly severely. One of the food handlers was extremely ill.
	persons with symptoms 2 5 11	Consumers at risk Symptoms 2 2 2	persons with symptoms 2 2 2 Salmonella typhimurium 5 5 5 Salmonella typhimurium 2 Not known Salmonella typhimurium 3 3 Salmonella typhimurium 11 13 Salmonella typhimurium 58 108 persons Salmonella typhimurium

Single Cases. Twelve single cases were notified during the year. In eleven instances the causative agent was salmonella typhi-murium; in the remaining case the organism was salmonella Newport.

TUBERCULOSIS

Notification. During the year 169 cases of tuberculosis were notified, comprising 137 respiratory and 32 non-respiratory cases. Of these 111 (90 respiratory and 21 non-respiratory) were primary notifications. The remaining 58 supplementary notifications were made up as follows:—

4 from Death Returns from local Registrars.

5 Posthumous Notifications.

48 Transfers from other areas.

1 from other sources.

The following table which summarises the notification register shows the number of patients at the end of 1949, the fluctuation of patients during the year under review and the number remaining at the end of 1950.

Type and Sex of Cases	Remaining on Register, 31/12/49	Notifications including Inward Transfers	Died	Recovered	Transferred	Lost Trace	Altered Diagnosis	Remaining on register at 31/12/50
Respiratory Tuberculosis : Male Female	0.0	85 52	38 14	34 21	23 12	3 2	14 4	276 215
Non-Respiratory Tuberculosis : Male Female	73 77	17 16	2 2	19 25	2 4	1 2	8 2	58 58
Totals	669	170	56	99	41	8	28	607

It will be observed that 17 cases are shown under male non-respiratory notifications in the above table and only 16 in the table below. This is explained as follows. A male patient suffering from both respiratory and non-respiratory tuberculosis has, during the year, recovered from the former condition and has therefore been transferred from the respiratory to the non-respiratory section of the register.

The following table classifies the notifications of tuberculosis during the year and the deaths occurring as shown from the notification register according to age groups.

Ama Domindo		PULMO TUBERO		Nom-Pulmonary Tuberculosis					
Age Periods	Notific M	ations F	Deaths M F		Notific M	ations F	Dea M	ths F	
0 to 1	_	-	2_	2-3	_	_		12	
1 to 5	2 3		-	-	1	-	-	-	
5 to 10	3	4	-	-	1	5			
10 to 15	1	-	-	-	2 5	-	-	-	
15 to 20	5 5	7	-	-	5	1	1	-	
20 to 25	5	11	1	-	-	1	-	-	
25 to 35	12	14 5	6 3	-	4	5 2	1		
35 to 45	11	5		5	1	2	-	-	
45 to 55	26	4 5 2	10	3	1		-		
55 to 65	15	5	11		1	-	-	-	
65 and upwards	5	2	7	2	-	2	-	-	
Totals	85	52	38	14	16	16	2		

It should be observed that the deaths as shown in the above two tables are the total number of deaths of persons on the register and is not necessarily those whose death was classified as due to tuberculosis.

Compulsory Isolation of Cases. It was not found necessary during 1950 to take action under Section 172 of the Public Health Act, 1936, for the removal of

patients to hospital.

Mortality. The number of deaths during 1950 which according to the Registrar General are attributable to tuberculosis was 45 (40 respiratory and 5 non-respiratory). This figure includes 4 persons who had not previously been notified as suffering from the disease.

Chest Clinic. The Blackpool and Fylde Hospital Management Committee are responsible for the administration of this clinic which is held at the Municipal Health Centre on the followind days:

> New Adult patients. Monday 2-4 p.m.

Former patients for clinical and x-ray examination Tuesday 2— 4 p.m.

by appointment.

Children's Clinic (old and new patients). Wednesday 9-11 a.m.

Thursday 9—10 a.m. Thursday 2— 4 p.m. Artificial Pneumothorax refill clinic (males only).

Former patients by appointment.

Artificial Pneumothorax refill clinic (females 10-11 a.m. Friday

Special review of patients by appointment. Friday 2-4 p.m.

Of the 491 respiratory cases on the notification register at the end of the year 470 or 95.7 per cent actually attend the chest clinic. 76 clinics were held during the year and at these clinics the following attendances were made.

Notified respiratory cases			4558
Contacts of respiratory cases	0.01	bba. d	951
Other cases			4338

The Health Department's radiography unit and radiographer are available for all x-ray films required by the Chest Physician and during the year 4,241 persons were x-rayed, involving 4,423 films. For the refill clinics on Thursday and Friday mornings, screening facilities are also available at the radiography unit.

Non-respiratory cases, formerly seen at the Tuberculosis Dispensary, are now referred by their own doctor to the appropriate out-patient department at the Victoria Hospital, Blackpool.

I am indebted to the Chest Physician at the Blackpool Chest Clinic for the above statistical data.

VENEREAL DISEASES

The Treatment Clinic, administered by the Blackpool and Fylde Hospital Management Committee, is held in premises at the rear of the Municipal Health Centre, Whitegate Drive on the following days.

Males Females

Monday 4.45-6.30 p.m. Tuesday 5-6.30 p.m. Wednesday 11 a.m.—12.30 p.m. Friday 11 a.m.—12.30 p.m.

Thursday 4.45—6.30 p.m. Saturday 11 a.m.—12.30 p.m.

The state of the s	Syphilis		Gono	rrhoea	Cond	her itions	Tot		otals	
	M	F	M	F	M	F	M	F	Total	
Number of patients who attended at clinic for first time during the year, either as new cases, or who had been removed from the register during a previous year and returned for treatment or obser-	1884									
vation for the same infection, or who had trans- ferred from other treatment Centres (Civil or Service) or from practitioners approved under Ministry of Health Circular 2226	67	44	129	19	323	73	519	136	655	
31.12.50	148	150	46	26	58	15	252	191	443	

To bring the clinic facilities to the notice of the public generally, small posters are placed in all the Public Lavatories in the Borough, stating the location of the clinic and the hours of attendance. The notice also states that treatment is free and is provided with the utmost privacy.

GENERAL PROVISION OF HEALTH SERVICES

Cremation. Your Medical Officer of Health and Deputy Medical Officer of Health are respectively the Medical Referee and Deputy Medical Referee to the Local Authority crematorium at Carleton. Increasing preference is being displayed for this means of disposal and during the year 2,088 cremations were authorised. A large proportion of the cremations were arranged from areas outside Blackpool.

Medical Examinations. All entrants to the municipal service are medically examined and a certificate of fitness or otherwise forwarded to the department concerned. 1.040 examinations were carried out in 1950. An arrangement also exists whereby medical examinations for the North Western Gas Board are undertaken by this department, 70 such examinations were made during the year.

Light Treatment and Massage. The Light Treatment Clinic is located at the Municipal Health Centre and is open 9 a.m. to 5 p.m. Monday to Friday and from 9 a.m. to 12 noon on Saturday. Underdeveloped and weakly children and expectant and nursing mothers are referred for tonic treatment from the various Maternity and Child Welfare Clinics. In addition to Light Therapy, ante-natal and post-natal exercises and massage are given.

Light Therapy, Massage and exercises are also given at morning sessions at Bispham Clinic. By arrangement with the School Medical clinic certain schoolchildren receive light treatment and details are given below.

The following tables summarise the work at the clinics during the year under review.

LIGHT TREATMENT CLINIC, MUNICIPAL HEALTH CENTRE

Treatment		Expectant and Nursing Mothers		Children under under 5 years Schoolchildren			hildren		culosis ses	Miscellaneous cases		
		Cases	Atten- dances	Cases	Atten- dances	Cases	Atten- dances	Cases	Atten- dances	Cases	Atten- dances	
Ultra Violet Ray		269	2990	268	3331	458	4749	17	175	19	123	
Radiant Heat		2	16	-	-	9	53	1	9	13	153	
Kromayer Lamp		_	-	-	_	-	-	8	78	-		
Exercises		108	467	23	202	16	122	-	_	19	990	
Massage		_	_	41	525	-	_	_	_	22	338	

BISPHAM CLINIC

			xpectant Mothers	Children under 5 years			
Treatment		Cases	Attendances	Cases	Attendances		
Ultra Violet Ray	 	66	751	158	1816		
Exercises	 	32	219	30	159		
Massage	 	_	200	18	186		

PROVISION OF SERVICES UNDER THE NATIONAL HEALTH SERVICE ACT AND CERTAIN OTHER STATUTES

CARE OF MOTHERS AND YOUNG CHILDREN

Clinics. A list of clinic facilities was given in my last annual report. In addition to these, the following clinics have commenced during 1950.

Monday 9.30 a.m. Ante-Natal Special clinic (cases referred from ante-natal clinics by doctors).

Wednesday 2.30 p.m.

Ante-Natal Services. Six ante-natal clinic sessions are held weekly.

All expectant Mothers who attend the Ante-Natal Clinics are given advice by the Nursing Staff on hygiene and diet in pregnancy and on the provision to be made for the new born baby. Stress is laid on the importance of breast feeding and instruction given on the care and preparation of the breasts.

Expectant Mothers who book at the Glenroyd Maternity Hospital or with Municipal Midwives are encouraged to attend as soon as they are aware of the pregnancy. Doctors who wish their patients to attend advise them to do so. Mothers attending Ante-Natal Clinics are examined at 4 weekly intervals up to 28 weeks, at 2 weekly intervals from 28 weeks to 36 weeks and weekly in the last month of pregnancy.

At the first visit a full physical examination is carried out. This ensures that expectant Mothers suffering from heart disease, or tuberculosis are detected at an early stage of pregnancy. All cases of heart disease are referred to a physician for full investigation and assessment of the amount of rest and care necessary to prevent a breakdown during pregnancy or labour and to the consultant Obstetrician for his advice. All cases of suspected lung disease are referred to the Chest Physician for investigation.

Blood is taken for Rh & A.B.O. Grouping. All Rh Negative mothers have specimens of blood examined for Antibodies at the 28th, 32nd and 36th weeks of pregnancy, as requested by the Pathologist. Should Antibodies develop, the patients are referred to the Consultant Obstetrician for any action considered necessary.

Blood is also sent for Kahn testing and if found Positive a further specimen is sent as a check and the patient referred to the Women's Special Clinic for further investigation and treatment if required.

In co-operation with the Special Clinic, treatment may be carried out at the Antenatal Clinic should the patient so desire.

The Blood pressure estimation and testing of urine is carried out and patients are weighed at regular intervals.

Should any obstetrical abnormality be found at the routine examination, the patient may be referred to the Consultant Obstetrician for an opinion. Facilities for X-Ray are also available at the Health Centre.

All Mothers who are physically suitable and have the time to go, are referred for U.V.R. and for Ante-Natal exercises which include teaching in relaxation methods. Gas and Air Analgesia instruction is also given at the Clinic by the Midwife in attendance.

The Midwives are encouraged to see their own booked cases at the Ante-Natal Clinic.

Mothers are advised about Maternity Benefits available to them, the extra rations and vitamin preparations from the Ministry of Food and the necessary Certificates signed.

Arrangements are made where necessary for the care of older children while the Mother is being confined.

Notes on the Rhesus Factor During Pregnancy

It is now clear that a knowledge of the Blood Groups of the expectant Mothers and of the presence or absence of the Rh Factor in her red blood cells should be known in the Ante-Natal period. From this information the possibility that an infant may suffer from Haemolytic disease of the newborn is recognised, and the necessary action can then be taken at the earliest possible moment. Furthermore the possibility of giving an incompatible transfusion during an obstetric emergency is avoided.

All expectant Mothers who attended the Blackpool Ante-Natal Clinics during the year 1950 had a Blood investigation carried out.

A card issued by the Pathologist giving the A.B.O. and Rh grouping was handed to each expectant Mother. White cards are given to those who are found to be Rh Positive and Green Cards to those who are found to be Rh Negative.

During this period the blood investigation of 1,155 Ante-Natal cases necessitated the taking of 1,512 blood specimens. Of these 1,155 cases, 967 were found to be Rh Positive and 188 Rh Negative. The latter being $19\frac{1}{2}\%$ of the whole. Of these 188 cases further investigation showed the development of Rh Antibodies in 8. Notes on these 8 cases are set out below.

Mrs. P. Admitted in labour on 17.9.50. Coombes Test on Cord Blood found to be strongly Positive. Mild icterus. Haemoglobin watched (Too late for replacement transfusion). Haemoglobin fell gradually to 70%. 28.9.50. Transfused. About 100 c.c. given. 30.9.50. Transfused. 80 c.c. of blood given. Baby's condition appears to be satisfactory.

Mrs. S. Admitted for Induction on 9.10.50 because of rising Antibody E.D.D. Titre. Foetal Heart not heard on admission. History of no movements for one week. Delivered of stillborn macerated foetus on 10.10.50.

Gravida 2.

Mrs. R. S. Admitted for rest on 17.9.50. Rh Negative with antibodies. For medical induction—2.10.50. Baby born on 10.10.50. Coombes Test Negative. Baby satisfactory.

Gravida 4.

Mrs. M. Admitted for induction on 22.5.51 because of rising Antibody Titre. E.D.D. Induced by Artificial rupture of membranes on 23.5.51. Coombes test on 25.5.51. Cord Blood found to be Positive. Haemoglobin watched. Transfusion was not required.

Gravida 3.

Mrs. B. Admitted on 20.12.50 for observation because of rising Antibody Titre. E.D.D. Confined on 14.1.51. Coombes test on cord blood positive. On 15.1.51 replacement transfusion commenced but baby died.

Gravida 2.

Mrs. L. Admitted in Labour on 31.10.50. Coombes test on Cord blood found to E.D.D. be positive. Haemoglobin watched. Transfusion was not required.

3.11.50. Gravida 4.

Mrs. C. Found at Ante-Natal Clinic to be Rh Negative with antibodies and advised re confinement in Hospital but refused. Information was given to her private doctor. She had a normal delivery on the district. Condition of baby appeared to be satisfactory.

Mrs. D. This person was found to be Rh Negative with Antibodies. No action

E.D.D. was taken as she had an abortion early in pregnancy.

13.10.50. Gravida 3.

A Kahn Test was also done on each Blood specimen and where found to be positive it was repeated and the case referred, where necessary, to the women's special clinic for further investigation and treatment if required.

All the doubtful cases were found to be negative on re-testing and the positive cases were referred to the Special Treatment Clinic for treatment and found to be already attending.

VIRUS INFECTIONS DURING PREGNANCY

The department is co-operating with the Ministry of Health in an enquiry, the purpose of which is to compare the risk of congenital defects occurring among children (a) born of women who suffered from rubella, mumps, chickenpox or poliomyelitis at some time during pregnancy, and (b) born of other women.

The two groups of expectant mothers are selected as follows:

 those who on first coming under ante-natal supervision have already had a virus infection during that pregnancy, or who suffer an attack during the subsequent course of the pregnancy;

(b) those who on first reporting for ante-natal supervision have not had a virus infection, and who do not suffer an attack during pregnancy, and whose birthday occurred on the 31st day of any month and year. This group is known as the

control series.

Both types are recorded at the ante-natal clinics on special cards which are passed on to the General Register Office for initial registration. The child is subsequently examined at birth, on the first birthday and on the second birthday to ascertain whether there are any congenital defects. The results of these examinations are recorded on the above mentioned cards which are again forwarded to the General Register Office for final registration.

Up to the end of the year one case under group (a) above and nine "controls" had been recorded and notified to the General Register Office.

The results of the enquiry will not be known for at least four years as it is intended to continue recording "cases" and "controls" for two years.

ANTE-NATAL SPECIAL CLINIC

Patients who attend ante-natal clinics and complain of occasional or abnormal discharge are referred to the Ante-Natal Special Clinic for investigation. The number of patients so referred for the year 1950 was 84.

The infecting organism was investigated in each case, specimens being sent to the Victoria Hospital Pathological Laboratory. Treatment was carried out as indicated and relief from irritation was very marked and rest at night assured to the patient. Naturally, they were very appreciative of this and attended regularly.

The Health Visitor for the district covered by the clinic attends at each session and also makes frequent visits to the patients in their own homes.

Attendances at the clinics during the year are as follows:

First visits 1144
Total Visits 9366
Number of women who attended during year 1637

A representative from the local Food Office attends at each session of the clinic to distribute orange juice and vitamin capsules.

Post Natal Services. The post-natal clinic is held on Thursday afternoon at the Municipal Health Centre, and is staffed by a Medical Officer, a midwife and a pupil midwife.

All mothers who have attended ante-natal clinics are encouraged to attend for examination six weeks after confinement.

An assessment of the mother's general health is made at this visit, taking into account her health prior to confinement and the type of delivery she has had. Any degree of anaemia is noted and treated. A pelvic examination is made to ensure that there is no displacement resulting from the confinement, and if such is found, it is treated by exercises given by the physiotherapist, or by the insertion of a pessary if considered necessary. Erosions of cervic are treated by cauterisation and any abnormal vaginal discharge is investigated by the Pathologist and treated as indicated.

Total attendances during the year were as under :-

Number of wo	men '	who	attended	during	vear	488
Total visits						689
						476
9	7			ALLCON .		

Infant Welfare Services. Seven sessions of the Infant Welfare clinic are held weekly and are very well attended. The mother brings her infant as soon as she feels able to do so. Advice on the general care and feeding of the baby is given. Every encouragement is given to the mother to breast feed her baby having regard to the psychological needs of the child. Test feeding to ensure that the baby gets an adequate supply of breast milk is used with discrimination. Where breast feeding is not possible the mother is advised about suitable artificial feeding and her fears that this may be detrimental to the baby are allayed.

The progress and development of the child mentally and physically is watched and where necessary the advice of the clinic Medical Officer is sought for the child by the Health Visitor or requested by the mother.

During the year the attendances at the clinic were as follows:

First visits:

	Under one year of age at first attendance									
Over one year of age at f	first att	endance	e					309		
Total Visits:										
Under one year of age								21061		
Over one year of age								5866		
Number of children who atter	nded cl	inic dur	ing the	e year				3381		
Number of children in attend					d of th	e vear	who			
were then:										
Under one year of age								1168		
Between the ages of 1 an	d 5							1709		
			1							

Various proprietary brands of dried milks, strained foods, baby cereals and vitamin preparations are supplied at the clinics.

Birth Control Clinic. 50 sessions of this clinic were held during the year at which 117 patients were advised. 44 of these were attending the clinic for the first time and in all 344 visits were made.

Great care is taken in selecting patients and the Minister of Health's recommendations contained in Memo 153/MCW (July 1930) and Circulars 1208 (July 1931) and 1408 (May 1934) on Birth Control are strictly adhered to. These recommendations are as follows:—

(a) Clinics are to be available only for women who are in need of medical advice and treatment for gynaecological conditions.

(b) Advice on contraceptive methods is to be given only to married women who attend the clinics for such medical advice or treatment, and in whose cases pregnancy would be detrimental to health.

What is, or what is not, detrimental to health is decided by the medical officer at the clinic and advice is given to married women suffering from sickness, physical or mental, other than gynaecological conditions providing childbirth would be detrimental to the woman's health. Advice is not given on purely economic or family planning grounds. Women are only seen at the clinic if they have been recommended to attend by a medical practitioner and present a medical certificate to that effect.

Day Nurseries. These nurseries were first introduced in Blackpool as a wartime measure when there was a considerable increase in the number of women employed in industry and the Minister of Health felt that some provision was necessary for the care of children under school age whilst their mothers were out at work. At the present time there are five nurseries. Undoubtedly, the nurseries are appreciated by the mothers who take advantage of the facilities, but for some time the Health Committee has been concerned with the rising cost of the service, particularly as the conditions which prompted the opening of the nurseries have now ceased. Furthermore, it was considered that the majority of the mothers who placed their children in the nurseries were not employed in industries "vital to production for essential home requirements or for export"; a point which is confirmed by the fact that the number of mothers making use of the nurseries during the holiday season is considerably more than it is in the winter months.

In the light of the above circumstances, representations have been made to the Minister of Health seeking permission to close two of the five day nurseries.

It is the intention that accommodation in the three remaining nurseries should be available only for pre-school children of women of the following categories:

- (i) Unmarried mothers.
- (ii) Widowed mothers.
- (iii) Mothers whose husbands' earning capacities are limited on account of recognised physical disabilities.
- (iv) Mothers whose husbands are serving in H.M. Forces.
- (v) Mothers admitted to hospital for operations or confinements.
- (vi) Mothers separated from husbands with little or no separation allowances.

The following table shows the admissions and discharges in respect of each nursery and the average daily attendance over the current year.

Tel service de la constante de			Admitted			Daily Average Attendance		
Nursery	Nursery		Admitted	Discharged	Under 2 years	2—5 years		
Caunce Street Claremont Park Health Centre Lostock Gardens Lytham Road			75 63 72 56 68	94 68 79 58 76	6·6 8·6 10·0 9·1 8·5	26·4 28·5 31·2 27·5 27·1		

A charge to cover the cost of meals is made to all users and this is at the rate of 2/6d. per day, Monday to Friday, and 1/6d. for Saturday mornings. An abatement is made for low incomes; a copy of the graduated scale was given in my last annual report.

Child Life Protection. By arrangement between the Children's Committee and the Health Committee my Health Visitors visit foster children under the age of five years. 172 such visits were made during the year and reports thereon forwarded to the Children's Officer.

Adoption of Children. Children who are to be adopted under the provisions of the Adoption of Children Acts are examined medically by the Maternity and Child Welfare Medical Officer on behalf of the Children's Committee. Throughout the year 22 children were so examined. Persons wishing to adopt children are in all cases visited by my Health Visitors when the home conditions and accommodation for the child are fully investigated. 29 visits were made throughout the year.

Mother and Baby Homes. The Fylde House of Help and the Lancaster Diocesan Protection and Rescue Society separately maintain homes where the unmarried mother may have her confinement and where the child may be kept temporarily until it is adopted or the mother is discharged with the child. An annual grant is made by this Authority to these bodies, in addition to which maintenance fees incurred in respect of Blackpool patients are also met. Four women for whom this authority were responsible were admitted to these homes during the year.

Illegitimate Children. This Authority makes an annual contribution to the Fylde House of Help and the Lancaster Diocesan Protection and Rescue Society, the two voluntary bodies responsible for the majority of the social work in Blackpool connected with the unmarried mother and her child. A Social Worker has not been appointed in this department as it is considered that the Health Visitors and the local Probation Officers together with the above voluntary associations adequately cover this aspect of our social services.

Nurseries and Child Minders (Regulations) Act, 1948. This act provides for the regulation of premises used as day nurseries and of persons who, for reward, receive children into their homes to look after them. No applications for registration under the act have been received during the year. The day nurseries provided by this Authority are outside the scope of the act.

Dental Treatment. With the consent of the Minister of Health this Authority's proposals under Section 22 of the National Health Service Act, 1946, for the establishment of a dental clinic at the Municipal Health Centre, have not yet been implemented.

Premature Children. For the purpose of this department's activities a premature baby is defined as one that weighs $5\frac{1}{2}$ lbs. or less at birth irrespective of the period of gestation. Details of premature births during 1950 are as follows:—

- (a) Notified during 1950 (mother normally resident in Blackpool) :-
 - (i) Born at home 20
 - (ii) Born in hospital or nursing home ... 96
- (b) Premature babies born in the area (whether their mothers normally reside in the area or not), excluding those babies born in maternity homes and hospitals in the National Health Service.

-			Born	at H	Iome			Born in Private Nursing Ho					g Ho	mes
is all the	Nursed entirely at home				Tips how	in pr	Nurse	ed en	tirely sing h	ome				
	Transferred to hospital	Died in first 24 brs.	Died 2nd-7th day	Died 8th-28th day	Survived 28 days	Total	Grand Total	Transferred to hospital	Died in first 24 hrs.	Died 2nd-7th day	Died 8th-28th day	Survived 28 days	Total	Grand Total
Under 3 lb. 3-4 lb. 4-5½ lb.	2 2 4				_ 1 11	- 1 11	2 3 15				111		- 4	4
Total	8	-	_	_	12	12	20	-	_	1	-	3	4	4

To ensure that all facilities are available for the care of premature babies the following arrangements have been made:—

- (a) In the case of children born in the Maternity Hospital or Nursing Home, the residence of the parents is visited by the Health Visitor prior to the discharge of the baby from hospital. She makes certain that the conditions to which the baby will return are satisfactory, ensures that there are adequate heating arrangements, and that a suitable cot and sufficient clothing are available. Special equipment is provided by this department. If considered necessary by the Health Visitor, she is permitted to visit the mother in hospital and she can also recommend that the baby be detained in hospital for a longer period than usual where the home conditions are unsatisfactory.
- (b) The birth of a premature baby at home is reported by the midwife to the Superintendent Nursing Officer who discusses with the midwife the care of the baby and if necessary visits the home. Any special equipment needed is provided by this department. Should the baby be very feeble it is usually found advisable to have it admitted to the hospital.

MUNICIPAL MIDWIFERY SERVICE

Five midwives are employed in this department for attendance to those women who are to have their confinement at home. During the year they attended 298 cases, 143 as midwives and 155 as maternity nurses. This again represents a reduction on the previous year.

HEALTH VISITING

Thirteen Health Visitors are employed in this department. Three of them are permanently seconded to tuberculosis duties and a further two nurses are occupied solely with visiting cases of infectious diseases.

Those Health Visitors primarily concerned with the care of mothers and young children operate from three of the four clinic premises in the Borough and visit those mothers and children who attend their respective clinics. The clinic at Layton is attended by Health Visitors operating from the Municipal Health Centre.

The Tuberculosis Health Visitors, in addition to their visits to patients in their homes, also attend at the various sessions of the chest clinic. This ensures a most desirable liaison between the diagnostic and curative services of the Regional Hospital Board and the Prevention, Care and After-care services of this Authority.

The two infectious diseases nurses visit all households from which a case of infectious disease, excepting tuberculosis (see previous paragraph), and some dysentery and food poisoning, (which are visited by the Meat and Food Inspector), has been notified. Advice on nursing is given where the patient is to be isolated at home.

Details of visits made during 1950 by the Health Visitors are as follows:

Expectant and Nursing Mothers		Children under 1 year of age		Children between the ages of 1 and 5		Tuberculosis Patients		Cases of Infectious Disease	Other Cases	
First Visits	Total Visits	First Visits	Total Visits		Total Visits	First Visits	Total Visits	Total Visits	First Visits	Total Visits
511	847	1777	8888	168	11931	148	6668	1948	1481	1984

Note: "Other Cases" includes, e.g. visits to Contacts of Tuberculosis patients and cases under observation, persons wishing to adopt children, chronic sick cases awaiting admission to Wesham Park Hospital, and children subject to legislation on Child Life Protection.

HOME NURSING

Fifteen nurses, three of whom are part-time, are employed in this department for home nursing duties. During the year 1,193 patients were attended by the nurses, necessitating a total of 32,016 visits.

A store of sick-room equipment is maintained at the Municipal Health Centre for loan to those patients who are being attended by home nurses or midwives or who are being nursed at home by relatives and friends. A small charge is made for the loan of the articles, except those loaned to tuberculous patients. 343 articles of equipment were issued on loan throughout the year.

VACCINATION AND IMMUNISATION

A special diphtheria immunisation clinic is held at the Municipal Health Centre on Saturday mornings and anyone who wishes may be immunised free of charge. On the other hand, children under 5 years of age who attend the infant welfare clinics at the north and south ends of the town may be immunised at the routine visit to the clinic. School children are normally dealt with by the School medical department and during the year 666 children were immunised or re-immunised at the school medical clinics. Vaccination clinics are held as and when a sufficient number of persons to warrant the holding of a clinic request vaccination; on the average one clinic per week is held. Arrangements have also been made with certain medical practitioners for free vaccination and immunisation for any person who so desires. A payment of five shillings is made to the doctor on completion of the appropriate record card.

It is advisable that a child should be vaccinated as soon as possible after it is four months old and immunised against diphtheria after nine months. A notice to this effect is sent to all parents shortly after the birth of their child or children.

The table below shows the numbers of persons vaccinated (or re-vaccinated) during the year.

Age at 31st Dec., 1950, i.e. born in years	Under 1 1949	1 to 4 1945 to 48		15 or over Before 1935	Total
No. vaccinated	312	92	71	228	703
No. re-vaccinated	12	12	24	273	321

No other cases of generalised vaccinia, post-vaccinal encephalomyelitis or deaths from other complications of vaccination have been reported.

The tables below give the numbers of children immunised in various age groups in relation to child population, and also the number of diphtheria notifications and deaths in relation to immunisation.

IMMUNISATION IN RELATION TO CHILD POPULATION

Number of Children who had Completed a Full Course of Immunisation at any Time up to the 31st December, 1950

Age at 31/12/50 (i.e. Born in Year)	Under 1 1950	1	2 1948	3 1947	4 1946	5–9 1941–1945	10-14 1936-1940	Total under fifteen		
Number Immunised	577	414	1032	1146	910	6690	7984	18753		
Estimated Mid-year Population 1950		8808					14910			

DIPHTHERIA NOTIFICATIONS AND DEATHS IN RELATION TO IMMUNISATION

of	of cases	Number of cases included in pre- vious columnin which the child had completed full course of immunisation	of	of	Number of cases included in pre- vious columnin which the child had completed full course of immunisation
Under 1	1		Under 1	_	_
1	-	-	1	-	-
2	-	-	2	-	-
3	-	-	3	-	-
4	1 2	1	4	-	
5 to 9	2	2	5 to 9		-
10 to 14	1	1	10 to 14	-	-
TOTALS	5	4	TOTALS	-	-

AMBULANCE SERVICE

The ambulance service provided by this Authority is divided into two sections, the directly provided service maintained by the municipal transport department and the agency service supplied by the Blackpool Invalid Transport Service. Local non-infectious cases, accidents and maternity cases are transported in local authority vehicles and all infectious cases and out of town cases are dealt with by the agency service. I referred in my last annual report to the misuse of ambulance service and to the fact that all requests for ambulance and car transport, except in accidents or emergency maternity cases, are carefully scrutinised by this department before:

passing on to the appropriate ambulance station. These efforts on the part of my department have not been entirely successful and it is obvious that general medical practitioners and hospitals when requesting transport are not, in all cases, considering whether an ambulance or car is a necessity. Many cases are reported to me by the ambulance attendants of patients who were able to walk and who could without risk have travelled by public transport. In an endeavour to reduce the cost of the ambulance service a meeting between representatives of this Authority, the Hospital Management Committee and the medical profession, was held on 20th June, 1950. Several suggestions for effecting economies were made and it is hoped that as a result of the decisions reached at the meeting and of the co-operation promised by all parties the desired reduction in expenditure may be achieved.

The following table summarises the work of the ambulance services throughout the year.

(1)	No. of vehicles at 31.12.50		Total no. of patients carried during the year (4)	No. of accident and other emergency journeys incl. in Col. 3	Total mileage during the yea	
Directly provided service	11 ambs. 1 car	12108 1379	20938 6895	1863	72791 13069	
Agency service	5 ambs. 1 car	2538 69	2927 69	=	100121 3697	

PREVENTION OF ILLNESS, CARE AND AFTER-CARE

Section 28 of the National Health Service Act empowers Local Health Authorities to make arrangements within their area for the prevention of illness, and the care and after-care of persons suffering from illness. Full details of this Authority's proposals under the Act were given in my report for 1948, and in the following paragraphs I propose to comment briefly on the existing service.

Tuberculosis. During 1950 no B.C.G. vaccinations took place, although in the latter few weeks of the year the initial enquiries, to ascertain suitable persons for vaccination, commenced. In my report for 1951 I should be able to enlarge on this important subject and give details of work undertaken.

The visiting of tuberculous patients in their homes is undertaken by three health visitors who have been permanently seconded to this work. These nurses also attend at each session of the local Chest Clinic and by so doing, effect a most desirable liaison with the Prevention, Care and After-Care services of this Authority. I have continually stressed the importance of frequent examinations of contacts of known cases of respiratory tuberculosis and it is mainly due to the efforts of these nurses that 951 examinations of contacts were made at the Chest Clinic during the year. 274 of these contacts made their first visit to the clinic. Home visits by the Health Visitors throughout 1950 are as follows:—

				First Visits	Total Visits
Respiratory cases		 	 	119	5056
Non-respiratory cases		 	 	29	1524
Contacts		 	 	_	276
Patients under observat	ion	 	 	-	194
Death enquiries		 	 	-	15

In addition 63 home visits were made in conjunction with the Chest Physician.

Patients who "have suffered a loss of income in order to undergo treatment for tuberculosis of the respiratory system" are referred by the Chest Physician to the National Assistance Board and are eligible for the higher scale of assistance. The above condition is interpreted literally by the National Assistance Board and such persons as students, patients who normally work but were not doing so when diagnosed, suspected cases and all cases of non-respiratory tuberculosis are only eligible for the lower scale rates.

Liaison is maintained with the Disablement Resettlement Officer of the Ministry of Labour to ensure that tuberculous patients when able to resume work obtain the maximum benefit of the Ministry's rehabilitation services.

Other Types of Illness. Close co-operation is maintained between the local Hospital Management Committee, General Practitioners and this department and all cases of illness where the assistance of this Authority is desired are notified to your Medical Officer of Health. Such assistance might include Home Nursing, loan of sick room equipment, visits by Health Visitors, Duly Authorised Officers or the Mental Health Worker. An account of the work of the department under these latter headings is given elsewhere in this report.

Health Education. An annual grant is made to the Central Council for Health Education and exhibition material is received from time to time for display in the Maternity and Child Welfare clinics. This material covers such appropriate topics as Diphtheria Immunisation, Care of teeth, etc.

Facilities for the treatment of Venereal Diseases are explained on posters which are placed in all public conveniences in the Borough and, by arrangement with the licencees, in the toilet accommodation in a number of licensed premises.

Lectures and demonstrations on such topics as public health generally, hygiene, food hygiene and poisoning have been given to church guilds, women's organisations, mothers attending the Maternity and Child Welfare clinics, and various other bodies in the Borough by the medical, sanitary and administrative staff of this department.

Ladies' Sick Poor Association. I would like in this section of my report to refer to this voluntary body which has been functioning for fifty-seven years and endeavours to fill in those gaps which often exist in the various forms of statutory relief. Between 100 and 150 cases are visited and assisted each month and the help afforded is greatly appreciated by the recipients. In spite of difficulties, the work of the convalescent branch of the association is still being carried on, and numerous cases are dealt with either locally or by arrangements with suitable places out of town.

DOMESTIC HELP SERVICE

The power to provide a domestic help service is permissive and not obligatory, and the Minister of Health in Circular 118/47 pointed out that the discharge of the duties of a local health authority under other sections in Part 1II of the National Health Service Act, 1946, particularly those relating to the care of mothers and young children, domiciliary midwifery, home nursing and the care and after-care of persons suffering from illness or of mental defectiveness, would be seriously hampered without an adequate and efficient domestic help service. This, then, indicated the desirability of such a service and this Authority in the exercise of its powers employs, as at the end of the year, fifteen whole-time and eight part-time domestic helps. The allocation of duties and the initial investigation into all requests for this service are carried out by the Domestic Help Supervisor.

Domestic Help was provided for the following types of cases during the year, during which time an average of 100 homes per week have been served.

(a)	maternity (in	cluding	expec	tant me	others)	12
	tuberculosis					10
(c)	others					206

The service of a domestic help in maternity cases assists the mother to regain her normal health and to take full advantage of the "lying-in period" without the cares and worry of housework. Again, in tuberculosis cases, it ensures that the patient does not overtax her strength, and takes adequate rest. There is not the risk of "quiescent" and "arrested" cases of tuberculosis breaking down. The large majority of the 206 other cases are elderly people or couples living alone who because of their advancing years or some chronic illness are unable to cope with the household duties, and it is felt that by providing domestic help in these cases a certain amount of strain is taken from the already overtaxed hospital accommodation or accommodation provided by Welfare Authorities under Part III of the National Assistance Act. It may even be a means of preventing a case from degenerating into the type requiring action under Section 47 of the National Assistance Act, 1948.

I feel that this service is appreciated by general medical practitioners in the Borough; in many instances patients are advised by their own doctor to take advantage of it. Many expressions of appreciation, verbal and written, are received from grateful recipients of help.

If it is to be truly a "help" in the household something more is required than just the adequate functioning of the domestic help service; the staff themselves must take an interest in their duties. It is essential that they be good workers, but even more important they must possess tact, good sense, kindness and sympathy. Many instances come to the knowledge of the department, through roundabout channels, of acts of kindness displayed by the helps—instances where the help has called at a home at evenings and week-ends to visit elderly persons who are lonely and in need of friendship.

Increasing demands are being made on this service but for reasons of economy it has not been possible to increase the staff of domestic helps; in spite of this, practically all applicants are allocated a help for some period during a week.

A charge, based on the all-in cost of the scheme to this authority, is made to all users. The full charge is 2/3d. per hour but an abatement is allowed for low incomes. The charge, where the illness is likely to be protracted, such as tuberculosis, cancer or some chronic illness, is subject to special review and unless the recipient of the service is of sound financial means the charge is waived.

MENTAL HEALTH SERVICE

I referred in my last Annual Report to the difficulty in securing vacancies for female patients in Mental Hospitals. This is not peculiar to Blackpool and arises from the shortage of nursing staff in the hospitals. To ensure a more equitable allocation of vacancies in mental hospitals the Manchester Regional Hospital Board has during the year instituted a system of bed bureaux. Blackpool is within the catchment area of Whittingham Mental Hospital who also control admissions to mental hospital accommodation in the area. This system commenced on 1st November, 1951, and it is yet too early to say how the Mental Health Service will be affected. Where necessary, detailed comment and criticism will be made in my next report.

The Mental Health Sub-Committee is composed of eight members of the Town Council, one of whom is a medical practitioner, and four co-opted members, two of whom are medical practitioners, one being the visiting psychiatrist at the Victoria Hospital, Blackpool. Meetings are held as and when necessary. The Senior Assistant Medical Officer for Mental Health resigned his appointment in July to accept a post with the Liverpool Regional Hospital Board. Dr. D. W. Wauchob has been appointed to fill the vacancy and will commence duty on 1st January, 1951. The remainder of the staff engaged in the Mental Health Service comprise two Authorised Officers, a Mental Health Worker, a Supervisor and an Assistant Supervisor at the Occupation Centre, and a clerical assistant.

Co-ordination with Regional Hospital Boards and Hospital Management Committees. A psychiatrist on the staff of Whittingham Mental Hospital, near Preston, conducts an out-patient clinic at the Victoria Hospital, Blackpool, and where necessary patients are referred by the Authorised Officers to this clinic, either directly or indirectly through the patient's own doctor. I have, at this stage, one criticism to offer. Whittingham Hospital refuse to accept voluntary patients unless first seen at this out-patient clinic. This would be quite reasonable were the waiting list for the clinic not so long. The unfortunate result may be that a patient originally suitable for voluntary treatment may, by the time seen at the out-patient clinic, require certification, thus defeating one of the primary objects of voluntary admissions.

Arrangements have been made with various Mental Hospitals and Hospitals for Mental Defectives whereby my staff provide:—

- (i) As regards persons of unsound mind:
 - (a) Case History Reports.
 - (b) Home Reports on patients when discharge is being considered.
- (ii) As regards Mental Defectives:
 - (a) Home Reports required when continuation of the Order detaining a defective in institution or when the question of Licence or Holiday for the defective is being considered.
 - (b) Periodic Progress Reports on defectives on Licence from institution.

Duties Delegated to Voluntary Associations. The existing staff of the Mental Health Service is considered adequate to the requirements in Blackpool. From time to time advice has been sought from the National Association for Mental Health.

Training of Staff. A residential course for social workers in Mental Health was held at Sheffield University from 12th to 25th July. One authorised officer attended the course.

Community Care.

- (i) Persons of Unsound Mind: To comply with the spirit of the Mental Treatment Act, 1930, certification under the Lunacy Acts is adopted only as a last resort and where possible efforts are made to persuade patients to accept treatment voluntarily or attend the Out-patient clinic at the Victoria Hospital for interview with the psychiatrist. It is regrettable that certification has to be adopted to secure institutional care and attention for many older members of the community who in their declining years display signs of senile dementia. As a matter of routine, all cases when discharged from Mental Hospital, are visited either by a Duly Authorised Officer or the Mental Health Worker unless the discharge report states that the patient has expressed a desire not to be visited. The purpose of these visits is to assist in the rehabilitation and resettlement of the patient. The co-operation of the Disablement Resettlement Officer of the Ministry of Labour and National Service is secured where necessary.
- (ii) Mental Defectives: Details of Guardianship, Supervision and Training of defectives are given in a later paragraph on work performed under the Mental Deficiency Acts. Defectives on Licence from institution are periodically visited by the Mental Health Worker and progress reports submitted to the Medical Superintendent. Every effort is made to ensure the suitability of employment which the defective may enter. Where beneficial, arrangements are made for the younger defectives on licence to attend the Occupation Centre. Currently, the number of defectives on licence is eight.

Mental Deficiency Acts, 1913-38.

(i) Ascertainment: Defectives are reported to this department from a variety of sources, e.g., the Local Education Authority, the Police, the family doctor and the parents. During the year twenty-one cases have been reported of whom fourteen have been ascertained as "subject to be dealt with" in accordance with Section of the Act. At the end of 1950 twelve defectives were awaiting admission to institution. The following summarises the cases reported during the year and the manner in which they were dealt with.

they were dealt with.			
Cases reported during the year :—	M.	F.	T.
(a) By Local Education Authority Section 57,			1.
Education Act, 1944) :—			
(i) Under Section 57(3)	1		1
(ii) Under Section 57(5)		of the name of	1
On leaving special schools	The same of the sa		
On leaving ordinary schools			_
(b) Other ascertained defectives found to be "subject			
to be dealt with "	5	0	10
(c) Other reported cases who are not at present "subject	3	8	13
to be dealt with "	c		-
to be dealt with	6	1	1
Disposal of asses second 1 1	12	9	21
Disposal of cases reported during the year :-			
(a) Ascertained defectives found to be "subject			
to be dealt with ":			
(i) Admitted to institutions	1	1	2
(ii) Placed under Guardianship	-	_	_
(iii) Taken to "Places of Safety"	-	_	_
(iv) Placed under Statutory Supervision	2	4	6
(v) Died or removed from area	1	_	1
(vi) Action not yet taken	2	3	5
(b) Cases not at present subject to be dealt with:			
(i) Placed under Voluntary Supervision	4	1	5
(ii) Later found not to be defective	_	_	_
(iii) Died or removed from area	_		_
(iv) Action unnecessary	2		2
least le religion ell sugge alest qui solle ser alestese	12	9	21
-			

(ii) Guardianship and Supervision: Defectives when ascertained as "subject to be dealt with," as an alternative to being admitted to an institution for care and training, may be either placed under Guardianship or Statutory Supervision. Defectives not yet "subject to be dealt with" may be maintained under voluntary supervision, particularly so when the parent requests visits from the Mental Health Worker. The following details relate to the defectives in Blackpool maintained under Community Care as at 31st December, 1950.

ricy	care as at orst December, 1950.							
(a)	Guardianship:					M.	F.	T.
	(i) Under 16 years of age							1.
	(ii) Aged 16 years and over				***	0		-
(b)	In "Places of Safety"			**	***	2	_	2
	Under Chatalan C				***	-	_	-
(c)	Under Statutory Supervision (e	exclu	ding	cas	es on			
	licence):							
	(i) Under 16 years of age					7	10	10
	(ii) Aged 16 years and over					00	12	19
(1)	Defectives ascertained as " and	:	. 1			23	21	44
(00)	Defectives ascertained as "sub	ject	to be	de	alt			
	with" but in whose case	no a	ction	has	s yet			
	been taken under any of	the	head	ing	s (a)			
	to (c)	380		0	1)	3	4	-
(e)	Under Voluntary Supervision:					0	4	1
	(i) Under 16 years of age							
	(ii) Agod 16 record and	***				3	3	6
	(ii) Aged 16 years and over					4	2	6
					7 10 35	42	42	84

(iii) Institutions: the following defectives were in an institution as at 31st December, 1950.

				MI.	r.	1.
				9	6	15
				35	31	66
are the f	ollowin	ng defec	ctives			
				-	1	1
				5	9	7
	are the f	are the followir	are the following defec	are the following defectives	are the following defectives — 35	

(iv) Training: This Authority provides an Occupation Centre for mentally defective children and for this purpose rents accommodation in a church hall at Dean Street, Blackpool. In my opinion these premises are inadequate, either for segregation of the various grades or for giving more varied instruction. Earlier in this report I have referred to the request to the Minister of Health for permission to close two day nurseries and it is the intention, if permission to close is granted, to transfer the Occupation Centre to the present day nursery situated at the Municipal Health Centre.

The Centre caters primarily for defectives of both sexes mainly up to the chronological age of sixteen years who do not require institutional care and attention, although at the present time it will be seen from the details given below that practically 50 per cent. of those in attendance are aged 16 years or over. The majority attending are of imbecile grade. One or two higher grades do attend but no facilities exist for the low grades.

Mid-day meals are supplied at a small charge and transport to and from the Centre is provided for those defectives who are unable to travel unaccompanied on public transport. Instruction is given in various forms of handicrafts, viz., rug-making, needlework, embroidery and knitting. There is a percussion band, and singing, musical games, country dancing, ball games and eurythmics are taught.

As at 31st December, 1950, the following defectives were receiving training at

the Occupation Centre :-

					M.	F.	T.
Under 16 years of age					5	3	8
Aged 16 years and over					5	2	7
The average daily attenda	nce over	the whol	le year	was 14	1.6.		

Admissions to Hospitals. The following table shows the number of health service patients admitted to hospitals during the year classified according to the various sections of the relevant Acts.

(a)	Mental Hospitals :				
, ,	Section 16, Lunacy Act, 1890		 	 	61
	Section 20, Lunacy Act, 1890		 	 	19
	Section 21(1), Lunacy Act, 1890		 	 	93
	Section 21(2), Lunacy Act, 1890		 	 	5
	Section 1, Mental Treatment Act,	1930	 	 	83
(b)	Mental Deficiency Institutions:—	WESTER .			- 2
	Section 5, Mental Deficiency Act,		 	 	5
	Section 8, Mental Deficiency Act,	1913	 	 	1

Domiciliary Visiting. In addition to visits to patients necessary before their removal to hospital a number of other visits are made. Briefly, these may be clasified as follows:—

Lunacy and Mental Treatment :-

(i) To prepare reports for mental hospitals.

(ii) After-Care Visits.(iii) General enquiries.

Mental Deficiency :-

(i) To prepare case notes and other reports for institutions.

(ii) Supervision of defectives under community care.

(iii) General enquiries.

766 visits were made for one or other of the above purposes.

Out-patient Treatment Services. An out-patient clinic is held at the Victoria Hospital, Blackpool, attended by a Psychiatrist from Whittingham Mental Hospital. Patients are referred to this clinic either by my mental health staff or by the patient's own doctor.

From time to time patients attending the above clinic are recommended for out-patient electro-convulsant therapy at Whittingham. This necessitates attending this hospital three days a week for a period of 3—4 weeks. Twenty-two patients have during the year been afforded such treatment and sitting-case car transport to and from the hospital is provided in all cases through the Ambulance Service of this Authority.

REGISTRATION OF NURSING HOMES

Eleven nursing homes were on the register at the end of 1950, two of which were first registered during the year. One Home which had closed down in a previous year was re-registered and two establishments ceased to function as a Nursing Home and the registration certificate was withdrawn. Twelve routine visits of inspection were made by the Non-Medical Supervisor of Midwives and in addition eight special visits were made—four of these were prior to registration of Homes, three following notifications of puerperal pyrexia and one consequent on the death of a baby. The following defects were observed:

- (a) Drugs register not kept up to date.
- (b) No drugs register maintained.
- (c) Night staff arrangements unsatisfactory—assistant nurse only on duty.
- (d) Non-notification of puerperal pyrexia.

On attention being drawn to these discrepancies they were immediately remedied and no action was necessary under the provisions of the Public Health Act, 1936, or the byelaws made thereunder.

The following is a list of the Registered Nursing Homes operating in the Borough throughout the year.

Address of N	ursin	e Home			Be	eds		
		e rrom			Maternity	Others		
26, Leys Road					5	2		
230, Hornby Road	***	***	***		_	12		
22, Moore Street	***	***	***	***	_	10		
24, Highbank Avenue	***	***			-	2		
420, Lytham Road	***				_	- A		
46, Sherbourne Road		***			3	8		
575, Lytham Road					_	8		
13, Burgate					1	17		
308, St. Annes Road			***			2		
13, Luton Road						9		
160, Reads Avenue					6	4		
412, Lytham Road				1/25	8	*		
254, Waterloo Road					0	3 8		

Note:

- * Registered or re-registered during 1950.
- † Closed during 1950.

MIDWIVES ACTS, 1902-36

Inspection of Registered Midwives. As at 31st December, 1950, eleven midwives were engaged in private practice within the Borough. Of these six were in domiciliary practice—the remainder being employed in nursing homes. The midwives in domiciliary practice are visited periodically by the Non-Medical Supervisor of Midwives and their bags, appliances and registers are examined. Twenty visits of inspection were made during the year. The midwives employed in Nursing Homes are visited on the routine inspections of these Homes.

Medical Aid under Section 14(1), Midwives Act, 1918. During 1948 medical aid was summoned by midwives in 74 domiciliary cases. In 14 instances the Medical Practitioner had arranged to provide the patient with maternity medical services under the National Health Service. It was not found necessary to summon medical aid for any institutional patients.

Administration of Analgesics. Eighteen midwives in practice in the Borough are qualified to administer analgesia in accordance with the requirements of the Central Midwives' Board. Five of the midwives are in the service of this Authority, one in private domiciliary practice and twelve in hospitals in the National Health Service. Each of the five municipal midwives is in possession of a Minnitt Gas and Air apparatus and during the year analgesia was administered in 178 cases. Details of these cases are given in the table below.

And a supplied to the		Receive	d Relief	Received a fair amount of relief		Received no relie	
Constitution of		Prima- gravida	Multi- gravida	Prima- gravida	Multi- gravida	Prima- gravida	Multi- gravida
Received Ante-Natal in-	Yes	8	81	8	23	-	-
Struction in the use of Gas and Air Analgesia	No	11	34	2	10	1	-
Attended for Ante-Natal	Yes	7	35	4	14	-	_
Exercises	No	12	80	6	19	1	-
Other Drugs Administered	Yes	19	81	9	28	1	-
	No	-	34	1	5	-	-
Stage of Labour at which	1st	19	106	10	31	1	-
Analgesia commenced	2nd	_	9	1	2	_	

NATIONAL ASSISTANCE ACT, 1948, SECTION 47

Provision is made under the above Section of the Act for the removal to hospital of persons who :—

- (a) are suffering from grave chronic disease or, being aged, 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.

Briefly, this section of the Act provides that if your Medical Officer of Health is satisfied that in the interests of any such person as above, or for preventing injury to the health of, or serious nuisance to, other persons, it is necessary to remove any such person to hospital, and certifies to that effect, the Welfare Authority may apply to a Court of Summary Jurisdiction for an Order for that person's removal to a suitable hospital. The Court if satisfied on the allegations in the certificate may make an Order for an initial period of three months which may be extended for further three-monthly periods on renewed applications to the Court. At any time after the expiration of six weeks from the making of an Order the Court may revoke it if changed circumstances render it expedient to do so.

During the year it was not necessary for this department to take any initial action under this Act but the Court Order in respect of the person referred to in my last annual report has been renewed on four occasions.

SANITARY CIRCUMSTANCES OF THE BOROUGH

WATER SUPPLY

The Water Supply in the Borough is under the jurisdiction of the Fylde Water Board and I am indebted to the Engineer to the Board for supplying me with the information incorporated in the tables given below.

The water delivered to Blackpool is supplied from two sources, (a) from Watersheds at Barnacre, and (b) at Stocks on the River Hodder, and has been satisfactory both in quality and quantity.

At both these head works upland surface water is collected and stored in reservoirs. The watershed at Barnacre is free from human habitation, and at Stocks the Board owns the watershed and controls all operations on it.

The raw water is stained with peat, and is treated with Sulphate of Alumina before Filtration to remove this colour during Filtration and Lime Water is added after Filtration to compensate acidity. Finally the water is sterilised with Chlorine. The pH of the filtered water as it leaves the filters is recorded continuously by a Multelec pH Recorder. The combined alkalinity, acidity and colour is taken at least daily at various stages of the treatment.

Full chemical analyses are not frequently made, as the waters do not vary significantly—a copy of the latest analysis was given in my report for 1948. Bacteriological Analyses of the Water and of samples collected at various points in the Borough are made at least once a month—reports on these analyses are summarised below.

There is no liability to plumbo-solvent action as the acidity is neutralised with

Lime Water at the Filters.

At 31st March, 1950, there were 44,356 houses in the Borough all of which, with the exception of one, had a piped supply of water. The population supplied, based on the Registrar General's estimate, is 149,600.

SUMMARY OF BACTERIOLOGICAL ANALYSES OF RAW WATER FROM BARNACRE WORKS

		Aerobic mic growing in	Probable no. of coli-aero-		
Date sample taken	ph Value of sample		ies per ml. of vater	genes per 100 ml. of water (McCrady	
		in 2 days at 37°C	in 3 days at 22°C		
	. 6.0	3	37	8	
	6.1	4	91	1	
	6.10	2	77	0	
	6.70	5	140	5	
	7.0	5 3 3	100	17	
5th Aug., 1950 .	6.6	3	33	35	
23rd Aug., 1950 .	. 6-40	2	168	35	
27th Sept., 1950 .	6.40	4	96	7	
441 Par 1050	. 6.55	3	110	5	

SUMMARY OF BACTERIOLOGICAL ANALYSES OF RAW WATER FROM HODDER WORKS

		Aerobic mic growing in	Probable no. of coli-aero-		
Date sample taken	ph Value of sample			genes per 100 ml. of water (McCrady)	
	Tally of the	in 2 days at 37°C	in 3 days at 22°C		
25th Jan., 1950	6-90	9	159	8	
10th Feb., 1950	6.90	9 5 22 2 3 3	2960	8 35 11	
21st Mar., 1950		22	196	11	
5th May, 1950		2	430	17	
27th June, 1950		3	123	50	
22nd July, 1950			510	350	
24th Aug., 1950		20	392	250	
13th Sept., 1950		8	668	600	
27th Oct., 1950	7.0	4	111	8 25	
9th Dec., 1950	6.90	6	560	25	

SUMMARY OF BACTERIOLOGICAL ANALYSES OF FILTERED WATER BEFORE CHLORINATION FROM HODDER WORKS

Date sample taken		I phara	Aerobic micro-organisms growing in yeastrel again			
		ph Value of sample			genes per 100 ml. of water (McCrady)	
			in 2 days at 37°C	in 3 days at 22°C		
10th Feb., 1950		9 · 20	2	11	1	
15th Feb., 1950		6.40	1	7	0	
21st Mar., 1950		9.40	1	3	1	
5th May, 1950		9.05	0	2	0	
27th June, 1950		8.80	1	3 5	0	
22nd July, 1950		9.00	1		0	
24th Aug., 1950		8.90	3	72	0 5 2	
13th Sept., 1950		9.10	1	29	2	
27th Oct., 1950		8.50	0	14	0	
9th Dec., 1950		8.90	1	8	0	

SUMMARY OF BACTERIOLOGICAL ANALYSES OF FILTERED WATER BEFORE CHLORINATION FROM BARNACRE WORKS

		Aerobic mic growing in	Probable no. of coli-aero- genes per 100 ml. of water (McCrady)		
Date sample taken	ph Value of sample	No. of coloni wa			
		in 2 days at 37°C	in 3 days at 22°C		
19th Jan., 1950		1	3	0	
21st Feb., 1950		3	7	0	
10th March, 1950		2	7	0	
18th May, 1950		1	112*	0	
27th June, 1950	9.15	0	3	0	
5th Aug., 1950	9.10	1	4	0	
27th Sept., 1950	9.10	0	3	0	
4th Dec., 1950	0.15	1	3	0	

^{*} Alumina injection turbines had just been adjusted and colour of Filtered Water had gone off—also purity.

SUMMARY OF BACTERIOLOGICAL ANALYSES OF SAMPLES OF WATER TAKEN IN THE BOROUGH OF BLACKPOOL

		Aerobic mic growing in	Probable no. of coli-aero- genes per 100 ml. of water (McCrady)		
Date sample taken	ph Value of sample	No. of coloni wa			
		in 2 days at 37°C	in 3 days at 22°C		
16th Jan., 1950		0	1	0	
14th Feb., 1950		1	2	0	
28th March, 1950		1	4		
4th May, 1950		0	12 25	0	
22nd June, 1950		0		0	
15th Aug., 1950	7.35	1	12	2	
19th Sept., 1950	7.3	0	7	0 0 2 0 0	
12th Oct., 1950	7.2	1	33	0	
7th Nov., 1950	7.7	0	4	0	
12th Dec., 1950	7 - 15	1	2	0	

SEWERAGE OF THE BOROUGH

There are in the Borough 63,372 water closets and 295 pail closets. No record is held of pail closets on showgrounds or temporary structures. The 295 pail closets and the cesspools remaining in the Borough are serviced regularly by the Cleansing Department of this Authority. On the periphery of the Borough a number of septic tanks still exist and in view of their unsatisfactory condition abolition at an early date is most desirable.

During the year the Spen Dyke drainage scheme referred to in my last annual report was completed. A new sewer has been laid to serve the Toronto Avenue school and a small number of building plots in the Moor Park Avenue neighbourhood.

Details of the Council's proposals for future main sewage improvements are given below:—

Dauntsey Avenue Drainage. Construction of a new sewer from Dauntesey Avenue to Bathurst Avenue to dispense with the sewage plant which is inefficient and causes pollution of the adjoining dyke and to dispense with a septic tank serving five other properties.

PADDOCK DRIVE AREA. It is proposed to provide main drainage for approximately 140 houses in the vicinity of Buttermere Avenue and to dispense with the Paddock Drive septic tank.

NORTHERN AREA. A scheme is in the course of preparation for the construction of a new trunk sewer to drain 730 acres in the north of the Borough outside the existing drainage area.

MIDGELAND ROAD SEWER. A tentative scheme has been prepared for the provision of foul sewers to drain some of the existing properties in the Marton Moss area.

EASTERN AREA. A provisional scheme has been evolved to eliminate flooding in this area. It involves the construction of storm water overflows in Whitegate Drive discharging into a new storm-water culvert to Marton Mere.

REFUSE COLLECTION AND DISPOSAL

This is carried out by the Cleansing Department of this Authority. I am informed by the Director of Public Cleansing that the work of Refuse Collection has continued to increase and the waste paper content of the refuse rose considerably owing to the severe fall in price of baled waste-paper. During this year the yield of refuse and night-soil was affected by the first post-war Illuminations. The amount of refuse dealt with at the Refuse Disposal Works was 23,315 tons, whilst in addition 31,627 tons were tipped away and 1,655 tons of night-soil were removed.

SANITARY INSPECTION OF THE BOROUGH

This section of the Annual Report, and the following sections dealing with Housing, Rodent Control and Disinfestation, General Food Supply and Prosecutions, give details of the variety of functions undertaken by the Chief Sanitary Inspector and his staff in connection with the environmental health services.

COMPLAINTS RECEIVED							2543
VISITS AND INSPECTIONS (TOTAL)						and the same of	30180
VISITS AND INSPECTIONS (TOTAL)						***	30100
Houses fully inspected:							
(b) Old Houses			***				6
(c) Basement Tenements					***		3
(d) Temporary Structures							-
Inspections of Work in Progress							1141
Visits to Shops							2664
Visits to houses and other premis							4690
Visits to requisitioned property							-
Visits re Building Repair Licence			***		***	***	702
		ndon N	otica	***	***	1000	
Re-inspections in relation to nuis				at the little	and or o	***	7543
Inspection of basements (excludi			ions)		***	***	27
Inspection of manure heaps							49
Sands inspection							2
Enquiries into deaths							2
Smoke observations (half-hour du	uration	each)					22
Inspections of temporary structu	res (exc	cluding	full ins	pection	is)		1707
							129
Offensive Trades							19
Inspections re Rats and Mice							21
Inspections of Common Lodging							471
Inspections of Factories and Wor							968
Inspections of bakehouses							525
							-
Visits in connection with Infection	ous Dise	ases		***			7
INSPECTIONS UNDER FOOD AND DRUG	S ACT:						
Visits re Catering Licences							722
Visits re general Food inspection							4262
Visits re Food Manufacturing Pro							21
Inspections of Cafes and Snackba							540

Visits to Public Abattoirs							25
Inspections of Ice Cream Premise		***					889
							889 1096
Inspections of Fish Frying Shops							889 1096 371
Inspections of Dairies and Milk Sh	ops und	 ler Milk					889 1096 371 1000
	ops und	 ler Milk					889 1096 371
Inspections of Dairies and Milk Sh Inspections of Hotels and Licens	ops und	 ler Milk	 and D	 airies F	 Regulat	 ions	889 1096 371 1000
Inspections of Dairies and Milk Sh	ops und	 ler Milk	 and D	 airies F	 Regulat	 ions	889 1096 371 1000
Inspections of Dairies and Milk Sh Inspections of Hotels and Licens Inspection of Ash Receptacles:	ops und	 ler Milk	 and D	 airies F	 Regulat	 ions	889 1096 371 1000 6
Inspections of Dairies and Milk Sh Inspections of Hotels and Licens Inspection of Ash Receptacles: Satisfactory	ops und	 ler Milk	 and D	 airies F 	 Regulat	ions	889 1096 371 1000 6
Inspections of Dairies and Milk Sh Inspections of Hotels and Licens INSPECTION OF ASH RECEPTACLES: Satisfactory Unsatisfactory	s nops und ed Pren	 ler Milk	 and D	 airies F 	 Regulati 	ions	889 1096 371 1000 6 46 201
Inspections of Dairies and Milk Sh Inspections of Hotels and Licens Inspection of Ash Receptacles: Satisfactory Unsatisfactory Re-inspections under notice	oned Pren	 ler Milk	 and D	airies F	 Regulati 	 ions 	889 1096 371 1000 6 46 201 272
Inspections of Dairies and Milk Sh Inspections of Hotels and Licens Inspection of Ash Receptacles: Satisfactory Unsatisfactory Re-inspections under notice Notices to provide Galvanised Bir	ops und ed Pren	 ler Milk	 and D	 airies F 	 Regulati 	ions	889 1096 371 1000 6 46 201 272 57
Inspections of Dairies and Milk Sh Inspections of Hotels and Licens Inspection of Ash Receptacles: Satisfactory Unsatisfactory Re-inspections under notice	ops und ed Pren	 ler Milk	 and D	airies F	 Regulati 	 ions 	889 1096 371 1000 6 46 201 272
Inspections of Dairies and Milk Sh Inspections of Hotels and Licens Inspection of Ash Receptacles: Satisfactory Unsatisfactory Re-inspections under notice Notices to provide Galvanised Bir Number of Galvanised Bins prov	oned Pren	der Milk	 and D	 airies F 	 Regulat	 ions 	889 1096 371 1000 6 46 201 272 57
Inspections of Dairies and Milk Sh Inspections of Hotels and Licens Inspection of Ash Receptacles: Satisfactory Unsatisfactory Re-inspections under notice Notices to provide Galvanised Bir	oned Pren	der Milk	 and D	 airies F 	 Regulat	 ions 	889 1096 371 1000 6 46 201 272 57 239
Inspections of Dairies and Milk Sh Inspections of Hotels and Licens Inspection of Ash Receptacles: Satisfactory Unsatisfactory Re-inspections under notice Notices to provide Galvanised Bir Number of Galvanised Bins prov	oned Pren	der Milk	 and D	 airies F 	 Regulat	 ions 	889 1096 371 1000 6 46 201 272 57
Inspections of Dairies and Milk Sh Inspections of Hotels and Licens Inspection of Ash Receptacles: Satisfactory Unsatisfactory Re-inspections under notice Notices to provide Galvanised Bir Number of Galvanised Birs prov Notices Served for the Abatemen Statutory	oned Pren	der Milk	 and D	 airies F 	 Regulat	 ions 	889 1096 371 1000 6 46 201 272 57 239
Inspections of Dairies and Milk Sh Inspections of Hotels and Licens Inspection of Ash Receptacles: Satisfactory Unsatisfactory Re-inspections under notice Notices to provide Galvanised Bir Number of Galvanised Bins prov	oned Pren	der Milk	 and D	 airies F 	 Regulat	 ions 	889 1096 371 1000 6 46 201 272 57 239

H	OUSE DRAINS TESTED:							
	Total number of tests made						i Paul	81
	New Houses:				OF STREET		nondba	
	Satisfactory							31
	Unsatisfactory							1
	Rendered satisfactory after							1
	Old Houses:							
	First test satisfactory				Design 1			1.
	First test unsatisfactory							8
	Re-tested during relaying							198
	Final Test satisfactory							170
D	RAINS:							
	Laid, relaid, disconnected and v	entilat	ted		10000			
	Repaired, cleaned out							1034
	New gullies fixed							8
	Soil pipes fixed or repaired							14
W	ATERCLOSETS:							
	New W.C.'s fixed in lieu of privi	es pa	il closet	s and	defectiv	ve w c	'e	2
	Water closets repaired					ve w.c.	S	30
	Fittings and water provided for	w.c.'s		***				33
	Waterclosets unblocked							:
	Cesspools abolished							M. C
	Pail closets provided Privies abolished	***		***				4
	Privies constructed into Pail Clo	coto			•••			-
	Pail closets abolished	sets			•••			100
111								_
VV	ASTE PIPES:	- DIE						
	Bath, lavatory and slop waste p	ipes di	sconne	cted ov	er gull	ies		5
	New slop waste pipes fixed							3
	Slop waste pipes repaired New rainwater pipes fixed							30
	Rainwater pipes and roof gutters	s repai	red			- 111		62
	Water service pipes repaired							67 13
M	SCELLANEOUS:				1			10
	Houses where sanitary defects w	ere for	und					576
	Houses where sanitary defects w Number of sanitary defects reme	ere rer	nedled			***		505
	Houses disinfested:	anca						2035
	H.C.N. Gas					The same		3
	Insecticides only							27
	D.D.T. and special methods		***					38
	Floors repaired or relaid		11000					49
	Back yards repaired Back yards flagged, concreted or	oonbo	ltod			***		12
	Accumulations removed	100						10
	Animals removed from improper	situat	ions					56
	Roots repaired							109
	Rooms ventilated	***						103
	Yards cleansed							11
	Watercourses cleansed							6
	Manure receptacles abolished Manure receptacles provided							-
	Sundry minor defects remedied							1
	Manholes, gullies, back streets, et	tc rer	orted t	o Dire	ctor of	Cleans	ing	292 53
						Orcento.	4444	00

MISCELLANEOUS-contd.

-do Borough Surveyor					 	21
Erections in yards reported to Bo	rough	Surve	yor		 	4
New slop sinks fixed					 	4
New damp proof courses fixed					 	5
Dampness remedied					 	68
Fireplaces provided or repaired					 	40
Food stores provided					 	2
Food Stores ventilated					 	-
Hand rails to staircases fixed					 	3
Courts or back passages repaired					 	2
Courts or back passages cleansed					 	2
Premises Cleansed					 	4
Name and Address of Landlord in	serted	in Re	nt Boo	k	 	2

Building Licences. When the Building Licence scheme came into operation, the Chief Sanitary Inspector was appointed an authorised officer by the Ministry of Works and the Local Authority for the issuing of licences for general repairs to dwellinghouses, and during the year, 61 licences were issued for repairs to dwellinghouses in excess of £100, the total cost being £14,924 14s. 0d.

In the case of repairs to business premises, these are inspected before recommendations are sent to the Ministry of Works, and the latter normally are guided by the observations of this department.

During 1950, 334 timber permits were issued for both types of premises, and the total number of visits made for this work was 702.

Common Lodging Houses. There are two registered Common Lodging Houses in the Borough and the total accommodation of these houses is as follows:—

- 13, Eden Street: 160 adults and 1 child.
- 12, Seed Street, 56 adults and 1 child.

and in both cases they are for males only, there being no accommodation of this type for women in the town.

During the year, 471 visits and inspections were made in order to maintain a reasonable standard of hygiene.

Sanitary Conditions of Theatres and Music Halls. There are in the Borough the following places of public entertainment.

Cinemas				 	13
Cinemas (also	used	for vari	ety, etc.)	 	5
Variety, etc.				 	6
Ballrooms				 	5
Ice Drome				 	1

During the year, 31 inspections were made, and from the Public Health point of view these halls are conducted satisfactorily.

It is true to say that the standard of sanitary accommodation and the general condition of this type of premises in the borough compares favourably with any other town in the country.

It is most gratifying to commend the sense of responsibility which prompts the owners of these buildings to maintain their properties in first class condition.

Factories. During the year, the closest co-operation has been maintained between H.M. Inspector of Factories at Preston and this department, and this policy is one which has been to our mutual benefit.

During 1950, 1,496 visits were made to Factories by the District Sanitary Inspectors, and in the course of these inspections 154 contraventions of the Factories Acts of 1937 and 1948 were noted. In 124 instances, action was taken informally, and it was only necessary in 30 cases for written notices to be served on the occupiers of the premises.

The department is not aware of any Blackpool firms employing outworkers within the borough, but 5 notifications have been received from other authorities where outworking was carried on in their places locally. In all cases, these were visited and

found to be satisfactory.

The details of the visits and conditions found in the factories are given in the following tables:—

INSPECTIONS OF FACTORIES

	n	Number of						
	Premises	Inspections	Written notices	Occupiers prosecuted				
(i)	Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	371	5	_				
(ii)	Factories not included in (i) in which Section 7 is enforced by the Local Authority	1122	25	la control de la				
(iii)	Other Premises in which Section 7 is enforced by the Loca' Authority (ex- cluding out - workers' premises)	3	2007	200 m				
	TOTAL	1496	30	_				

DEFECTS FOUND IN FACTORIES

						No.of cases in which prose- cutions were instituted	
Particulars	Not Remedied 1949	Found 1950	Remedied 1950	Not Remedied 1950	Referred to H.M. Inspector		
Want of cleanliness (S.1)	89	61	55	95	-	-	
Overcrowding (S.2)	-	-	-	-	_	-	
Unreasonable temperature (S.3)	-	-	-	_	-	-	
Inadequate ventilation (S.4)	9	1	1	9	-	-	
Ineffective drainage of floors (S.6)	-	-	-	-	-	-	
Sanitary Conveniences (S.7) (a) insufficient	31	3	7	27	_	-	
(*) unsuitable or defective	39	49	61	27	2	_	
(c) not separate for sexes	1	16	17	-	- /	-	
Other offences against the Act (not including offences re-	N. Saling	Will Live		All and	Altania	ono :	
lating to Outwork)	29	24	16	37	3	-	
TOTAL	198	154	157	195	5		

HOMEWORK

The state of the state of	Outworker's Lists, Section 110 Lists received from Employers								
at alvertise solv									
Nature of Work	Tw	ice in the	year	Once in the year					
Nature of Work		Outwo	orkers		Outworkers				
AND THE PARTY OF T	Lists	Con- tractors	Work- men	Lists	Con- tractors	Work men			
Wearing Apparel— making, etc	5	5	_	Parties .	_	_			

REGISTERED FACTORIES

				Mechanical Power	Non- Mechanica Power
Making of Wearing Appar	el			 114	20
Bakehouses		***		 140	6
Preparation of other Food	8			 93	2
Building Trades				 79	1
Furniture making, etc.				 37	21
Conveyances and Engineer				 146	12
Letterpress and Photograp					1
Bookbinding				 43	1
Other Trades				 52	5
Laundries				 18	-
Total No. of Factories on	Regis	ter	7.0	722	68

OTHER MATTERS NOTIFIED TO H.M. INSPECTOR OF FACTORIES

Failure to affix	Abstract	of the	Factor	ies Act	, Sectio	n 128	(3b)	 	2
Other matters								 	1

Shops. During the year, the department found it possible to make a survey of all shops in Blackpool, involving 2,047 first inspections and 617 re-inspections, to ascertain whether the provisions of Section 10 of the Shops Act 1934 (Section 38 of the Shops Act 1950) were being complied with. This detailed inspection had to be suspended during the war years, but it was gratifying to find that there had been no serious deterioration of the position owing to the absence of inspections during this period. It is hoped that in future years continuous routine visits can be made for this particular purpose, and it is not anticipated that any major works will be required at any of the premises involved.

The undermentioned tables show the details of the conditions found by the sanitary inspectors and action taken to remedy various defects.

		F	ound	Repaired or remedied		
		Nil	Defective	Provided	Repaired	
Sanitary conveniences Washing facilities		13	96 23	9	49	
Washing facilities	***	11	23	9	7	
Lighting	***		1	1	-	
Ventilation	***	2	2	_	-	
Temperature	***	1	_	3	-	
TOTALS		27	122	22	56	

Offensive Trades. The following offensive trades exist within the Borough :-

Tripe Boilers		 	 2
Gut Scrapers		 	 1
Rag and Bone Depots	s	 	 4

With the exception of the rag and bone depots all the above are located at the Public Slaughterhouse. This is particularly satisfactory as they are under the daily observation of the Superintendent, and furthermore the effluvia emitted by them is not detected by any large body of the public.

In the case of rag and bone dealers it should be noted that the sorting of bones is not carried out in the manner it was in the days prior to 1939 as they are collected from butchers' shops and taken direct for treatment to convert into fertilisers in a well conducted factory on the outskirts of the town at the Bispham end of the Borough.

HOUSING

1.	Ins	PEC	TION OF DWELLING HOUSES DURING THE YEAR:	
	(i)	(a)	Total number of dwelling houses inspected for housing defects under Public Health or Housing Acts	380
		(b)	Number of inspections made for the purpose	927
	(ii)	(a)	Number of dwelling houses (included under sub-heading (i) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925)	100
-		(b)		108
	/:- \			280
	(iv)	inji	mber of dwelling houses found to be in a state so dangerous or urious to health as to be unfit for human habitation (including arance areas)	9
	(iv)		mber of dwelling houses (exclusive of those referred to under	,
	(14)	the	previous sub-heading) found not to be in all respects reasonably for human habitation	197
	-			
2.	REI	MED	Y OF DEFECTS DURING THE YEAR WITHOUT SERVICE OF FORMAL	
			of defective dwellings rendered fit in consequence of informal	
	acti	on b	by the Local Authority or the officers	198
3.	Аст	ION	Under Statutory Powers During the Year:	
	(a)		oceedings under Sections 9, 10 and 16 of the Housing Act, 1936:	
		(i)	Number of dwelling houses in respect of which notices were	1007
		/***	served requiring repairs	55
		(ii)	Number of dwelling houses which were rendered fit after service of formal notices:	
			(a) By owners	56
			(b) By Local Authority in default of owners	8
	(b)		ceedings under Public Health Acts:	
		(i)	Number of dwelling houses in respect of which notices were	THE REAL PROPERTY.
		/**	served requiring defects to be remedied	156
		(11)	Number of dwelling houses in which defects were remedied after service of formal notices:	
			(a) By owners	92
			(b) By Local Authority in default of owners	54
	(c)		ceedings under Sections 11 and 13 of the Housing Act, 1936:	
		(1)	Number of dwelling houses in respect of which Demolition Orders were made	
		/223		2
			Number of dwelling houses demolished in pursuance of Demolition Orders	-
	(d)	Pro	ceedings under Section 12 of the Housing Act, 1936:	
		(i)	Number of separate tenements or underground rooms in respect of which Closing Orders were made	5
		(ii)	Number of separate tenements or underground rooms in	
			respect of which Closing Orders were determined, the tenement or room having been rendered fit	

Clearance Areas. The position at the end of 1950 was as follows :-

Area		Date of represen- tation	Confirmation by Ministry of Health	No. of dwellings removed, vacated or de- molished	No. of dwellings still occupied	families in
Waterloo Road	No. 1	8.3.37	C.P.O.	12	2	(3 persons)
Common Edge Rd.	No. 3	9.2.38	30.6.39	6	3	(9 persons)
Daggers Hall Lane	No. 1	" .		8	1	(1 person)
Vicarage Lane	No. 2	"		8	3	(3 persons)
Abbey Road	No. 2	"	"	1	1	(2 persons)
Waterloo Road	No. 2	"		5	1	(1 person)
Sedbergh Avenue	No. 1	"	"	2	1	(1 person)
Little Layton	No. 1	Not co by Mini Health. quired b Authorit Grange I tension.	Part re- y Local y for	40	5	5 (10½ persons)
Little Layton	No. 2	"	"	3	2	(5 persons)

Caravans and Wooden Structures. During the year, the difficulties of the department have certainly not decreased, and it has been necessary to make 1,707 visits to temporary structures used for human habitation.

As far back as 1925, the Local Authority obtained special powers in a local Act which ensured, in conjunction with the Amendment Act of 1935, that no land should be used for human habitation unless and until it was provided with sufficient roads, sewers, water supply and sanitary accommodation. In consequence of these two Acts, the question of licensing sites under the Public Health Act of 1936 has not arisen, as the Local Authority is of opinion that the local powers are much stronger than those contained in general legislation. These remarks, of course, pay no cognizance to the Town and Country Act, of 1947, and are purely directed towards public health provisions rather than interference with amenities.

The largest site used for caravans for the summer period is situated at the northern end of the town, on the sea front near Norbreck, and about 300 structures are usually accommodated between Easter and October. The land is provided with roads, sewers, water supply and sanitary accommodation, and only a few of the structures are allowed by the proprietors of the camp to remain occupied on the site during the winter months. The land has now been purchased by the Local Authority, and in about three years it will cease to be used for camping purposes.

It has not been possible to ascertain the actual number of these types of structures which are used for permanent habitation, but there has certainly been a considerable increase since the outbreak of hostilities in 1939, due chiefly to the housing shortage. No caravan, however well equipped, can give the same satisfaction to the occupier as a well kept and well constructed permanent dwelling, which is not so susceptible inside changes in temperature, and wherein can be provided such amenities as constant hot water supply and bathrooms which are becoming accepted as a necessity in our modern civilisation.

The department had a similar experience of the increase in the numbers of this type of structure after the cessation of hostilities in 1918, and one cannot expect a reduction in their use until the housing shortage is less acute. As priority in the allocation of municipal houses is given to those resident in Blackpool, with particular reference to those who have served in the armed forces, the opportunity of some of the occupants of the caravans who have arrived in the Borough since 1939, of obtaining a Corporation house, is extremely remote. All that the department can do then, is to ensure that there is no overcrowding, and that the site is provided with facilities to allow a reasonable standard of comfort, and the hope that the economic situation of the country will improve more quickly than one can visualise, so that a greater proportion of our national resources can be devoted to housing purposes, for a decent home life is the foundation of a healthy and happy community.

Overcrowding. I can only repeat what I said in my last annual report that without making a complete survey it is impossible to give any exact figures regarding the extent of overcrowding in the borough.

When individual cases are discovered by the sanitary inspectors the facts are in every instance reported to the Related Health Services Committee for their instructions. In those cases referred for eligibility for municipal tenancies a report is sent to the Estates and Housing Department of the Local Authority; this department is most helpful in their attitude to these particular problems when recommendations are made.

Allocation of Municipal Tenancies. The Estates and Housing Department of the Corporation is responsible for the allocation of all municipal tenancies, but the closest liaison is maintained between that office and the Public Health Department concerning families living under unsuitable conditions. Detailed reports are sent in each case and it is customary for an inspection to be made of the existing conditions to ensure that no vermin is transferred to a municipal house from a previous residence.

The Borough Treasurer has furnished the following information regarding the various types of municipal houses erected in the post-war period ending 31st December, 1950. These are as follows:—

Permanent: 1 bedroom					
		***	 ***	 	 120
2 bedrooms			 ***	 	 20
3 bedrooms			 	 	 1114
4 bedrooms	***		 	 	 34
					1288
Temporary bungalows			 	 	 344
					1632

During the year 335 families comprising 1207 persons were rehoused. As at 31st December, 1950, the number of applicants still outstanding was 4,980.

RODENT CONTROL AND DISINFESTATION

Rodent Infestation. The continuous search of premises for rodent infestation during the year entailed visits to 1,333 premises, summarized as follows:—

672 Business Premises.612 Dwelling Houses.49 Open Spaces.

Of these 445 premises were found to be infested. Orders for disinfestation were received from the persons responsible for all cases, and the work was carried out by the departmental rodent control staff with satisfactory results.

The relationship between the department and the general public continues to be most cordial, and the helpful co-operation of shopkeepers and householders has been very much appreciated. Surface Infestation. Under this heading, 988 complaints of rodent infestation were received or discovered. During the year, 197 premises were proved clear by test baiting, 800 premises, comprising 394 business premises and 406 dwellinghouses received treatment. Premises treated included theatres, cinemas, hotels, warehouses, restaurants and cafes, and in addition, the abattoirs, tips, refuse disposal works, water-courses, and other premises belonging to the Local Authority received periodic inspection and treatment where necessary. During the year, the rodent control staff engaged on surface infestation made 9,127 visits, all of which were chargeable to the owners or occupiers of the premises.

It is worthy of note that the period under review includes the first nine months working of the Prevention of Damage by Pests Act 1949, and as the provisions of the Act become more widely known, it is expected that more work will have to be undertaken by the department.

Charges. Discussions have taken place both at the Regional and Consultative Committees on the charges made for rodent control work at dwelling houses and business premises, and it has been surprising to hear of the difference between the policies in adjoining districts. In some areas, for dwellinghouses there is a free service, whilst in others, there is a flat rate of 5s. 0d., but in Blackpool the Local Authority has always taken the view that some charge should be made so as to prevent the service being abused. Yet, on the other hand, the cost to the individual should not be so excessive as to discourage the occupiers of premises seeking the advice of the department.

The charges in Blackpool are as follows:-

DWELLING HOUSES

Rats

Cost of	poison	2/6d.	plus an additional	charge of	6d. per	visit	1 —10 points
,,	,,	3/9d.	,,	,,	9d.	,,	11—15 points
,,	,,	5/0d.	,,	,,	1/-	,,	16—20 points
,,,	,,	6/3d.	,,	,,	1/3d.		21—25 points
,,	,,	7/6d.	,,	,,	1/6d.	"	26—30 points

Mice

Cost of	f poison	6d. plu	is an additio	nal charge of	6d. per	visit	1-10 point	s
,,	,,	9d.	,,	,,	9d. /		11—15 point	S
,,	"	1/-	,,	,,	1/-	,,	16-20 point	
,,	,,	1/3d.	,,		1/3d.	,,	21—25 point	
	.,	1/6d.	,,	,,	1/6d.	,,	26-30 point	S

BUSINESS PREMISES

Labour at 5s. 0d. per hour plus materials cost plus 331%.

CLASS	No. of Manholes	COMMENCED	COMPLETED	BAIT	Poison	ESTIMATEI KILL
Maintenance	608	6.3.50	31.3.50	Bread Mash	Arsenious Oxide	445
10% Test	654	3.7.50	20.7.50	Sausage Rusk	-	-
Maintenance	634	4.9.50	22.9.50	Sausage Rusk	Zinc. Phos.	310

Sewer Treatments. The approved sewer treatments were carried out during the year as follows:

A divisional inspector of the Ministry of Agriculture and Fisheries, Infestation Division, was present at each stage of the above treatments, and certified that the correct procedure was adopted. In all, 6,276 sewer treatments were effected.

Insect Infestation. Treatment or advice has been given as a result of 675 complaints of infestation and these were classified as follows:—

			1st Visits	Revisits	Total Visits
Vermin, Bugs, Lice, Fleas		 	286	46	332
Cockroaches		 	172	99	271
Steam Flies		 	6	19	25
Ants		 	70	23	93
Moths		 	29	6	35
Wood borers	***	 	32	20	52
Flies		 	11	2	13
Food Pests		 	6	1	7
Other Pests		 	63	29	92
			675	245	920

Although the total number of visits shows an increase over the figures for the previous two years, there was a decline in the number of cases of house vermin, bugs, lice and fleas, from 400 in 1948, 352 in 1949, to 286 in the period under review. This may be attributed to:—

- (a) greater efficiency of the new insecticides.
- (b) higher standards of hygiene in the home.
- (c) the effect of lectures and informal talks given by members of the department to clubs, fellowships, and guilds during the year.

During 1950, the number of insects sent to the department for examination and identification totalled 183.

Staff. Five full-time employees are engaged in this section of the department, i.e., a Pestologist and four rodent operatives. Insect disinfestation is carried out by other staff.

VERMIN AND INSECTS—SUMMARY OF VISITS, ETC., DURING 1950

7	500 an													
Į,	Visits	35	31	47	46	111	202	111	18	83	20	47	#	920
Visits	Re- Visits	10	9	=	7	21	99	43	21	27	23	6	=	245
	1st Visits	25	25	36	39	96	146	74	99	56	47	38	33	675
Insects sent to	identi- fication	3	+	6	=	23	46	22	21	18	6	6	œ	183
Other Pests	Re- Visits	1	1	1	-	1	7	4	64	7	9	1	-	29
Other	1st Visits	-	1	*	0	00	7	7	10	00	8	64	-	63
Pests	Re- Visits	1	1	1	-	1	1	1	1	1	1	1	1	-
Food	1st Visits	1	1	-	1	1	2	62	-	1	1	1	1	9
Flies	Re- Visits	1	1	1	1	1	61	1	1	1	1	1	1	64
FI	1st Visits	-1	1	1	1	61	2	-	+	-	-	1	1	==
Woodboring Insects	Re- Visits	1	1	1	1	1	3	00	64	4	67	1	-	20
Wood	1st Visits	- 1	1	-	1	1	10	00	-	7	8	-	-	32
Moths	Re- Visits	1	1	-	1	1	-	1	1	1	1	61	61	9
Mo	1st Visits	1	-	64	-	8	1	10	1	-	9	64	-	53
Ants	Re- Visits	1	1	1	1	10	15	8	1	1	1	1	1	23
Aı	1st Visits	1	1	-	01	17	37	7	00	-	1	-	1	20
Steam Fly	Re- Visits	1	1	61	1	1	01	-	64	-	9	7	-	61
Stear	1st Visits	1	-	-	-	1	-	1	-	1	1	-	1	9
Cockroaches	Re- Visits	-	01	+	+	13	21	16	12	12	2	3	9	66
-	1st Visits	9	10	9	15	25	26	19	23	13	00	=	15	172
Vermin, Bugs, Lice, Fleas	Re- Visits	œ	7	+	-	3	10	==	8	8	+	1	1	46
Vermin Lice,	1st Visits	18	18	20	15	7	47	28	17	26	21	20	15	286
No of	Com- plaints	25	25	36	39	96	146	74	09	99	47	38	33	675
	Month	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total

RODENT CONTROL—SUMMARY OF WORK UNDERTAKEN DURING 1950

not v	Esti- mated Kill	1	1	445	1	1	1	1	1	310	1	1	41	1
SEWERS	Poison Bait Take	1	1	C P 8 57	1	1	1	1	1	C P 3 66	1	1	1	1
TROL OF	Bait and Poison Used	1	1	BMA	1	1	-	S.R.	1	SR	1	1	1	1
RODENT CONTROL OF SEWERS	Main- tenance Treatment	-	-	HW 809	1	1	-	T	-	634 MH 4-22.9.50	1	1	i po	N IS
an equi	Annual 10% Test	1	1	6-31.3.50	1	-	-	654 MH 3-20.7.50	1	1	1	1	1	1
ISES	No. of Visits	884	820	940	674	629	818	699	200	587	799	606	692	9127
TYPE OF PREMISES TREATED	Business Dwelling Premises Houses	53	26	94	24	24	34	26	34	36	42	33	28	406
Tver	Business Dwelling Premises Houses	36	37	#	31	20	38	37	31	32	27	38	33	394
500	For	88	98	3	47	37	45	51	44	64	55	55	28	613
NOI	For	21	7	17	8	7	27	12	21	4	11	- 91	33	187
SURFACE INFESTATION	No. of premises treated with poison	68	63	98	55	44	72	63	65	89	6	1	61	800
SURFACE	Premises proved clear by investi- gation or test baiting	22	62	27	18	3	18	23	17	9	17	13	=	197
	No. of Premises Complaints proved of clear Infes- by investi- tations gation or discovered test baiting	III	85	107	73	69	87	75	80	98	74	95	62	886
ED CLYSIS	No. of Visits	84	219	97	104	129	107	166	150	86	67	52	108	1333
CONTINUOUS SEARCH ANALYSIS OF PREMISES EXAMINED (SURVEY)	Open	90	10	8	C1	8	7	=	-	1	-	8	40	49
PREMISES EX (SURVEY)	Business Dwelling Premises Houses	28	163	72	4	93	50	49	64	#	28	34	38	612
CONTI	Business	12	51	19	19	33	53	106	147	72	38	15	99	672
	Month	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Year

GENERAL FOOD SUPPLY

In all seaside resorts the supervision of the food supplies is one of the most important functions of the Public Health Department, and in Blackpool this is especially important as few places have more catering licences than this County Borough.

Bye-Laws. During the year, the Council adopted the Model Bye-Laws under Section 15 of the Food and Drugs Act, 1938, concerning the handling and wrapping of food, and further reference to the implementation of these bye-laws will be made in the next annual report.

Meat Inspection. There are no private slaughterhouses in the Borough and all animals slaughtered for human consumption are killed at the Public Abattoirs, which have been taken over by the Ministry of Food and are used as a centralised slaughtering establishment for Blackpool and most of the district around.

The table set out below shows the number of animals which have been slaughtered at this establishment during the last 15 years.

Year	Cows	Heifers	Bullocks	Bulls	Calves	Sheep	Pigs	Total
1935	143	5141	2405	12	1203	67706	4199	80809
1936	260	5979	2608	46	1216	71920	4695	86724
1937	552	5985	2710	108	11111	67878	5528	83872
1938	569	5423	2444	67	1045	69579	4639	83766
1939	1172	5902	2994	86	957	70649	5905	87665
1940	2005	3975	2318	107	4075	73754	8316	94550
1941	2301	2433	2998	187	5034	48261	4192	65406
1942	2109	2751	3895	181	8081	62171	1144	80332
1943	2532	2299	3758	183	10444	48843	696	68755
1944	2678	2138	2435	170	9544	45627	691	63283
1945	2837	2686	4462	192	10764	40450	1258	62649
1946	4075	2391	4968	154	11671	54015	607	77881
1947	3224	2273	4093	108	7929	24932	290	42849
1948	4075	1938	3397	129	7589	36015	550	53693
1949	4610	2230	2691	204	6202	34276	711	50924
1950	5606	4127	3249	303	7257	36593	2032	59167

The inspection of the meat at this slaughterhouse is carried out by a full time Abattoir Superintendent who is a fully qualified meat inspector and who is assisted by other sanitary inspectors holding special qualifications as and when circumstances deem it necessary. There is little ante-mortem examination taking place at the Abattoirs, and in the view of the department, all animals intended for human consumption should be examined at the grading centres by a fully qualified veterinary officer.

During the year the undermentioned quantities of meat were condemned at the Public Abattoirs in the course of inspection.

CARCASES INSPECTED AND CONDEMNED

	Catle excluding Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed	7679	5606	7257	36593	2032
Number killed	7679	5606	7257	36593	2032
All diseases except T.B.— Whole carcases condemned	7	7	80	24	34
Carcases of which some part or organ was condemned	3821	4285	25	907	185
Percentage of the number inspected affected with disease other than T.B	50 · 1	76-5	1.3	2.5	10-5
Tuberculosis Only— Whole carcase condemned	25	121	22		8
Carcases of which some part or organ was condemned	1230	1658	-	-	187
Percentage of the number inspected with	16.3	31.6	-3	_	9.5

	1	TEAT	CONDE	WNED 4	T THE	Derner	~ Cr	CHERRA	onen		11.
Abscess						PUBLI	C SLAU	GHTERH	OUSE		lbs. 282
Angioma				1.	10.00	1077		30 115	***		48
Arthritis								***			967
Atrophy	***		100.0	11111							50
Blown			orie il lo								1165
Bruised	***	***		***	***			***			
Bone Taint							***	***			4971
Calcificatio								***			2520
	11										12
Congested	Dani										1214
Cysticercus		S									4657
Decomposi											1298
Degeneration											10
" Diamond	S			***							236
Dropsy											460
Emaciation	1										541
Empyema											19
Enteritis											122
Fever											1897
Filth conta	minat	ion									10
Fluke											839
Fracture											424
Gangrene											40
Hydraemia											46
Immature											233
Insufficience			ng								244
Jaundice											963
Jointill											4994
Lymphader											
Mal. furrow											8
Mastitis			***		***						571
Melanosis					***						981
Moribund											11
Mould											240
	nd and										11
Nephritis as Odema	nd ana	aemia	a								666
											44
											78
Pericarditis											14
Parasitic											9808
Pleurisy											72
											513
											814
Pneumonia											388
Pyaemia, T	.B. an	d ma	astitis								84
Pyelonephr	itis										884
Rochitis											62
Stoveburn											20
Chantaria											3
Suppuration	n										5
Septicaemia								dilion.			3041
Sour											15
Swine erysi	pelas						•••				218
Scar Tissue				***			•••				
Turnous				1000			***	****			71
Tuberculosis	S										581
Tuberculosis	s Flui	ke ar	d other	condit	ione (i	. C	Povid	Dorositi	Man	4:4:-	136134
Actinor	nycoci	ie Io	intill, et	condit							004110
EO Garage				12.							204119
Heticomia	· · · love	***	***	•••							592
articula d				•••							168
											388478

Cysticercus Bovis. Reference was made in the Annual Report for 1949 to the justification of the department in making an intensive investigation into the presence of Cysticercus bovis in cattle. The department's figures of infested carcases still exceed those of any other meat inspection centre in the country, but in order to have a true comparison with the previous year's figures in Blackpool it should be noted that the 4.5% infestation in 1950 relates to viable cysts, whereas the 1949 figures of 10.9% include both viable and degenerate cysts.

The percentage figure for cows, it will be noted, is again much less than that for other bovines, indicating that the heaviest infestation is in the younger animals.

The trade continues to complain about the economic loss of food caused by the quick deterioration in the keeping qualities of the meat, owing to the extensive number of incisions which are made in the head, but the Related Health Services Committee has decided that there must be no change in the standard of inspection locally, a policy which has the full support of the Ministry of Food. It is the view of the department that the Blackpool technique should be adopted throughout the country, as cases have come to our notice where carcases and heads have been sent into the town when the normal three incisions in the cheek have been made, but cases of viable cysts have been discovered here after inspectors have made the extra cuts in the masseter muscles.

INCIDENCE OF CYSTICERCUS BOVIS IN BLACKPOOL DURING THE YEAR 1950

Bovines slaughtered			r infested . Bovis	Number of		
Cows	Other Bovines	Cows	Other Bovines	Number of Generalised Cases	Percentage infection, all Bovines	
5606	7679	150 (2·7%)	446 (5·8%)	1	4.5	

Manufacture of Meat Products. In Circular M.F. 7/49, local authorities were asked to review the conditions in all premises where manufactured meat products were made, and in consequence of this, a complete survey was made of all businesses of this nature. This entailed, not only an inspection of premises where the normal processes ancillary to the retail sale of meat are carried out, but a complete inspection of all bakehouses within the borough where such articles as meat pies and sausage rolls, etc., are made.

The law relating to the precautions which are to be taken against the contamination of food as well as present trade practices, is being investigated by a Working Party of the Ministry of Food, and it should be remembered that at the present time action can only be taken in accordance with the provisions of Sections 13 and 14 of the Food and Drugs Act, 1938.

For the purposes of this survey it was deemed advisable to segregate the various types of business in accordance with the groupings made by the Ministry of Food on the basis of allocations, and the number of manufacturers in the four grades involved is as follows:—

Group I.	Large Manufac	turers							2
Group II.	Butchers and are made								132
Group III.	Confectioners v	where	meat pi	es and	sausage	rolls	are	manu-	156
Group IV.	Pork butchers								6

As Groups I, II and IV are concerned with the meat trade, they have been dealt with in that sequence, whilst Group III, in which bakehouses are involved, has been left to the last.

GROUP I. LARGE MANUFACTURERS.

There are two Group I manufacturers in Blackpool, and in both cases the meat supplies are obtained direct from Liverpool. Both these factories are maintained in a cleanly condition.

Firm (a): This firm manufactures sausages, potted, pickled, pressed and preserved foods, and supplies these products to 40 shops (of which 32 are in Blackpool) and 1 travelling shop. Sausages and brawn are also supplied to grocery shops owned by the same firm.

The making up factory is well equipped for this trade, with wash bowls and hot and cold water supply laid on; clean towels and soap are provided for the persons employed in the premises.

Firm (b): This is a small factory in which are manufactured, sausages, potted pickled, pressed and preserved foods, and these are retailed from the market stalls.

The building is provided with a constant supply of hot and cold water, clean towels and soap. There is a fixed sink and enamel bowls provided, but in my opinion a special sink for hand-washing should be provided in lieu of enamel bowls.

GROUP II. BUTCHERS AND OTHER SMALL MANUFACTURERS WHERE SAUSAGES AND COOKED MEAT PRODUCTS ARE MADE.

- (i) Layout of Premises. This group may be classified under the following headings:—
- (a) In 57 retail shops, manufacturing is carried out in the actual shop premises.
- (b) In 40 instances, the manufacturing processes are carried out in the retail shop and rooms adjoining.
- (c) In 19 cases, cellars are used in conjunction with the retail shop for the manufacture of the meat products.
- (d) 16 premises have structurally separated buildings in which the manufacturing processes take place.
 - (ii) Type of occupation and purposes for which the premises are used:—
- (a) Of the 57 retail shops used for manufacturing, 31 are lock-up shops, and 26 have living accommodation at the rear. Of the 31 lock-up premises, 27 are used for the manufacture of sausages only, but 4 make up both sausages and other cooked meat products. Regarding the 26 shops with living accommodation at the rear, all are used for the manufacture of sausages only, no cooked meats being prepared there.
- (b) In the case of the 40 retail shops with adjoining room, 30 are lock-up premises and 10 are combined with living accommodation. Of the 30 lock-up premises, 20 manufacture sausage only, and 9 manufacture sausage and cooked meat products, the remaining 1 manufactures kosher meat products. Of these combined with living accommodation, all manufacture sausage and cooked meat products.
- (c) In the case of the 19 shops with cellars, 14 are lock-up premises and 5 are combined with living accommodation. Sausages are manufactured in all of them, but in the case of 5 of the lock-up premises, and 3 with the combined living accommodation, cooked meat products are manufactured in addition.
- (d) Of the 16 structurally separated buildings, 4 are associated with lock-up shops and 12 are combined with living accommodation. Sausages are manufactured in all these premises, and all the lock-up shops are used for manufacturing cooked meat products in addition to 6 which have living accommodation nearby.

Summarised, this means that of the 132 Group II manufacturers, 79 occupy lock-up premises and 53 occupy premises with living accommodation at the rear of the shop or otherwise close by.

GROUP IV. PORK BUTCHERS.

These have been classified as follows:-

- (a) 4 premises used which consist of shop and adjoining room.
- (b) 2 premises in which shop and cellar are used.

In all these cases both sausage and cooked meat products are manufactured.

GROUP III. BAKEHOUSES.

The statutory definition of a bakehouse is as follows :-

"Any place in which bread, biscuits or confectionery are baked by way of trade, or for purposes of gain."

The total number of registered bakehouses in the Borough is 203, the majority of which are connected with a retail shop. There are several large wholesale bakehouses employing a considerable staff. The number of bakehouses on the register, but not at present being used as such, is 42, but many of these are only closed temporarily due to seasonal changes, and all of them still have ovens installed which may be brought into operation at any time.

In the case of Group III manufacturers, meat pies are made in various quantities in the bakehouses. Generally, the minced meat is obtained ready processed from local butchers, and the pies are sold fresh. In some cases, where trade fluctuates considerably, there are bound to be some left over, and it is essential that all manufacturers should cool meat pies as rapidly as possible, and keep them in a cool place until they are sold.

Whilst on the whole, the general standard is good, it has been necessary in many cases to draw the attention of the proprietors of some bakehouses to a closer attention to cleanliness, particularly with regard to the periodic cleansing of walls, etc., required by the regulations. It is noticeable that the offenders in this respect have a record for delay in attending to the periodic cleansing, and have usually to be reminded of their obligations. The necessity is shown for continued supervision, as only by constant vigilance and regular inspection, can it be assured, in many cases, that even the minimum standard of cleanliness required by regulations is maintained.

Layout of Premises.

On the whole, the structural standard of bakehouses is reasonably satisfactory, and the condition of the tins, utensils and machinery, etc., is generally good. It is interesting to record that very few bakehouses are without mechanical power, the number being 5, representing 2.5% of the whole.

As regards the method of firing, 9 bakehouses are fitted with electric ovens, 65 with gas ovens, and the remainder are 5 with solid fuel, chiefly coke. In a few of the larger type of bakehouses there are both gas and coke fired ovens. The Committee will appreciate the difficulty of avoiding dust in the case of coke fired ovens, of which 16 are fired from inside the bakehouse.

A considerable amount of structural alteration and improvement is in progress, and the opportunity has been taken to suggest other improvements in the light of the present trend of the industry. Shortage of materials and labour is still impeding progress in this direction, and firms, anxious to improve their premises, are held up, whilst others in need of improvement offer the economic situation as an excuse.

WASHING FACILITIES

(i) Groups II and IV.

One of the most important factors in the prevention of food poisoning is unquestionably the health and cleanly habits of the workers, and consequently, a continuous supply of hot and cold water for the washing of utensils and hands, as well as an adequate supply of soap and clean towels is vital in maintaining a high standard of food hygiene. It is quite a common practice for many employees to wash their hands under the tap, rather than make use of the fixed or portable basins.

The following tables indicate the different types of washing facilities which are available in premises occupied by Groups II and IV manufacturers.

WASHING OF HANDS

Group	Use of Enamel Bowls	Use of Fixed Wash Bowl	In domestic Premises		
II a	24 31	6 5	27 4		
d	12 6 6	3 2	8		

WASHING OF UTENSILS

GROUP	A DOMESTIC OF	WATER	SUPPLY	BASINS, ETC.			
II	Cold			Donatoria	In		
11	Cold	Constant	Intermittent	Sink in Shop	Buckets	domestic Premises	
a (57)	32 in shop 25 house at rear	17 geysers	6 domestic gas boilers 8 gas rings 25 house at rear 1 carries water from premises	23	8	26	
b (40)	37 in shop 3 house at rear	13 geysers 9 H & C direct	7 gas boilers 8 gas rings 3 house ar rear	36	1	3	
c (19)	18 in shop 1 house at rear	4 geysers 3 H & C direct	6 domestic gas boilers 3 gas rings 1 from adjoining premises	18	Tu Tun	1	
d (16)	14 in shop 2 house at rear	3 geysers 3 H & C direct	5 gas boilers 5 house at rear	11	-	5	
IV	6 in shop	4 H & C direct	2 gas boilers	6		_	

At the present time, local authorities in their actions, are limited by the interpretation of clauses (h) and (i) of Section 13 of the Food and Drugs Act, 1938, and especially as to what constitutes "within reasonable distance of the room," "suitable washing facilities and a sufficient supply of soap, clean towels, and clean water, both hot and cold, for the use of persons employed in the room." As will be seen from the facts mentioned earlier in this report, the hot water supply varies considerably. Sometimes it is from the domestic supply in the house, in other cases from gas or electric boilers, in others from containers which have to be boiled on gas or electric rings, and in two cases, the hot water has to be carried from adjoining premises.

In order to reduce risk to a minimum, all businesses of this nature ought to be run separately from the domestic side, and a continuous supply of hot water with special arrangements for hand-washing should be made available at all times. Only Court Action could bring the matter to a head, but in view of the possible recommendations of the two Working Parties dealing with the Catering Trades and Manufactured Meat Products Industry, the Committee may feel disposed to tackle the problem by means of persuasion rather than coercion, except of course, the two cases where the hot water is obtained from the adjoining premises. In these two instances, it is recommended that the Town Clerk be authorised to serve the usual notices against the delinquents.

(ii) GROUP III.

No bakehouses are without a cold water supply, but 4 are without means of providing a continuous hot water supply in the actual bakehouse. In these cases, hot water is made available, either by carrying it from another room on the premises, or by heating the water in a vessel by means of gas or electricity. The proprietors of these bakehouses have been approached with a view to encouraging themto have a constant supply of hot water provided over a sink and/or lavatory basin in the bakehouse.

The remainder have available a constant supply of hot water, provided by means of a mechanical heating arrangement such as a gas heater, geyser, or a back boiler or electric immersion heater. Towels are provided and are generally clean, although in some instances it has been found necessary to draw the attention of the proprietor to the necessity for a more frequent changing of the towels. One bakehouse provides electric hand driers in lieu of the towels, and whilst this does not strictly comply with the letter of the law, it is undoubtedly of greater hygienic value than a towel used in common in a large bakehouse employing many people. The larger bakehouses too, cater for personal hygiene by the provision of separate lavatory basins, as opposed to a kitchen sink, in which trade utensils are washed.

MISCELLANEOUS

In all cases where gelatine is used, it is advisable that only sufficient should be prepared for the actual use at the time, and all brawns, gelantines, and other similar products should be cooled as rapidly as possible, stored at a temperature not exceeding 50°F. and protected during transit and during the final retail sale. Gelatine and other similar products provide fertile ground for promoting the growth of pathogenic organisms, and it is only the speedy lowering of the temperature after heating, and storing in a cool place, which will reduce the risk to a minimum.

In a town of the nature of Blackpool, which is one of the largest catering districts in Britain, it is more than ever essential that the traders dealing with manufactured meat products should be alive to their responsibilities, as to the necessity in maintaining a high standard of hygiene in their premises, and constant inspection is one of the means of helping to achieve this object. The majority of our traders are most helpful in co-operating with the department in effecting improvements in premises, equipment and methods, and we wish to foster the spirit of co-operation which is to the mutual advantage of Blackpool and the traders involved.

Food Inspection. During the past twelve months the undermentioned foodstuffs were condemned as unfit for human consumption. This, of course, is in addition to the meat condemned at the public slaughterhouse. These figures show a considerable advance on the amounts condemned in years prior to 1939; an experience, no doubt common to most towns and one which has been prompted by the points system.

Item		Units	lbs.	Bags/Boxes	Tins/Jars
Biscuits		 	42	5	
Meat (Fresh)	***	 	112		_
Bacon and Ham		 	1962	-	192
Fish (Fresh)		 -	354	1	-
Shellfish		 -	121	8	140
Fruit (Fresh)		 -	3682	982	-
Vegetables (Fresh)	***	 	274	26	-
Meat (Tinned)		 -	1078		1028
Fish (Tinned)	***	 	270		450
Fruit (Tinned)		 	2650		4560
Vegetables (Tinned)		 -	1492		3396
Milk (Tinned)	***	 -	5121	-	5619
Butter and Fats		 -	398	74	17
Jam, Marmalade, et	c.	 -	171	-	184
Bread	***	 	89		-
Tea		 -	10		63
Rabbits		 16	332	-	159
Poultry	***	 3	14		3
Cheese		 	86	1	1
Eggs		 252	29	2	1
Cereals		 	793	38	4
Sweets Confectioner	y	 -	43028	694	924
Miscellaneous		 125	2281	60	3701
Soup		 _	424	-	502

Fish Friers. The trade of fish frier was scheduled as an offensive trade under a Declaratory Order which came into operation on the 13th March, 1914, when licences to carry on the trade were granted without limit of time. Businesses existing before that date did not require licensing. Under the Blackpool Improvement Act, 1925, all future licences were to be granted subject to yearly renewal.

In view of Section 107 of the Public Health Act, 1936, this Authority having adopted Town Planning Schemes decided that in future the Town Planning Committee would deal with all applications for licence to carry on the trade.

Before new applications are considered or old ones renewed the Public Health Department is consulted as to the suitability of the premises in the case of new applications, and whether the business has been conducted satisfactorily in cases of applications for renewals of old licences. The total number of licences now in operation is 143.

Other Foods. The following is a list of shops in the Borough where food is exposed for sale:—

Where Butchers Meat is	s sol	d	 	 	 M	214
Meat stalls			 	 	 	_
Fish Shops	***		 	 	 	105
Grocery and Provisions Confectioners' Shops			 	 	 	469
Restaurants, Cafes and	Tea		 	 	 	213 281
Fruit Shops			 	 	 	148
Tripe Shops			 	 	 	63
Oyster Stalls			 	 	 	24
Fish and Chip Shops	***		 	 	 	143

Milk Supply. The tendency has been in Blackpool, as in most other large towns, for milk to be brought into the town and heat treated and bottled before being supplied to the public.

Probably at least 80% of the milk supply in the town is treated and distributed in this way.

The following is a list of the milk and ice cream purveyors in the borough :-

Milk Stores						
	***		***		***	 6
Milk Shops selling by retail	***					 4
Dairymen's premises, not including	farmers					 41
Distributors of Milk						 193
Purveyors of Ice Cream						 345
Milk Producers in the Borough						 25
Dairymen using Registered Dairies	other tha	n owi	n premi	ises		 6

Milk and Dairies Regulations, 1949. In the Annual Report for 1949, reference was made to the discussions which were to take place between the Local Authority, their officers, and the various trade organisations, regarding the implementing of the regulations with the minimum of disturbance to the trade.

Extensive work has been carried out in the dairies, but there are two problems which have still not been solved. These relate to the interpretation of Clause 29 concerning what constitutes the final delivery of a retail sale, and the covering-in of vehicles as required by Clause 30 of the regulations.

In some towns, the strict interpretation of the latter regulation has been held to mean that only bottled milk can be sold, but in Blackpool we have taken the same line as the Ministry of Food, namely that if only bottled milk had been intended when these regulations were passed by Parliament, such a specific enactment would have been incorporated in the regulations. Consequently, loose milk is still being sold within the Borough, although it is certainly less than 5% of the total quantity sent out in retail distribution.

Regarding the covering-in of vehicles as required by Clause 30 of the regulations, the trade has complained of the excessive charges being quoted by body builders for the carrying out of this work, and consequently, progress in this respect has been slower than anticipated. The matter, however, will be kept under constant review.

Milk (Special Designations) Regulations, 1949. The coming into operation of these regulations has entailed a great deal of administrative work, as the licences for retailers are renewed annually, and most of them are merely a matter of form. It is the view of the department, that once a licence has been granted, and then during the course of the normal inspection, conditions have been found to be satisfactory, the necessity for annual renewal should not arise, and a new licence should only be necessary when there is a change of occupier.

The following licences under the above regulations were in operation at the end of the year :—

(a)	Producers' Licence	es:							
	Tuberculin To	ested						 	Nil
	Accredited							 	Nil
(b)	Licensed Bottling	Establi	shments	::					
	Tuberculin To			s				 	1
	Accredited.	At farm	S					 	Nil
	Accredited. (Other p	remises					 	Nil
	Pasteurised							 	3
	Sterilised							 	1
(c)	Dealers' Licences								
	Tuberculin To	ested an	d Tuber	rculin 1	Tested	(Paster	rised)	 	23
	Accredited	***						 	Nil
	Pasteurised							 	7
	Sterilised							 	59
(d)	Supplementary Li	cences:							
	Tuberculin To	ested an	d Tuber	rculin 1	rested	(Paster	rised)	 	2
	Pasteurised							 	2
	Sterilised							 	2

Milk and Ice Cream Analysis. The following statistics relate to the chemical and bacteriological examination of milk and ice-cream.

CHEMICAL ANALYSIS OF MILK

The number of milk samples taken was 102 of which 3 were below the limits prescribed by the Sale of Milk Regulations, 1901 and 1939.

The average composition of the milk for the year was:—

Milk Fat ... 3·48%. Non-Fatty solids ... 8·8%. Water ... 87·72%.

BACTERIOLOGICAL EXAMINATION OF MILK

19 samples of ordinary milk were examined for the Methylene Blue Test, and one sample failed to pass this test.

19 samples of ordinary milk were examined for the presence of Tubercle Bacilli.

GRADED MILKS

The following table shows the results of samples taken under the Milk (Special Designations) Orders, 1923 and 1936.

C. L. CMIII	Outside th	ne Borough	Inside the Borough		
Grade of Milk	Satis- factory	Unsatis- factory	Satis- factory	Unsatis- factory	
T.T. (Pasteurised) T.T. (Certified) or Tuberculin	36	-	-	-	
Tested:	131	3	-	-	
Pasteurised	57 35	-	54	-	
Sterilised	35	-	16		

In addition, the following samples were submitted for the Phosphotase Test.

Grade of Milk	Outside th	e Borough	Borough	
Grade of Milk	Satis- factory	Unsatis- factory	Satis- factory	Unsatis- factory
T.T. (Pasteurised) Pasteurised	36 57	=	54	=

52 samples of sterilised milk were submitted for Turbidity Test, and one sample was found to be unsatisfactory.

During the year, the following samples of Graded or Heat Treated milk were sent to the Pathologist for Animal Inoculation Test and the results of his findings are given below.

Grade of Milk	Outside th	ne Borough	Inside the Borough		
Grade of Milk	Satis- factory	Unsatis- factory	Satis- factory	Unsatis- factory	
T.T. (Pasteurised) T.T. or Certified Pasteurised Sterilised	5 20 3 2	=	- 8	Ξ	

Manufacture and Sale of Ice Cream. During the past year, there has been a considerable reduction in the number of manufacturers of ice-cream. Eleven manufacturers of heat treated mix, and one using cold mix, have ceased processing. In the case of purveyors, the number registered shows only a slight reduction. The undermentioned table indicates the trend of the industry, i.e. the tendency for the manufacturing part of the business to be in fewer hands, whilst the retail side is not affected materially by these factors.

	Mix	1939	1947	1948	1949	1950
	Pasteurised	5	6	_	_	_
	Boiled	67	86	-	-	-
Manufacturers	Heat Treated	-	-	60	60	49
	Cold	23	6	6	3	49
ALL DESIGNATION OF THE PARTY OF	Total	95	98	66	63	51
The second second	Pasteurised	134	194		_	_
	Boiled	85	123		-	
Purveyors	Heat Treated		_	326	363	343
	Cold	23	6	6	3	2
none la constitución	Total	242	323	332	366	345

PREMISES

There has not been extensive alterations and additions to buildings used for processing during the past year, but the diversion of this trade into fewer hands is taxing the capacity of a few local manufacturers. In one case, new premises have been erected and the latest equipment installed, and in another instance a large manufacturer is adapting a more suitable building than the one he is using at the present time.

On the whole, the premises used for manufacture are of a reasonable standard, and the details and number of rooms used in each case is shown in the undermentioned table.

Class of Manufacture		No. of rooms available				
Crass of Manufacture	1	2	3	Total		
Heat Treated Mix Cold Mix		39 2	4	49		
The second secon	6	41	4	51		

EQUIPMENT

There has been little change since the last report in the position of thermometers, and the department is awaiting the Ministry's further instructions as to the operative dates for the compulsory fixing of these instruments.

ANALYSES OF RESULTS

The samples have been taken for two types of analysis, namely chemical and bacteriological. Of these 63 were examined for both tests, and 60 for methylene blue reductase test only.

CHEMICAL

- (a) Full results are to be found in Appendix I and have been correlated with the bacteriological results of each individual sample.
- (b) The table below shows a wide variation of the chemical composition of the ice-cream samples. No samples have been below the prescribed minimum provisional standard of 2.5% fatty solids which was fixed by the Ministry of Food in order that manufacturers could qualify for the additional ingredients. It should be noted that the Food Standards Committee's recommendations of the 3rd July, 1950, i.e. 5% fat, 10% sugar, and $7\frac{1}{2}\%$ milk solids other than fat, have not yet been made compulsory. As an interim standard, until food supplies are more normal, we are of the opinion that the proposal is not an unreasonable one, and it certainly would ensure fairer trading.

Year	Class of	Fatty Solids		Non-Fatt	ty Solids	Total Solids	
rear	Mix	Vary from	Average	Vary from	Average	Vary from	Average
1950	Heat Treated	2·7% to 12·8%	7.3%	16.7% to 30.3%	23 - 7%	22.6% to 38.9%	30.7%
	Cold	8.9% to 9.5%	9.2%	22·0% to 25·4%	23.7%	30.9% to 34.9%	32.9%
1949	Heat Treated	2·3% to 13·0%	6.37%	12·1% to 27·3%	21 · 87%	20·0% to 37·4%	28 · 24 %
	Cold	4·1% to 5·6%	4.7%	18·7% to 27·0%	26.4%	23·1% to 31·1%	26.5%

(c) A comparative classification of the fat content in the samples for the two years 1950 and 1949 can be seen at a glance in columns 4 and 5 of the undermentioned analysis.

Class	destion		Class	of Mix	Whole	Whole
Classification Fat Content %		Heat Treated (2)	Cold (3)	Group 1950 (4)	Group 1949 (5)	
	Below 2.5	5	-	_	_	1
Over 2.5	Below 3		2	_	8 5 13	1
Over 3	Below 4		2 8 5		8	8 16
Over 4	Below 5		5	_	5	16
Over 5	Below 6		13	-	13	8 9
Over 6	Below 7		4	-	4	
Over 7	Below 8		5		5	10
Over 8	Below 9		5	1	6	8
Over 9	Below 10		5 5 8 11	1	6 9 11	1
Over 10			11	-	11	6
To	tals		61	2	63	68

(d) A comparison of the results for the two years 1949 and 1950 again reveals a progressive improvement in the chemical quality of the ice-cream sold in Blackpool. No samples fell below 2.5% of fatty solids, and only 15 were below 5% as compared with 26 in 1949.

(e) The following table shows the result of this chemical analysis of samples taken from vendors with stalls on the foreshore.

				Fatty	Non-Fatty	Total Solids
1	***			12.4	19.5	31-9
2 3	***			5.6	17-0	22.6
3	***		****	3.9	19-9	23.8
4	***	***	* ***	7.0	24 · 4	31.4
5	***	***		7.4	22.7	30 - 1
6				7.0	16.7	23.7
7	***	***	***	9.2	23.0	32.2
8	***	***	***	3.6	21.8	25.4
9		***		5.7	23.0	28.7
10	***	***		4.5	21.7	26.2
Ave	rage			6-64	20.97	27-61

BACTERIOLOGICAL

- (a) For full details of the grading see Appendix I, wherein they are correlated with the results showing the chemical composition of the ice-cream.
- (b) The undermentioned table shows the grading of the 63 samples referred to in the above Appendix.

Class of Mix -	Provisional Grade				
Class of Mix	1	2	3	4	Totals
Heat Treated Cold	18	13 1	19 1	11	61
* 1	18	14	20	11	63

(c) In addition, 60 other samples were sent to the Bacteriologist with the following results :--

Class of Mix	Provisional Grade					
Class of Mix	1	2	3	4	Totals	
Heat Treated Cold	17	21	10 1	11	59 1	
	17	21	11	11	60	

(d) It should be noted that these results are slightly worse than last year, due perhaps to the use of more milk in ice-cream and the increase in time of storage, caused by the indifferent weather and consequential retarded sales.

WRAPPED ICE-CREAM

During 1950, 123 samples taken and submitted for Methylene Blue Test.

70 or 56.9% fell within Grades 1 and 2. 53 or 43.1% fell within Grades 3 and 4.

Of the 123 samples taken and submitted to the Methylene Blue reductase test, 26 were of wrapped blocks and 97 were taken from bulk supplies.

Concerning the 26 samples of the wrapped product:—

9 or 35% were provisionally Graded 1.

10 or 39% were provisionally Graded 2. 3 or 11% were provisionally Graded 3. 4 or 15% were provisionally Graded 4.

N.B.-74% were in Grades 1 and 2. Concerning the 97 samples from bulk :—

26 or 27% were provisionally Graded 1. 25 or 26% were provisionally Graded 2. 28 or 28% were provisionally Graded 3. 18 or 19% were provisionally Graded 4. N.B.—53% were in Grades 1 and 2.

APPENDIX I

	1						
		Che	mical Ana	lysis	Provisional	Presum.	
Class of Mix	Sample No.	Fatty Solids%	Nonfatty Solids%	Total Solids%	Grade M.B. Test	Coli. No/ml.	Source of Sample
Heat Treated	1	11-2	25-1	36.3	2 2	0-3	Conservator-wrapped
0 0	3	10.5	25·0 24·1	35.5	2 2	0—3 0—3	-do
" "	4	12.4	19.5	31.9	î	0-3	Conservator-bulk
" "	5	12.6	25.8	38-4	2	0-3	Conservator-wrapped
0 0	6	8.3	25.3	33.6	4	25	Refrigerator-wrapped
n n	7 8	8.8	26·3 26·5	35·1 35·5	4	0-3	—do.— —do.—
" "	9	5.6	26.0	31.6	i	0-3	Conservator-bulk
0 0	10	12.6	25.3	37.9	1	0-3	Refrigerator-wrapped
0 0	11 12	12.2	23·4 17·0	35·6 22·6	1	0—3 25	Refrigerator-bulk Conservator-bulk
" "	13	3.3	23.2	26.5	3	75	-do
n n	14	5.3	28.0	33.3	2	4	-do
0 0	15 16	3.9	28.5	33·6 23·8	1 2	0-3	—do.— —do.—
" "	17	7.0	24-4	31.4	3	1,100	Refrigerator-bulk
" "	18	7.4	22.7	30 · 1	1	0-3	-do
n n	19 20	8.3	21 - 7	30.0	2 4	1,500	Conservator-bulk —do.—
" "	20	5.2	29.8	35.0	3	0-3	-do
" "	22	3.7	24.9	28.6	1	15	-do
0 0	23	12.8	21.9	34 - 7	1	0-3	Refrigerator-wrapped
0 0	24 25	7·0 5·6	16.7	23 · 7	1 2	0—3 0—3	Conservator-bulk —do.—
" "	26	9.2	23.0	32.2	2	4,500	-do
n n	27	5.7	22-9	28.6	3	9	-do
	28 29	5·8 8·3	24.5	30.3	3	15 0—3	do
" "	30	5.0	23-8	28-8	i	0-3	-do
n n	31	4.5	22.7	27 · 2	4	0-3	- do
0 0	32 33	6·5 3·0	19-1	25.6	1 3	0—3 0—3	do
" "	34	3.2	22.6	25.8	1	0-3	-do
" "	35	2.7	26-2	28.9	3	250	-do
0 0	36 37	4.2	25 · 1	29·3 31·8	3	450 45	do
" "	38	9.3	23-1	32.4	2	25	—do.— —do.—
" "	39	3.2	24.9	28 · 1	2	0-3	-do
0 0	40	9.8	25.9	35.7	4	1,500	Conservator-wrapped
0 0	41	7·8 3·6	25.5	33·3 25·4	3 2	950 25	—do.— Conservator-bulk
" "	43	5.7	19.9	25-6	4	0-3	-do
, ,	44	3.8	21.8	25.6	3	0-3	-do
n n	45 46	9.8	23·6 18·3	28·3 28·1	4 3	0-3	—do.— —do.—
	47	5.7	23.0	28.7	4	14,000+	do
" "	48	8.6	30.3	38-9	3	4	Conservator-wrapped
n n	49 50	9.8	22·2 25·5	32.0	3	0—3 25	Soft ice-cream machine Conservator-bulk
" "	51	5.5	26.9	32-4	3	45	-do
" "	52	4.5	21.7	26.2	3	14,000+	-do
0 0	53 54	7·8 6·2	21.2	29 · 0	3	1,400+ 45	Refrigerator-bulk Conservator-bulk
" "	55	11.0	23.3	34.3	3	15	Refrigerator-bulk
" "	56	2.9	24 - 2	27 - 1	4	14,000	Conservator-bulk
n n	57	9.6	21.9	31·5 30·3	1 3	0-3 0-3	-do -do
" "	58 59	6.2	25-1	36.7	2	9	Refrigerator-bulk
" "	60	11.2	24 - 2	35-4	1	0-3	Conservator-wrapped
Cold Mix	61	9.9	26.2	36-1	3 2	7	Conservator-bulk
	62 63	9·5 8·9	25·4 22·0	34.9	3	450	Soft Ice-Cream Conservator-bulk
" "		0.0		00 0		THE PERSON NAMED IN	1
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Food and Drug Acts, 1938. During the year 349 samples were taken under the Act and the results received from the Public Analyst are detailed below:—

Informal Samples
Taken Genuine
Arrowroot
Baking Powder
-
-
Cake Filling
Cake Mixture
— Candied Peel 1 — — Celery Salt 1 — — Coffee 15 — — Coffee Extract 1 — — Cooking Fat 22 — — Cornflour 1 — — Cornflour 1 — — Cream of Tartar 1 — — Custard Powder 1 — — Curry Powder 1 — — Desiccated Coconut 2 1 — — Desiccated Coconut 2 1 — — Dried Bilberries 1 — — — — — Dried Bilberries 1 —
— Coffee
Coffee Extract
Cornflour
— Cream of Tartar 1 — — Curry Powder 1 — — Desiccated Coconut 2 1 — Desiccated Coconut 2 1 — Dried Bilberries 1 — — Dried Bilberries 1 — — Dripping — — — Fish Dressing 1 — — Fish Dressing 1 — — Fish Paste 2 — — Fish Paste 2 — — Fish Paste 2 — — Galantine of Pork and Beef — — — Fish Paste 2 — — Galantine of Pork and Beef — — — Galantine of Pork and Beef — — — Galantine of Pork and Beef — — — Galace Cherries 1 — — Golden Raising Powder </th
— — Curry Powder 1 — — — Desicated Coconut 2 1 — — Dessert Powder 3 — — — Dried Bilberries 1 — — — Dripping — — — — Fish Dressing 1 — — — Fish Paste 2 — — — Fish Paste 2 — — — Fish Paste 2 — — — Galantine of Pork and Beef — — — — Galantine of Pork and Beef 1 — — — Galantine of Pork and Beef 1 — — — Galantine of Pork and Beef 1 — — — Galantine of Pork and Beef 1 — — — Galantine of Pork and Beef 1 — — — Galantine of Pork and B
Desiccated Coconut
Dessert Powder
Dried Sage
Fish Dressing 1
Color Colo
Color Colo
Color Colo
Color Colo
Cround Ginger 3
Cround Ginger 3
- Jelly
- Jelly
-
-
2
2
- Palm Kernel Oil
1 1 Penner
- Pepper Flavoured Compound
1 - Potted Shrimps
Pressed Meat 1
Pudding Mixture 2 Raisin Flavoured Wine 1
Rice Flour 1
4 1 Salad Cream 1
2 - Salmon
- Sandwich (Chicken) 1 -
2 — Sauce
2
1 - Sponge Flour Mixture
- Stuffing (Sage & Onion) 1 - Sweets 3 - Vinegar
1 - Vinegar 18 -
33 4 316 8
0.00

The action taken by the department in respect of certain samples was as follows:-

Potted Meat. Formal Sample No. 371. (Continued from previous quarter). Sample deficient of 16% of its meat solids. In view of further information obtained, the Council's decision to institute legal proceedings was rescinded, and a warning letter only was sent to the retailer concerned.

Milk. Formal Sample No. 32. The sample contained 3% added water. Reported to the Related Health Services Committee on the 30th January, 1950. The matter was referred to the County Medical Officer of Health as the milk had been obtained by the dealer from an establishment in the area of the Lancashire County Council.

Beef Sausage. Formal Sample No. 83. The sample was deficient of 8% of its meat. Reported to the Related Health Services Committee on the 3rd April, 1950, and the report was referred to the Ministry of Food as the appropriate authority to deal with the matter.

Milk. Formal Sample No. 113. The sample was deficient of 8% of its fat. Reported to the Related Health Services Committee on the 5th June, 1950, and the matter was referred to the County Medical Officer of Health as the farm at which the milk was produced is in the area of the Lancashire County Council.

Dessicated Coconut. Formal Sample No. 116. The sample contained 26% sugar, and 25% starch, whereas genuine desiccated coconut contains no starch and not more than 7% of sugar. Reported to the Related Health Services on the 5th June, 1950, and the Town Clerk was authorised to institute legal proceedings under the Food and Drugs Act, 1938. The case against the Retailer was heard on the 21st June, 1950, and was dismissed. Further proceedings are to be instituted against the supplier for issuing a false warranty.

Potted Meat. Informal Sample No. 120. (Imported tin. Uruguay). The sample contained 18% of Cereal filler. The matter was referred to the Ministry of Food (Labelling Division).

Table Jelly. Formal Sample No. 130. The sample was devoid of sugar. The matter was referred to the Ministry of Food as an infringement of the Food Standards Order 1949.

Milk (Tuberculin Tested). Formal Sample No. 193. The sample was deficient of 12% of its fat. Reported to the Related Health Services Committee on the 4th September, 1950, and the matter was referred to the County Medical Officer of Health, as the farm at which the milk was produced is in the area of the Lancashire County Council.

Beef Sausage. Formal Sample No. 218. The sample was deficient of 4% of its meat. Reported to the Related Health Services Committee on the 4th September, 1950, and the Town Clerk was authorised to send a letter to the retailer drawing his attention to the Public Analyst's report.

Salad Cream. Informal Sample No. 249. The sample was decomposing and unfit for human consumption. Arrangements were made for the remainder of the stock to be surrendered for destruction.

Beef Sausage. Formal Sample No. 309. The sample was deficient of 22% of its meat. Reported to the Related Health Services Committee on the 8th January, 1951, and the matter was referred to the Ministry of Food. A warning letter is being sent to the supplier by the Minister of Food.

Pepper. Informal Sample No. 319. The sample was flavoured compound decomposed, and containing cereal starch and 56% of water. Reported to the Related Health Services Committee on the 8th January, 1951. No further action was taken by the department, and the complainant was advised to deal with the matter privately.

Pork Sausage. Formal Sample No. 331. The sample was deficient of 21% of its meat. Reported to the Related Health Services Committee on the 8th January, 1951, and the Town Clerk was authorised to institute legal proceedings.

PROSECUTIONS DURING 1950

Монтн	Section	CONTRAVENTION. RESULT OF PROCEEDINGS
January	Public Health Act, 1936, Section 93.	Repairs not carried out as per notice served. Abatement Order for 3 months. To pay costs of 6s. 6d.
February	Food and Drugs Act, 1938, Section 9.	Defendants fined £10. Storage for purposes of sale walnuts unfit for human consumption.
April	Blackpool Improvement Act, 1925, Section 87 (as amended).	Caravans placed on land. Fined £2.
May	0	Defendant fined £1.
August	0 0 0 0	2 defendants fined 10s.
September	Foods and Drugs Act, 1938. False Warranty. Food and Drugs Act, 1938, Section 13.	Fined £20 and £3 3s. costs. Defendant fined £15.
November	Blackpool Improvement Act, 1925, Section 87 (as amended). Public Health Act, 1936, Section 93.	2 defendants each fined 2s. 6d. Case withdrawn as work commenced on day of Court case but defendant's solicitor
	Food and Drugs Act, 1938, False Warranty. Food and Drugs Act, 1938, Section 13.	agreed to pay costs. Defendants fined £2 plus £4 4s. 3d. costs. Defendants fined £10.
December	Food and Drugs Act, 1938, Section 13.	Defendants fined £2 on each of 21 summonses.

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