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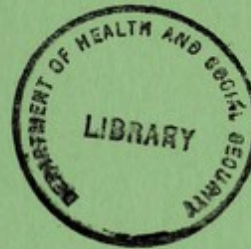
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**BLOFIELD & FLEGG
RURAL DISTRICT COUNCIL**



ANNUAL REPORT
of the
MEDICAL OFFICER OF HEALTH
including the report of the Chief Public Health Inspector
for the
YEAR 1972

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Medical Officer of Health:

DR. G. R. HOLTBY, M.D., B.S., M.R.C.S., L.R.C.P., D.P.H., D.I.H.

Chief Public Health Inspector:

G. A. WEBB, M.A.P.H.I., M.R.S.H.

Deputy Chief Public Health Inspector:

H. R. C. STRANGE, M.A.P.H.I.

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Public Health Officer

Mr. J. H. HUGHES

Public Health Officer

Mr. E. H. JONES

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Mr. E. J. WILSON

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Mr. J. H. HUGHES

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Mr. E. H. JONES

Council Offices,
Acle,
Norwich,
NOR 61Z.

TO: The Chairman and Members of the
Blofield and Flegg Rural District
Council.

Ladies and Gentlemen,

I have the honour to present the Annual Report for the year 1972. The Registrar General estimated the mid-year population as 44,340 compared with 43,340 last year. There were 615 live births and 560 deaths, giving a natural increase of 55. This suggests that there was a movement into the district of 949 people.

The birth rate was 14.6 per thousand population, and the death rate 9.6. The infant mortality rate (deaths under one year per thousand total live births) was 11, the neonatal death rate (first four weeks) 10, and the early neonatal (first week) 10 per thousand.

This may be one of the last Annual Reports in its present form and whether I shall be called on to make one under a different name in the re-organised National Health Service remains to be seen. I hope that the Reports made over the last 20 years and their subsequent discussion have done something for the cause of health education and persuasion, which in its widest and best sense is probably one of the most important subjects to study and practice.

One of the duties of the Medical Officer of Health (the post which is about to be abolished) has been to advise his Authority about the health of its employees for the purposes of superannuation and occasionally for retirement on medical grounds. Medical examination before employment is, I think, important. It has sometimes been suggested that the completion of the medical history form by the applicant is all that is necessary but I think that an examination also is required. Symptomless conditions such as high blood pressure and diabetes may be discovered and the examination is itself a suitable occasion for health education. Advice about the wisdom of giving up smoking or reducing weight can be reinforced at the interview.

In the early part of the year there was an outbreak of infective jaundice at Little Plumstead Hospital. Outbreaks of this kind are very common in similar hospitals and this outbreak was kept under control by the use of gamma globulin injections for patients and staff. My purpose in mentioning it here is to point out that it involved a great deal of time-consuming work by the Public Health Department and in particular by the Public Health Inspector for the Area.

He was thanked by the Control of Infection Committee of the hospital for his report and helpful recommendations in connection with hygiene. Much of the work in preventive medicine is by definition devoid of tangible results, i.e. there is absence of disease. It can be demanding work, however, with many visits of inspection and much collection of specimens for laboratory examination.

The health of the community has been good and there is no doubt that this is a very healthy part of the country. One of the reasons, not always realised, is the hardness of the water supply. Hard water seems to protect against some diseases of the heart and arteries. It has been suggested that this is due to lack of plumbo-solvency - the dissolving of lead into the water supply.

Lead is not a major problem in this area, if it is one at all. There are no smelting works and inhalation of petrol fumes is hardly likely to cause lead poisoning here, if indeed it does anywhere. Lead is, of course, a constituent of some paints, particularly those used on outdoor surfaces where they are very weather resistant. Cracking and peeling of such paint can conceivably be a hazard to young children by chewing, particularly those children who have an abnormal appetite, described as pica. This possibility is being kept in mind and investigations will be carried out as required.

Most change is gradual but over the last 20 years many improvements have taken place in the Area. This is not the place to list them but merely to mention a few which immediately spring to mind. The steady increase in sewerage systems is a great benefit. It has been described as the most important public health measure after a pure public water supply. It is not to be expected, of course, that everyone will be satisfied with the rate of provision.

Nor will everybody be satisfied with the provision of public toilets which, however, have greatly increased over the years and I have received reports and comparisons favourable with some other authorities.

With the ending of the discharge of crude sewage from boats into the broads and rivers the danger of enteric fevers will be decreased but more important is the aesthetic aspect. In this case public health is closely connected with aesthetics; the two go hand in hand.

Death by drowning still occurs each year in the broads and in the sea but most fatalities are people from outside the County and so far as local organised sailing courses are concerned, the necessity of wearing a lifejacket while on the water as well as being able to swim is constantly insisted on. The Norfolk and Suffolk Water Safety Association continues to do all in its power to stop the waste of life from drowning.

It is often said that poly unsaturated fatty acids, PUFA, found in "vegetable" oils are less likely to be one of the factors in coronary artery disease than the saturated fatty acids found in animal fats. This may be so for some of the "vegetable" oils such as corn oils, soya bean oil or, preferably, sunflower seed oil, but not all vegetable oils are desirable. Some may be actually dangerous. Manufacturers should declare the source and major composition of all fats used in foodstuffs. The public have a right to know.

Regular readers of this Annual Report will recall that cigarette smoking has been mentioned in it ad nauseam but because it is so important it must be mentioned again. The form of advertising of cigarettes is not so pernicious as it used to be but surely large, colourful hoardings and free gift coupons must bring some recruits to smoking and do more than merely re-distribute the various brands among an unchanging group of smokers, or people who would smoke anyway, as the manufacturers maintain.

At present there is some doubt whether the Annual Report for the year 1973 will be available during the life of the present Council. I would, therefore, like to take this opportunity, which may be the last, of thanking the members for their help and forbearance over this quite lengthy period and the staff for all their support and conscientious work, which it is not too much to say has helped to transform the conditions in this part of Norfolk in the last two decades.

I remain, Ladies and Gentlemen,

Your Obedient Servant

G. R. HOLTBY

Area in acres	74,531
Population (Registrar-General estimate)	44,340
No of inhabited Houses (1972) according to Ratebook	17,931
Rateable Value	£4,187,691
Estimated Net Produce of 1p Rate	£41,000

It is often said that only unrefined oils are likely to be one of the factors in coronary artery disease than the saturated fatty acids found in animal fats. This may be so for some of the "vegetable" oils such as corn oil, soybean oil or olive oil, but not all. Some may be actually dangerous.

Manufacturers should declare the source and major composition of all fats used in foodstuffs. The public has a right to know.

Regular readers of this Annual Report will recall that cigarette smoking has been mentioned in it as a nuisance but because it is so important it must be mentioned again. The form of advertising of cigarettes is not so pernicious as it used to be but surely large, colorful headlines and free gift coupons must bring some results to smoking and do more than merely re-distribute the various brands among an unchanging group of smokers, or people who would smoke anyway, as the manufacturers maintain.

At present there is some doubt whether the Annual Report for the year 1957 will be available during the life of the present Congress. I would, therefore, like to take this opportunity, which may be the last, of thanking the members for their help and forbearance over this quite lengthy period and the staff for all their support and conscientious work, which it is not too much to say has helped to transform the conditions in this part of Norfolk in the last two decades.

I remain, Ladies and Gentlemen,
Your obedient servant,
Edwin D. Smith, M.P.

G. R. HOLTY

With the most anxious desire to see the Annual Report for 1957 published as early as possible, I am sure that the members of the House will be able to read it with interest and profit.

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SECTION 'A'

NATURAL AND SOCIAL CONDITIONS

Area - (in acres) 74,531. There are 33 parishes within the area which has its administrative centre at Acle. The major portion of the District is rural in character, Agriculture and Dairy Farming being the main industry. The District is a very popular summer resort catering for many thousands of visitors during the holiday season, the numbers increasing each year. It includes a large area of the Broads with many miles of pleasant inland waterways, and some of the best beaches in the country are to be found on its eight miles of coastline which extends from the boundary of Great Yarmouth northwards to Horsey.

Population - The Registrar General has estimated the population for the mid-year 1972 as 44,340 giving a population density of approximately .59 per acre.

SUMMARY OF VITAL STATISTICS

Area in acres	...	...	...	...	...	...	...	...	74,531
Population (Registrar-General mid-June estimate)	...	...	...	...	...	...	...	...	44,340
No of Inhabited Houses (1972) according to Ratebook	...	...	...	...	...	...	...	...	17,931
Rateable Value	...	...	...	...	...	...	...	...	£4,187,691
Estimated Net Produce of 1p Rate	...	...	...	...	...	...	...	...	£41,000

LIVE BIRTHS

	<u>Male</u>	<u>Female</u>	<u>Total</u>
Legitimate	305	273	578
Illegitimate	19	18	37
	<u>324</u>	<u>291</u>	<u>615</u>

Live Birth Rate per 1,000 of estimated resident population:-

Blofield and Flegg R.D.	Crude Birth Rate	..	13.9
	Standard Birth Rate	..	14.6
England and Wales	Standard Birth Rate	..	14.8

STILL BIRTHS

	<u>Male</u>	<u>Female</u>	<u>Total</u>
Legitimate	5	4	9
Illegitimate	-	-	-
	<u>5</u>	<u>4</u>	<u>9</u>

Still Birth Rate per 1,000 total live and still births:-

Blofield and Flegg R.D.	..	..	..	..	..	14
England and Wales	..	..	..	..	..	12
Total live and still births	..	..	..	..	..	624

INFANT MORTALITY (Death of infants under one year)

	<u>Male</u>	<u>Female</u>	<u>Total</u>
Legitimate	4	3	7
Illegitimate	-	-	-
	<u>4</u>	<u>3</u>	<u>7</u>

Infant Mortality Rate per 1,000 live births:-

Blofield and Flegg R.D.	..	..	..	..	..	11
England and Wales	..	..	..	..	..	17

Infant Mortality Rate per 1,000 live births:-

Blofield and Flegg R.D.	Legitimate	..	..	..	12
	Illegitimate	..	..	...	-

Infant Mortality - Neo Natal (first four weeks)

	<u>Male</u>	<u>Female</u>	<u>Total</u>
Legitimate	3	3	6
Illegitimate	-	-	-
	<u>3</u>	<u>3</u>	<u>6</u>

Neo-Natal Mortality Rate (deaths under 4 weeks per 1,000 total live births) 10.0

Early neo-natal mortality rate (deaths under 1 week per 1,000 total live births) 10.0

Peri-natal mortality rate (still births and deaths of infants under one week of age) 24.0

Illegitimate live births per cent of total live births 6.01

MATERNAL MORTALITY

Deaths associated with pregnancy, childbirth or abortion None

Maternal mortality rate per 1,000 live and still births Nil

DEATHS (all causes)

<u>Male</u>	<u>Female</u>	<u>Total</u>
274	286	560

Death rate per 1,000 of estimated resident population:-

Blofield and Flegg R.D.	Crude Death Rate	12.6
	Standard Death Rate	9.6
England and Wales	Standard Death Rate	12.1

BirthsRates per 1,000 Population

	<u>Blofield & Flegg R.D.C.</u>	<u>England and Wales</u>
Live Births	14.6	14.8
Still Births	14.0	12.0

Deaths

All causes (excluding Still Births)	9.6	12.1
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Infant Mortality

All causes under 1 year	11.0	17.0
Peri-natal mortality	24.0	22.0
Neo-natal mortality rate	10.0	12.0

Deaths from Cancer and Total Deaths

	1967	1968	1969	1970	1971	1972
No. of Deaths from Cancer	89	96	94	98	105	106
No. of Deaths all causes	557	617	568	571	592	560
% of total deaths due to Cancer	16.0	15.6	16.54	17.16	17.74	19.11

Cancer Deaths during last 6 years

Year	Male			Female		
	Total Deaths	Lung Cancer	Other Cancers	Total Deaths	Lung Cancer	Other Cancers
1972	274	26	33	286	3	44
1971	289	29	30	303	2	44
1970	284	18	31	287	4	45
1969	256	18	30	312	3	43
1968	287	24	33	330	2	37
1967	269	17	27	288	4	41

Deaths from Coronary Disease

	1967	1968	1969	1970	1971	1972
No. of deaths from Coronary Disease	87	169	139	152	143	135
No. of deaths all causes	557	617	568	571	592	560
% of total deaths due to Coronary Disease	15.6	25.8	24.47	26.6	24.15	24.1

Deaths from Coronary Disease during last 6 years

Year	Male		Female	
	Total Deaths	Ischaemic Heart Disease	Total Deaths	Ischaemic Heart Disease
1972	274	69	286	66
1971	289	78	303	65
1970	284	95	287	57
1969	256	67	312	72
1968	287	79	330	90
1967	269	46	288	41

Individual Causes of Death

		<u>Male</u>	<u>Female</u>	<u>Total</u>
B5	Tuberculosis of respiratory system	2	-	2
B6(1)	Late effects of respiratory TB -	-	1	1
B14	Measles	1	-	1
B18	Other infective and parasitic diseases	1	1	2
B19(2)	Malignant neoplasm, oesophagus	4	2	6
B19(3)	Malignant neoplasm, stomach	2	3	5
B19(4)	Malignant neoplasm, intestine	8	3	11
B19(5)	Malignant neoplasm, larynx	1	-	1
B19(6)	Malignant neoplasm, lung, bronchus	26	3	29
B19(7)	Malignant neoplasm, breast	-	13	13
B19(8)	Malignant neoplasm, uterus	-	4	4
B19(9)	Malignant neoplasm, prostate	2	-	2
B19(10)	Leukaemia	4	-	4
B19(11)	Other malignant neoplasms	16	19	35
B20	Benign and unspecified neoplasms	1	-	1
B21	Diabetes mellitus	3	3	6
B46(1)	Other endocrine etc. diseases	-	2	2
B23	Anaemias	-	2	2
B46(3)	Mental disorders	2	4	6
B24	Meningitis	1	-	1
B46(4)	Multiple sclerosis	-	3	3
B46(5)	Other diseases of nervous system	3	3	6
B26	Chronic rheumatic heart disease	1	1	2
B27	Hypertensive disease	-	5	5
B28	Ischaemic heart disease	69	66	135
B29	Other forms of heart disease	12	22	34
B30	Cerebrovascular disease	35	43	78
B46(6)	Other diseases of circulatory system	19	16	35
B31	Influenza	-	5	5
B32	Pneumonia	21	30	51
B33(1)	Bronchitis and emphysema	12	3	15
B46(7)	Other diseases of respiratory system	-	2	2
B34	Peptic ulcer	1	-	1
B36	Intestinal obstruction and hernia	1	-	1
B37	Cirrhosis of liver	1	-	1
B46(8)	Other diseases of digestive system	2	5	7
B39	Hyperplasia of prostate	2	-	2
B46(9)	Other diseases, genito-urinary system	4	3	7
B46(10)	Diseases of skin, subcutaneous tissue	1	-	1
B46(11)	Diseases of musculo-skeletal system	3	3	6
B43	Birth injury, difficult labour etc.	1	2	3
B44	Other causes of perinatal mortality	1	1	2
B45	Symptoms and ill defined conditions	-	2	2
BE47	Motor vehicle accidents	5	2	7
BE48	All other accidents	1	7	8
BE49	Suicide and self inflicted injuries	1	2	3
BE50	All other external causes	4	-	4
<u>TOTAL ALL CAUSES</u>		<u>274</u>	<u>286</u>	<u>560</u>

	<u>Male</u>	<u>Female</u>	<u>Total</u>
Under 4 Weeks	3	3	6
4 weeks and under 1 year	1	-	1
1 - 4	1	-	1
5 - 14	-	1	1
15 - 24	1	3	4
25 - 34	5	2	7
35 - 44	3	4	7
45 - 54	19	8	27
55 - 64	53	21	74
65 - 74	94	62	156
75 and over	94	182	276
	<hr/>	<hr/>	<hr/>
	274	286	560

	<u>Male</u>	<u>Female</u>	<u>Total</u>
Prematurity	1	1	2
Meningitis	1	-	1
Prematurity, respiratory distress syndrome	1	-	1
Respiratory distress syndrome	-	1	1
Hydrops foetalis. Rhesus disease of newborn	-	1	1
Acute heart failure due to reaction to Conray 325 (Injection prior to x-ray caused heart failure)	1	-	1
	<hr/> 4	<hr/> 3	<hr/> 7

VITAL STATISTICS OF THE DISTRICT FOR 1972, AND

PREVIOUS YEARS COMPARATIVE TABLE WITH ENGLAND AND WALES FOR THE

PAST FIVE YEARS

	<u>1968</u>	<u>1969</u>	<u>1970</u>	<u>1971</u>	<u>1972</u>
<u>Live Birth Rate (Standardised) per 1,000 population</u>					
England and Wales	16.90	16.30	16.00	16.00	14.80
Blofield and Flegg R.D.	18.00	19.20	17.00	18.70	14.60
<u>Still Birth Rate, 1,000 total (live and still) births</u>					
England and Wales	14.30	13.00	13.00	12.00	12.00
Blofield and Flegg R.D.	9.00	13.00	13.00	9.00	14.00
<u>Death Rate (Standardised) per 1,000 population</u>					
England and Wales	11.90	11.90	11.70	11.60	12.10
Blofield and Flegg R.D.	10.50	9.80	9.50	10.10	12.60
<u>Infant Mortality Rate per 1,000 Live Births</u>					
England and Wales	18.30	18.00	18.00	18.00	17.00
Blofield and Flegg R.D.	13.49	15.00	18.00	18.00	11.00

SECTION 'B'

GENERAL PROVISIONS OF THE HEALTH SERVICES

Blofield and Flegg Rural District, together with Smallburgh Rural District and North Walsham Urban District, are combined to form No. 1 Area. The Norfolk County Council, acting under the National Health Service Act of 1946 and the National Assistance Act, 1948, provides the following services:-

Care of mothers and young children, Midwifery Service, Home Nursing, Vaccination and Immunisation, Prevention of Illness and Care and After Care of Sick Persons, Home Help Service, Mental Health Service and Welfare Service for the aged.

Some details are given below.

NATIONAL HEALTH SERVICE ACT, 1946 - Care of mothers and young children.

This includes the provision of Child Health Clinics to which mothers of young children can come for advice and help. Clinics are held at villages on the day stated and the Health Visitor is in attendance at each clinic from 2 p.m. to 4 p.m. A Doctor attends all clinics where there is an average attendance of 25 or more.

Acle	Unionist Hall	Second Thursday each month.
Blofield	Margaret Harker Hall	Last Thursday each month.
Blofield Corner	Village Hall	Second Thursday each month.
Brundall	Memorial Hall	First Wednesday each month.
Caister	Parish Hall	Second and last Wednesday each month.
Cantley	Village Hall	Third Tuesday each month.
Hemsby	The Institute	Third Thursday each month.
Lingwood	Recreation Hall	Third Thursday each month.
Lt. Plumstead	Mission Room	First Thursday each month.
Martham	Church Room	Fourth Thursday each month.
Ormesby	Church Hall	Second Friday each month.
Thorpe (1)	Roxley	Last Thursday each month.
Thorpe (2)	Shakespeare Memorial Baptist Church Hall Witard Road.	Every Tuesday (Doctor attends Second and Fourth Tuesday).

Vaccination and Immunisation

Information given by the County Medical Officer in respect of inoculations performed by General Practitioners and Public Health Medical Officers during the year in Area No. 1 are shown in the following tables:-

Table 1

Completed Primary Course

Type	Year of Birth				1965 - 1968	Others under 16	Total
	1972	1971	1970	1969			
Diphtheria	7	443	160	28	159	19	816
Whooping Cough	7	450	160	24	25	3	669
Tetanus	7	450	163	29	170	56	875
Poliomyelitis	7	559	172	30	160	44	972
English Measles	10	323	212	48	205	8	806
German Measles	-	-	-	-	-	456	456

Table 2

Reinforcing Doses

Diphtheria	13	23	5	770	61	872
Whooping Cough	12	21	2	50	12	97
Tetanus	14	27	12	815	688	1556
Poliomyelitis	12	15	3	719	584	1333

B.C.G. Vaccination

This protection against tuberculosis is offered to all 13 year old school children. In Area No. 1 83% of parents gave their consent.

The findings during the year were as follows:-

Number eligible	-	831
Number tested	-	671
Number positive	-	27
Number vaccinated	-	613

Laboratory Facilities

Facilities for Laboratory investigation are to be had at the Public Health Laboratory, Bowthorpe Road, Norwich.

National Assistance 1948 Act, Section 47

There were no cases where action had to be taken under the above Act.

Type	Year of Birth					Total
	1951	1950	1949	1948	1947	
Diphtheria	7	447	160	28	159	810
Whooping Cough	7	450	160	28	159	810
Tetanus	7	450	160	28	159	810
Polio-myelitis	7	450	160	28	159	810
English Measles	10	323	212	48	209	600
German Measles	10	323	212	48	209	600

Second Throat Swabs		First Throat Swabs	
Diphtheria	23	27	50
Whooping Cough	21	27	48
Tetanus	27	27	54
Polio-myelitis	15	27	42
Total		Total	
114		114	

This protective antigen-tuberculin is offered to all 15 years old school children. Vaccinated No. 1 875 of parents gave their consent. The findings during the year were as follows:-

Number eligible	-	871
Number tested	-	671
Number positive	-	27
Number vaccinated	-	613

SECTION 'C'

ENVIRONMENTAL HEALTH

Water Supplies

(i) Mains

All parishes in the district are served by public water mains, although at present it is not possible for all premises to connect. In the Eastern parishes water is supplied by the East Anglian Water Company. The main source of supply is the river Bure at Belaugh in St. Faiths and Aylsham Rural District, but this is supplemented by water from the Ormesby group of broads.

The undertakers for the majority of the district are the Norwich Water Company. Water is supplied from deep bores at Thorpe, Strumpshaw and Stalham, with a relatively small proportion of river water added.

All supplies are filtered and chlorinated.

(ii) Private Supplies

Following the difficulties experienced in 1971 in the Parish of West Caister, agreement was reached whereby the Rural District Council became guarantors for a water main to serve 27 properties in the Parish. The main was laid during the year and connections made to several properties. Several isolated areas in the district are still without a main supply. The provision of such supplies not only ensures an adequate supply of wholesome water but also enables property owners to modernise substandard dwellings with the aid of an improvement grant.

Sewerage

The steady progress made over the past years in the provision of sewers continued during 1972. The scheme for the Parishes of Burlingham and Strumpshaw was well advanced. This will make main drainage available to over 600 more properties. Further schemes were commenced during the year for the Parishes of Filby, Fleggburgh and Rollesby in the eastern part of the district and Freethorpe in the west. When complete it will be possible to connect nearly 800 additional dwellings.

Twenty years ago only the Parishes of Thorpe St. Andrew and Caister-on-sea had main drainage systems available, in each case to part of the Parish only. The total of properties so served would be less than 2,500. Since this time these two Parishes have been almost completely sewered and other schemes have been provided to twelve Parishes, either totally or in part. When the contracts already in progress are complete, approximately 15,250 properties will have this essential amenity available.

In addition to the above, schemes are scheduled for the years 1973-1976 for Reedham, Thorpe End, Gt. and Lt. Plumstead, Upton and South Walsham (part).

Sewerage (continued)

These results are excellent and represent the maximum progress permissible by financial and practical considerations. Despite this, drainage difficulties still exist, particularly in areas where sewers are not available, but new properities have been erected.

Wet Refuse

Two vehicles operated throughout the year to provide a weekly service for the collection of wet refuse. During the year 122 council owned properties were modernised and pail closets converted. Following pressure from the staff of the Health Department more than one hundred private dwellings had W.C.'s provided to replace pail closets. Despite this there were still 887 dwellings receiving a weekly service. Of these 193 were council owned. In addition a twice weekly collection was given to the holiday chalets in the Marram Hills at Hemsby for a period of sixteen weeks.

The work of introducing owners to the benefits of improvement grants and the eradication of this obsolete method of sanitation must continue with increased vigour for several years yet.

Dry Refuse

The number of rounds operating continued at 10 as in previous years. One Musketeer compression vehicle was purchased to replace a side loader. A further Musketeer and a Denis Bulkloader were ordered for delivery in early 1973. The latter vehicle is for use in the coastal area where heavy concentrations of refuse are experienced on caravan sites, holiday camps etc. During the latter part of the year the first vehicles were submitted for plating and testing. Current legislation requires all vehicles to be plated by September 1973. No great difficulties were experienced in preparing and submitting vehicles for test.

Throughout the first half of the year surveys and timings were carried out by L.A.M.S.A.C. to enable the workmen to benefit from a productivity agreement. In October the scheme was submitted to the Council for approval and recommended a bonus payment of 20% to all cleansing service employees. Although this report was dealt with expeditiously the scheme was not introduced before the Government Freeze in November, and implementation had to wait until early 1973. In the meantime workmen received a 'lead-in' payment of £1 each per week.

After long delays work was commenced on the amenity building at Acle, but this was not completed during the year. Action continued to secure a site for new garages and amenities in the coastal area. Several sites were considered but were either unsuitable or unobtainable. When details of Re-organisation were announced and it was seen that the coastal area would be amalgamating with Great Yarmouth, no further action was taken to secure a site. This would enable the New Authority to formulate its own policy which may or may not require garaging in this area.

Dry Refuse (continued)

Refuse continued to be disposed of by tipping on the four refuse tips at Acle, Caister, Martham and Strumpshaw. A quantity was burned in the small incinerator at Thorpe. Towards the end of the year Great Yarmouth County Borough Council were without tipping facilities due to the cancellation of a planning consent to tip refuse on land to the south of the River Yare. Agreement was reached for the joint use of the Caister tip. The effect of such action will be to reduce the life span of the tip from an estimated ten years to less than two.

Early in the year it was found that a 34 acre gravel pit at Strumpshaw was available for purchase. The Council decided to buy this land, if planning consent for its use for the tipping of refuse could be obtained. Such consent was granted in June 1972. At this time Norwich C.B.C. were urgently requiring tipping areas and it was decided to purchase and use this quarry jointly. Completion was made in December 1972 and works of road construction etc. were required before tipping could commence.

Cesspool Emptying

An increase in the quantity of sewage removed by this service was again recorded. The amount rose from 9,393,000 gallons to 9,749,000 gallons. This was despite the provision, late in 1971, of sewers in Acle and part of Thorpe. During recent years many properties have been connected to mains drainage but no appreciable decrease in the demand for cesspools to be emptied has resulted.

Six vehicles continue to be employed for this service although overtime was worked delays were experienced during the peak holiday months.

Disposal of cesspool sewage continued to be into the coastal sewage disposal scheme and pits at Buckenham and Thorpe. With the completion of the Lingwood/Strumpshaw sewage scheme and the enlargement of the works at Brundall it is anticipated that the major part of the liquid at present being deposited in pits will be discharged into the new works.

Rivers (Prevention of Pollution) Byelaws

Reference was made in the report for 1971 to the above byelaws. The work of converting flush type closets on boats to chemical recirculating type closets began and some two hundred hire cruisers used this system during the summer season. Additional work to facilitate sewer connections from discharge points or the provision of suitable storage tanks was also put in hand. No demand was placed on the cesspool emptying service, but this is anticipated in 1973.

Public Conveniences

The difficulties experienced in obtaining suitable sites and obtaining planning consent for public conveniences prevented the erection of any new blocks in 1972. After long delays sites at Acle Bridge and South Walsham received planning consent and the necessary work was put in hand for these to be constructed.

Public Conveniences (continued)

The blocks in regular use were very well maintained by the Council's part time employees and many complimentary remarks passed. Although there have been cases of vandalism these have not been numerous and it may well be that a high standard of upkeep helps to reduce such incidents.

The increase in holiday makers in post war years has necessitated the provision of additional public conveniences. These have been provided mainly in coast and broads locations, although those at Thorpe and Acle are also adjacent to the A47 Midlands to Gt. Yarmouth trunk road. In 1953 public conveniences were in use only at Hemsby Beach, Scratby, California, Caister village and Caister Beach. Only two of these (Caister village and California) remain, the others, being old and unhygienic have been replaced by modern blocks. Additional provision has been made at Thorpe, Ranworth, Acle, Thurne, Martham and Winterton. Together with those referred to in the previous paragraph a total number of thirteen blocks may appear reasonable for a rural area. Further provision in Broads and Village locations is envisaged however in the programme laid down by the Health Committee.

Caravan Sites and Control of Development Act 1960

As in previous years a count of caravans was carried out during the month of August. At the request of the County Council this was transferred from the first week in August to the week preceding the Bank Holiday. It is, therefore, difficult to give a direct comparison with previous years, although these figures are stated.

Static holiday caravans numbered 4,203 compared with 4,216 the previous year, and touring van numbered 545 as opposed to 571 the previous year.

The demand for sites for touring caravans again outnumbered the spaces available, and great difficulties were experienced by visitors during the peak weeks, resulting in nuisances on lay-bys and other unsuitable sites.

It has been constantly stressed that there is a need for additional touring caravan facilities within the area and with this in mind, several sites were visited in conjunction with the Planning Department of the County Council and joint recommendations were made.

Onesmall site (12 vans) was subsequently licensed and further applications for licenses are anticipated.

Tent Sites

Once again a count was carried out the last week in August as opposed to the beginning of the month, with the result that a considerable drop was recorded in the numbers of tents in use, the figure being 808 as against 1,267 in 1971. It should be noted that this by no means represented the peak of the demand.

In previous years reference has been made to the number of tents on un-licensed sites which are operated for not more than six weeks during the summer season. Similar circumstances appertained during 1972. Again nothing was done nationally to bring up to date the Public Health Act 1936. It is extremely

Tent Sites (continued)

regrettable that as yet there are no proposals for implementing all, or even part, of the recommendations published in 1970 by the Camping Working Party.

Meat Inspection

The through-put for the one licensed slaughterhouse in the district is detailed in Section 'D' of this report. Again it is pleasing to report that 100% inspection was achieved.

Milk

There were 104 distributors registered with the Council, an increase of 10 from the previous year.

Offices, Shops and Railway Premises Act 1963

The following table shows the number and type of premises registered:-

<u>Type</u>	<u>Registered During the Year</u>	<u>Total at End of Year</u>	<u>No. Receiving General Inspection</u>
Offices	1	34	4
Retail Shops	-	161	48
Wholesale Shops and Warehouses	-	1	1
Catering Establishments and Canteens	-	46	40
Fuel Storeage Depots	-	3	1
	<hr/>	<hr/>	<hr/>
	1	245	93

Food and Drugs Act, 1955

Food Hygiene (General) Regulations 1970

During the year there was one additional registration for the manufacture and sale of soft ice-cream, and 13 additional premises were registered for the storage and sale of pre-packed ice-cream.

There was one registration of premises for the retail of preserved foods.

The one ice-cream factory in the district continued to operate satisfactorily, and only minor difficulties with regard to delivery vans were experienced.

Twenty two ice-cream samples were submitted for routine examination. 20 proved satisfactory and two were Provisional Grade II.

Food and Drugs Act 1955

Food Hygiene (General) Regulations 1970 (continued)

During the year routine inspections continued to all food premises. In addition to normal food hygiene matters, attention was paid to date coding and stock rotation. In many cases it was found that the efforts of the previous years regarding stock rotation were taking effect and it was pleasing also to note an increase in the amount of food being date marked.

Again the standard of hygiene in food premises remained reasonably good, but it was necessary to take two prosecutions where food not of the nature, quality or substance demanded had been sold to purchasers. In the first case defendants were found not guilty of selling a fruit pie containing a snail, the case being dismissed on a technicality. In the second defendants were fined £75 plus costs for supplying mouldy croquettes.

The following list gives details of the various types of food premises in the district:-

Baker	3	Butcher	27
Cafe, hotel, restaurant	51	Confectioner	20
Grocer, greengrocer	150	Fish, wet and fried	24
Licensed premises, clubs	76	Manufacturers	2
Poultry packers	1		

(This does not include school kitchens)

Prevention of Damage by Pests Act 1949

14,860 visits were made by the two rodent operators in 1972 and 9833 of these were to domestic premises. No major infestations were found. Throughout the year operators continued to treat the two hospital premises within the district in a satisfactory manner.

Poultry Inspection

There is still only one poultry processing plant in the district and this continued to operate in a satisfactory manner. The processing of live poultry has again been at a minimum but the premises continue an extensive trade in game. The plant manager is responsible for inspection and the Council's staff make random checks and advise when called upon.

Only 100 turkeys and 200 capons were processed for the Christmas season but the premises dealt with some 27,000 game birds in the year. None of the turkeys or capons was rejected as unfit for consumption.

Carcases and Offal inspected and condemned in whole or in part

	Cattle excluding Cows	Cows	Calves	Sheep & Lambs	Pigs	Horses
Number killed	3,763	140	35	2,468	10025	
Number inspected	3,763	140	35	2,468	10025	
<u>All diseases except Tuberculosis and Cysticerci</u>						
Whole carcasses condemned.	3	2	2	4	45	
Carcases of which some part or organ was condemned	705	37	8	22	1530	
% of the number inspected affected with disease other than tuberculosis and cysticerci	18.73	26.42	22.85	.89	15.26	
<u>Tuberculosis only</u>						
Whole carcasses condemned.		1				
Carcases of which some part or organ was condemned.					175	
% of the number inspected affected with tuberculosis.		.71			1.74	
<u>Cysticercosis</u>						
Carcases of which some part or organ was condemned.	2					
Carcases submitted to treatment by refrigeration.	2					
Generalised and totally condemned						

SECTION 'E'

HOUSING

Council Houses

The following is a list of houses erected by the Council up to March, 1972:-

Pre-war	899
Post-war	1,255
Others	16
	<hr/>
	2,170

At the 31 March 1973 outstanding applications for Council house accommodation numbered 709.

Private Houses

As a result of action under the Housing Act, 1957 Demolition Orders were made in respect of 32 properties and Closing Orders in respect of 2 others.

A number of properties were repaired to a good standard as a result of information action. This was achieved by consultation with owners, when applying for Improvement Grants and by survey of older properties.

Qualification Certificates

The following table gives details of applications for qualification certificates:-

Applications received	(qualification certificates)	30
	(provisional certificates)	12
Certificates issued	(qualification certificates)	25
	(provisional certificates)	4
Invalid applications		6

SECTION 'F'

INFECTIOUS DISEASES

Measles

Ninety cases of measles were notified during the year compared with 82 last year. Immunisation against this complaint is now readily available and there is no doubt that it is effective in reducing the incidence of the disease, which in an unmodified form is frequently associated with severe complications particularly those involving the ears and the chest, as well as encephalitis. It should also be emphasised that the vaccine in use now is a safe vaccine. Parents should be encouraged to arrange for their children to be immunised either by doctors from the Public Health Department or by general practitioners.

Whooping Cough

Two cases were notified compared with 11 last year. The complaint is now seldom a serious one and immunisation must be responsible for this improved situation. Children with a history of repeated convulsions, however, should not be given whooping cough immunisation although they can be immunised against diphtheria and tetanus.

Scarlet Fever

Two cases were notified compared with 16 last year. Whilst scarlet fever itself is seldom a dangerous disease in this country, the germ which causes it is the haemolytic streptococcus and cannot be ignored, as both rheumatic fever and kidney disease can result from an infection which may be associated with a rash as in scarlet fever, but may merely cause a severe sore throat.

Food Poisoning

There were 3 cases of this complaint notified during the year compared with 5 last year.

Infective Jaundice

Eight cases were notified compared with 25 last year and 95 the year before. This complaint can be a most debilitating one and largely because of the long incubation period of about a month, it is very difficult to trace the source of any particular case.

Dysentery (Sonne)

There were three cases of sonne dysentery.

Immunisation Schedule

The schedule of immunisation in Norfolk County Council Child Health Clinics and Schools is now the following:-

Immunisation against whooping cough, diphtheria and tetanus (the triple injection) at 6 months, 8 months and 14 months. Poliomyelitis vaccine is given by mouth at the same time as those injections. The increased spacing of injections eliminates the need to give a boosting injection at 18 months to 2 years while retaining the same efficacy.

We carry out measles vaccination after the first birthday 'Booster' injections against diphtheria and tetanus with poliomyelitis immunisation by mouth are given at school entry and another tetanus injection and polio immunisation on leaving school.

Immunisation against tuberculosis or B.C.G. vaccination is carried out, after testing whether the individual child requires it, for third-year pupils at Secondary Schools.

Immunisation against rubella or German measles, is now carried out for 13 year old girls. The purpose of this immunisation is different from that of the others. The infection is not serious for the patient, but when it occurs in a pregnant woman damage may be caused to the foetal heart, eyes, ears or brain. Thus in this country immunisation is offered only to females and is preferably given before reaching child bearing age. It is not recommended after pregnancy has commenced.

**Incidence of infectious diseases (excluding T.B.)
during the last five years**

	1968	1969	1970	1971	1972
Measles, excluding rubella	267	53	194	82	90
Dysentery, amoebic or bacillary	-	151	1	13	3
Scarlet Fever	18	8	12	16	2
Whooping Cough	1	2	14	11	2
Infective jaundice	6	7	95	25	8
Diphtheria	-	-	-	-	-
Tetanus	-	-	-	-	-
Acute meningitis	-	-	1	-	-
Acute encephalitis, infective	-	-	-	-	-
" " post infectious	-	-	-	-	-
Ophthalmia neonatorum	-	-	-	-	-
Acute poliomyelitis, paralytic	-	-	-	-	-
" " non paralytic	-	-	-	-	-
Leptospirosis	-	-	-	-	-
Paratyphoid fever	-	-	-	-	-
Typhoid Fever	-	-	-	-	-
Food Poisoning	4	2	14	5	3
Malaria	-	-	-	-	2
Plague	-	-	-	-	-
Cholera	-	-	-	-	-
Anthrax	-	-	-	-	-
Smallpox	-	-	-	-	-
Typhus Fever	-	-	-	-	-
Relapsing Fever	-	-	-	-	-
Yellow Fever	-	-	-	-	-

TUBERCULOSIS - NEW CASES NOTIFIED DURING 1972

	Respiratory		Meninges & C.N.S.		Other		Total
	Male	Female	Male	Female	Male	Female	
Under 5 years	-	3	-	-	-	-	3
5 to 14 years	2	1	-	-	-	-	3
15 to 24 years	-	-	-	-	-	-	-
25 to 44 years	2	2	-	-	2	-	6
45 to 64 years	1	1	-	-	-	-	2
65 years and over	-	-	-	-	-	1	1
Age unknown	-	-	-	-	-	-	-
	5	7	-	-	2	1	15

TUBERCULOSIS - NUMBER OF CASES ON REGISTER AT END OF 1972

	Male	Female	Total
Pulmonary	117	112	229
Non Pulmonary	7	13	20
	124	125	249

DETAILS OF NEW CASES OF TUBERCULOSIS FOR LAST FIVE YEARS

(excluding Inward Transfers from other Districts)

		1968	1969	1970	1971	1972
Pulmonary	M	-	3	4	-	5
	F	3	3	2	2	7
Non Pulmonary	M	-	-	-	-	2
	F	1	1	2	-	1
		4	7	8	2	15

FACTORIES ACT, 1961

Part 1 of the Act

1: Inspection for purposes of provisions as to health (including inspections made by Public Health Inspectors).

	<u>Number on Register</u>	<u>Number of Inspections</u>	<u>Number of written Notices</u>	<u>Number of Occupiers Prosecuted</u>
(i) Factories in which sections 1,2,3,4 & 6 are to be enforced by Local Authorities	9	3	-	-
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authorities	91	42	7	-
(iii) Other premises in which Section 7 is enforced by Local Authorities	14	6	-	-
	<u>114</u>	<u>51</u>	<u>7</u>	<u>-</u>

2: Cases in which DEFECTS were found:-

<u>Particulars</u>	<u>Found</u>	<u>Remedied</u>	<u>To H.M. Inspector</u>	<u>By H.M. Inspector</u>	<u>Number of cases in which prosecutions were instituted</u>
Sanitary Conveniences (S7):					
(a) Insufficient	1	1	-	-	-
(b) Unsuitable or defective	6	5	-	-	-
	<u>7</u>	<u>6</u>	<u>-</u>	<u>-</u>	<u>-</u>

PART VIII OF THE ACT

OUTWORK - (SECTIONS 133 and 134)

<u>Nature of Work</u>	No. of outworkers in August list required by <u>Section 133</u>	<u>Section 133</u>		<u>Section 134</u>		
		No. of cases of default in sending lists to <u>the Council</u>	No. of Prosecutions for failure to supply lists	No. of instances of work in unwholesome premises	<u>Notices served</u>	<u>Prose- cutions</u>
Wearing - (Making etc. (Cleaning and Apparel (Washing	25	-	-	-	-	-
Brush Making	-	-	-	-	-	-
Cosagues, Christmas Crackers, Christmas Stockings, etc.	5	-	-	-	-	-
	30	-	-	-	-	-

