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Contributors

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URBAN DISTRICT OF
BOLSOVER
DERBYSHIRE



ANNUAL REPORT

OF THE

Medical Officer of Health

and the

Public Health Inspector

FOR THE YEAR

1956



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BOLSOVER
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BOLSOVER URBAN DISTRICT COUNCIL

PUBLIC HEALTH COMMITTEE

(As at 31st December, 1956)

Alderman T. Colledge (Chairman)

Councillor J. W. Bluff	Councillor S. Jennings
Councillor Mrs J. Colledge	Councillor W. B. Revill
Councillor D. A. Coupe	Councillor J. W. Savage
Councillor F. Cross, J.P.	Councillor M. W. Simpson,
Councillor G. Fisher	B.E.M.
Councillor S. T. Fisher	Councillor J. Spray

PUBLIC HEALTH STAFF :

Medical Officer of Health :

Dr. A. R. ROBERTSON, M.B., Ch.B., D.P.H.
"Dale Close," 100, Chesterfield Road South, Mansfield,
(Tel. : Mansfield 811)

Clerk: Miss P. M. WILSON.

Deputy Medical Officer (Part time)

Dr. J. B. McKAY, M.B., Ch.B.

Public Health Inspector and Cleansing Superintendent :

JOHN F. H. WALTON, M.R.S.H., M.A.P.H.I.
(Tel. : Bolsover 3255/6)
Council Offices.

Clerk : C. F. THOMSON.

PREFACE

To the Chairman and Members of the
Bolsover Urban District Council.

Mr. Chairman, Madam and Gentlemen,

I have great pleasure in submitting this report on the health and sanitary conditions of your district for the year 1956. As you are aware this has been my first full year in office as your medical officer. I have enjoyed my year and have done my best to serve you. Throughout, I have been grateful for your kind help, interest and co-operation and I look forward to this continuing in the future.

This report will be slightly different from those of the past. As you know I am medical officer for three County districts, therefore, I have decided to make the first part of each report a general one and then the second part will appertain to the particular features of each district. I hope you will like this new style of report.

I am,

Your obedient Servant,

A. R. ROBERTSON,

'Dale Close',
100, Chesterfield Road South,
Mansfield.

OLD PEOPLE

We all know that the proportion of old people in the population is increasing. As it is, old people create problems in some cases. It seems reasonable to suppose that the problem will grow hand in hand with the increase in number. Therefore, I feel we should learn as much as possible during the present and strive at the same time to plan ahead for the future. Let us look at those who came to our notice in 1956.

1. A lady aged 75

This lady's husband died in the early part of 1956. Since then she has lived by herself in an isolated, small country cottage. However, she is very well and very active. She is as happy as she can be considering the loss of her husband. Her house is spotlessly clean. She wishes to stay in her house, I visit her every three months or so, just to see that all is well.

2. A gentleman aged 79

When he was younger this man was a shepherd, and he is still fit enough to help out in the lambing season. He has lived by himself since his wife died. Now, he wishes a bungalow in a certain district, so that he can be near a woman who is keen to help him and who nursed his wife in the past. We will let him have his bungalow as soon as possible. Again, I visit regularly.

3. A gentleman aged 79

This man is also fit and well. He lives by himself, and he wishes to keep on doing so. He has a daughter who lives about four miles away. She is willing to have him but he wants to stay as he is for as long as he can manage. Well, he is managing well so far and I hope he will continue so for many years to come. He is clean and fit and his house is tidy.

4. A lady aged around 70

We received complaints that this lady's house was being badly kept. My Public Health Inspector and I

went to see her. The house was by no means perfect but it was by no means as bad as we had been told. However, we persuaded her to give the house a bit of a clean. Since then my Public Health Inspector and I have visited regularly. The house is now much better than it was. The lady is in reasonable physical health but, she is not as bright mentally, as she has been when younger.

5. A lady over 80

This lady had been living by herself for some years. Her health, physical and mental, failed gradually. Her only relative was a man of fifty odd and he had an aged mother to care for, and, he lived some miles away. The home was in a filthy condition. After several visits I advised my Council to take action under the National Assistance Act. The Council agreed and we duly made our application in the magistrates court. Our application was refused. Some months later, the lady's health began to deteriorate very rapidly. Using the emergency procedure set out in the above Act, I was able to have her admitted to hospital (at the last minute she said she wished to go). Unfortunately, she died a few days later.

6. & 7. Two old gentlemen

In December, I was approached about these men. They were both aged and they were both incontinent, of bowel and of bladder. One lived with his wife who was aged and suffered from arthritis. The other lived with a brother whose wife had recently died—and the only woman in the house was a girl of sixteen. In both cases, the washing had become a terrible problem. Both men were placed on the waiting list for admission to hospital.

These are the old people we have tried to help. What have we learnt? Well, in Cases 1, 2 and 3 we only need to give our moral support and to be sympathetic and considerate. I am proud to record that you (as Councils) and we (your officers) are always ready and willing to dispense our help. A friendly visit can go a long way. Case 4 has also had a happy outcome. Persuasion and

visiting has helped a lot. Case 5 was tragic. Perhaps things would have been different if our original application had succeeded. I think it might have succeeded if the magistrates had seen the lady and her home. (She did not appear in court.) I realise that justices are very busy, and, I realise that no-one should be taken from their home lightly. But, I do feel in such a case time spent by the magistrates, in a visit to the home, would be time well spent. After all, words can never take the place of eyes and I feel that a visit should be routine. It must be very difficult to decide such a case and I could only do it by seeing for myself (indeed, by law that is what I have to do). Cases 6 and 7 are also tragic. I firmly believe that these men could have stayed at home, if there had been a washing service available, and I feel that such a service will be a "must" in the future.

It can never be said too often that all the above are individual people. They are all different and have to be treated differently. So far, we have managed to give them a personal service. It is prodigal of time and there may not be much to show for our efforts. However, we can rest easy in that we have all done our best to help.

TUBERCULOSIS

I give below the number of cases of tuberculosis in England and Wales in 1956.

Respiratory	Meninges & C.N.S.	Other
31,642	434	3,739

Deaths from tuberculosis were:—

Respiratory	Meninges & C.N.S.	Other	Total
4,849	92	427	5,368

Now, I have heard many people say that tuberculosis is "on the way out." Well, it is, if one compares the deaths for 1956 with those for 1954 and 1955.

1954	7,897
1955	6,492
1956	5,368

Thus, you can see that the total deaths have fallen by over 1,000 a year in these three years. But, let us look a little more closely at them. In **males** the deaths from respiratory tuberculosis have fallen from 4,944 in 1954 to 3,532 in 1956, i.e. a fall of 29%. In **females**, the fall has been from 2,125 in 1954 to 1,317 in 1956, i.e. a fall of 38%. Thus the fall in female deaths is $1\frac{1}{2}$ times the fall in male deaths. Therefore, it seems to me that we have no right to be complacent because **everything** in the garden is not lovely. Besides, over 5,000 people lost their lives in 1956 because of tuberculosis. Can we wait for this total to diminish year by year, or, should we jump in now and attack tuberculosis from every angle? Surely in this, the 20th Century of Christian Civilisation, there can be only one answer. Everyone from the throne down, should attack tuberculosis in any way they can. Remember, 5,000 deaths is bad enough, but, in addition some 36,000 people have fallen ill and their worries, loss of earnings and cost in medical care would be a staggering computation if they could be measured. But, no-one can assess the anguish of one person, never mind that of 36,000.

Well then, what are we to do about Tuberculosis? It seems to me that many things are necessary and many of these necessities will help in many ways, i.e. they will not be specific against tuberculosis. Therefore in casting our bread upon the waters of tuberculosis we would have it brought back many times on the tides of General Health and Well-being. I now give my ideas as to what should be done:—

1. **Housing.**

Every one should be in a house which is easily and well ventilated and overcrowding must be ended.

2. **Food.**

Good sound nourishing food is a "must". To quote one example, the giving of milk to school-children has been of great value to them and to the nation. If our school-meals are good, we must hope that future generations will automatically demand good food. In school-meals we have a weapon ready forged with which to cut away prejudices, sloth and ignorance.

3. Habits.

Health Education is now a very up-to-date and scientific subject. Yet, I wonder if it can give any better advice than the old-fashioned "Be moderate in all things." Moderation is the ideal. We should neither play nor work too hard. Physiologists often compare the human body to an internal combustion engine. We all know what happens if such an engine is worked too hard.

4. Working Conditions.

These are just as important as homes. Most of us spend one-third of our life at work. Therefore, we must have good ventilation at work and we must have dust suppressed as much as possible. Obviously, some occupations are harder to be rendered good than others. But, even in the difficult cases, we must make full use of all advances in scientific knowledge **NOW**.

5. Treatment.

The treatment of Tuberculosis has been revolutionised in recent years. People for whom there would have been no hope, can now be restored to good health. I feel this should be brought home repeatedly to the public. Everyone must be made to realise that most cases of tuberculosis can be cured.

6. X-Rays.

The Chest Clinics and the Mass Miniature Radiography Units do a job of tremendous importance. I would like to see them increased in availability. It should be as easy to have a chest x-ray as it is to buy a loaf.

7. The Infective Case.

Here we are on thorny ground because we are dealing with personal liberty. I am all for personal liberty until such liberty damages other people. After all, we incarcerate thieves and murderers. A person who goes around liable to spread tuberculosis, can

rob people of health and can cause death. Surely they too should be "incarcerated." Now that the number of cases and deaths are falling, a move like this might have a dramatic effect. You know, there is legal provision in the Public Health Act whereby this could be done.

Tuberculosis is an immense subject and many Doctors devote their whole career to it. They could add and subtract to my list, I am sure. Even so, I feel that my points are valid and if we all proceed along these lines I hope we shall be able to hasten the decline of tuberculosis.

POLIOMYELITIS VACCINE

An outstanding event of 1956 is the introduction of a British vaccine against poliomyelitis. We are not Local Health Authorities and at first glance we may not seem to be very concerned. Yet in some ways we are even more concerned than Local Health Authorities. When people wish advice about the vaccine, they go to their own Doctor, or to you as Councillors, or to me as your Medical Officer of Health, as well as going to Local Health Authorities Clinics. As we are nearest to the people concerned, we are often approached.

First, a word about the disease itself. It is a disease of long standing and Ancient Egyptian art shows people who have flail legs due to poliomyelitis. In this country, the first big epidemic was in 1947. It is an infectious disease and is notifiable. There are two forms:—

1. Paralytic
2. Non Paralytic

The number of cases and deaths for 1956 are given below.

Paralytic	Non Paralytic	Deaths
1,708	1,497	114
		(Provisional)

Now, 1,708 people with paralysis is tragic. But, it must be remembered that not all of these people would be seriously affected. Indeed, I guarantee that a fair number will

now have recovered completely. Thus, I feel that we should not become hysterical about this illness. After all, more people died from tuberculosis than became ill from poliomyelitis. I would appeal to the press and to the public to refrain from becoming panic stricken because of a case or a few cases of polio.

As for the vaccine, we are using a modification of the Salk vaccine introduced in the U.S.A. in 1954. Parents whose children are eligible have been asked to register their consent. Alas, there will not be sufficient vaccine to satisfy demand. Therefore, the Medical Research Council will select certain children (by date of birth) who will be offered vaccination. Then by comparing the number of cases in these children with those in a similar group of non vaccinated, they hope to gain some idea of the efficacy of the vaccine. I have no doubt that they will plan this with statistical thoroughness and I hope their results will be good.

It seems to me that this vaccine may well be an extremely useful addition to the armamentarium of modern medicine. In face of this it may seem rather petty to carp about it. Still, I feel, there are two points which must be raised. Firstly, I feel it is a great pity that we could not have had the supply equal the demand. I know the people of my district and I am very afraid that their enthusiasm will wane considerably, if they register, yet do not have their children done (This will not apply to everyone but I predict that it will to many in my districts). Also, I abhor the idea of selection in any shape or form. After all, we have a National Health Service, which is the envy of many. Therefore, as a matter of principle, it seems wrong that one should get what another cannot have. Everyone is surely entitled **at all times** to the same benefits from a National Health Service. Secondly, I feel that a warning should have been given to parents that their children may have to be vaccinated at regular intervals. No one can forecast how long lasting will be the immunity conferred by vaccination. But, I am certain that it will not last for ever and I shall not be surprised if five years or thereabouts is the answer. There is one snag here. By and large, the older you are when you contract paralytic poliomyelitis, the more likely you are

to have severe and lasting paralysis. So, it looks as though repeated courses will be necessary. This must be stressed, because I feel that any parent who refuses a second course may well have done their child more harm than good in allowing it to be vaccinated.

Well, I have expressed my reservations, but I still welcome the advent of the vaccine and I do hope that it will not be long until we are able to immunise on demand (as we do now for diphtheria and whooping cough)

FOOD HYGIENE

In 1956 there were 11,008 cases of food poisoning in England and Wales. Also, there were 48,982 cases of dysentery, and in many of these, contaminated food would play a large part. These figures are truly shocking. Therefore I welcome the Food Hygiene Regulations, 1955, with open arms. These regulations came into operation on January 1st, 1956. They are greater in scope than earlier legislation. Personally, I am very pleased that they place responsibility on both employer and employee. Indeed, I think this dual responsibility may well be the most important point in the Regulations. If all public health devotees can help to convince everyone connected with food that they are responsible, then I feel sure we shall see a reduction in the number of food poisoning cases.

We have not had many cases notified to us. But, this does not mean that we have not had many cases. You see, food poisoning is like an iceberg—1/10th is visible while 9/10ths are hidden. Many people with a slight attack do not consult their doctor. Also, not all cases are notified—I meet people who say that they have had food poisoning yet I have received no notification. Therefore, we cannot be content simply because we do not have many notifications.

While on this subject I feel I must mention education in food hygiene. To me, education and schools are synonymous. All school-children should be taught to handle food hygienically and, most important, they should be taught by example. By example, I mean that every

school kitchen and canteen should be impeccable. Their standards should be exemplary. Surely this would have an effect on children and, who knows, it may even jolt some parents who would be badgered by their children into increasing their standards.

The more one looks at this problem, the more vexed one becomes. After all, this country has been interested in Public Health for approximately one hundred years. Yet, we still have to use legislation to try and ensure clean handling of food. We should be ashamed that we have needed Regulations. Let everyone who handles food develop a sense of cleanliness and regulations will not be needed. Any dirty food handler is guilty of a great moral wrong. We must make such people realise this, and every food handler should search his conscience and see if it is clear—remember, food poisoning can be a mild illness—it can also be **FATAL**.

One final word addressed to everyone—are you free from guilt? Do you accept low standards? Do you drink from cracked or lipsticked cups? Do you eat in dirty surroundings? etc., etc. Well, if you do, you too, are guilty. If you insist on hygiene, you will get it. So, in many ways it's up to you and you and you.

A VIRUS OUTBREAK

In the late Autumn, we had a violent epidemic of illnesses caused by a virus. I understand that the epidemic raged through Nottinghamshire before coming to us. We had hundreds of cases. The illness lasted from 4 days to 2 or 3 weeks; the reason for the wide variation in time is that the illness could be uni-, bi-, or even triphasic. As for symptoms, all the sufferers felt really ill (This is characteristic of virus illness). Also they suffered from sickness and fever and headache. Many had a rash which was often only of fleeting duration. If they had any sores or cuts when they felt ill, these took very much longer to heal up than usual. The illness was very infectious and raged through whole families.

In a considerable number, there were also signs of meningeal irritation (e.g. stiff neck, severe headache, stiff limbs). This picture looked like non paralytic polio, and it was difficult to differentiate between the two. Here, the patient was often sent to hospital.

There were no deaths from the illness and as far as I know there were no lasting ill effects.

Lodge Moor Hospital for infectious disease was very interested in this illness. One of their doctors in collaboration with a Bolsover doctor visited many of these people and took specimens from them. From these, he was able to isolate and type the virus responsible for the illness. Thus, we have helped to contribute to the store of medical knowledge.

STATISTICS OF THE AREA

Area (acres)	...	...	...	...	4,526
Population (census), 1951	...	...	...	...	10,817
Population mid-year (Registrar General) 1956	...	...	...	...	11,040
Number of inhabited houses (end of 1956)	...	...	...	...	3,615
Rateable Value (as at 31.3.57)	...	...	...	...	£102,081
Sum represented by a Penny Rate, 1955/56	...	...	...	...	£405

SOCIAL CONDITIONS

The chief occupations of the inhabitants are coal mining and agriculture. Fruit is grown in the district in large quantities. The general standard of social condition shows little change from previous years.

VITAL STATISTICS

BIRTHS.

Live Births :—

	Total	Males	Females	
Legitimate	209	113	96	{ Birth-rate per 1,000 of the estimated resident population 19.38.
Illegitimate	5	3	2	

Corrected birthrate 19.38

Still Births	2	—	2	{ Rate per 1,000 total (live and still) births, 9.2.
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DEATHS.

	Total	Males	Females	
	123	74	49	{ Death-rate per 1,000 of the estimated resident population 11.14.

Death rate corrected by comparability factor 14.59.

DEATH RATE OF INFANTS UNDER ONE YEAR OF AGE.

All infants per 1,000 live births	...	...	...	28.03
Legitimate infants per 1,000 legitimate live births	...	...	...	28.7
Illegitimate infants per 1,000 illegitimate live births	...	...	...	nil.

Death rate of infants under 4/52 of age, i.e. Neonatal deaths per 1,000 live births 23.3.

Our local infantile death rate is higher than the national rate which was 23.8. Similarly, the Neonatal death rate is higher than the Neonatal one which is 16.9.

In all, six infants died, one of these was aged 3 months and he died from inhalation asphyxia and whooping cough. The other five infants were all less than four weeks old at death. In three of the five prematurity was a contributing factor to the deaths.

Every expectant mother can now have expert ante natal care either through the ægis of the National Health Service or at the County Council's Ante natal Clinics. The Ante natal care can help to cut down the incidence of prematurity and it is to be hoped that all expectant mothers will take advantage of this service.

DEATHS FROM :--

Coronary thrombosis	...	...	...	15
Tuberculosis	...	...	...	0
Cancer	...	...	...	13
Measles	...	...	...	0
Whooping Cough	...	...	...	1

The number of deaths from cancer was three less than last year. There was only one death from lung cancer.

The number of deaths from coronary thrombosis was virtually double that of last year. The national figures for deaths from this disease also continues to increase, and, speaking as a male, I regret to point out that substantially more males than females die from this. Much research has been centred in this disease both here and in the U.S.A. The present opinion is that overweight and over much fat in the diet help to cause this disease. The advice is often given that a man of 45 should strive to be no more in weight than he was at 25. I think this good advice even though it may be difficult to follow.

GENERAL PROVISIONS OF HEALTH SERVICES IN THE AREA

Laboratory Facilities.

These are provided by the Derbyshire County Council. There is a laboratory at the County Offices at Derby.

Ambulance.

This service is provided by the County Council.

Maternity and Child Welfare.

Derbyshire C.C. provide this service. There is a County Council Clinic in Bolsover.

Chest Clinic.

The nearest clinic is in Chesterfield, under the auspices of the Sheffield Regional Hospital Board.

Venereal Disease.

Treatment for such disease can be obtained at Chesterfield Royal Hospital.

SANITARY CIRCUMSTANCES OF THE AREA

Water.

This is supplied by the Chesterfield, Bolsover and Clowne Water Board and is satisfactory in quality. All the houses in the district are supplied direct from the town's mains.

Monthly samples for chemical and bacteriological analyses were collected at Bolsover moor and Hillstown Softening Plants. At these plants the various raw hard waters are softened and chlorinated before distribution and the two copies of results of analyses are typical of the water supplied. The various raw water supplies to these plants are also sampled regularly and a pre-chlorine dose is also given. Samples of the softened chlorinated water have all shown the absence of Coliform organisms from 100 ml. and agar plate counts have also been zero.

Regular samples for bacteriological and physical analyses were also collected at the following distribution points:—

Hillstown Storage Tanks (2)
Tap, Gasworks, Bolsover.
Tap, Stratton Road, Bolsover.

These sampling points have all given satisfactory results throughout the year.

Results of Examination of Sample of Water.

Taken from Hillstown Softening Plant (Treated) on 10th December, 1956.

Bacteriological Examination.

Agar plate counts per 1 ml.				
2 days at 37° C	...	...	...	0
3 days at 20° C	...	...	...	0
Coliform counts per 100 ml.				
2 days at 37° C	...	...	...	0
Bact. Coli type 1 (44° C)	...	...	...	0

Physical and Physico-Chemical Examination.

Appearance—Clear.
Colour—(Burgess) 2 m.m. (5 Hazen).
Taste—Normal.
Electrical Conductivity—750. units
Turbidity—5 p.p.m.
Odour—Nil.
pH—7.6.

Chemical Analysis (Expressed in Parts per million).

Carbonate Hardness (CaCO ₃)	...	...	165
Non-Carbonate Hardness (CaCO ₃)	...	...	0
Total Hardness (CaCO ₃)	...	...	165
Iron (Fe)	...	...	0.02
Manganese (Mn)	...	...	0.01
Lead (Pb)	...	...	0.01
Total Alkalinity (CaCO ₃)	...	...	181
Excess Alkalinity (Na ₂ CO ₃)	...	...	17
Chlorides (Cl)	...	...	65

Remarks.

Chlorine Dose 0.4 p.p.m. As supplied to parts of
Bolsover U.D.

Residual Chlorine.

Free .03 p.p.m. Combined T. p.p.m.

Results of Examination of Sample of Water.

Taken from Bolsover Moor P.S. (Treated) on 10th
December, 1956.

Bacteriological Examination.

Agar plate counts per 1 ml.				
2 days at 37° C	...	...	...	0
3 days at 20° C	...	...	...	0
Coliform counts per 100 ml.				
2 days at 37° C	...	...	...	0
Bact. Coli type 1 (44° C)	...	...	...	0

Physical and Physico-Chemical Examination.

Appearance—Clear.
Colour—(Burgess) 2 m.m. (5 Hazen).
Taste—Normal.
Electrical Conductivity—870. units
Turbidity—5 p.p.m.
Odour—Nil.
pH—7.8.

Chemical Analysis (Expressed in Parts per million).

Carbonate Hardness (CaCO_3)	...	...	138
Non-Carbonate Hardness (CaCO_3)	...	...	0
Total Hardness (CaCO_3)	...	...	138
Iron (Fe)	...	...	0.03
Manganese (Mn)	...	...	0.01
Lead (Pb)	...	...	0.01
Total Alkalinity (CaCO_3)	...	...	268
Excess Alkalinity (Na_2CO_3)	...	...	138
Chlorides (Cl)	...	...	41.5

Remarks.

Chlorine Dose 0.4 p.p.m. As supplied to parts of
Bolsover U.D.

Residual Chlorine.

Free .12 p.p.m. Combined .02 p.p.m.

Closet Conversions.

Conversions continued to be made in 1953. A total of 5 pail closets were converted this year.

Sewerage and Sewage Disposal.

The preparation of the scheme for Sewering of Chesterfield Road, Shuttlewood has been complicated by the possibility of the erection of 50 Houses in the drainage area.

The Syphons for Shuttlewood Sewage Works are on order.

Emergency work to eliminate surcharging of the main sewer to Bolsover Sewage Works in times of storm has been sanctioned by the Council and will be carried out immediately.

Housing.

In 1956, 100 new houses were built in Bolsover. 6 were built by private individuals and 94 by the Council. While this total is less than that for 1955, it is still a respectable one.

Factories Acts, 1937 and 1948.

Visits are paid regularly to the factories in the district, and conditions generally were found to be satisfactory.

1. Inspections for the purpose of provisions as to health.

Premises.	Number on Register.	Inspections	Number of Written Notices
(i) Factories in which Sections 1, 2, 3, 4, and 6, are to be enforced by Local Authorities	7	32	1
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority.	20	57	4
(iii) Other Premises in which Section 7 is enforced by the Local Authority. (excluding outworkers' Premises.)	4	12	2
Total	31	101	7

2. Cases in which Defects were found.

Particulars.	Number of Cases in which defects were found.			
	Found	Remedied	Referred.	
			To H.M. Inspector	By H.M. Inspector
Want of Cleanliness	1	1	—	—
Overcrowding	—	—	—	—
Unreasonable temperature	—	—	—	—
Inadequate ventilation	—	—	—	—
Ineffective Drainage of Floors	—	—	—	—
Sanitary Conveniences.				
(a) insufficient	2	2	—	—
(b) unsuitable or defective	4	4	—	—
(c) not separate for sexes	—	—	—	—
Other offences against the Act (not including offences relating to Outwork.)	—	—	—	—
Total	7	7	nil	nil

3. Outwork.

Nature of Work	No. of Outworkers	No. of cases of default in sending lists to the Council
Lace, lace curtains and net	4	nil.

INSPECTION AND SUPERVISION OF FOOD.

Milk, Meat and Other Foods.

An account of the supervision of milk, meat and other foods will be found in the Public Health Inspector's report.

NATIONAL ASSISTANCE ACT, SECTION 47.

The Council made no application under this Act.

Cases of Infectious Disease Notified during the Year 1953

Notifiable Disease	Number of Cases notified.													
	At Ages - years												Total cases rem'd to Hospital	Total Deaths
	At all Ages	Under 1	1 to 2	2 to 3	3 to 4	4 to 5	5 to 10	10 to 15	15 to 20	20 to 35	35 to 45	45 to 65			65 and up
Diphtheria	2	..	..	..	..	..	..	..	..	..	1	1	..	..
Erysipelas	13	..	..	3	1	4	4	1	..	..	..	..	..	8
Scarlet Fever	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Encephalitis Lethargica	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Puerperal Pyrexia	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Ophthalmia Neonatorum	4	..	..	..	..	..	1	..	1	2	..	..	..	..
Pulmonary Tuberculosis	1	..	..	..	..	..	1	..	1	..	..	..	..	..
Other forms of Tuberculosis	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Pneumonia	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Cerebro-Spinal Fever	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Dysentery	1	..	..	..	..	..	..	..	..	1	..	..	1	..
Polio-myelitis (Paralytic)	1	..	..	..	..	..	..	..	..	1	..	..	..	1
do. (Non-Paralytic)	3	..	..	..	..	..	2	..	1	..	..	..	..	3
Measles	4	1	1	2	..	..	..	..	..	..	..	..	..	..
Whooping Cough	108	6	10	11	13	15	42	10	..	1	..	..	..	1
Para-Typhoid Fever	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Gastro Enteritis	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Food Poisoning	..	..	..	..	..	..	..	..	..	..	..	..	..	..
TOTAL	137	7	11	16	14	19	50	11	2	5	1	1	..	13
														1

PREVALENCE AND CONTROL OVER INFECTIOUS DISEASES

Diphtheria.

Again, no notification of this disease was received. Nevertheless, it is important that children should continue to be immunised against this disease which was once both prevalent and deadly. Children can be immunised at County Clinics and by their own doctor.

Scarlet Fever.

13 cases were notified as against 38 for 1955. The disease continues to be mild.

Measles.

There were 4 cases of Measles as against 66 for 1955. Measles is a disease which usually occurs in bi-annual epidemics and it is reasonable to suppose that there will be more cases next year.

Whooping Cough.

There were many more cases of whooping cough this year (108 as against 29 in 1955). It must be recorded and stressed that there was one death from this illness. Immunisation against whooping cough is available and in my opinion it is well worth while. This immunisation is not fool-proof but in the opinion of the Medical Research Council it gives sufficient protection to make it of value to the child. While the whooping cough epidemic was raging in Bolsover I had a conversation with one of the general practitioners and he said that in his opinion it was rare to see an immunised child with whooping cough. Accordingly, I would stress that mothers should have their children immunised against whooping cough.

Poliomyelitis.

There were 4 cases but only one of these was of the paralytic type.

Tuberculosis.

For the second year in succession there were no deaths from tuberculosis. However, there were 4 new cases of pulmonary tuberculosis notified as against 1 for 1955. This is definitely something which can give us no pride.

Age Periods in years	NEW CASES				DEATHS			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M.	F.	M.	F.	M.	F.	M.	F.
0
1
5	1	...	...	...	...	...	...
10	1	...	...	...	...	...
15	1	...	...	...	...	...	...
20
25	2	...	...	...	...	...	...
35
45
55
65 and upwards
Totals	...	4	1	...	...	...	...	...

ANNUAL REPORT

OF THE

PUBLIC HEALTH INSPECTOR AND CLEANSING SUPERINTENDENT

To the Chairman and Members of the
Public Health Committee

Mr Chairman, Madam and Gentlemen,

I have the honour to submit my report for the year 1956.

The report refers to the continued good progress made in the provision of houses and the completion of the Castle Estate at the end of the year. The erection of over 500 houses on this Estate during the past 2½ years has had a most beneficial effect and the acute housing shortage has very largely disappeared. This does not mean that every family now has a sound, good house; the matter of housing is a problem which will always be with us, though fortunately not in its acute form. New houses will continue to be required to replace those which fall into decay and become unfit for further occupation, and the needs of the elderly and the young married couples will have to be satisfied. It would be a much happier start if these young couples could look forward to a home of their own on being married, rather than having to live with their parents and have at least one child before they amass enough "points" to secure tenancy of a house. Fortunately the wait for a house, whether it be Council owned, privately owned or purchased for owner occupation, is now not nearly so great, and an ever increasing number of young couples now start married life in their own home.

The report sets out the action taken to secure the removal of families from unfit dwellings, and states that 75 families had been displaced by the end of the year. Bald figures on the progress made on slum clearance do nothing to convey the essentially human aspect of this work. The word "slum" is not synonymous with poverty, squalor or problem families, it is now widely used to denote houses which are no longer fit for human habitation. These unfit houses are occupied by ordinary, decent human beings and quite a number of them are owner-occupiers. Many of these families were keen to secure better housing accom-

modation, some were not so keen, and others of them were elderly people who viewed with apprehension the prospect of being forcibly up-rooted from their existing surroundings to which they had become accustomed and attached. Your officers spared no effort to approach this task with courtesy and understanding and every attempt was made to offer these families alternative accommodation which was in every way suitable. The personal problems which affect the offer of a house concern its type, its location, the rent to be charged, its position in relation to old friends and new neighbours. I would not claim that every single person has been completely satisfied, but it has been gratifying to see many of these people after a month or two in their new homes and to find how appreciative they were of the modern amenities and conveniences which their new houses contained. We are in the midst of a crusade to help people in bad and unfit houses to be offered good, modern houses, where they may achieve, we hope, a fuller, happier and healthier life.

Slaughtering was carried out in the district throughout the year and there was a slight fall in the percentage of bovine animals found to be diseased. The quality of animals slaughtered to provide the bulk of the local meat supply remained of a very high order.

The report outlines the peculiar difficulties which confront authorities in mining districts in combatting atmospheric pollution from domestic sources. The problem will be an extremely difficult one to solve, but I cannot imagine that it will prove impossible of solution and that mining districts must be allowed to fall behind the rest of the country in the drive to secure a cleaner air.

During the year Mr Robinson, who had been the Clerk in the Department, left to undergo National Service and over 6 months elapsed before a suitable new appointment could be made.

I should like, once again, to express my appreciation of the continued assistance that I have at all times received from the Chairman and Members of the Public Health Committee.

I am, Mr Chairman, Madam and Gentlemen,

Your obedient servant,

JOHN F. H. WALTON,

*Public Health Inspector and Cleansing
Superintendent.*

General Inspection of the Area.

Table showing inspections, etc. undertaken during the year 1956.

Inspection of houses for nuisances and defects	...	621
Revisits to houses	... ..	508
Visits in connection with improvement of houses...		194
Visits re water supply	... ..	8
Visits to infectious disease cases...	... ..	35
Milk Distributers and Dairies	... ..	62
Slaughterhouses—Meat Inspection	... ..	628
Butchers Shops	... ..	135
Bakehouses	... ..	12
Fried Fish Shops	... ..	20
Other Food Preparing Premises	... ..	71
Food Shops	... ..	186
Market Stalls	... ..	34
Ice Cream Premises	... ..	29
Inns and Other Public Buildings	... ..	9
Factories	... ..	101
Knacker's Yard	... ..	36
Schools	... ..	16
Controlled Refuse Tips	... ..	108
Colliery Spoil Banks	... ..	10
re Atmospheric Pollution...	... ..	32
Moveable Dwellings	... ..	14
re Keeping of Animals	... ..	12
Shops Act	... ..	41
Petroleum Licensing	... ..	47
Drainage Works	... ..	212
to Public Baths	... ..	8
Miscellaneous Visits	... ..	17
Interviews with owners, contractors, etc....	... ..	216

Housing and Public Health Act Defects.

The following table shows the defects remedied as a result of action under the Housing and Public Health Acts. Defects in connection with:—

House roofs	...	...	...	...	38
Chimney stacks	...	...	...	...	9
Eaves gutters and rain water pipes	...	...	...	...	56
Pointing and brickwork of walls	...	...	...	...	34
Yard paving	...	...	...	...	16
Waste pipes	...	...	...	...	19
Internal wall and ceiling plaster	...	...	...	...	104
Windows and sash cords	...	...	...	...	38
Doors	...	...	...	...	19
Floors	...	...	...	...	41
Staircases	...	...	...	...	5
Cooking ranges and fireplaces	...	...	...	...	52
Sinks	...	...	...	...	37
Washing coppers	...	...	...	...	19
Rising or penetrating dampness	...	...	...	...	48
Outbuildings	...	...	...	...	29
Dirty houses	...	...	...	...	3
Drains and inspection chambers	...	...	...	...	74
Water closet pedestals	...	...	...	...	23
Closet flushing cisterns	...	...	...	...	21
Conveniences at places of public entertainment	...	...	...	...	1
Dilapidated dustbins	...	...	...	...	182

In connection with the foregoing defects 271 informal notices and 29 statutory notices were served.

Of the legal notices served, 4 required the abatement of nuisances at dwelling houses, 20 called for replacement of dilapidated dustbins, 4 were under Section 9 of the Housing Act, 1936 and 1 required repair of a defective water closet.

Housing.

During 1956, 100 new houses were erected in the Urban District, 94 by the Council and 6 by private persons. Although this total is appreciably less than the figures for the two previous years, it is, nevertheless, approximately double the number constructed annually in the immediate post-war period.

The Council houses were built on the extension to the Castle Estate and provided 42 two bedroomed houses, 49 three bedroomed houses and 3 houses with four bedrooms; the last house on the completed Castle Estate being occupied during December, 1956.

The development of this Estate, which has been undertaken jointly with the Coal Industry Housing Association, has provided well over 500 houses, and the serious housing problem which faced the Council about five years ago has now very largely disappeared. This improvement in the housing position has enabled an ambitious start to be made on the removal of unfit houses and by the end of 1956, 75 families had been rehoused from unfit houses and a number of elderly persons were awaiting the tenancy of Council bungalows.

During 1956, plans were prepared for the erection of 40 two bedroomed bungalows by the Council on Oxcroft Lane, but work on the site did not commence until the beginning of 1957. It is pleasing to report that the housing needs of the elderly are being catered for, their's will be an ever growing problem as the number of older persons continues to rise year by year, and the erection of bungalows for them will liberate larger houses for young married couples with children.

A most noticeable feature of recent years has been the very big increase in the number of houses in owner occupation. The removal of the acute shortage of houses by the development of the Castle Estate, coupled with the landlords desire to dispose of investment type property, has resulted in quite a large number of vacant houses being offered for sale, rather than let to a new tenant, and the scarcity value of the immediate post-war period has now largely disappeared. Quite a number of the new owners have taken advantage of the improvement

grant provisions and as a result now occupy good modernised houses which have not been too costly to secure.

The year was again a busy one as a result of steps to remove unfit houses and the following action was taken:

Station Road (No. 1) Clearance Order, 1955

This Order which was made in 1955, was confirmed without modification in July, 1956. The eight houses affected being 23, 31, 35, 37, 39, 41, 43 and 45, Station Road, Bolsover.

Cotton Street (No. 3) Clearance Order, 1956

This Order affecting 34, 36 and 38 Cotton Street, Bolsover, was confirmed without modification.

Station Road (No. 2) Clearance Order, 1956

This Order affecting 14, 16, 18, 20, 22, 24, 26, 28, 30, 32, 34, 36, 38, 40, 42, 44 and 46 Station Road, Bolsover was the subject of a Public Local Inquiry in September, 1956, and was subsequently confirmed without modification.

Cotton Street (No. 2) Clearance Order, 1956

This Order affecting 14, 16, 18 and 20 Cotton Street, Bolsover was confirmed after being modified to exclude an old farm building adjacent to the houses.

The action taken in respect of individual unfit houses during 1956 was as follows:—

21 and 25 High Street, Bolsover	...Demolition Orders made
53 Station Road, Bolsover	...Demolition Order made
43 and 43A, Bolsover Hill, Bolsover	...Demolition Orders made
Farm Cottages Nos. 1, 4 and 5, Oxcroft Estate, Shuttlewood	...Demolition Orders made
22A, Appletree Road, Stanfree	...Closing Order made
49 Quarry Road, Bolsover	...Closing Order made
42 and 44 Market Place, Bolsover	...Closing Orders made
4, Woodthorpe Road, Shuttlewood	...Demolition order made
1, 2, 3, 4, 5 and 6 Brockley Wood Cottages, Bolsover	...Demolition Orders made

In addition to the above, the Council accepted undertakings under Section 11 (3), Housing Act, 1936 in respect of Nos. 1 and 2, Woodside Cottages, Shuttlewood. One house, 2, Middle Street, Bolsover, which was the subject of action under the Housing Act, 1936 was demolished before any Order was made.

The task of enforcing demolition of vacated unfit houses has proved to be far from easy, though towards the end of the year the position had improved considerably and good progress was being made. The trouble mostly arose from the scarcity of reliable demolition contractors, but in a limited number of cases the work had to be carried out by the Council in default of the owner.

The provisions of the Slum Clearance (Compensation) Act which came into force during the year were particularly welcomed as a means of giving some limited recompense to those unfortunate persons who had purchased for owner occupation sub-standard houses during the period of acute housing shortage. To the end of 1956, action had been completed in the case of 9 houses where the provisions of the Act apply.

The effect of slum clearance action is now beginning to be noticeable in the central area of the town and its effect will be more marked in the near future as demolition of further houses proceeds. It is pleasing to note that the Council are acquiring some areas in the town for preservation as open space and opportunities are arising for a certain amount of planned redevelopment on a scale greater than has existed for very many years.

It is rather disappointing to report a decline in the number of houses improved with the aid of grant and especially the much smaller number of tenanted houses which were dealt with. During 1956, 29 improvement grants were made, 23 in respect of houses for owner occupation and 6 tenanted houses. The corresponding figures for 1955 were 25 owner occupation and 40 tenanted houses, and although it could not be expected that these high figures would be maintained every year, the lack of interest of most property owners is very apparent. To the end of 1956 a total of 97 houses had been improved of which 46 were tenanted houses, and it is hoped that this number will grow steadily year by year until the ben-

efits of modern amenities and conveniences are brought to the vast majority of householders.

Reports for recent years have expressed the hope that landlords would take advantage of improvement grants to modernise their houses. Perhaps it is too much to expect great progress while rents of houses bear an ever diminishing relation to the greatly increased maintenance costs. The provisions of the 1954 Act which allowed limited increase of rent after a certain amount of maintenance work had been carried out have proved to be rather ineffective in this district. For several years there has been a danger that our national stock of houses were being inadequately maintained and it has been suggested that they were deteriorating into slums at a rate faster than new houses were being built. The Rent Bill which is now having a controversial passage through Parliament is designed to afford to the property owner, in most cases, a quite appreciable increase in rent and it is to be hoped that this will allow, and secure, much greater attention to maintenance. Thereafter a further percentage increase will be allowed on the owner's share of improvement works and I sincerely trust that this revision of the rent legislation will result in much wider use of the improvement grant provisions and hasten the time when every family has the benefit of a sound home, with modern amenities and conveniences.

During 1956, 14 certificates of disrepair were granted under the provisions of the Housing Repairs and Rents Act, 1954. The repair work required was being carried out at the end of the year but the certificates were not revoked until early in 1957.

Caravans and Moveable Dwellings.

During the year there was again a slight increase in the number of caravans used for human habitation, 21 being in use at the end of the year.

The Council's caravan site, provided in 1954 to afford 12 standings with water supply, drainage and sanitary conveniences, was fully occupied throughout the year. Plans were prepared to extend the site to afford a further 11 standings but this work was not completed during the period covered by this report.

Infectious Diseases and Disinfection.

Particulars will be found in the Medical Officer's report of the number of cases of infectious diseases notified during the year. 35 visits were paid to houses where cases had occurred and 17 books were disinfected on behalf of the Bolsover Branch of the County Library.

During the year the Council's disinfecting station continued to be available, if required, for the disinfection of blankets, etc. in cases of infectious disease.

Terminal disinfection is not normally carried out, except where requested by the householder, but disinfectant is available free of charge.

Vermineous Premises.

There was again very little evidence of bed bug infestation of houses in the district; though a number of householders experienced trouble from cockroaches and silverfish.

The advice and assistance of the Department is freely available to householders; D.D.T. powder, Gammexane dust, liquid disinfectant and D.D.T. fly solution continued to be supplied free of charge.

Water Supply.

Every house in the district is supplied with water from the main supply of the Chesterfield, Bolsover and Clowne Water Board. Two samples of tap water were submitted for bacteriological examination and both were reported as suitable for drinking purposes.

Premises used for the Preparation or Sale of Food.

During 1956, 161 visits were paid to premises used for the preparation of food (excluding slaughterhouses)—these comprised two bakehouses, 6 fish frying premises, 3 ice cream manufacturers, 1 jam and canning factory, 9 manufacturers of sausages, etc. and 2 small cafes. With the exception of the bakehouses and cafes, all the above premises are registered under the provisions of the Food and Drugs Act.

388 visits were paid to food shops and market stalls, including 27 shops registered under the Food and Drugs Act for the sale of ice cream.

Apart from the 6 fish frying establishments, there are 83 shops selling food, 3 being bakers and confectioners, 11 concentrating on the sale of fruit and vegetables 10 predominantly grocers, 10 butchers, 2 dealing in made up meat products and 48 general dealers. The vast majority are combined house and shop premises of restricted size where the hygienic storage and display of differing types of food present numerous problems.

During the year a start was made on carrying out detailed inspection of the food premises in the light of the requirements contained in the Food Hygiene Regulations, but it was not possible to proceed as quickly as I would have liked, due to the preoccupation with slum clearance activities. At the time of preparing this report more attention can now be devoted to this important aspect of public health administration and next year's report will contain more detailed information on the action taken. I feel however that I must comment at this stage on the peculiar problems which face the small authority where there is no main central shopping area with modern premises and where the bulk of the food trade is carried on in small combined houses and shops. In such circumstances it is extremely difficult to define a clear demarkation between the shop or food business and the living accommodation and so much thereby depends on the attitude of mind and hygiene consciousness of the proprietor rather than on the structural design of the premises. In such circumstances every opportunity is being, and will be, taken to impress on all food traders the vital importance of strict cleanliness and attention to hygienic practices in all aspects of food preparation, storage and sale.

There was, again, no cases of food poisoning resulting from food manufactured or processed in this district.

Slaughterhouses.

There are four small slaughterhouses in the district providing slaughtering facilities for 7 local butchers and 2 from the adjoining rural areas.

Inspection of Meat and Other Foods.

The following table gives particulars of meat inspection carried out during the year. Every animal slaughtered was examined and much of this work was carried out during the evening and at weekends.

**Carcases and Offal inspected and condemned in whole
or in part.**

	Cattle excluding Cows	Cows	Calves	Sheep and Lambs	Pigs	Horses
Number killed ...	559	144	20	1,188	435	—
Number inspected	559	144	20	1,188	435	—
All diseases ex- cept Tuberculosis and Cysticerci						
Whole carcasses con- demned	—	—	—	1	—	—
Carcases of which some part or organ was condemned	46	16	—	6	11	—
Percentage of the number inspected affected with dis- ease other than tuberculosis and cysticerci ...	8.23	11.11	—	0.59	2.53	—
Tuberculosis only						
Whole carcasses con- demned ...	1	—	—	—	—	—
Carcases of which some part or organ was condemned...	32	22	—	—	15	—
Percentage of the number inspected affected with tub- erculosis ...	5.90	15.29	—	—	3.45	—
Cysticercosis						
Carcases of which some part or organ was condemned...	1	—	—	—	—	—
Carcases submitted to treatment by refrigeration ...	1	—	—	—	—	—
Generalised and tot- ally condemned ...	—	—	—	—	—	—

During the year an estimated 4,501lb. of meat and offals found to be unfit for human food was voluntarily surrendered by the butchers to the local authority. After staining, the meat and offal were disposed of to the local knacker and arrangements were made for part of the proceeds to be returned to the butchers concerned.

An agreement exists with the Chesterfield Corporation, whereby one of their inspectors undertakes meat inspection in this district during my absence.

The following amount of food, apart from fresh meat, was found to be unfit for human consumption and voluntarily surrendered being disposed of by burial at the Council's refuse tips:—

Sausages	...	...	...	...	11lb.
Bacon	...	...	...	...	9lb.
Cooked meats	...	...	...	...	2½lb.
Canned meats	...	...	...	...	31 tins
„ fruit	...	...	...	...	43 tins
„ tomatoes	...	...	...	...	165 tins
„ vegetables	...	...	...	...	33 tins
„ milk and cream	...	...	...	...	14 tins
„ soup	...	...	...	...	8 tins
„ fish	...	...	...	...	5 tins
Fish cakes	...	...	...	...	40
Dried fruit	...	...	...	...	2 pkts.
Gravy salt	...	...	...	...	1 pkt.
Ground almonds	...	...	...	...	15 pkts.
Cake mixtures	...	...	...	...	6 pkts.

Sampling of Food.

Sampling of food under the provisions of the Food and Drugs Act is carried out by the Derbyshire County Council and Mr R. W. Sutton, B.Sc., F.R.I.C., F.C.S., the County Analyst, has kindly supplied the following report:

“39 samples, including 11 milks, were taken under the Food and Drugs Act, 1955 in the area of the Bolsover Urban District Council during the year 1956. All samples were classed as satisfactory”.

Milk and Dairies Administration.

The sale of non-designated milk is prohibited in this district by virtue of the Milk (Special Designations) (Specified Areas) (No. 3) Order, 1953 which came into operation on the 1st January, 1954.

At the end of the year there were 17 dairy farmers in the district, five of them producing Tuberculin Tested milk.

One producer of Tuberculin Tested milk bottles his milk at the farm and retails it locally, but in all other cases the milk is collected by the local dairy company and pasteurised.

The Milk and Dairies Regulations, 1949 to 1954.

The Milk (Special Designation) (Raw Milk) Regulations, 1949 to 1954.

The Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949 to 1953.

The registrations and licences granted as at the 31st December, 1956 were as follows:—

Registered distributors of milk	...	...	12
Licensed dealers in Tuberculin Tested milk	...	...	7
Licensed dealers in Pasteurised milk	...	...	7
Licensed dealers in sterilised milk	...	...	6

Supplementary licences to deal in Pasteurised milk and Tuberculin Tested milk were granted to the local Co-operative Society.

Milk Sampling.

During 1956, twelve samples of milk obtained from local producers were submitted to the Public Health Laboratory at Derby for biological examination. In no case was a condition of tuberculosis reported.

Ice Cream.

During the greater part of the year there were 3 premises at which ice cream was manufactured, though the largest producer discontinued operations during the year.

Three samples of ice cream were submitted to the Public Health Laboratory for bacteriological examination, two being reported to be in Grade I and the third in Grade II.

Swimming Baths.

Two samples of swimming bath water were submitted for bacteriological examination, both being reported as "suitable for bathing purposes".

I have previously reported on the Council's intention to carry out improvements to the Public Baths in Castle Lane, Bolsover, by providing improved and compulsory pre-cleansing and better dressing facilities; unfortunately this work is still held up by reason of the restriction on capital expenditure.

Slaughter of Animals Acts, 1933-1951.

At the end of 1956, 11 persons held licences to slaughter or stun animals in Slaughterhouses or Knacker's yards.

Knacker's Yard.

36 visits of inspection were paid to the Knacker's yard.

This is rather a small business in a most remote part of the district, but it was conducted in as satisfactory a manner as its nature and location permits.

Shops Act, 1950.

41 visits were paid to shop premises regarding sanitary conveniences, closing hours and the employment of young persons.

Petroleum Licensing.

47 inspections were made of premises used for the storage of petroleum spirit.

At the end of 1956, 20 licences were in force involving a maximum storage capacity of 299,500 gallons.

Rodent Control.

The Department has two trained rodent operatives and one of these men undertakes rodent control work regularly.

The Council carry out free treatment of private houses infested with rats or mice, but business premises are charged with the cost of the treatment. The Knacker's yard is the subject of a special annual contract and permanent baiting points have been established.

The systematic survey of the district for the presence of rats and mice was continued throughout the year. Permanent baiting points were maintained at the refuse tip and at certain sewage disposal works.

Rodent Control Report for the year ended 31st March, 1957.

	Type of Property			
	Local Authority	Dwelling houses	Business Premises	Agricultural
Total properties inspected ...	19	2332	218	67
Number of treatments carried out				
Rats ...	7	59	6	—
Mice ...	—	28	6	—

Agricultural properties are surveyed, but practically all hold contracts with the County Agricultural Executive Committee for extermination of pests.

Conversion of Pail Closets, etc.

During 1956, five pail closets were converted into water closets, in all cases these were at farm premises which were being improved with the aid of grant. It is pleasing to note the interest which a number of farmers

have displayed in modernising farm cottages as a means of attracting and retaining farm workers.

It is hoped that further progress in this direction will continue to be made, as the vast majority of the houses which are not served by the public sewer are isolated farms and cottages in remote and scattered positions; no comprehensive sewerage scheme to serve them is economically possible.

Atmospheric Pollution.

The Clean Air Act came into being during 1956, and although its provisions did not come into effect immediately, certain parts became operative at the very end of the year and the remaining parts are expected to operate from the summer of 1958. This is "An Act to make provision for abating the pollution of the air" surely, a most necessary task in promoting and maintaining the good health of the public. Although the harmful effects of atmospheric pollution are rarely so obvious as the effects of consuming contaminated food or drink, its toll on human health and damage to buildings, etc. are nonetheless ever present. The task of abating pollution of the air is one that cannot be achieved in a short period, it is a problem which will have to be combatted with conviction and energy over a long period, success will not be won easily and will not be so readily obvious.

During the Spring of 1956, this Authority, together with its neighbours who constitute the North-East Derbyshire Smoke Abatement Joint Consultative Committee, organised a Domestic Smoke Campaign with the co-operation of the Solid Smokeless Fuels Federation and the Gas and Electricity Boards. The interest of the public was rather disappointing, though the abatement of smoke pollution in a mining district could not be expected to be received with rapturous enthusiasm. The problems of mining areas are peculiar and appreciably greater than elsewhere. The desire for a cleaner air is shared by local authorities and the leaders of the mineworkers' union, but the supply of coal to mineworkers is an integral part of the industry's wages structure. The members of the Consultative Committee are exploring every avenue

to overcome this problem, but success will be hard to achieve. The establishment of smoke control areas in mining districts will not be a simple task. I have previously reported on discussions held with union leaders on this point and the question has since formed the subject of a meeting with representatives of the National Coal Board. The discussion of these problems with the interested parties has served a useful purpose, but the difficulties will not be easily overcome.

There are in this district post war housing estates fitted with approved appliances capable of burning smokeless fuels and which could become future smoke control areas; however it has been felt that the question of miners fuel was one to be resolved before positive action could be taken. One must strive and hope for success, if not immediately, at least in the not too distant future.

Public Cleansing.

Refuse Collection.

A weekly collection of refuse was maintained throughout the year.

2 refuse collecting vehicles—a 12 cu.yd. S and D Freighter and a 7 cu.yd. Karrier Bantam, each with 2 driver and three loaders, are engaged whole time on refuse collection. During holiday periods, etc., a second Karrier Bantam assists on collection duties to maintain the weekly service.

An excess rate of 3½d. per hour continued to be paid throughout the year in an attempt to retain the workmen employed, and no undue labour difficulties were experienced. Refuse collection and disposal, especially in a mining area, remains a dirty occupation and an unattractive one during periods of full employment.

I cannot submit this report without paying a most sincere tribute to the loyalty and devotion to duty of the workmen engaged on all branches of public cleansing. These men perform duties which are not particularly pleasant, but which are nevertheless, very important in protecting the public health. It is to their credit that the service they give is virtually unnoticed by the general public and complaints are extremely rare.

Refuse Disposal.

All refuse collected was disposed of by controlled tipping at the New Byron refuse tip. This tip has been in limited use for a number of years but all disposal has now been concentrated there. I reported last year on the difficulties then being experienced by the refuse vehicles in negotiating the very steep access road to the tip. During the Spring of 1956 arrangements were completed for future tipping to be transferred to an area where all the clay had been extracted and a new access road was constructed by the Council. At this point there is available tipping space for very many years and a fence and gate were erected to restrict unauthorised tipping which had previously been rather a problem.

Towards the end of the year, greater attention was being paid to the segregation of tins and uneconomic scrap from the refuse at the tip and although there was an appreciable increase in scrap tins sold during the financial year, it is hoped to improve on this total during the present year.

Emptying of Cesspools, Pail Closets and Privies

The Council provide a free service, except in one special case, for the emptying of cesspools, pails and privies. This service is carried out during the day-time by a 7 cu. yd. Karrier Bantam fitted with a 300 gallon tank and using a 3 inch trailer mounted mud pump. The contents are conveyed to the sewage works, or to suitable sewer manholes, for disposal.

One day each week, this same vehicle is engaged in collecting waste paper from shops and business premises.

Salvage.

(Referring to the financial year ended 31st March, 1957)
Sales from the 1st April, 1956 to the 31st March, 1957
were as follows:—

			T. Cwts.	Q.	£	s.	d.
Waste paper and cardboard	...	...	143	2	2	1263	17 10
Textiles	...	...	1	13	3	27	0 0
Scrap tins	...	...	23	12	1	93	1 0
Scrap metals	...	...	4	15	0	26	0 0
			173	3	2	£1409	18 10

Sales of waste paper declined by just over 9 tons during the year due to restrictions on deliveries to the mill; collections throughout the country being in excess of mill requirements. A reduction in selling price for waste paper had the effect of cutting the income by just over £100, but the service still yielded a profit of almost £500 to the general rate fund.

These restrictions have continued into the present year, and have been slightly intensified, and I look forward to the time when, once again, an assured outlet can be secured for the whole of the waste paper collected.

There was a reduction in the income from sales of textiles, this arises from the increased activity of rag collectors in the district.

Sales of waste paper during recent years have been as follows:—

1956/1957	143 tons 2½ cwts. sold for	£1,263 17 10
1955/1956	152 tons 7½ cwts. sold for	£1,371 8 3
1954/1955	132 tons 10 cwts. sold for	£1,045 13 5
1953/1954	107 tons 12¾ cwts. sold for	£816 16 4
1952/1953	78 tons 16½ cwts. sold for	£687 18 6
1951/1952	81 tons 5½ cwts. sold for	£1,430 11 6
1950/1951 (part)	23 tons 3½ cwts. sold for	£286 6 10
1949/1950 (part)	31 tons 1¾ cwts. sold for	£102 9 5
	750 tons 4¾ cwts. sold for	£7,095 2 1

THE
OFFICE OF THE
SECRETARY OF THE
NAVY
WASHINGTON, D. C.
JANUARY 1, 1900

TO THE
HONORABLE
MEMBERS OF THE
NAVY
DEPARTMENT
WASHINGTON, D. C.

FOR THE
RECORD

THE
NAVY DEPARTMENT
WASHINGTON, D. C.

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