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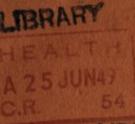
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URBAN DISTRICT OF BRENTWOOD

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR

1948



URBAN DISTRICT OF BRENTWOOD

MEMBERS OF THE COUNCIL

Chairman: Councillor J. F. Hough, M.A. (Cantab), J.P.

Vice-Chairman: COUNCILLOR H. J. FARROW.

Councillors:

F. P. Brinkworth, H. E. Brownett,

V. H. Burton,

Rev. E. W. Byles, B.A., B.D.(Lond.),

D. Campbell,

A. V. Cave (Chairman of the Health Committee),

A. H. Christey,

E. R. D. de Rougemont, J.P.,

P. W. Duck,

J. Durston, S. B. Farrell,

P. W. Hammond,

E. R. Hartley,

J. Ffrancon Jones, J.P.,

H. J. Kirby,

A. J. Lamb,

Miss D. M. Landon (Vice-Chairman of the Health Committee),

T. N. Lavender,

J. R. Meadon,

G. A. D. McTurk,

F. W. C. Salway,

D. C. J. Scott,

W. H. Venner,

R. H. Willard,

S. A. Wilson,

PUBLIC HEALTH STAFF

Medical Officer of Health (Part-time):
B. Fraser Beatson, M.R.C.S., L.R.C.P., D.P.H., D.T.M. & H.

Bacteriologists and Analysts:

The Counties Public Health Laboratories.

Senior Sanitary Inspector:

F. G. SPENCER, M.R.San.I., M.S.I.A., Sanitary Inspector, Meat and Food Inspector and Smoke Inspector, Royal Sanitary Institute's Certificate in Sanitary Science as applied to Buildings and Public Works.

First Additional Sanitary Inspector:

P. T. SHELTON, M.R.San.I., M.S.I.A., Sanitary Inspector, Meat and Food Inspector, Royal Sanitary Institute.

Second Additional Sanitary Inspector:

G. H. ROBERTS, M.R.San.I., M.S.I.A., Sanitary Inspector, Meat and Food Inspector,
Royal Sanitary Institute.
(Appointed 20th January, 1948.)

Clerks and Shorthand-Typists:

Miss D. Griffiths (resigned 31st January, 1948);

Miss B. Brayden (appointed 12th January, 1948, resigned 16th October, 1948);

Miss C. F. CONNATTY (appointed 5th April, 1948);

Miss L. F. Clark (appointed 18th October, 1948).

Annual Report of the Medical Officer of Health for the Year 1948.

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

Mr. Chairman, Madam and Gentlemen,

I beg to present my Annual Report for the year 1948, in accordance with the Minister of Health's Circular 3/49.

In the public health world the outstanding event of the year has been the inauguration of the National Health Service Act, 1946, which commenced to operate on the 5th July, 1948. Under this Act the County Council became the Local Health Authority, but much of the administrative control of public health services has been decentralised from County Councils to Area Health Committees and other bodies.

The most suitable delineation and grouping of health areas have been subjects of controversy throughout the country; their success as administrative units is in course of trial.

In my view an unfortunate feature in the Act is the failure to grasp the opportunity of bringing the Medical Officers of Health of County Districts into these new administrative "set-ups." This means the loss of expert local advice at executive level.

The Area Health Committee is advised by an Area Medical Officer. When the Area comprises a number of districts the result is merely to exchange one remote control officer, namely the County Medical Officer, for another, namely the Area Medical Officer.

The Council of the Urban District of Brentwood has now ceased to be a Local Health Authority, and has become a Local Sanitary Authority. The effect on the work of the Public Health Department has, however, been almost negligible by reason of the fact that, with one exception, the work now being administered by the Area Health Committee was already in the hands of the County Council. That one exception is the Foot Clinic which was set up by the Urban District Council in July, 1944, and has proved its value. The Clinic has now passed out of our control, but will, I hope, be enabled to continue to render good service to the people of Brentwood.

The health of the district has maintained a very satisfactory level. There has been no untoward happening. The general incidence of notifiable diseases was the lowest since 1939. The number of cases of Diphtheria was the smallest I have ever been able to record.

The Sanitary Inspectors, under the able leadership of Mr. F. G. Spencer, have done notably good work and are to be highly commended. The presence of the Second Additional Sanitary Inspector has helped enormously in bringing the district under fuller inspection. I am indebted to the Senior Sanitary Inspector, both for valuable co-operation in the compilation of statistics contained in this report, and for loyal and unfailing co-operation in all health matters throughout the year.

I have to thank my whole staff, both inspectorial and clerical, for valuable services rendered.

I am.

Mr. Chairman, Madam and Gentlemen,
Your obedient Servant,
B. FRASER BEATSON,
Medical Officer of Health.

GENERAL PROVISIONS OF HEALTH SERVICES FOR THE AREA

Laboratory Facilities.

- (a) Routine examinations of milk and water samples were again carried out by the Counties Public Health Laboratories at 66, Victoria Street, London, S.W.1.
- (b) Other laboratory examinations were made at St. Andrew's Hospital, Billericay.

SANITARY CIRCUMSTANCES IN THE AREA.

Water Supplies.

From Mains

Main water supplies to the area are provided principally by the South Essex Waterworks Company, and to a less extent by the Southend Waterworks Company. These supplies were satisfactory in both quality and quantity.

Six samples taken from the South Essex Waterworks Company's mains showed the water to be clear and bright in appearance and of very satisfactory bacteriological purity and, therefore, suitable for drinking and domestic purposes. Chemically, the water was free from metals, apart from a negligible trace of iron, but it was hard in character, though not to an excessive degree. The average hardness was:—

Temporary, 175; Permanent, 77.5; Total, 252.5 (calculated in parts per million).

Six samples of water taken from the Southend Waterworks Company's mains showed the water to be clear and bright in appearance and of a very satisfactory bacteriological purity, and suitable, therefore, for drinking and domestic purposes. Chemically, this is a soft water, the average hardness being:—

Temporary, 25; Permanent, Nil; Total, 25 (calculated in parts per million).

The number of properties which obtain their water supply from standpipes has been further reduced, as during the year eight houses were provided with a piped supply from the mains, and taps installed inside the houses.

Sanitary Inspection of Area.			Inspections.	R	e-inspections.
Housing Regulations		 	 34		347
Housing (Overcrowding Prov	visions)	 	 8		-
Council Houses		 	 13		-
Allocation of Council Houses		 	 402		48
Moveable Dwellings		 	 6		3
Sanitary Defects		 	 376		1,293
Verminous or Dirty Premise	es	 	 38		24
Infectious Diseases		 ***	 26		16
Water Supply		 	 67		48
Drains-Inspected		 ***	 66		59
Tested		 	 30		8
Sewers		 	 19		11
Cesspools		 	 28		6
Sanitary Conveniences-Scho	ools	 	 1		-
Factories-Power		 	 64		31
`Non-power		 	 29		2
Outworkers' Premises		 	 4		-
Bakehouses		 	 15		_
Rat Infested Premises		 	 105		101
Ponds, Ditches and Watercou	ırses	 	 39		40
Swine, Fowls, etc		 	 9		10
Accumulations of Refuse		 	 16		9
Refuse Tips		 	 19		3
Requisitioned Property		 	 12		1
Miscellaneous Visits		 	 270		16
Sewers-Rat Destruction		 	 14		_

Canitama Inc.			75						
Sanitary Inspection Fair Grounds		ntinue	ed)			Inspectio	ns. R	e-inspection	s.
Offensive Trades					•••	4		noimode	
Hairdressers' Shops						1 12	1007		
Swimming Pools				***		8		Mary To	
•	357 1055								
						1,735		2,076	
Food Inspection.						100		- Casasa um	
Slaughterhouse	s						20		
							116		
Horseflesh Sho	*				***		2		
Provision and o		hops	***	***			103		
Food Preparing Fried Fish Sho			***		***	515	3		
Dairies and Mi			Military No.	00000			2 16		
Ice-cream Pren					- :::		132		
Knackers Yard				and and			19		
0 1 1						0110	152		
Cafés and Rest	aurants						182		
Food Sampling.									
Milk	***		***				47		
Ice-cream			***				31		
Water				444	***	***	15		
							840		
Number of	Complaints	receiv	ed = 5	40.			010		
			USING						
1. (a) Number of					7		ts (un		
	Health or I							37	
(b) Number of								2,05	
2. Number found								20	1
3. Remedy of defe									
	defective dw						_		0
	nal action by					neir om	cers	17	4
4. Action under St (a) Proceedings						as Hou	aina	\ at	
(a) Proceedings	s under Sect	nons	9, 10 8	ina 16	01 11	ne nou	sing A	ACL,	
	er of dwellin	ghous	es in r	espect	of wh	ich not	ices w	ere	
	requiring re							*3	9
	er of dwelli					ndered	fit a	fter	
service	e of formal r	otices	:						
	y Owners								8
	y Local Auth				Owne	ers		***	2
(b) Proceeding	er of dwellin				of wh	ich not	iona u	oro	
	requiring de			-		nen not	ices w		8
	er of dwellin					s were	remed		
	service of fo					1000	FIRM		
	and the same of th								8
	y Local Auth								9
	addition to t								
	Section 12 o								
	demolished u having been r				ne Ac	t, the L	emon	don Orde	1
					uone e	ormed .	molon	Section 7	5
	ddition to the								
	dustbins.]	rical	2100	, 2000,	roqu	8 P	0.711010	J. He	

INSPECTION AND SUPERVISION OF FOOD SUPPLIES.

Milk Sampling.

Past	eurised Milk—						
	Number of Samples take	en					16
	Number of Samples satis						16
Unde	esignated Milk—						
	Number of Samples take	en					31
	Number of Samples sat	isfactory					28
	[Three Samples failed to	pass the c	oliform	test,	one Sar	nple	
	also contained exce						
Ice-cream S	Sampling.						
	Number of Samples take	en					31
	Number of Samples sati	sfactory					27
Meat and C	Other Foods.						
	Number of Inspections				1		138
	Total weight of meat an	d other foo	dstuffs	conde	mned:-	-	
	Tons.	Cwts.	Qrs.		Lbs.		
	1	11	0		201		
Knackers Y	ards.						
	Number of Premises				00		1
	Number of Inspections						19

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS DISEASES.

Notifiable Diseases.

As already pointed out I am able to report a total incidence of notifiable diseases which has only once been bettered since 1939. The highest peak was touched during the war year of 1941, when the notifications totalled 1,790. This figure was mainly the result of a widespread epidemic of Measles. In 1948 the total of all notifiable diseases was 242.

Diphtheria.

A noteworthy feature of this report is that only two cases of Diphtheria occurred during the whole year, the lowest figure ever recorded in the district. That this is largely due to the cumulative effect of immunisation can hardly be doubted. Such a figure, while being most satisfactory, is, however, no cause for complacency. The fight against Diphtheria must be waged unceasingly. Every child should be immunised as soon as possible after reaching the age of nine months, and should thereafter receive re-inforcing injections at appropriate ages. The aim is a nil return for this dangerous disease.

The responsibility for Diphtheria immunisation is now entirely in the hands of Local Health Authorities. It is for them to provide propaganda and service. This Council instituted Diphtheria immunisation, on my advice, in 1936, and the work has been carried on consistently since then. In 1945 the County Council took over responsibility, but where local schemes were considered to be satisfactory, as was the case in Brentwood, no change was made in current arrangements. With the coming into being of the new National Health Service Act, it is for the Local Health Authority to organise Diphtheria immunisation through its Area Health Committee.

Pending any new scheme, I was asked in August to carry on the actual work of immunisation as heretofore at the County Council's Clinic.

Attendances at the Immunisation Clinic from the 1st January, 1948, to the 4th July, 1948, were as follows:—

Number of children who received their second injection	35 170 Immunisation
Number of children who received both injections	completed.
Number of children who received their first injection	23
Number of children who received a "boosting" injection	68
Total number of children treated	261
Total number of injections given	396

Scabies.

Before the second world war no provision for the treatment of persons suffering from scabies was found to be necessary in this District beyond the facilities for children at the County Council's Clinic.

During the war a Scabies Order was made by the Minister of Health in 1941 to deal with the possible spread of this skin infection resulting from mass movements of population, evacuation, overcrowding, and other problems of total warfare.

A Scabies Clinic was set up in November, 1943, in temporary accommodation, first at "Oakbank" First Aid Post and later at the Doddinghurst Road Depot, for the treatment of persons of both sexes and any age. No regular sessions could be held for lack of cases. A female nurse or male attendant treated the cases as and when necessary.

This Clinic was closed in June, 1948, thus reverting to the pre-war position. Figures of attendances during the first six months of the year were as follows:—

Men.	V	Vomen.	Boys.	Girls.	Total.
5		7	 10	 8	 30

MISCELLANEOUS.

Foot Clinic.

Table of Attendances-

The following figures show the number of persons treated between the 1st January, 1948, and the 4th July, 1948:—

		New P	atients.				Attendanc	es by:	
Ad	fults.	Ch	ildren.	0.	A.P.	New	Old		
M.	F.	M.	F.	M.	F.	Patients.	Patients.		Total.
25	72	3	12	14	29	 155	1,939		2,094

Swimming Pools.

The following Samples were taken from Swimming Pools and submitted to bacteriological and chemical examination:—

		Sa	tisfacto	ry. Un	satisfactory.	
Brentwood Urban District Counc	il	 	5		_	
Ursuline High School		 	1		-	
Brentwood Boys' School		 	1		-	
County High School for Girls		 	1		-	
			8		- 2010	

Factories Act, 1937.

1. Inspections—

				1	Number	of	Notices
Pr	emises.		Inspections.	No	tices ser	ved.	Complied.
Factories	(Power)	 	95		8		4
Factories	(Non-Power)	 	31		2		1

2.	Defects Found—							
	Particula	ars.				Found.		Remedied.
	Lack of Cleanliness					3		3
	Defective Sanitary	Accommod	lation			2		1
	Insufficient Sanitary	Accommo	dation			- 4		1
	Defective Floors					1		_
3.	Outworkers-							
	Number of Outwork	kers						12
	Number of Inspecti	lons						4
		itimate 425 226 gitimate 19 6 Total. M 7 5						
Live I	Births.			Total.		M.		F.
	Legitimate			425		226		199
	Illegitimate			19		6		13
				Total.		M.		F.
Stillbi	rths			7		5		2
	The Stillbirth rate	per 1,000	total b	irths wa	s 15.5	2.		
				Total.		M.		F.
Death	s			275		140		135
Deaths at Various Ages. Age Groups. No. of Deaths.								
	Age Groups.				No.	of Death	s.	
				M.		F.		Total.
	Under 1 year .			5		5		. 10
				2		1		3
	2 and under 5 .			_		_		_
	5 and under 15			_		-		-
	15 and under 25			4		1		5
	25 and under 35			1		3		4
	0= 1 1 4=			5		7		12
	15 1 1 55			17		8		25
	1 1 05							47
		500		- 10002				67
								102
	to and apwards	Continue Common Continue Continue						
				140		135		275
Canso	s of Death.				No	of Death	16	
Cause		eath.		M	140.		13.	Total.
		7.77.77						1
								12
			ystem					1
	C							50
								2
								42
								82
				40		99		04
			tory			0		14
								14
	D							6
								8
				10.77				2 3
						1000		6
	CONTRACTOR OF THE CONTRACTOR O			1		2	***	3
						0		0
				_	***			3
								2
					•••			3
								7
	All other Causes .			15		13	•••	28
				140		135		275
				175				2.3

ANALYSIS OF NOTIFIABLE DISEASES UNDER AGE GROUPS.

	Total.	7	32	60	63	00	1	122	- 72	4	242
	65 and over.	1	1	1	-	1	1	1	1	1	H
	45—65	1	11/	2	1	н	1	1	1	1	4
	35 45 45	1	1,	1	1	1	1	1	1	1	62
	35	1	1	1	1	910	1	53	SI.	က	∞
s.	15-20 20-		1	1	1	1	1	1	1	1	-
Age Groups.	5-10 10-15 15	1	9	1	1	н	1	1	2	100	10
Age	5-10	1	20	1	1	П	1	48	15	100	85
	45	1	1	1	1	1	1	21	18	100	39
	3 4	1	2	1	1	1	1	13	16	about the last	31
	2 3	н	5	1	1	1	1	16	13	1	32
	1-2	1	1	1	n par	esp.	rior	12	5		17
	Under 1 1-2	1	1	1	1	1	1	6	2		12
		:	:	:	1		:	0.0	:	91	Hard H
	Diseases.	:	wer	:	:		Pyrexia	Cough			To you
	Q	Diphtheria	Scarlet Fever	Erysipelas	Dysentery	Pruemonia	Puerperal Pyrexia	Whooping Cough	Measles	Jaundice	Jan Sala



