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BRIXWORTH RURAL
DISTRICT COUNCIL



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ANNUAL
REPORT

OF THE

MEDICAL OFFICER
OF HEALTH

FOR THE

YEAR 1964

JOAN M. ST. V. DAWKINS
M.B., B.S., D.P.H., D.C.H.

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Council Offices,
Brixworth,
Northampton.

To THE CHAIRMAN AND MEMBERS OF THE
BRIXWORTH RURAL DISTRICT COUNCIL.

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present my ninth Annual Report as Medical Officer of Health, incorporating that of the Public Health Inspector.

The vital statistics for the year 1964 show that there were 247 deaths, 38 more than last year. This gives a standardised rate of 10.27 compared with the national figure of 11.3. Female deaths exceeded male deaths by 53 compared with 28 last year. Details and comments on the causes of death are on pages 10, 11 and 12.

The total number of births was 307 showing an increase of 19 on last year's figure of 288, of which 14 were illegitimate, 1 less than last year. There were 6 infant deaths compared with 3 last year, 3 were under one month of age. The infant death rate rose to 19.54 compared with 10.42 last year, and is below the national figure of 20.0.

There was a decrease of infectious disease, notifications falling from 377 to 160, due to biennial incidence of measles which fell from 342 to 136 cases. Once again no poliomyelitis is recorded. There were no cases of dysentery and one only of food poisoning. Infectious hepatitis became locally notifiable as from July 1962 and two cases have been notified. The outbreak of typhoid fever which occurred in Aberdeen necessitated the tracing of all corned beef of the infected batch and its withdrawal from retail sale. In addition the need for the strictest hygiene in the preparation and handling of food was once more emphasised at this time.

This year 6 people died from pneumonia, 9 from bronchitis and none from influenza. There were 2 deaths from respiratory and 1 from non respiratory tuberculosis. The respiratory infections are, in these days when many effective antibiotics are freely available, seldom a cause of death, those succumbing being usually aged or suffering from previous chronic illness. There remain, however, a cause of considerable morbidity and influenza and bronchitis are still the two commonest causes for absence from work. It is well to remember too that in the last decade and a half the scourge of tuberculosis has been vanquished by the availability of antibiotics and effective preventative measures, such as isolation of infectious cases, vaccination, tubercular testing of cattle, mass radiography, good housing and nutrition.

The County Council no longer break down the statistics for immunisation for individual districts, local figures are therefore not available. The need for every child to receive adequate immunisation must, however, be stressed with each new birth. Infants should receive immunisation to diphtheria, whooping cough, tetanus, poliomyelitis and smallpox with adequate booster immunisation until school life, and at thirteen years all schoolchildren should be vaccinated for tuberculosis.

Housing development continued. Private enterprise produced 92 houses, 61 less than in 1963. making a total of 1262 since the war. A further 91 houses were being erected at the end of 1964.

Improvement grants were made on 19 properties, an increase on the figure for 1963. During the year "Standard Grants" were paid on 25 properties.

The sewerage schemes for Brixworth, Cottesbrooke and Creaton were completed at the beginning of 1964. Schemes for Thornby and the extension of the works at Hollowell were being actively prepared throughout the year. In all 28 villages now have modern sewage disposal systems. A good record for the District.

A gradual and satisfactory environmental control of disease is being achieved, and an endeavour may now be made to assess the present trends in living which are the enemies of health. Many of the pressures, considered in the past to be the causes of human misery, have been lifted, and the community is increasingly able to afford and be in receipt of extra benefits. That these benefits may themselves be the cause of further human misery must give us pause in the complacent hope that we are achieving an Utopian Society.

The prevention of ill health and unhappiness, will lie increasingly in the power of the individual himself and the choice made will depend, to some degree, on the knowledge that he possesses, and the guidance given him in the use of this knowledge. The role, therefore, of the Doctor particularly those whose practice lies in prevention, should be that of health educator. This Report, once of necessity a statistical analysis of environmental control may now additionally be used for the purpose of health education. I endeavour, therefore, each year to lay stress on matters relating to general health as well as those that are purely of local concern.

Man may soon be renamed, not homo sapiens, but a new species, homo sedentarius. A being whose calorie intake far exceeds his energy output and who, as a result will become specially prone to those degenerative diseases that appear to be increasing in prosperous societies. The consumption of concentrated carbo-hydrate has only lately been considered as a factor which may contribute or even cause early degenerate changes or disease in the body, among which, arterial disease, resulting in coronary thrombosis and strokes, diabetes, obesity and dental decay may

at present be cited. Other morbid conditions yet unknown may similarly be related to chemical additives, hormones and antibiotics in the diet.

The motor car, both by causing accidents and by lack of physical exercise which results from its increasing use, is another hazard in our lives. In this country last year, over 7,000 people were killed and many more thousands injured. Each year, this figure rises, and if a world total of killed and mutilated was assessed, it would be seen that more have died as a result of the motor vehicle than have been killed in battles over many years. It is a sad reflection, that the development of mental naturity is far behind the ingenuity necessary for the invention of machines.

Deaths from accidents in the home, maintain a similar high figure. In this case, the majority involved are the young and the elderly.

The incidence of lung cancer rises annually. Last year there were 24,434 deaths from cancer of the lung. In 1939 there were 6,214 deaths. The relationship between cancer of the lung and heavy cigarette smoking is now accepted and unimpeachable. Yet smoking continues, and many young people start this habit each year. Were these deaths caused by unchecked infectious disease, there would be a national outcry and a clamour that such an outrage had not been prevented. Yet when action is left to individual choice, the habit remains and the death rate continues to rise. It is the duty of all who influence the young, to show them by their own example, that smoking is harmful. Parents, doctors and teachers who smoke heavily cannot hope that children will not follow their example.

Finally in the field of mental health, there appears, despite the benefits of the Welfare State, to be little sign that mental and psychiatric illness are diminishing. The increase in delinquency and crime, the divorce rate and the high figure of convictions for cruelty to young children, indicate that a community, though experiencing ever increasing material prosperity, still lacks stability. The causes here are more complex and the remedies may be obscure. Perhaps living can become too easy and without the stimulation of the necessity for endeavour, a society may gradually decline.

In conclusion I wish to thank the members of the Public Health Department for their excellent work during the year, and for their help in the compilation of this report. In addition, I wish to extend my grateful thanks to the Chairman of the Council, and the Chairman and Members of the Public Health and Housing Committees for help and encouragement.

Finally, I express my appreciation to the County Medical Officer

of Health for his ready co-operation in the supplying of information.

I have the honour to be,

Your obedient Servant,

JOAN M. ST. V. DAWKINS.

Medical Officer of Health.

BRIXWORTH RURAL DISTRICT COUNCIL

MEMBERS OF THE PUBLIC HEALTH COMMITTEE WHO SERVED DURING THE COURSE OF THE YEAR.

Mr. E.T. Gardner (Chairman)

Mr. J.R. Hart (Deputy Chairman)

Dr. A.E. Thomas, J.P.
(Chairman of the Council)

Captain R. Bailey, O.B.E., R.N.
(Vice-Chairman of the Council)

Mr. G.T. Bennett

Mr. D.S. Mason

Major P. de L. Cazenove, T.D.

Mr. T.R. Pegram

Mr. E.P. Cowling

Mr. J.H. Rishworth

Mr. R.H. Dickins

Mrs. E.M. Thwaites

Mr. J.T. Holmes

Mr. E.A. Turney

Mrs. J.D.R. Lambley

Mr. R. Wallbank

Mrs. W. Mahon

PUBLIC HEALTH OFFICERS OF THE LOCAL AUTHORITY

Medical Officer of Health:

JOAN M. ST. V. DAWKINS, M.B., B.S., D.P.H., D.C.H.

also holds appointments of

Medical Officer of Health, Daventry Rural District
Council, Daventry Borough Council, Assistant County
Medical Officer of Health and School Medical
Officer.

Senior Public Health Inspector:

F. A. RUSSELL, F.F.S., M.R.S.H., M.A.P.H.I.

Assistant Public Health Inspector:

R. S. LINLEY, A.R.S.H.

SUMMARY OF VITAL STATISTICS.

Area (in acres)	...	82,944
Population	...	18,920
Number of separate dwellings	...	6,522
Rateable Value 1964	...	£548,366
Product of a Penny Rate	...	£2,220

<u>LIVE BIRTHS</u>	<u>Male</u>	<u>Female</u>	<u>Total</u>	<u>Rate per 1000 estimated</u>	<u>Rate for England and Wales</u>
Legitimate	155	138	293		
Illegitimate	<u>9</u>	<u>5</u>	<u>14</u>		
	<u>164</u>	<u>143</u>	<u>307</u>	16.2	18.4
				S.R. 17.3	

<u>STILL BIRTHS</u>				<u>Rate per 1000 Live and Still Births</u>	
Legitimate	1	-	1		
Illegitimate	-	-	-	3.25	16.3

<u>TOTAL LIVE AND STILL BIRTHS</u>			
Legitimate	156	138	294
Illegitimate	9	5	14

INFANT DEATHS

Deaths under 1 year per 1000 live births.

	<u>Male</u>	<u>Female</u>	<u>Total</u>	<u>Rate per 1000 Live Births</u>	<u>Rate for England and Wales</u>
Legitimate	4	2	6	19.54	20.0
Illegitimate	-	-	-	Nil	

NEONATAL DEATHS

Legitimate	3	-	3	9.77	13.8
Illegitimate	-	-	-		

DEATHS OF INFANTS UNDER ONE WEEK

Legitimate	-	3	3
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Illegitimate Live Births per cent of total live births - 4.78

Maternal Mortality (including abortion) NIL
 " " per 1000 live and stillbirths NIL .25

DEATHS

	<u>Male</u>	<u>Female</u>	<u>Total</u>	<u>Rate per 1000 population</u>	<u>Rate for England and Wales</u>
	97	150	247	13.0	11.3
				S.R. 10.27	

TABULATED SUMMARY FOR PREVIOUS YEARS

Year	Estimated Population	<u>Births</u>		<u>Deaths</u>			
		No.	Crude Rate	<u>Under 1 year</u>		<u>All Ages</u>	
				No.	Rate	No.	Crude Rate
1954	18300	266	14.51	4	15.03	257	14.04
1955	18440	276	14.96	5	15.11	270	14.64
1956	18620	260	13.96	6	23.08	220	11.82
1957	18860	262	13.89	7	26.72	240	12.72
1958	19170	303	15.80	5	15.10	226	11.80
1959	19270	283	14.94	3	10.4	214	11.11
1960	19470	310	15.92	2	6.45	229	11.76
1961	18480	274	16.77	8	14.59	229	12.39
1962	18620	296	15.90	2	6.76	229	12.29
1963	18800	288	15.32	3	10.42	209	11.12
1964	18920	307	16.2	6	19.54	247	13.0

SECTION A.

NATURAL AND SOCIAL CONDITIONS.

The Rural District is centrally situated in the County of Northamptonshire, extending in the south from the County Borough of Northampton and in the north to the Leicestershire border. The character of the area is largely rural and the main industry is agriculture. A few light industries are scattered throughout the district. Open cast iron workings are present in the vicinity of Pitsford and Brixworth.

The district presents a picture of largely unspoilt rural country, with many woods, set in an undulating countryside enlivened by the stretches of water of the reservoirs, which are a characteristic of the area.

POPULATION. The Registrar General gives the estimated population for the mid-year 1964 as 18920, an increase of 120 on the population of the previous year. The natural increase in population, the excess of births over deaths was 60.

DEATHS. The total number of deaths assigned to the District for the year was 247, 38 more than in 1963. The crude death rate based on the mid-year, population was 13.0 compared with 11.12 in the previous year. The following table has been compiled for comparison with the four previous years :-

<u>Years</u>	<u>Total</u>	<u>Male</u>	<u>Female</u>	<u>Recorded</u>
1960	229	99	130	11.76
1961	229	84	145	12.39
1962	229	100	129	12.29
1963	209	91	118	11.12
1964	247	97	150	13.0

In order to compare the mortality in the District with the mortality for England and Wales it is necessary to make a correction to allow for the difference in age and sex distribution of the two populations. This is done by applying to the crude death rate of the District an "Area Comparability Factor" which has been estimated by the Registrar General as .79 for this District. In addition the area comparability factors have been adjusted specifically to take account of the presence of any residential institutions in the area. There are a number of institutions in this area for old people and this adjustment is therefore very necessary in order to obtain a true picture of the area mortality.

The Standardised Death Rate, therefore, is 10.27 and below the figure of 11.3 for England and Wales.

Causes of Death.

The causes of death are shown in the statistical table on page 12 and are classified under thirty six headings, based on the abbreviated list of the International, Statistical Classification of Diseases, Injuries and Causes of Death 1948, as used for England and Wales. This year the Registrar General has listed the Causes of Death in age groups, of under 1 year, then in quincades to fifteen and thereafter in decades to 75 and over. Male and female deaths are also shown.

The vital statistics for the year show that there were 247 deaths, 38 more than last year. This gives a standardised rate of 10.27 compared with the national figure of 11.3. Female deaths exceeded male deaths by 53. The great preponderance of deaths from diseases of the heart and circulation is once more evident, making a total of 147 of which 49 died from coronary disease alone, while 47 died from other heart disease, a further 36 from vascular lesions of the nervous system, and 15 from hypertension and other circulatory diseases.

Disease of the heart and circulation constitute therefore over one half of the total deaths. Cancer remains again the second cause of death, taking this year 38 persons, an increase of 8 on last year. 9 died (7 males) from cancer of the lung, an increase of 2 on last year. Disease of the heart and circulation together with cancer cause in the district 74% of the total deaths.

The trend of principal causes of death continues therefore towards the mainly degenerative and neoplastic conditions, and away from infectious disease now largely controlled by the wide number of antibiotic and other drugs. However, 50 persons out of a total of 247 deaths died before the age of 65. The causes of their deaths were predominately either due to respiratory infection, accidents, arterial disease or cancer.

Accidents in the home are all preventable, yet last year over 7,000 died as a result of such an accident, and no doubt countless thousands were injured. Those affected are usually the young and the aged. Mothers of young children need always to be on the look out for hazards, particularly in relation to burns and scalds, accidental poisoning and electricity. The aged have the problem of failure of sight, hearing, smell and balance, and their environment needs organising to combat these deficiencies.

Deaths as a result of road accidents are mounting in all prosperous countries. In addition, thousands are crippled every year. The benefit originally derived from the invention of the internal combustion engine is now becoming an increasing hazard, and unless a more mature mental attitude can be inculcated in drivers the toll of

deaths and injury will rise as the number of vehicles on the roads increase. The angry, careless, and selfish individual driving a motor vehicle can be a serious menace and the great majority of accidents would not occur if each driver resolved that such failures of temperament would not occur. The accident rate in a community can be a gauge of its mental maturity. The great majority of deaths are caused, however, by the degenerative diseases. People are living longer and the diseases of old age are more evident. However, in a prosperous well fed and largely sedentary society the emergence of early degenerative disease is now becoming significant. The consumption of highly refined, high calorie foods far removed from natural diet together with a largely sedentary life when work and leisure may be passively spent is probably the cause of the rise in early arterial disease, particularly in men. The high incidence of diabetes may also be related to this cause. In the endeavour to detect the aetiology of the diseases of civilisation one must look for the grosser departures of living habits from the natural order of things. The concentration of carbohydrate has recently been suggested as a possible malefactor in this respect, and it should be borne in mind that carbohydrate occurring in nature is almost always blended with bulky quantities of cellulose and fibre. So far those advising on diet have not emphasised the need for whole grain cereals in preference to refined cereals. It has been found that the natives in primitive societies seldom suffer from degenerative disease, obesity and hypertension, but if they become urbanised and live on western diet which includes white bread, fish and chips, sweets and aerated waters a high incidence of degenerative disease occurs.

Finally there are the deaths, the causes of which as yet evade us. These are largely in the group of cancers. There remains one condition, that of cancer of the lung which has been proved to have a relationship with cigarette smoking. Last year 24,434 people died of lung cancer. Each year this figure rises. 9 were from this district. Yet cigarette smoking declines little. It is the duty of every parent, teacher, and those who influence the young, to see that each succeeding generation of young people are aware of the hazards that await them when they start regular smoking.

The respiratory infections still take their toll, though less than formerly. The great majority of deaths from pneumonia are in those whose health is undermined by other causes and is as such only a terminal event.

M O R T A L I T Y T A B L E

<u>Causes of Death</u>	<u>Male</u>	<u>Female</u>	<u>Total</u>
1. Tuberculosis, respiratory	1	1	2
2. Tuberculosis, other	1	-	1
3. Syphilitic disease	-	-	-
4. Diphtheria ..	-	-	-
5. Whooping Cough ..	-	1	1
6. Meningococcal infections	-	-	-
7. Acute poliomyelitis	-	-	-
8. Measles ..	-	-	-
9. Other infective and parasitic diseases ..	-	-	-
10. Malignant neoplasm, stomach	3	2	5
11. Malignant neoplasm, lungs, bronchus ..	7	2	9
12. Malignant neoplasm, breast	-	3	3
13. Malignant neoplasm, uterus	-	-	-
14. Other malignant and lymphatic neoplasms ..	9	12	21
15. Leukaemia, aleukaemia	-	1	1
16. Diabetes ..	-	2	2
17. Vascular lesions of nervous system	13	23	36
17. Coronary disease, angina	21	28	49
19. Hypertension with heart disease	2	3	5
20. Other heart disease	10	37	47
21. Other circulatory disease	3	7	10
22. Influenza ..	-	-	-
23. Pneumonia ..	4	2	6
24. Bronchitis ..	5	4	9
25. Other diseases of respiratory system ..	-	1	1
26. Ulcer of stomach and duodenum	1	-	1
27. Gastritis, enteritis and diarrhoea	-	1	1
28. Nephritis and nephrosis	-	-	-
29. Hyperplasia of prostate	1	-	1
30. Pregnancy, childbirth, abortion	-	-	-
31. Congenital malformations	2	1	3
32. Other defined and ill-defined diseases ..	6	14	20
33. Motor vehicle accidents	3	1	4
34. All other accidents	4	3	7
35. Suicide ..	1	1	2
36. Homicide and operations of war	-	-	-
	-----	-----	-----
	97	150	247
	====	====	====

Associated Mortality Statistics :-

	<u>Male</u>	<u>Female</u>	<u>Total</u>
STILL BIRTHS	1	-	1
DEATHS of infants under 1 year	4	2	6
DEATHS of infants under 4 weeks (included in previous figure)	3	-	3

BIRTHS. The number of live births was 307 compared with 283 in 1963. The rate per thousand of the population was 16.2. Applying the Registrar General's Area Comparability Factor for births (1.07) to this figure the Standardised Birth Rate obtained for this district - 17.3 compared with 18.4 for England and Wales.

STILL BIRTHS. The number of still births during 1964 was 1 male. The resultant rate for the district is 3.25 which is less than the figure for England and Wales. The rates for the past five years are given in the following table (per 1,000 live and still births) by way of comparison.

STILL BIRTH RATE.

<u>1960</u>	<u>1961</u>	<u>1962</u>	<u>1963</u>	<u>1964</u>
12.90	21.90	10.03	17.37	3.25

ILLEGITIMATE BIRTHS. There were 14 illegitimate births assigned to the district during the year (9 males and 5 females), compared with 15 in 1963. Shown as a proportion of the total number of live births this represents 4.55 per cent.

MATERNAL MORTALITY. No deaths associated with pregnancy or childbirth were recorded during the year.

INFANT MORTALITY. The number of infants who died before reaching their first birthday was 6 (4 males and 2 females), three more than in 1963. The resultant rate is 19.54 and is less than 20.0 the figure for England and Wales.

DEATH RATE UNDER 1 YEAR PER 1,000 LIVE BIRTHS.

<u>1960</u>	<u>1961</u>	<u>1962</u>	<u>1963</u>	<u>1964</u>
6.45	14.59	6.76	10.42	19.54

NEONATAL DEATH RATE. The number of infants who failed to survive for four weeks after birth was 3 males. This gives a rate per 1,000 live births of 9.77 or 0.98 per cent. This is very much lower than the rate of 13.8 for England and Wales.

The Registrar General gives a further sub-division, in his returns this year, of deaths of infants under one week of age. There was one death in this group.

These deaths are included in the Infant Mortality Rate.

TABLE OF CAUSES OF INFANT DEATHS.

	<u>Neonatal</u>	<u>1 - 12</u> <u>months</u>
1. Chest Infection		
Cardiac Fibro elastosis		1
2. Congenital Heart Disease		1
3. Atelectasis	1	
Prematurity		
4. Asphyxia	1	
Atelectasis		
5. Cyanotic Congenital Heart Disease	1	
6. Suppurative Meningitis		1

SECTION B.

GENERAL PROVISION OF HEALTH AND WELFARE SERVICES.

LABORATORY SERVICE. Laboratory work in connection with the diagnosis and control of infectious diseases is carried out at the Emergency Public Health Laboratory in Northampton under Dr. Hoyle, and is free of cost to the Local Authority. An efficient and helpful service is always provided, and we thank Dr. Hoyle for constant co-operation.

INFANT WELFARE CENTRES. The following centres are held at the places and dates indicated. Your Medical Officer of Health is in attendance in her capacity as Assistant County Medical Officer at Brixworth and Welford.

BRIXWORTH INFANT WELFARE -

3rd. Friday each month at Village Hall.

WELFORD INFANT WELFARE -

4th Thursday each month at Village Hall.

BOUGHTON INFANT WELFARE -

2nd Wednesday each month at Boughton Institute.

MOULTON INFANT WELFARE -

1st Tuesday each month at Manfield Hall.

SPRATTON INFANT WELFARE -

4th Tuesday each month at Women's Institute.

The Mobile Caravan Clinic which was instituted to supply services to those villages who were without access to existing Clinics, now operates at Ravensthorpe, East Haddon, Little and Great Brington, Holcot, Walgrave, Old and Hannington.

AMBULANCE SERVICE. General medical and surgical cases are removed by the County Ambulance Service, under the control of the County Council. Infectious diseases cases are also removed under the same arrangements.

NURSING IN THE HOME. The services of District Nurses, Mid-wives and Health Visitors are provided by the County Council, and the area is well covered. The Home Help Service is also provided by the County Council. This is a very necessary service, and affords considerable benefit to the Community both for domiciliary maternity cases and

particularly in this area in the care of old people, who can remain comfortably at home, and who, without this help would be in Institutions.

GENERAL HOSPITAL ACCOMMODATION. The Oxford Regional Hospital Board is responsible for the provision of hospitals and out patient clinics.

All medical, surgical and paediatric and gynaecological cases are treated at Northampton General Hospital.

Maternity cases are treated at the Barratt Hospital, which forms part of the General Hospital.

Accident and orthopaedic cases are treated at the General Hospital, and the latter also at the Manfield Hospital, Northampton.

Two Geriatric Units for old ladies are situated at Pitsford within this district.

ISOLATION HOSPITAL. Cases of Infectious Disease which require isolation are treated at the Harborough Road Isolation Hospital, Northampton, which comes under the administration of the Oxford Regional Hospital Board. Cases of tuberculosis are treated at Creton Hospital.

WELFARE OF OLD PEOPLE. National Assistance Act, 1948. Section 47 and National Assistance (Amendment) Act, 1951.

Under this section the Council is responsible for the removal to suitable premises of persons needing care and attention. No action was necessary, under this Act, this year, though a number of old people were kept under supervision, and arrangements made for them to enter Institutions, or to be looked after by other means. We are fortunate in this district in having two comfortable country houses at Pitsford as hospitals for old ladies. We have no accommodation in the district for males who have either to go to St. Edmunds Hospital, Northampton, or to Danetre Hospital, Daventry.

SERVICES FOR OLD PEOPLE.

The following provide services for old people -

1. The National Health Service.

(a) General Practitioner Service.

(b) Hospital and Specialist Services including the Almoner Service. In this district there are two geriatric hospitals for old ladies at Pitsford.

2. The County Council.

(a). The Health Department.

1. District Nurses.
2. Health Visitors.
3. Home Helps.
4. Chiropody Service.
5. Certain home equipment.

(b). The Welfare Department.

1. Part III accommodation and homes. There are none in this District.
2. Special services for blind etc., and home fittings.

3. The National Assistance Board.

Financial help.

4. The District Council.

Homes for the aged, flats and in some cases flatlets with warden supervision.

5. Voluntary Organisations.

These are many and services vary in different areas. They include holiday schemes in which old people are taken on seaside holidays in off season times. The Darby and Joan Clubs, "Meals on Wheels" Service, and Home Visiting. The Womens Voluntary Service very often undertake many of the above duties, while in other areas local voluntary Committees run the various organisations. The Rural Communities Council together with the Old Peoples Welfare Committee provide co-operation between the various services.

Your Medical Officer of Health having a special interest in the welfare of the aged and by virtue of her appointment both to the District and the County Council and by her relationship with other Medical colleagues endeavours to fulfil the function of co-operation and co-ordination between these many agencies. Many cases of breakdown can be prevented by early application of these services.

Voluntary organisations have also requested that your Medical Officer should give lectures and talks and such invitations are always accepted.

6. Darby and Joan Clubs.

The 'Evergreen Club', Brixworth.

This Club has approximately 56 members, who during 1964 were provided with a varied and interesting programme of activities. Visits were arranged to the Pantomime and Spring Show at the Coventry Theatre, and in the summer a day trip was organised to Oxford and Abingdon.

Mrs. Green, the Club Treasurer, reports that the exchange visits between the Brixworth and Harpole Clubs, which were a popular feature of the 1963 calendar, were again included in the programme for 1964.

The Chiropody Service now visits every six weeks and many members are taking advantage of its facilities.

Moulton Darby and Joan Club.

A Club whose activities have not previously been reported holds its meetings on alternate Wednesdays at the Manfield Hall, Moulton, and according to Mr. Chappell, the Club Leader, now has more than 80 members. This Club which has been in existence since 1957 caters for all tastes by including concert parties, educational demonstrations, film shows, and day excursions into the year's list of events.

A visit from the Raunds Club and the Annual Party were two events of the year, particularly well supported by the members.

Fifty two members take advantage of the Chiropody Service, 17 of whom are treated at their own homes.

The Walgrave Club.

As in previous years the Club continues to meet each Monday afternoon. Mrs. Lewis, the Club Leader, states that all activities are well attended, even though the Club has lost some of its older members. The most popular features of its 1964 programme were the concert party and various mystery tours arranged.

The Welford 'Welcome Club'.

This Club has considerably increased its following since 1963, and can now boast a membership of 70. During the year, visits were arranged to the Coventry and Phoenix Theatres and several day excursions and mystery tours were organised. The highlight of the year, however, was the Christmas Party, which was well attended by the majority of the members. Mrs. G. Vaughan, Secretary of the Club, reports that several members are receiving treatment from the recently introduced Chiropody Service which visits the village every ten weeks.

SECTION C.

SANITARY CIRCUMSTANCES OF THE DISTRICT.

WATER SUPPLIES.

All responsibility for water undertaking throughout the entire Rural District is now vested in the Mid-Northamptonshire Water Board. The source of supply for the Board is Pitsford Reservoir which has a capacity of about 4,000 million gallons. Treatment of water consists of softening, filtration and finally chlorination. There is no plumbo solvency.

The following figures are supplied by the Mid-Northamptonshire Water Board :-

Bacteriological samples taken in Brixworth Rural District	..	47
Chemical analyses at Treatment Works		24
Bacteriological samples taken at Treatment Works	..	172

Unfortunately no figures are readily available for the number of houses supplied (a) direct from the mains, and (b) by stand-pipes.

PRIVATE SUPPLIES.

Six samples were taken during the year.

SEWERAGE AND SEWAGE DISPOSAL.

The schemes for Brixworth, Cottesbrooke and Creaton were completed early in 1964. The scheme for Thornby and the extension of the works at Hollowell were being prepared throughout the year.

All the larger villages, with the exception of Guilsborough which requires re-sewering only and the ~~B~~ringtons, have now adequate modern systems. There remain only the smaller villages and hamlets, which will receive attention in due course.

The District has now completed 28 schemes since the war which is a very satisfactory rate of progress.

DISINFECTATION. Concurrent and terminal disinfection by means of gaseous liquid disinfectants is carried out in houses where certain infectious diseases are notified. In the course of the year a number of requests for disinfection of premises were received and dealt with.

DISINFESTATION. This service is carried out on behalf of the Council at the request of owners or tenants of houses complaining of the presence of vermin. Some action was necessary during 1964. (This includes the eradication of bed bugs).

PREVENTION OF DAMAGE BY PESTS ACT, 1949.

During the year the existing staff proved adequate to discharge the Council's responsibilities under the Act; no major rat infestations occurred on the Council's properties throughout the period under review. Refuse tips are treated regularly throughout the year.

MOVEABLE DWELLINGS - PUBLIC HEALTH ACT, 1936. SECTION 26. AND THE CARAVAN SITES AND CONTROL OF DEVELOPMENT ACT, 1960.

Four licences were granted by the Council during the year.

REFUSE COLLECTION AND DISPOSAL.

The "paper sack" system of refuse collection was introduced into approximately one fifth of the District during the year, as the first stage in a five year schedule to a complete change over to this system. At the end of the year it is pleasing to report that the change has been generally welcomed in those villages where it has been applied providing as it does, a "back door" collection, as opposed to the "kerb side" system, with more hygiene conditions in collection and disposal. Complaints have been surprisingly few, the only really serious and genuine cases have been with regard to animals damaging the sack to get at the edible contents. These have been relatively few in number, but sufficient, nevertheless, to suggest that with cheaper appliances now on the market, giving protection against animal depredation, some further thought might be given to this aspect of the problem.

The remainder of the District continued to operate on a weekly "kerb side" bin system.

gms

SECTION D.

HOUSING.

Housing Act, 1957.

No. of permanent dwellings in area	6522
Estimated number of houses unfit for human habitation according to Sec.16 of the Act and suitable for action under Secs.17 & 42 of the Housing Act, 1957 ..	209
No. of houses for inclusion in Clearance Areas ..	127
No. of houses already covered by Clearance Orders ..	3
No. of houses for individual demolition	79

It is of interest to note that, for the purposes of the report, the total number of unfit houses revealed by the original survey, plus subsequent additions is 949 but by the time the report had been prepared 324 of these had been sufficiently improved to merit upgrading, whilst a further 422 had been demolished.

The usual work of the Council under the Housing and Public Health Acts continued, and the details are set out in tabular form below and on page 43.

Housing Act, 1957. Section 17.

1. No. of unfit houses represented	Nil
2. No. of Demolition Orders made	Nil
3. No. of houses demolished	Nil
4. No. of persons affected	Nil

Housing Act, 1957. Section 42.

1. No. of Clearance Orders made	Nil
2. No. of houses included in Area	Nil
3. No. of houses demolished	Nil
4. No. of persons affected	Nil

Other associated housing statistics.

1. No. of undertakings received	11
2. No. of unfit houses upgraded	17

From these details it will be observed that the total number of unfit houses throughout the district declined by 30 during the year, either through improvements or demolition, whilst 11 houses came under

control by means of an undertaking from the owner not to re-let after vacation until made fit for human habitation.

Whilst these figures show good progress in slum clearance during the year under review, it should be remembered that the slum clearance problem in the Brixworth Rural District had largely been dealt with by the end of 1960. A survey of the position at the end of the year 1964 is appended below, and shows the position in better perspective, with only 24 houses remaining to be dealt with. This is a very satisfactory position with regard to which the District Council are to be congratulated.

No. the subject of Undertakings	169
No. dealt with by Demolition Order, Clearance Order or Closing Order	432
No. repaired by owners and upgraded	324
No. remaining to be dealt with	24

Nevertheless it must be recorded that a fairly large number of sub-standard houses are still occupied by single persons or old couples. Practically the whole of these are the subject of Undertakings not to re-let when they become vacant. Though the majority may be adequate to serve the life-time of the present tenants, a re-survey of these properties is at present being made in order to determine this. The Council has no new houses under construction but the survey referred to may reveal a need for a few more old peoples' bungalows.

Private owners continue to take advantage, encouraged by the Council, of the financial aid available for improving their properties. The position to date is summarised as follows -

402 properties have been brought up to modern standards by the provision of Discretionary Grants amounting in total to £102,800. The most significant thing about this, however, is that 75 of the 402 referred to were substandard and as a result of the improvements, costing £17,556, they have been upgraded and their useful life prolonged for many years. It is fairly certain that had these 75 properties not been upgraded with the assistance of grants they would have had to have been demolished, so that it may be said that for an investment of a little over £17,000 the Council have been saved the provision of over 70 new houses which would cost in the region of £100,000.

106 Standard Grants have been approved to date, of which 94 have been completed and grant aided to a total cost of £8,039.

SECTION E.

INSPECTION AND SUPERVISION OF FOOD.

THE MILK AND DAIRIES (GENERAL) REGULATIONS, 1959.

The above Regulations made jointly by the Minister of Agriculture, Fisheries and Food and the Minister of Health, came into operation on 8th March, 1959, and brought earlier regulations into line with modern methods of milk production. They simplified much of the existing procedure, making it easier for milk to be produced, handled and distributed under up to date hygienic conditions.

The enforcement of the Regulations is the responsibility of the Minister of Agriculture, Fisheries and Food and (as regards milk distribution and infected milk) by the Local Authority.

On November 25th, 1957, the Rural District became a Specified Area for the sale of milk, as a result of which no milk which has not been tuberculin tested, pasteurised or sterilized may be sold in the area.

FOOD AND DRUGS ACT, 1939 - CLEAN FOOD.

DAIRIES. There are three registered dairies in the District, and during the year a satisfactory standard of cleanliness was maintained therein.

FOOD PREMISES. There are 128 food premises in the District, the total number being made up as follows - 66 shops, 3 cafes, 13 butchers shops, 4 bakeries and 42 public houses.

CONDEMNED FOOD. Condemned food is disposed of in one of two ways, i.e. tinned food is buried at one of the Council's refuse tips, and unsound meat is sent to the Pytchley Hunt Kennels.

ICE CREAM. Most retailers are still selling pre-packed varieties only, but with the introduction of the Food Hygiene Regulations 1955, it is now possible to register premises for the sale of both completely wrapped and partly wrapped products.

FOOD HYGIENE REGULATIONS, 1955.

During the year efforts have been made to improve further the general standard of food hygiene throughout the District. In spite of the difficulties involved it can fairly be stated that the majority of food traders are endeavouring to attain satisfactory standards. 164 visits were paid to food premises under the Food Hygiene Regulations.

Samples taken in the Brixworth Rural District in the
15 months ended 31st March, 1965.

Milk	100	Brought forward	162
Meat products	16	Curry powder	2
Jan and narmalade	4	Cheese	1
Spirits	18	Crean	1
Butter	2	Dried milk	1
Soft drinks	2	Glucose	1
Cakes etc.	6	Soup	1
Meat and fish paste	5	Malt extract	1
Beverages	2	Potatoes	1
Lard	1	Sweets	3
Table jelly	3	Nuts and raisins	1
Ice cream	<u>3</u>		
Carried forward	162	TOTAL	<u>175</u>

Remarks.

Four samples of milk taken from one farmer were reported as containing 6.2%, 6.4%, 1.5% and 2% of added water respectively. Subsequent "Appeal to Cow" samples taken at the time of milking were found to be satisfactory and legal proceedings were instituted against the farmer concerned. Although adequate time was allowed for service, however, the summonses were not served on the farmer in time and the proceedings were therefore withdrawn. The farmer was advised to arrange for the overhaul of his milking equipment and he found certain faults which were corrected.

Only one sample was reported to be below standard in fat. This was taken from a village retailer and since a second sample taken on the same occasion was satisfactory he was reminded of the need to mix bulk milk very thoroughly before and during bottling. Subsequent samples were found to be satisfactory.

Twenty one samples of milk were tested for the presence of antibiotics and four samples were found to contain very small quantities of penicillin. The producers concerned were visited and enquiries made about the procedure adopted after the administration of penicillin injections to dairy cows. In each case the importance of withholding the milk for a period of 48 hours was stressed.

A sample of sweets was sold from a jar described then as

containing vitamin C without stating the minimum content of ascorbic acid as required by Article 9 of the Labelling of Food Order, 1953. The sweet manufacturers were contacted and they wrote to say that they had discovered their mistake two months before and that all their containers had since been labelled with the necessary particulars.

SALE OF FOOD (WEIGHTS AND MEASURES) ACT, 1926.

4,842 articles of food were checked for weight or measure during the period and 55 of these were found to be incorrect. As the errors were of a minor nature they were dealt with by advice or warning at the time of detection.

This report will be taken in future from March and will not apply to the calendar year of the Annual Report.

Note that the present report applies to the first three months of 1965 as well as 1964.

SLAUGHTERHOUSES.

At the beginning of the year there were two slaughterhouses licensed, having been brought up to the standards prescribed in the Slaughterhouses (Hygiene) Regulations, 1958, and the Slaughter of Animals (Prevention of Cruelty) Regulations, 1958.

It is not anticipated that any further slaughterhouses will be brought up to standard.

MEAT INSPECTION.

Inspection of meat was maintained at 100%, and findings are recorded below in a table based on that suggested by the Ministry of Health.

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

	Cattle	Calves	Sheep and Lambs	Pigs
Number killed (if known)	288	3	2120	1
Number inspected	288	3	2120	1
<u>All diseases except Tuberculosis and Cysticerci</u>				
Whole carcasses condemned	Nil	Nil	3	Nil
Carcasses of which some part or organ was condemned ..	45	Nil	90	Nil
Percentage of the number inspected affected with disease other than tuberculosis and cysticerci	15.63	Nil	4.39	Nil
<u>Tuberculosis only.</u>				
Whole carcasses condemned	Nil	Nil	Nil	Nil
Carcasses of which some part or organ was condemned	Nil	Nil	Nil	Nil
Percentage of the number inspected affected with tuberculosis	Nil	Nil	Nil	Nil
<u>Cysticercosis.</u>				
Carcasses of which part or organ was condemned	3	Nil	7	Nil
Carcasses submitted to treatment by refrigeration ..	3	Nil	Nil	Nil
Generalised and totally condemned ..	Nil	Nil	Nil	Nil

SECTION F.

PREVALENCE OF, AND CONTROL OVER, INFECTIONS AND OTHER DISEASES.

There was a decrease in the notification of infectious diseases. This was due to the decrease of measles notifications from 342 last year to 136 this year, and which continues to show its biennial incidence.

MEASLES. Notifications fell to 136. This disease though highly infectious is now, like scarlet fever, of a more benign character, seldom showing serious complications. However, in the more delicate, and occasionally in normal children ear or eye infections or pneumonia still occur. These are, however, usually soon and successfully dealt with by the large number of effective antibiotics that are now available.

SCARLET FEVER. 9 cases were notified. This disease continues in its mild phase. Its principle interest is that it gives a rough indication of the amount of streptococcal infection in the community.

WHOOPING COUGH. Only 2 cases were notified. This is another condition which is becoming largely more benign, but in some cases this can be distressing, and in infancy a serious illness. Protection to this disease is often by triple vaccination, together with tetanus and diphtheria, and the low incidence in the District may be ascribed to their immunisation.

DYSENTERY.

No cases have been notified. This is very satisfactory.

POLIOMYELITIS. Once again there have been no cases, and this freedom can be ascribed to immunisation as the decline in incidence has occurred concurrently with vaccination. The oral Sabin vaccine is now used which gives a longer lasting immunity than the Salk or injected variety. A drink of syrup or a lump of sugar is also much more acceptable to the young patients than the previous needle prick.

ERYSIPELAS. One case was notified (1 female).

DIPHTHERIA. There have been no cases of diphtheria in Northamptonshire since 1956. There is therefore with each successive year of freedom from infection a diminishing public recollection of the dangers of this infection. Mothers without knowledge of the disease feel a false security and may fail to have their children immunised. That this is a dangerous situation cannot be too strongly stressed, and only

by keeping up the numbers of children immunised may the disease be kept in check. It is the duty of all parents to have their children immunised, and if they fail to do so they neglect their children's welfare.

PNEUMONIA. 5 cases were notified and there were 6 deaths. Respiratory infection continues to be a cause of much ill health and chronic suffering. A very marked decline in deaths from pneumonia has taken place since the discovery of the sulphonamides and antibiotics, however, in chronic sufferers from bronchitis and in the aged and debilitated, some cases do still prove fatal.

The incidence of chronic nasal catarrh often with the later development of sinusitis is still an all too common occurrence. Many schoolchildren still suffer from nasal catarrh. The cause is obscure and the need for research into this problem continues to be stressed.

MENINGITIS. No cases occurred.

SMALLPOX. There were no cases. The vaccination of children is still necessary and should be carried out sometime during the first two years of life, preferably between the first and second year.

INFECTIOUS HEPATITIS. The Minister of Health gave sanction that this disease should be made locally notifiable as from 1st July, 1962. By arrangement with other District Councils this also became operative in the County of Northamptonshire. Two cases were notified during the year.

Acute Infective Hepatitis is a disease caused by a virus, which attacks the liver and causes jaundice. It is mainly an infection of young people of faecal-oral spread, and with an incubation period of 15 - 50 days. The incriminative routes of infection are from food handlers, water, and children to their mothers. The virus is present in faeces 16 days before jaundice, and up to 8 days after. Serum hepatitis, which is another form of infective hepatitis, has a longer incubation period of 50 - 160 days and affects mainly adults and can be spread by blood transfusion and inefficiently sterilised equipment used by doctors, dentists, nurses and drug addicts, and in the various tattooing processes. The clinical groups of these two types of hepatitis are indistinguishable. There is no specific treatment and an icteric adult would be away from work from six weeks to two months, and sometimes might not feel really fit for a year. Quarantine measures are of little value, and patients can be treated at home or in hospital, provided adequate hand washing techniques are practised, with current disinfection of excreta. Serum hepatitis can be virtually abolished,

if disposal equipment was generally introduced. In this County disposable equipment is used by the County Health Department for all procedures involving immunisation. Gamma Globulin is of value for the protection of close contacts and pregnant women during epidemics.

FOOD POISONING. One case only occurred in a schoolboy. This was a fortunately low incidence in the District. The condition is usually caused by one of the Salmonella organisms, the commonest being the Typhimurium strain or paratyphoid A or B. The Stephylococcus gaining entry to food from an infected spot or boil on the hands, arms or face of a food handler may also cause a severe form of food poisoning. Some chemical contaminants may also be an occasional factor. More rarely typhoid fever and botulism may occur. The commonest cause of food poisoning is the salmonella, gaining entry into food by faulty hygiene of food handlers. The sources of infection can be numerous, uncooked contaminated (often imported) meat being today probably one of the commonest.

ABERDEEN TYPHOID OUTBREAK. During the summer months, an outbreak of typhoid fever occurred in Aberdeen, which was proved to originate from a 6 lb. tin of corned beef, manufactured in the Argentine. Stocks of this infected batch had been distributed throughout the Country, and were on sale in the shops. It became necessary to trace all these cans and withdraw them from sale immediately. Throughout the District all such stocks were traced and withdrawn. This entailed much extra work and repeated visits and check-ups of stocks were necessary as further possible infected sources were notified from the Ministry of Health.

ZERMATT TYPHOID OUTBREAK. An endeavour was made to trace all people who had been on holiday in Zermatt, and who may have been infected or who had become symptomless carriers. One such person, who was a food handler, had been in the area at the time. Both he and his family were tested and found to be negative.

MALARIA. Three cases of malaria were notified by the same General Practitioner in one week. They were all cases who had returned recently from abroad, and who were receiving adequate treatment.

Notification of the following cases of infectious disease was

received during the year.

DISEASE	M.	F.	Total	Rate per 1,000 population
Food Poisoning	1	-	1	.05
Acute Primary Pneumonia	-	5	5	.26
Whooping Cough	2	-	2	.11
Measles ..	66	70	136	7.19
Scarlet Fever ..	6	3	9	.48
Erysipelas ..		1	1	.05
Infective Hepatitis	1	1	2	.11
Puerperal Pyrexia		1	1	.05
Malaria ..	3		3	.16
Total	79	81	160	

VACCINATION AND IMMUNISATION.

Children are offered immunisation to the following diseases - Diphtheria, Whooping Cough, Tetanus, Poliomyelitis and Smallpox in the earlier years. These procedures are carried out by General Practitioners or by the County Council at their Child Welfare Clinics which are held in this District at the Centres detailed on page 15.

In addition, the County Council provides a mobile caravan clinic which visits many villages of the area which were not formerly accessible to welfare clinics. The following villages are visited :-

Ravensthorpe, East Haddon, Great and Little Brington,
Holcot, Walgrave, Old and Hamlington.

Figures are not available this year of the numbers immunised in the District. The County Council will include these in their statistics for the year.

TUBERCULOSIS.

No action was found to be necessary under the Public Health (Prevention of Tuberculosis) Regulations, 1925, in connection with persons suffering from pulmonary tuberculosis employed in the milk trade, or under Section 172 of The Public Health Act, 1936, which deals with the compulsory removal to hospital of persons suffering from tuberculosis.

Vaccination against tuberculosis is offered by the County Council to all children at 13 years of age. This is carried out in the schools and there is a high acceptance rate.

Deaths		New Cases				Age Groups	
Other	Pulmonary	Other	Pulmonary	Other	Pulmonary	Age	Group
-	-	-	-	-	-	-	0 -
-	-	-	-	-	-	-	1 -
-	-	-	-	-	-	-	2 -
-	-	-	-	-	-	-	15 -
-	-	-	-	-	-	-	20 -
-	-	-	-	-	-	-	25 -
-	-	-	-	-	-	-	30 -
-	-	-	-	-	-	-	35 -
-	-	-	-	-	-	-	40 -
-	-	-	-	-	-	-	45 -
-	-	-	-	-	-	-	50 -
-	1	1	1	1	-	-	65 and over
-	-	-	-	-	-	-	Age unknown
-	1	1	1	-	1	-	Total

TUBERCULOSIS.

AGE AND SEX DISTRIBUTION OF NEW CASES AND DEATHS, 1964.

Age Groups	New Cases				Deaths			
	Pulmonary		Other		Pulmonary		Other	
	M	F	M	F	M	F	M	F
0 - ..	-	-	-	-	-	-	-	-
1 - ..	-	-	-	-	-	-	-	-
5 - ..	-	-	-	-	-	-	-	-
15 - ..	-	-	-	-	-	-	-	-
20 - ..	-	-	-	-	-	-	-	-
25 - ..	-	-	-	-	-	-	-	-
35 - ..	-	-	-	-	-	-	-	-
45 - ..	-	-	-	-	-	-	-	-
55 - ..	-	-	-	-	-	-	-	-
65 and over ..	-	-	1	-	1	1	1	-
Age unknown ..	-	-	-	-	-	-	-	-
Total	-	-	1	-	1	1	1	-

MASS RADIOGRAPHY SERVICE

No. 1 Unit, Oxford Regional Hospital Board.

Brooklands Aviation Ltd.,
Monkton, Northampton.

Response: 72%

11.6.64

<u>Summary of Work</u>	<u>Male</u>	<u>Female</u>	<u>Total</u>
No. of miniature films taken	200	13	213
No. referred to chest clinic	1	-	1
No. previously examined by M.M.R.	163	11	174
No. not previously examined by M.M.R.	37	2	39

Result of case referred to Chest Clinic.

Hiatus hernia	1	-	1
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MASS RADIOGRAPHY SERVICE
No. 1 Unit, Oxford Memorial Hospital, South,

Brookline, Boston, Mass.
October 1934

11.6.34

Response: 73%

Number of

Number of work

Number of

Total

Results

Tests

No. of minutes film taken

No. referred to chest clinic

No. previously examined by M.M.B.

No. not previously examined by M.M.B.

Results of case referred to Chest Clinic.

Median period

113

13

200

1

-

1

174

11

163

39

2

37

1

SECTION G.

OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963.

This Act was introduced to establish a standard of health, welfare and safety in relation to the working conditions of persons employed in premises coming within the scope of the Act.

These premises include offices, shops, hairdressers, hotels, public houses, restaurants, transport cafes, canteens, wholesale warehouses and fuel storage depots.

The Act lays a duty on the Local Authority to appoint inspectors to enforce the provisions of the Act, and the Public Health Inspectors have been so appointed by this Council.

Initially, the Act requires that, from the 1st May, 1964, all employers of persons in any of the above types of premises must register with the Local Authority. Despite publicity, all applications for registration have not yet been submitted, and for this reason, it was decided to undertake a survey of every shop, office, catering establishment etc. in the District in order to provide a full record of those premises coming within the scope of the Act. This survey will be completed in 1965 and detailed inspections of each registered premises will then be made to secure compliance with the Act.

The provisions of the Act, and the more detailed requirements of the Regulations made thereunder which are enforceable by the Local Authority are briefly as follows :-

1. Maintenance of general cleanliness.
2. Provision of adequate working space.
3. Maintenance of a reasonable temperature and provision of thermometer.
4. Provision of adequate and suitable lighting and ventilation.
5. Provision of suitable and sufficient sanitary conveniences and washing facilities.
6. Provision of an adequate and wholesome supply of drinking water.
7. Provision of suitable and sufficient seating facilities.

8. Provision of suitable and sufficient accommodation, including drying facilities for working and outdoor clothing.
9. Provision of suitable and sufficient eating facilities for the use of employed persons who are required to eat meals on the premises.
10. Construction and maintenance of secure fences on machines, to guard against injury.
11. Prohibition of persons under 18 years of age from cleaning machinery if it exposes him to injury from moving parts.
12. Prohibition of any person from working at any machine prescribed by Order as being dangerous unless he has received adequate safety training or is under adequate supervision.
13. Prohibition of any person being required to lift or move loads so heavy as to cause injury to him.
14. Provision of a first aid box to contain specified numbers of dressings etc., depending upon the number of employees and class of premises.
15. Notification of accidents to Local Authority.
16. Construction and maintenance of all floors, passages, stairs etc., to reduce risk of accidents.
17. Display of an Abstract of the Act and Regulations for information of employees.

It will be evident from the above provisions that in addition to the basic conditions for environmental health and welfare, such as space, cleanliness, lighting, ventilation etc. emphasis has now been laid on the safety factor for persons employed in these premises. It is of interest that the machines prescribed by Order as being dangerous, include mincing, slicing, potato chipping and guillotine machines which can be found in general use in most food shops, catering establishments and some offices. It is anticipated that considerable time will require to be devoted to achieving the effective fencing of these machines and to the training of personnel in the safe operation of individual machines.

The Fire Authority and H.M. Factory Inspectorate are also responsible for the enforcement of certain sections of the Act and close liaison is maintained with those Authorities when joint action is required in respect of any premises.

Prescribed particulars on the administration of the
Offices, Shops and Railway Premises Act 1963 for
the year 1964.

Class of Premises	No. of premises registered during the year.	No. of persons employed in work places incorporated with registered premises.		No. of registered premises inspected during the year.
		M	F	
Offices	9	1	-	1
Retail shops.	20	1	5	2
Wholesale shops & warehouses.	1	-	-	-
Catering establishments open to the public canteens	9	-	-	-
Fuel storage Depots	-	-	-	-
Totals	39	2	5	3
Total number of visits of all kinds by Inspectors to registered premises = 20				

ENFORCEMENT OF THE ACT

Class of Premises	Exemptions Granted				Prosecutions
	Space (Sec. 5)	Temperature (Sec.6)	Conveniences (Sec.9)	Washing facilities (Sec.10)	
Offices	-	-	-	-	-
Retail Shops	-	-	-	-	-
Wholesale shops and warehouses	-	-	-	-	-
Catering establishments open to the public canteens	-	-	-	-	-
Fuel storage depots	-	-	-	-	-

Prescribed penalties on the violation of the
Illinois, State and Public Health Act of 1907
for year 1911.

Class of premises	No. of premises registered during the year.	No. of persons employed in work places incorporated and with registered premises.	No. of visits during the year.
Offices	1	1	1
Retail shops	20	2	2
Wholesale shops and warehouses	1	1	1
Catering establishments open to the public	1	1	1
Food storage depots	1	1	1
Totals	25	6	6

Total number of visits of all kinds by inspectors to registered premises = 30

EMPLOYMENT OF THE ACT

Class of premises	Examples listed		
	Sec. 1 (Sec. 2)	Sec. 2 (Sec. 3)	Sec. 3 (Sec. 4)
Offices			
Retail shops			
Wholesale shops and warehouses			
Catering establishments open to the public			
Food storage depots			

SECTION H.

FACTORIES ACT, 1937. 1961

PRESCRIBED PARTICULARS ON THE ADMINISTRATION OF
THE FACTORIES ACT, 1937, FOR THE YEAR 1964.

1961
CLASSIFIED LIST OF REGISTERED FACTORIES
AS AT 31ST DECEMBER, 1964.

		<u>Power</u>	<u>Non- Power</u>
1.	Food manufacture	4	-
2.	Wearing Apparel :-		
	(a) Boots and Shoes	1	-
	(b) Outfitting	2	-
3.	Carpentry, Joinery & Sawmills	10	5
4.	Garages, Repair Shops and Engineers ..	17	5
5.	Laundries ..	3	-
6.	Plumbers ..	-	2
7.	Purification of water	2	-
8.	Leather Accessories	2	-
9.	Gasholders ..	1	-
	TOTAL	42	12

REVISIONS

PART I OF THE ACT.

1. INSPECTIONS FOR PURPOSES OF PROVISIONS AS TO HEALTH.

Premises	No. on Register	Number of		
		Inspections	Written Notices	Occupiers prosecuted
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	19	34	-	-
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	35	12	-	-
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	-	-	-	-
	54	46	-	-

2.

CASES IN WHICH DEFECTS WERE FOUND.

Particulars	No. of cases in which defects were found			Referred		No. of cases in which prosecutions were instituted
	Found	Remedied	to H.M. Inspec.	by H.M. Inspec.		
Want of Cleanliness (S.1)	-	-	-	-	-	
Overcrowding (S.2)	-	-	-	-	-	
Unreasonable temperature (S.3)	-	-	-	-	-	
Inadequate ventilation (S.4)	-	-	-	-	-	
Ineffective drainage of floors (S.6)	-	-	-	-	-	
Sanitary conveniences (S.7)						
(a) Insufficient	1	1	-	1	-	
(b) Unsuitable or defective	-	-	-	-	-	
(c) Not separate for sexes	-	-	-	-	-	
Other offences against the Act (not including offences relating to Outwork)	-	-	-	-	-	
TOTAL	1	1	-	1	-	

PART VIII OF THE ACT - OUTWORK.

Nature of Work	Section 110 133				Section 111 134	
	No. of out-workers in August list required by Sec. 110 (i) (c)	No. of cases of default in sending list to the Council	No. of prosecutions for failure to supply lists	No. of instances of work in un-wholesome premises	Notices served	Prosecutions
Making Wearing Apparel	8	-	-	-	-	-
TOTAL	8	-	-	-	-	-

SUMMARY OF
PUBLIC HEALTH INSPECTOR'S INSPECTIONS.

Housing	..	1314
Slaughterhouses and Butchers Shops		238
Bakehouses	..	12
Cafes	..	8
Shops	..	56
Factories and Workshops		46
Water Supplies	..	15
Infectious Diseases	..	28
Defective Premises	..	102
Defective Drainage	..	64
Pests Destruction	..	63
Tents, Vans and Sheds	..	70
Dairies	..	13
Verminous Premises	..	4
Nuisances	..	6
Refuse Collection	..	953
		2,992
		2,992

NOTICES SERVED :-

Informal - Section 92 Public Health Act, 1936		1
Statutory - do.		Nil

SUMMARY OF

FIELD HEALTH INSPECTOR'S INSPECTIONS

133A	..	Housing	
133B	..	Sanitation and Public Health	
133C	..	Business	
133D	..	Laundries	
133E	..	Shops	
133F	..	Factories and Workshops	
133G	..	Water Supply	
133H	..	Industrial Plants	
133I	..	Detective Services	
133J	..	Detective Services	
133K	..	Public Protection	
133L	..	Food, Drug and Alcohol	
133M	..	Barber	
133N	..	Veterinary Services	
133O	..	Religious	
133P	..	Religious Collection	
			2,992

NOTES SHEET:

Interval - Boston 22 Police
Health Act, 1938

1

133

60.

Stationery -

