

[Report 1921] / Medical Officer of Health, Cheadle R.D.C.

Contributors

Cheadle (England). Rural District Council.

Publication/Creation

1921

Persistent URL

<https://wellcomecollection.org/works/hd9rb29v>

License and attribution

You have permission to make copies of this work under a Creative Commons, Attribution license.

This licence permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited. See the Legal Code for further information.

Image source should be attributed as specified in the full catalogue record. If no source is given the image should be attributed to Wellcome Collection.



Wellcome Collection
183 Euston Road
London NW1 2BE UK
T +44 (0)20 7611 8722
E library@wellcomecollection.org
<https://wellcomecollection.org>


CHEADLE
RURAL DISTRICT COUNCIL.

Annual Report

OF THE
MEDICAL OFFICER OF HEALTH.

1921.

J. LOWNDES, PRINTER, CHEADLE.



Digitized by the Internet Archive
in 2017 with funding from
Wellcome Library

<https://archive.org/details/b29099845>

TO THE CHEADLE RURAL DISTRICT COUNCIL.

Gentlemen,

I have pleasure in presenting my annual report for the year ending 31st Dec., 1921.

With a view to economy and to facilitating the preparation of this report the Minister of Health has directed that certain modifications and curtailments be made, and that details of conditions that do not vary from year to year be omitted. The scope of the report will therefore be considerably reduced, full "Survey Reports" being required only at intervals of five years. (Reports for 1919 and 1920 are to be regarded as "Survey Reports"). Nevertheless there are certain conditions prevailing in the district that require repeated iteration. Notably, the urgent need of more adequate water supplies to certain of the villages, the need of improved arrangements for the removal of nightsoil and ashes—in some villages this is left entirely in the hands of the villagers themselves, and is a source of very objectionable nuisance—and the need, practically throughout the district, of improved sewerage and sewage disposal. It is to be hoped that with improved economic conditions the Council will be able in the near future to deal with many of the insanitary conditions that prevail.

For the proposed supply of water to the Tean district, two small wells have been sunk at Tenford, at a depth of 17 feet. The water met with is wholesome and adequate—about 200,000 gallons per day—and the scheme is now in the hands of the engineers who are preparing plans, etc.

For the supply of Cheddleton, Werrington, Wetley Rocks and district a well has been sunk at Wall Myers, and at a depth of 35 feet a plentiful supply—over three hundred thousand gallons per day—of good and wholesome water has been found. This scheme is also in the hands of the engineers who are preparing plans, etc.

At Alton, where the inadequacy of the water supply has led to many complaints being made, about 600 yards of cast iron mains have been laid, giving an improved supply to a portion of the village. Various public wells in the district have been improved and repaired.

Many other improvements (see appendix) have been carried out throughout the district, and it is worthy of note that the two local cinema-houses, in compliance with the Ministry of Health circular, have been greatly improved as regards ventilation and general sanitation.

Maternity and Infant Welfare Work.

The following table has been compiled from figures supplied by the health-visitors, of whom there are ten working in the district. With one exception the health visitors devote only part of their time to this important work, and consequently there is considerable variation both in the amount and in the character of the work done in the different areas. The amount of work to be done continues to increase very markedly, and no doubt it will be necessary, in the near future, if it is to be carried out efficiently, to employ whole-time specially trained health visitors, who will be able to give to it the time and experience that this important branch of preventive medicine deserves and requires.

Milk (Mothers' and Children's) Order, 1919.

This order was rescinded by the Minister of Health as from April 14th, 1921, and the County Council, chiefly to restrict the expenditure of public money, decided to terminate their scheme for supplying necessitous mothers and young children as from May 10th, 1921.

Appendix.

1. General Statistics.

Area (acres)	...	...	...	54,172
Population (1921)	...	...	...	28,730
Number of inhabited houses (1921)	...	...	...	5679
Number of families or separate occupiers (1921)	...	...	...	5779 approx.
Rateable Value	...	...	...	£138,911
Sum represented by a penny rate	...	...	...	£450

2. Extracts from Vital Statistics of the Year.

BIRTHS:—Legitimate: Male, 330; Female, 300; Total, 630. Illegitimate: male, 9; female, 12; total, 21. Birth Rate (R.G.)—22'6.

DEATHS:—Male, 151; Female, 166; Total, 317. Death Rate (R.G.)—11'03.

Number of women dying in, or in consequence of, childbirth: from Sepsis, 3; from other causes, 1.

Deaths of infants under one year of age per 1000 births:—Legitimate, 60; Illegitimate 6; Total, 66.

Deaths from Measles (all ages) 1; deaths from Whooping Cough (all ages) nil; deaths from Diarrhoea (under 2 years of age) 5.

(3) Notifiable Infectious Diseases.

DISEASE		Total Cases Notified	Cases ad- mitted hosp.	Attack rate per 1000 pop.	Total deaths
Scarlet fever	...	183	171	6'3	2
Diphtheria	...	40	31	1'4	2
Enteric fever	...	6	6	0'2	2
Pneumonia	...	43		1'5	16
Dysentery	...	15		0'5	
Erysipelas	...	12		0'4	1
Ophthalmia Neonatorum	...	10		0'3	
Encephalitis Lethargica	...	3	1	0'1	3
Puerperal fever	...	4		0'1	3
Acute Poliomyelitis	...	1		0'03	
Tuberculosis	...	48		1'6	23
a Pulmonary	Male	19			M. 7
	Female	18			F. 10
	Total	37		1'2	17
b Non-Pulmonary	Male	8			M. 3
	Female	3			F. 3
	Total	11		0'4	6

Table showing Distribution of Infectious Disease throughout the District.

	Scarlet Fever	Diphtheria	Pneumonia	Tuberculosis	Ophthalmia Neonatorum	Puerperal fever	Dysentery	Enteric fever	Erysipelas	Encephalitis Lethargica	Poliomyelitis
CHEADLE	76	21	18	17	2	1			6	2	
DILHORNE	56	9	17	12	2		2	6	1	1	
IPSTONES	16	2	4	16	6	2	15		3		
ALTON	35	8	4	3		1			2		1

Ophthalmia Neonatorum.

Cases						
Notified	Treated At home In hospl.	Vision un- impaired	Vision Impaired	Total Blindness	Deaths	
10	9 1	9	1	nil	nil	

Isolation Hospital.

The Isolation Hospital stands in its own ground—2 acres—and is situated at Moss Lane, about one mile from the town of Cheadle. Since it was opened in May, 1904, a total of 1,618 cases of infectious disease have been treated there.

During the year 1921, there were admitted to hospital 208 cases, including 171 suffering from Scarlet Fever, 31 suffering from Diphtheria, 5 suffering from Enteric Fever, and 1 suffering from Encephalitis Lethargica.

The increase—63 more than in 1920—in the number of cases admitted to hospital has kept the staff working at high pressure, and as many of the cases came from outlying parts of the district, much valuable time was spent by members of the staff in ambulance work. Should there be a continued prevalence of infectious disease in the district perhaps it would be well for the Council to consider the provision of a motor ambulance. This would be a great saving of time for all who took part in the ambulance work, and would be of undoubted benefit to patients.

**Age-incidence of patients admitted to hospital
during 1921.**

Age	Scarlet Fever	Diphtheria	Enteric Fever	Encephalitis Lethargica
5 yrs & under 5	... 31	... 5	...	...
Over 5 & under 10	... 61	... 9	...	...
„ 10 & „ 15	... 36	... 8	... 2	...
15 years and over	... 33	... 9	... 3	... 1

	Scarlet Fever	Diphtheria	Enteric Fever	Encephalitis Lethargica
Number of cases				
in hospital, Jan. 1st, 1921	... 16	... 2	...	...
Admitted during year 1921	... 171	... 31	... 5	... 1
Disch'g'd „ „	... 177	... 33	... 4	...
Died „ „	... 2	... 0	... 1	... 1
In hospital Dec. 31st, 1921	... 8	... 0	...	...

93·4% of the total number of cases of Scarlet Fever were treated in hospital, mortality rate 1·07%; 77·5% of the total number of cases of Diphtheria were treated in hospital, mortality rate nil.

BIRTHS—651.

The number of Births registered have been corrected for inward and outward transfers, and differ slightly from the figures compiled locally.

The corrected total number of Births registered during the year was 651, including 339 males and 312 females. Taking the mid-yearly population—28,730—as the basis of calculation, this gives a birth rate of 22·6 per 1000 of the population. It may be mentioned that the mid-yearly population for 1921 exceeds the census population—28,452—by 378, and is estimated on the best possible data available, after making adjustments for the holiday movements that were taking place throughout the country at the time the census was taken. The estimated mid-yearly population is therefore used in all calculations in connection with birth rate, death rate, etc.

The number of illegitimate children born during the year was 21, including 9 males and 12 females, giving an illegitimate birth rate of 0·7.

Although the total number of Births registered was 37 less than in the preceding year, the birth rate (22·6 as compared with 25·8 in 1920) gives the appearance of a much greater drop, due to its having been calculated on a considerably larger population. It is, however, very satisfactory, being practically double the death rate, and it is interesting to note that this year there has been a decrease in the illegitimate birth rate.

TABLE XV.

Birth-rate, Death-rate and Analysis of Mortality during the Year 1921.

(Provisional figures. Population as enumerated in 1921 have been used for the purposes of this table. The mortality rates refer to the whole population as regards England and Wales, but only to civilians as regards London and the groups of towns.)

	Birth-rate per 1000 of total population	Annual Death-rate per 1,000 population.									Rate per 1,000 births		Percentage of total deaths			
		All causes	Enteric fever	Small-pox	Measles	Scarlet fever	Whooping cough	Diphtheria	Influenza	Violence	Diarrhoea & enteritis under 2 years	Total Deaths under one year	Deaths in public institutions	Certified causes	Inquest cases	Uncertified causes of death
England and Wales ...	22.4	12.1	0.02	0.00	0.06	0.03	0.12	0.12	0.23	0.44	15.5	83	25.5	92.5	6.4	1.1
96 great towns includ'g L'don population exceeding 50,000	23.3	12.3	0.01	0.00	0.08	0.04	0.13	0.15	0.23	0.40	19.3	87	33.2	92.5	6.8	0.7
148 smaller towns, census population 20,000-50,000 ...	22.7	11.3	0.01	0.00	0.05	0.03	0.11	0.11	0.26	0.35	15.6	84	17.7	93.5	5.1	1.4
London... ..	22.3	12.4	0.01		0.05	0.06	0.12	0.25	0.23	0.42	21.3	80	49.2	91.6	8.2	0.2
Cheadle Rural District ...	22.6	11.03	0.06	0.00	0.03	0.06	0.00	0.06	0.34	0.24	7.6	66	6.0	98.7	1.0	0.3

DEATHS.

The total number of Deaths registered during the year was 377, but after making allowance for outward and inward transfers, the total number given by the Registrar General is 317, including 151 males and 166 females. This gives a recorded death rate of 11·03, which is lower than that of any preceding year, even after making allowance for the increase in population.

Deaths of Children under 12 months of age.

The total number of deaths of children under 12 months of age registered during the year was 43, including 21 males and 22 females. This gives an infant mortality rate of 66 per 1000 births, a very satisfactory decrease on that of the preceding year, when the infant mortality rate was 92. Of the 43 deaths, no less than 24 were due to congenital debility, malformation and premature birth, pointing to the urgent need for improving the antenatal life of the child, and for promoting a healthier condition of the parents.

During the year 5 deaths of illegitimate children were registered, making the illegitimate infant mortality rate 238 per 1000 illegitimate births.

Mortality from Various Diseases.

The following table—M.13—gives in detail the number of deaths from the various diseases.

Causes of Death (Civilians only)				M.	F.	Causes of Death.				M.	F.
All Causes ¹...	...	...	...	151	166	23 Appendicitis and typhilitis ...	...	...	...	2	2
1 Enteric fever ...	...	...	...	1	1	24 Cirrhosis of liver ...	...	...	...	1	...
2 Small-pox ...	...	...	...	...	...	25 Acute and chronic nephritis ...	...	...	...	2	1
3 Measles...	...	...	...	1	...	26 Puerperal sepsis ...	...	...	...	...	3
4 Scarlet fever ...	...	...	...	...	2	27 Other accidents and diseases of pregnancy & parturition	...	...	...	...	1
5 Whooping cough ...	...	...	...	...	...	28 Congenital debility and malformation, premature birth	...	...	...	13	11
6 Diphtheria ...	...	...	...	1	1	29 Suicide ...	...	...	...	1	...
7 Influenza ...	...	...	...	4	6	30 Other deaths from violence ...	...	...	...	6	1
8 Encephalitis lethargica ...	...	...	...	2	1	31 Other defined diseases ...	...	...	...	31	34
9 Meningococcal meningitis ...	...	...	...	...	...	32 Causes ill-defined or unknown	...	...	...	2	...
10 Tuberculosis of respiratory system ...	...	...	...	7	10	Special causes (included above)					
11 Other tuberculous diseases ...	...	...	...	3	3	Poliomyelitis ...	...	...	...	...	...
12 Cancer, malignant disease ...	...	...	...	9	16	Polioencephalitis ...	...	...	...	...	...
13 Rheumatic fever ...	...	...	...	...	1	Deaths of Infants under 1 year					
14 Diabetes ...	...	...	...	3	...	Total ...	...	...	...	21	22
15 Cerebral hæmorrhage, &c. ...	...	...	...	4	8	Illegitimate ...	...	...	...	1	4
16 Heart disease ...	...	...	...	30	27	Total Births ...				339	312
17 Arterio-sclerosis ...	...	...	...	6	6	Legitimate ...	...	...	...	330	300
18 Bronchitis ...	...	...	...	11	17	Illegitimate ...	...	...	...	9	12
19 Pneumonia (all forms) ...	...	...	...	8	8	Population ...				28,730	
20 Other respiratory diseases ...	...	...	...	1	1						
21 Ulcer of Stomach or duodenum ...	...	...	...	...	2						
22 Diarrhœa, &c. (under 2 years)	...	...	...	2	3						

Respiratory System.

The total number of deaths registered as due to diseases of the respiratory system was 63, including Pulmonary Tuberculosis 17 (7 males and 10 females); Bronchitis 28 (11 males, 17 females); Pneumonia 16 (8 males, 8 females), other respiratory diseases 2. The total death rate from respiratory diseases was 2'1.

In addition to the 17 deaths from Pulmonary Tuberculosis there were 6 deaths registered due to other tuberculous diseases, making the total number of deaths from Tuberculosis 23, and giving a Tuberculosis death rate of 0'8. The death rate from Pulmonary Tuberculosis alone being 0'6.

The number of deaths registered as being due to Influenza was 10, exactly similar to that of the preceding year, and gives an Influenza death rate of 0'34.

Cancer was again responsible for a comparatively large number of deaths—25—including 9 males and 16 females, giving a death rate of 0'87.

The death rate from Encephalitis Lethargica (sleepy sickness) was 0'1, and the death rate from the zymotic diseases was 0'4, the case mortality rate being :—Scarlet Fever, 1'08%; Diphtheria 5'0%; Enteric Fever, 33'3%.

(4) Causes of Sickness.

The chief causes of invalidity and sickness which have been noteworthy in the district during the year have been Influenza and Scarlet Fever. Several epidemics of the former occurred in various parts of the district during the year, but fortunately the type was much milder than that of the great pandemic of 1918—19. Steps were taken by the Council, by means of pamphlets, to make known throughout the district the simplest methods for preventing and combating this very treacherous disease, while the Ministry of Health have provided a vaccine for its prophylactic treatment. This can be obtained by the medical practitioners of the district on application to the local M.O.H.

Scarlet Fever was prevalent throughout the district practically all through the year. This disease was also of a mild type (though a few severe cases occurred) and its great prevalence was for the most part due to its mildness. Many mild cases were detected only after careful investigation, and when unfortunately a considerable amount of the infection had been disseminated. This was particularly noticeable amongst school children, on more than one occasion, children were found to be attending school while in an infectious stage, the disease not having been previously detected or suspected. On this account several schools in the district had to be closed for short periods in order that they might be thoroughly cleansed and disinfected under the supervision of the sanitary staff.

A few cases of Enteric Fever occurred, and in two of them the source of infection was not definitely detected. All were treated in hospital and the measures adopted to prevent any further outbreak of the disease proved satisfactory.

Three sporadic cases of Encephalitis Lethargica were notified during the year. Careful investigations as to the source of the infection proved fruitless, and there was apparently no connection whatever between any of them. The Minister of Health was supplied with details as to each case at the time of its occurrence.

(5) Summary of Nursing Arrangements, Hospitals and other Institutions available for the District.

General home nursing is carried out by District Nursing Associations, of which there are ten in the district. These Associations for the most part co-operate with the Staffordshire Nursing Association, with which they are affiliated, and are not under the control of the local sanitary authority. Their funds are derived chiefly from voluntary subscribers and from membership subscriptions, though they also derive a certain amount of financial assistance from the County Council and from the local authority.

With the exception of measles—for which the County Council have arranged to give nursing assistance in necessitous cases during an epidemic—no special arrangements are made for nursing infectious cases in the home, but the local infectious diseases hospital provides fairly adequate facilities for hospital treatment.

Midwifery practice is carried out to a great extent by the midwives, of whom there are 19 trained and 7 untrained in the district. None of these is employed by or subsidised by the local authority.

There is at present only one Maternity and Child Welfare Centre in the district, and that is situate in the town of Cheadle. The organisation is an entirely voluntary one, started by some of the ladies of the town 6 years ago. Meetings are held fortnightly in the Wesleyan Schoolrooms—3 rooms being set aside for this purpose—and from the number of attendances appear to be greatly appreciated by the mothers of Cheadle. The rooms are, however, not all that could be desired, one of the chief drawbacks being the inadequacy of the water supply.—This will be more acutely felt should any treatment of minor ailments be undertaken.

It is intended to hold a school clinic in the above premises at an early date, and this will be under the control of the County Council. No local provision has been made for the treatment of Venereal disease, other than that carried out by the local practitioners, but when necessary cases are treated at the North Stafford Infirmary, Stoke-on-Trent.

A Tuberculosis Dispensary is held weekly at Cumberland House, Cheadle. This consists of two rooms—a waiting room and a consulting room—and is under the control of the County Council.

Hospitals provided or subsidised by the Local Authority or by the County Council.

The Cheadle district infectious diseases hospital is provided by the local authority for the treatment of Scarlet Fever, Diphtheria and Enteric Fever. The North Staffordshire Joint Smallpox Hospital, at Bagnall, is partly maintained by the local authority.

The County Mental Hospital at Cheddleton is the only large hospital within the district. It is controlled by the County Council, and is subsidised to some extent by the local authority.

Outside the district, but receiving patients from the district, are Hartshill Infirmary, Stoke-on-Trent, Longton Cottage Hospital, Longton, and Longfields Cripples' Home, Stoke-on-Trent. All these are Voluntary Hospitals, and to "Hartshill" and Longfields the local authority makes yearly subscriptions.

The Staffordshire and Wolverhampton and Dudley Joint Committee have provided Sanatoria for the treatment of persons suffering from Tuberculosis i.e. at Moxley, Himley, Groundslow and Yarnfields, for men, children and women respectively. Provision is made for prospective unmarried mothers, on payment of 40/- per week for six weeks, at the Mrs. Legge Memorial Home, Wolverhampton, while homeless children, and to a certain extent illegitimate children, are provided for at the Cheadle Union Infirmary and Cottage Homes.

Apart from ambulances in connection with certain industries no facilities are provided for other than infectious cases, for which a horse ambulance is stationed at the Isolation Hospital, Cheadle.

(6) Laboratory Work.

The County Council has made arrangements for gratuitous bacteriological examinations at Birmingham University, in suspected cases of Diphtheria, Enteric Fever, Tuberculosis, Cerebro-spinal Fever and malaria, and the extent to which these facilities are appreciated and taken advantage of will be seen from the following figures:—

No. of Diphtheria swabs examined during 1921...	...	140
„ samples of sputa from suspected cases of Tuberculosis during 1921...	...	63
„ Vidal Reactions tested in suspected cases of Enteric during 1921...	...	8

List of Adoptive Acts, Byelaws and Local Regulations in force in the district:—

ADOPTIVE ACTS:—

Public Health Acts' Amendment Act, 1890. Part III.

BYELAWS:—

New Streets and Buildings. 7th June, 1911.

Nuisances { Cleansing of Footways and Pavements.
Removal of house refuse from premises, and the cleansing of privies, ashpits & cesspools. 7th June, 1918.

Dairies, Cowsheds and Milkshops. 1st August, 1902.

Slaughter Houses. 21st June, 1912.

(7) Sanitary Administration.

No. of Slaughter Houses in use in the district :— Registered, 32 ; Licensed, 3 ; Total, 35.

Some of the slaughter houses are still defective, and many are in need of minor repairs and improvements.

SCAVENGING.

There have been no practical alterations made in the scavenging of the district.

During the year 3000 loads of nightsoil, and 6,900 loads of ashes have been removed by the Council's own workmen and the various contractors.

Sale of Food and Drugs Act.

No proceedings have been taken under this Act, but a considerable amount of "foreign meat" has been condemned as unsound and unfit for human food.

Improvements carried out during the year.

No. of cesspit privies converted to W.C.'s	...	...	10
Additional W.C.'s	...	...	11
Cesspit privies converted to pail privies	...	...	75
Totally new pail privies	...	...	12
New pails provided (including conversions)	...	...	137
Privy Middens abolished	...	...	11
Ashbins replacing ashpits...	...	...	89
New ashbins provided	...	...	139
New W.C's replacing defective ones	...	...	6
Improvements to slaughter houses	...	...	6
Premises in which infected bedding and furniture were destroyed	...	...	1
Obstructions removed from drains	...	...	56
Drainage improvements	...	...	71
Schools disinfected	...	...	8
Premises „	...	...	231
Repairs to Houses	...	...	72
Inspection under Housing Acts	..	...	321
Public Health Acts notices served	...	...	141
Informal notices served	...	...	254
Number of visits under Public Health and Housing Acts	...	...	2120
„ dwellinghouses inspected for housing defects	...	...	1220
„ slaughter houses inspected	...	...	32
„ dairies, cowsheds and milk shops inspected	...	...	146
„ bakehouses inspected	...	...	6

Disinfection and disinfestation of Premises is carried out by the assistant sanitary inspector, the methods in use being antiseptic spraying and the production of vapour from "Formalin" lamps.

(8) Public Health Staff.

David McGruther Wilson, M.B., Ch.B., D.P.H., M.O.H., M.O. Infant Welfare Centre, School Medical Inspector, M.O. Union Infirmary and Cottage Homes.

Fred T. Inskip, Inspector of Nuisances Certif. R.S.I., Sanitary Inspector and Surveyor.

John E. Blakeway, Inspector of Nuisances Certif. R.S.I.; Inspector of meat and other foods Certif. R.S.I.; Assistant Sanitary Inspector and Assistant Surveyor.

HOUSING.

Number of New Houses erected during the year :—

(a) Total—52.

(b) as part of Municipal Housing Scheme—18.

I. UNFIT DWELLING HOUSES.**INSPECTION.**

- | | | | |
|-----|---|-----|------|
| (1) | Total number of dwelling-houses inspected for housing defects (under Public Health and Housing Acts | ... | 1220 |
| (2) | No. of dwellinghouses that were inspected and recorded under the Housing (Inspection of District) Regulations, 1910 | ... | 321 |
| (3) | Number of dwellinghouses found to be in a state so dangerous or injurious to health as to be unfit for human habitation | ... | 100 |
| (4) | Number of dwellinghouses (exclusive of those under the preceding sub-heading) found not to be in all respects reasonably fit for human habitation | ... | 180 |

2. REMEDY OF DEFECTS WITHOUT SERVICE OF FORMAL NOTICE.

Number of defective dwelling houses rendered fit in consequence of informal action by the local authority or their officers	32
---	-----	-----	-----	----

3. ACTION UNDER STATUTORY POWERS.

(A) Proceedings under Section 28 of the Housing, Town Planning, &c., Act, 1919.

- | | | | |
|-----|---|-----|------|
| (1) | Number of dwelling houses in respect of which notices were served requiring repairs | ... | 30 |
| (2) | Number of dwelling houses which were rendered fit : | | |
| | (a) by owners | ... | 16 |
| | (b) by Local Authority in default of owners | ... | nil. |
| (3) | Number of dwelling houses in respect of which closing orders became operative in pursuance of declaration by owners of intention to close | ... | nil. |

(B) Proceedings under Public Health Acts.

- | | | |
|-----|---|------|
| (1) | Number of dwelling houses in respect of which notices were served requiring defects to be remedied... | 20+ |
| (2) | Number of dwelling houses in which defects were remedied : | |
| (a) | by owners... .. | 124 |
| (b) | by Local Authority in default of owners ... | nil. |

(c) Proceedings under Sections 17 and 18 of the Housing, Town Planning, etc., Act., 1909.

- | | | |
|-----|--|------|
| (1) | Number of representations made with a view to the making of Closing Orders | 2 |
| (2) | Number of dwelling houses in respect of which Closing Orders were made | nil. |
| (3) | Number of dwelling houses in respect of which Closing Orders were determined, the dwelling house having been rendered fit | nil. |
| (4) | Number of dwelling houses in respect of which Demolition Orders were made | nil. |
| (5) | Number of dwelling-houses demolished in pursuance of Demolition Orders | nil. |

Difficulty has again been met with in getting repairs and improvements carried out as expeditiously as is desirable, owing chiefly to the prevailing economic conditions, while lack of alternative accommodation has greatly hindered representations being made with a view to the making of Closing Orders in respect of those houses that are deemed to be unfit for human habitation.

I am, gentlemen,

Your obedient servant,

D. M. WILSON.

CHEADLE,

May, 1922.

