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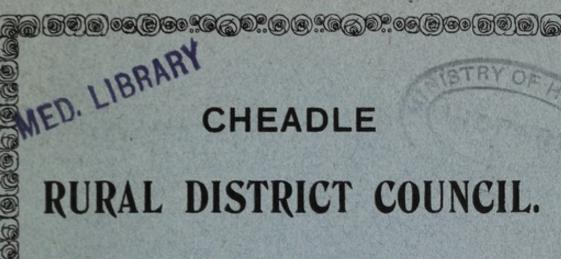
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Annual Report

OF THE

MEDICAL OFFICER OF HEALTH.



1925.

J. LOWNDES, PRINTER, CHEADLE.



TO CHEADLE RURAL DISTRICT COUNCIL.

Mr. Chairman. Ladies and Gentlemen,

I have pleasure in presenting my report for the year ending 31st December 1925, which as directed by the Minister of Health takes the form of a "Survey report" and deals comprehensively with the progress made in the sanitation of the district during the preceding five years.

In reviewing the extent and character of the changes made during that period, the most outstanding feature is perhaps the vast improvement that has been carried out in the water supply of various parts of the District. Cheddleton, Werrington, Wetley Rocks, Alton, Bradley, Tean, and other hamlets in these areas,—all of which for the most part depended previously on wells for their water supply,—have now an excellent and abundant, constant supply of water from springs at Wall Myers, Ramsor and Teanford; and although the sum of money expended in completing the schemes for the water supply of these villages is a large one the justification is in the improvement in health that is bound to be felt and appreciated by all who receive water from these sources.

Several important advances in the disposal of Sewage have been made during the period under review. At Weston Coyney a complete new sewage disposal works has been constructed, and another of similar type has been built at Froghall—this latter dealing with the sewage from Kingsley Holt. A small new sewer and outfall works has been constructed at Wetley Rocks, and at Cheddleton, while many minor improvements have been made to existing sewage schemes in various parts of the district. In Cheadle town the disposal of sewage has been improved by the utilisation of a larger area of land, but there is room for further improvement and with this end in view land that will be suitable for the erection of sewage disposal works at a future date has been acquired.

The scavenging of the district has been greatly improved during the last five years, and a reference to the appendix will indicate the large amount of work that is done by this department.

The Housing question is still a serious one, and although the local authority is, by the granting of subsidies, doing all in its power to encourage the building of houses suitable for the working people, there is still a large amount of overcrowding, and many existing houses are not reasonably fit for human habitation.

When these difficulties are overcome, and the economic conditions improve, the facilities that are now provided for

greater cleanliness of the home and its immediate environment will surely tend to bring about a great improvement in the public health throughout the whole of the district.

> I am, Mr. Chairman, Ladies and Gentlemen, Your obedient servant,

CHEADLE,

D. M. WILSON.

APRIL, 1926.

Extracts from Vital Statistics.

BIRTHS:—Legitimate: Total, 492 (Male 237, Female 255); Illegitimate: Total 20 (Male 10, Female 10); Birth Rate 19'3

DEATHS:—Total 271 (Male 130, Female 141); Death Rate 10'2.

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

Deaths of infants under 1 year of age per 1000 births:

Legitimate 70'3; Illegitimate 9'7 Deaths from Measles (all ages) 6.

Deaths from Whooping Cough (all ages) 6.

Deaths from Diarrhœa (under 2 years of age) 6.

General Statistics.

Area (acres)	54,258 1921 1925
Population (census 1921, and estimated 1925).	28,730. 26,430.
Physical features and general character of	
Dale chiefly Woodland and Agricultu	ral.
Number of inhabitated houses (1921)	5,886
Number of families or separate occupiers (19:	21) 6,004
Rateable Value	£131,325/17/7
Sum represented by a penny rate	£438

Natural and Social Conditions of the District.

The area of the district (including land and inland water) is 54, 258 acres, the greater part consisting of agricultural land and woodland, though much of the latter has been laid bare during the

last few years.

In the northern part of the district the ordanance map levels vary from 750 ft. to 1000 ft. above O.D.; in the Western area (N. to S.) the variations are 750 ft.—850 ft.—650 ft.—600 ft.; in the Southern area (W. to E.) 500 ft.—700ft.; in the Northeastern area 800 ft.—1,100 ft.; and in the South-eastern area the ordnance map level is 600 ft. O.D.

The highest level is reached near Foxt Reservoir, 1,244 ft. O.D., and the lowest level on the Tean—Uttoxeter Road, 414 ft.

O.D.

These figures give some indication of the nature of the district, which is chiefly comprised of hills and valleys, with numerous small streams and brooks, and one small river, "The Churnet," running through it.

The inhabitants of the district are comprised chiefly of the "working class," there being only a very small number of

residential houses throughout the whole area.

The principal industry is coal mining—at Cheadle, Dilhorne, and to a small extent at Froghall. Silk mills at Cheadle and Tean give employment to a large number of women. Brass and copper works at Froghall and Oakamoor give employment to upwards of 1,500 men, and a few are employed at brickmaking at Cheadle. At Cheddleton an increasing number of the inhabitants are finding employment in a large and up-to-date paper mill, while stone quarrying is an important industry at Cauldon Lowe and at Hollington, and throughout the district an increasing number are employed in agriculture.

There is no great prevalence of industrial diseases. A few cases of Nystagmus and other eye troubles occur annually amongst the coal miners, but the district is markedly free from these diseases, and it is to be noted that anæmia is much less prevalent amongst those working in the mills, probably on account of the improved sanitation and the tendency of the

workers to spend much more of their time in the open air.

FACTORIES AND WORKSHOPS.

The number of Factories and Workshops on the register is 116. The Workshops are comprised generally as follows:—Boot and shoe makers, bakers and confectioners, joiners, smiths, wheelwrights, painters and plumbers, motor repairers, dressmakers and milliners.

During the year 102 visits were made—32 to Factories, and 70 to workshops. In no instance has any serious nuisance been found arising from employment in these places, but in two where there was insufficient sanitary accommodation this condition has now been remedied.

BIRTHS AND DEATHS.

The numbers of Births and Deaths are those registered during the calendar year and are corrected for inward and outward transfers. The population has been estimated by the registrar-general as at 30th June, 1925, and is based on the adjusted 1921 figures after allowance for the varying rates of natural increase, as evidenced by the births and deaths in each area, and of migration, as indicated from other sources of information, such as changes in the numbers on the electoral register and the migration returns obtained by the Board of Trade.

1. Inspection of Factories, Workshops and Workplaces.

Including Inspections made by Sanitary Inspectors or Inspectors of Nuisances.

de la linea de la		Number of	DISTRIBUTE OF THE PARTY OF THE
Premises (1)	Inspections (2)	Written Notices (3)	Occupiers Prosecuted (4)
FACTORIES (Including Factory Laundries)	32	2	
WORKSHOPS (Includ Workshop Laundries)	70	nil	
WORKPLACES (Other than Outworkers' Premises)			
Total	102	2	nil

2. Defects found in Factories, Workshops and Workplaces

	Nu	mber of De	fects	Number of
Particulars (1)	Found (2)	Remedied	Referred to H.M. Inspector (4)	offences in respect to whichprose- cutionswere instituted (5)
Nuisances under the Public Health Acts:—		SKOTO		
Want of cleanliness				PARTE -
Want of ventilation				
Overcrowding		20000	and the	- 1100
Want of drainage of floors			- artista	La Car
Other nuisances			NAME OF THE OWNER, WHEN	A THE
Sanitary accommodation insufficient unsuitable or defective not separate for sexes	2	2	nil	nil
Offences under the Factory and Workshop Acts:—				Name of the last
Illegal occupation of underground bakehouse (s. 101)				
Other offences (Excluding offences relating to outwork and offences under the Sections mentioned in the Schedule to the Ministry of Health (Factories and Workshops Transfer of Powers) Order, 1921.)				
Total	2	2	nil	nil

	Causes of Death (Civilians only).	1	M. I	F.	Causes of Death.	М.	F.
All	Causes	13	30 14	11	23 Appendicitis and typhlitis 24 Cirrhosis of liver		
2 3 4 5 6 7 8 9 10	Enteric Fever Small pox Measles ScarletFever Whooping Cough Diphtheria Influenza Encephalitis lethargica Meningococcal meningitis Tuberculosis of respiratory system Other tuberculous diseases Cancer, malignant disease Rheumatic Fever		1 7 4 8 1	3 1 6 1 2 2 7 1	25 Acute and chronic nephritis 26 Puerperal sepsis 27 Other accidents and diseases of pregnancy & parturition 28 Congenital debility and malformation, premature birth 29 Suicide 30 Other deaths from violence 31 Other defined diseases 32 Causes ill-defined or unknown Special causes (included above) Poliomyelitis Polioencephalitis	1 10 4 6 20 3	3 1 5 2 26
14 15 16 17 18 19 20 21	Diabetes	2 1	5 22 2 11 3 1	1 8 7 4 2 1 1 1 3	Deaths of Infants under 1 year Total Illegitimate Total Births		16 1 265 255 10

Births.

The total number of Births registered during the year was 512, including 247 males and 265 females. Calculated on a mid-yearly population of 26,430, this gives a birth-rate of 19'3, considerably lower than that of the preceding years.

Deaths.

The total number of Deaths registered during the year was 271, including 130 males and 141 females. This gives an annual death-rate of 10'2, slightly greater than that of the preceding year.

The total number of deaths registered of Children under 12 months of age was 41, including 24 males and 17 females, and gives an infant mortality rate of 80 per 1000 births.

Amount of Poor Law Relief.

Cost of Indoor Maintenance for year: £2581/11/3.

Average number of Persons receiving indoor relief: 93.

Cost of Outdoor Maintenance for year: Out Relief, £3120/8/7½.

Non-settled Poor, £189/15/2.

Average number of persons receiving outdoor relief: 272.

Birth-rate, Death-rate and Analysis of Mortality during the Year 1925.

(Provisional figures. The rates for England and Wales have been calculated on a population estimated to the middle of 1925, while those for the towns have been calculated on populations estimated to the middle of 1924. 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.)

Cheadle, 1921	Cheadle, 1922	Cheadle, 1923	Cheadle, 1224	Cheadle Rural District	London	42	90	England and Wales	Birth-rate	ner
22.6	21.4	20.2	21.9	19:3	18.0	18.3	18.8	18.3	1000 of populat	total
11.03 0.06	10 0	10.1	10.0	10'2	11.7	11.2	12.2	12.2	All causes	
	0.00	0.00	0.00	0.00	10.0	10.0	10.0	0.01	Enteric fever	An
0 00	0.00	0.00	0 00	0.00	0.00	0.00	0.00	0.00	Small-pox	nual D
0.03	0.00	0.07	0.04	0.22	0.08	0.15	0.17	0.13	Measles	eath-ra
0.06	0.00	0.03	0.00	0.03	0.02	0.02	0.03	0.03	Scarlet fever	Annual Death-rate per 1,000 population
0.00	0.15	0 00	0.07	0.22	0.19	0.14	0.18	0.12	Whooping cough	1,000 p
0 06	0.26	0.19	0.04	0.03	0.11	0.06	0.09	0.07	Diptheria	opulati
0.34 0.24	0.52	0.34	0.26	0.52	0.23	0.31	0.30	0.32	Influenza	on
0.24	0.26	0.28	0.26	0.30	0.46	0.38	0.43	0.47	Violence	
76	10.5	11.3	3.4	11.7	10.6	7.6	10.8	8.4	Diarrhœa & enteritis under 2 years	Rate per 1,000 births
66	65	90.5	88	80	67	74	79	75	Total Deaths under one year	per births
98.7	96.2	94 4	93.2	93'1	91.1	93.0	92.1	92.1	Causes of Death certified by Registered Medical Practitioners	Percentage of total deaths
1.0	3:1	5.1	5.6	5.0	8.9	5.9	7.3	6.9	Inquest cases	f total
0.3	0.7	0.3	1:1	1.8	0.0	171	0 6	1.0	Uncertified causes of death	deaths

Cost of Maintaining Boarded-out Children: £226/1/4.

Average number of children boarded out: 10.

Cost of Maintaining Children in Cripples' Home: £303.

Subscription to North Staffs. Royal Infirmary: £10/10s.

Subscription to Buxton Hospital: £2/2s.

WATER SUPPLY.

Cheadle town and its immediate surroundings are supplied with good and wholesome water by the Cheadle Waterworks Company. The water, after filtration through the red sandstone formation, is pumped from a deep well to a reservoir, and thence distributed in iron mains. This is now a continuous supply, except for a few hours on Thursday afternoons, when cleaning operations are in progress at the reservoir.

The villages of Weston Coyney, Caverswall Blythe Bridge and Forsbrook receive an adequate supply of water from the neighbouring City. Dilhorne, Godley Brook and district are supplied with water through two miles of cast iron mains, from springs near Stansmoor. Oakamoor is supplied from springs in the surrounding woods, the water being brought to the village through mains to standpipes. Kingsley, Froghall and Kingsley Holt are supplied from springs at Shirley Hollow, between the villages of 1pstones and Foxt. The water is brought from these springs to a reservoir close to Kingsley village, from whence it is distributed through cast iron mains. Owing to bursts, and probably, to some extent, to the main being tapped to supply a large number of houses before it reaches the reservoir, there have on many occasions been serious shortages of water in the village, and at the present time the houses in the higher parts and more outlying districts are very inadequately supplied with water for drinking and domestic purposes.

The villages of Ipstones and Foxt are adequately supplied with water from springs at Ipstones Park.

Waterhouses and Cauldon Lowe obtain their water supply from the L.M.S. Railway Company's reservoir, the supply being wholesome, adequate and constant.

Whiston now receives an abundant supply of good and wholesome water from springs in that neighbourhood, and as this is much greater than is necessary for the needs of that village, it might well be used to supplement the supply of Kingsley and district.

The water scheme for supplying Cheddleton, Wetley Rocks, Werrington etc., has now been completed, and these villages have a plentiful supply of good and wholesome water distributed through cast iron mains from springs at Wall-Myers.

The Tean Water scheme has also been completed and the village of Tean and surrounding district has now an adequate supply distributed through cast-iron mains from a reservoir in the neighbourhood to which water is pumped from springs at Teanford.

Alton village and neighbourhood is supplied by gravitation from springs at Ramsor from which water is collected in a reservoir and thence led to the village and distributed through cast-iron mains.

In the village of Hollington there has been no improvement made in the water supply which is derived mainly from two wells. The question of extending the Tean scheme to supply this village and the hamlet of Freehay has been seriously considered by the local authority but so far the cost of such an extension has been found to be prohibitive.

Drainage and Sewerage.

The efficient drainage and sewerage of a rural district present many difficulties, and although there is room for much improvement in Cheadle district many important additions to existing sewers have been carried out in various of the villages. local authority has adopted the policy, in adding to existing sewers and drains and in laying new sewers, of constucting these in such a manner as will enable them to be utilised as part of a complete scheme. By this means comprehensive schemes are gradually being carried out and existing nuisances and in time most of the villages will be adequately sewered and drained. In addition modern sewage and outfall works have been constructed at Weston Covney and at Froghall, while at Cheadle and in the villages of Cheddleton and Wetley Rocks land has been acquired for this purpose. There are however still certain villages very badly in need of improved sewerage and drainage-noteably Kingsley, Alton, Tean, Ipstones, Dilhorne and Alton, and in Cheadle there are still some areas unsewered. For these reasons some pollution of brooks and streams running through or past these villages is to be noted, and so marked is this nuisance at Kingsley that a new sewage scheme and outfall works for that village is in preparation.

Scavenging.

The scavenging of Cheadle town is carried out by the Council's own teams and workmen, an arrangement that has proved entirely satisfactory.

In the villages of Blythe Bridge, Forsbrook, Dilhorne, Caverswall, Werrington, Cheddleton, Wetley Rocks, Kingsley, Ipstones, Foxt, Oakamoor, Hollington and Tean the scavenging

is contracted for, the arrangements being left to the Parish Council, acting for this purpose as a sub-committee of the District Council, and although an arrangement of this sort must depend for its success or otherwise, to a great extent on the individual contractor, very few complaints of inattention are received.

There are still two villages in which adequate arrangements for scavenging have not yet been made, the disposal of nightsoil and household refuse being left to the villagers themselves, and in many instances very objectionable nuisances have arisen from this source.

Number of night soil removals by scavengers for 1925... 69,382 Number of refuse and ashes removals by scavengers for 1925 ... 78,053

Closet Accomodation.

Throughout the whole district Ashpits and Privy closets are being gradually abolished. Whenever a nuisance arises from these sources, ashbins are installed to replace the former and W.C's or Pail closets to replace the latter. A reference to the appendix will give an indication of the changes that have taken place in this direction during the year 1925.

Estimated number of dwelling houses using water closets
,, ,, moveable pails
1,760
,, ,, earth closets or
Privies with fixed receptacles ... 3,002

Estimated number of dwelling houses using covered
ashbins 2,205

Estimated number of dwelling houses using open ashpits
,, ,, covered ashpits 1,762

SCHOOLS.

There are 28 Elementary schools in the district, most of which have been much improved during recent years. The R.C. school, Cheadle, has had new lighting and heating apparatus installed and new modern cloak rooms added so that it can now be regarded as a comparatively modern school.

Cheadle Council school has had a large class room added to it.

Ipstones school has had new closet accomodation provided and is much better drained than formerly, and Foxt school has had several sanitary improvements carried out. In many of the others minor improvements have been made, though little attention has been paid to the provision of adequate cloakroom accomodation and facilities for drying clothes and boots. This is a matter deserving the serious consideration of the school

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authorities, as in a rural district with a scattered population, many of the children have to walk several miles to school, and it is very essential that adequate provision should be made for changing and drying their clothes when neccessary. Several schools that were previously without an adequate supply of drinking water are now well supplied owing to the several water schemes that have been carried out by the local authority, but in this respect the schools at Hollington and Freehay are still defective, while the water has not yet been laid on to the schools in the village of Tean.

During the year several schools or departments of schools have been closed for short periods owing to outbreaks of infectious disease amongst the scholars, but this measure has seldom provided a check to the outbreak. Even in a rural district school closure,—except in the very sparsely populated areas—does not appear to have any very definite effect in preventing the spread of disease, no doubt because of the difficulty in keeping the children from congregating in other places. There is however greater prospect of epidemics affecting school children being checked by individual exclusion from school owing to the promptitude with which head teachers now report children suspected to be suffering from infectious disease to the M.O.H.

HOUSING.

The estimated number of houses in the district is 5769 of which the great majority are of the "working class" type. It will be observed that the estimated number of houses for the year 1925 is less than the number given for the year 1921, and also that the population of the district estimated for 1925 is still markedly less than it was in 1921. This is due chiefly to the altered area of the district brought about by the extension of the then County Borough of Stoke-on-Trent, the number of acres taken over by the County Borough being 1,260, with an estimated population of 3,834, the number of houses being 767, while there was added to the Cheadle Rural District an area of 1,346 acres with an estimated population of 545, the number of houses added being 109. It is therefore to be observed that though the population of the district is less now than it was in 1921, it does continue to increase gradually—from 25,163 in 1922 to 26,430 in 1925. This is a normal rate of increase, due chiefly to the excess of Births over Deaths. There has been no influx of people to the district during these years nor is there any reason to anticipate an abnormal increase or decrease in the population during the next few years. Although the general standard of the houses throughout the district has improved, due chiefly to the energy displayed by your inspectors-note the comparatively large number of improvements carried out through informal action on their part,—there are still many that are structurally defective, damp, lacking in proper sanitary conveniences, and poorly ventilated.

Apart from structural defects there are still many houses overcrowded, many have more than one family living in them though not adapted for this purpose, and a much larger number than is given in the statistics are unfit for human habitation. It is not possible to give definite figures for these as your staff with its multitude of other duties is quite unable to make a complete survey of the district in 12 months. It is however intended that some of the very bad cases should be dealt with and already several representations with a view to the making of closing orders have been made, other defective dwellings being dealt with by requiring owners to carry out such alterations and repairs as will render the houses reasonably fit for human occupation. Below are given details of the Housing statistics for the Year and details of other sanitary matters.

Housing Statistics for the Year 1925.

- (A) Total [including numbers given under (b)] -108.
- (B) With State Assistance under the Housing Acts:
 - (i) By Local Authority-nil.
 - (ii) By other bodies or persons-48.

I. UNFIT DWELLING-HOUSES.

INSPECTION.

- (A) Total number of dwelling-houses inspected for housing defects (under Public Health and Housing Acts) ... 924

 (B) Number of houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910 102
- (c) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation 12
- (D) Number of dwelling-houses (exclusive of those referred to in the preceding sub-heading) found not to be in all respects reasonably fit for human habitation ... 77

II. REMEDY OF DEFECTS WITHOUT SERVICE OF FORMAL NOTICES.

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers ... 174

Maternity and Infant Welfare.

Particulars relating to the Work during the Year 1925.

								Bir	Births								The same of the sa
	18 41 14 18 1				Not	Notified	***		LEVE I				Trans	Transfers from other Districts during the Month.	be Mont	Districts b.	
	Live	Live Births			Stillborn	DOTE		. B	•	By Pa	arents	Une		Over te	n days		year
Full term	term	Premature	ature	Full term	term	Premature	ature	Midv	Midwives	Doc	Doctors	ten	ten days	and under	year		and under five
L.	I.	L.	I.	ï	T.	L.	T.	L.	I.	r.	1.	L.	I.	L.	I.	T.	1.
407	11	2	0	15	0	=	0	0 343	12	59	0	0	1	29	2	49	0

Fin	First Visits		Rev	Revisits		Total	Total Visits		Children on Visiting List at	siting List at
Machinese National	Dudae	Children Barton of	Representant	Venden	Continue Honton'r	Expectant Mothers	Pyther	Onder Network	Uniday One Vens	One Year and
335	+55+	6.5	302	3847	BYYR	4.40	+271	381.8	****	18847

Children on Visiting List at	One Year and under five	1647
Children on V	Under. One Year	466
	Under Betw'n 1 year 1 & 5 years	5815
Vinite	Under 1 year	4271 5815
Total Visits	Expectant	647
	Under Betw'n 1 year 1 & 5 years	5772
-	Under 1 year	3847 5772
Revisi	Expectant	392
	Under Betw'n 1 year 1 & 5 years	43
Piscat Vinite	Under 1 year	424
Prison	Expectant	255

	No. of cases of	insanitary	reported to Medical Officer of Health			32
	oes			Health Visitor		50
	Attendan		iren	Children Under Betw'n		1055
	Total No. of Attendances		Children	Under	years	604
Welfare Centre	Total			Expectant		19
We			iren	Under Betw'n	years	56
	No. on Books		Children	Under	years	31
	No. on		Expectant			2
Deaths, Transfers and Removals of Children on Visiting List during the Year			Transferred to School	208		
	o ueu			mv'ls	-I.	0
100	ur .		ne year an	s Re	L.	78
3	e Yes		One	Seath	. I	7 0
1	ovalis of the		and	I sl. A	1.	2
Daniel	durir		days :	Rem	L.	30
7	List		Over 10 days and One year and under one year under five	aths	I.	-
-	ISTELS	-	O an	ls De	L.	11
4	, rai		Sr.	emv	. I.	0
1	enns,		Under ten days	Deaths Remy is Deaths Remy'ls Deaths Remy'ls	L. I. L. I. L. II. L. II. L. II. LII.	3 1 0 0 11 1 30 2 7 0 78 0
2	20		-	Dea	L	~

III. ACTION UNDER STATUTORY POWERS.

(A)	Proceedings under Section 28 of the Housing, 7 Planning, &c., Act, 1919.	Γown
(1)	Number of dwelling-houses in respect of which notices	2
(2)	were served requiring repairs Number of dwelling-houses that were rendered fit	2
	after service of formal notices: (a) by owners	2
	(b) by Local Authority	nil
(3)	Number of dwelling-houses in respect of which closing	
	orders became operative in pursuance of declarations by owners of intention to close	*4
(B)	Proceedings under the Public Health Acts.	
(1)	Number of dwelling-houses in respect of which	
	notices—formal or informal—were served requiring defects to be remedied	279
(2)	Number of dwelling-houses in respect of which	
	defects were remedied after service of formal notices: (a) by owners	32
	(b) by Local Authority in default of owners	nil
(c)	Proceedings under Section 17 and 18 of the Housing, Planning Act, 1909.	Town
(1)	Number of representations made with a view to the	.,
(2)	making of closing orders	nil
	closing orders were made	nil
(3)	Number of dwelling-houses in respect of which closing orders were determined,—the dwelling-houses	
(.)	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
	Visits. Number of visits made under the Public Health and	
	Housing Acts	
	Number of visits made to new buildings drains and sewers	133
(3)	,, ,, dairies, cowsheds and milk-	
(5)	shops	103
(6)	" " " re water supply	283
(7)	(licenses) ,, petrol and carbide of calcium	83
	(licenses)	03

(8)	Number of visits made to workshops	66
(9)	(inspection of meat) ,, slaughter houses and shops	
	(inspection of meat)	235
(10)	Number of visits made re offensive trades	4
(E)	Summary of defects remedied.	
(1)	Number of privies and earth closets converted to water-	
, ,	closets	4
(2)	Number of earth closets converted to moveable pail	
	privies	72
(3)	Number of new covered ashbins to replace defective	
	ones	49
(4)	Number of new covered ashbins to replace abolished	
1=1	ashpits	96
4	Number of new privy pails to replace defective ones	17
(6)		51
(7)		10
101	without drains	19
	Number of offensive accumulations removed	23
(9)	,, ,, additional closets provided	11 8
(10) (11)	,, ,, water closets repaired ,, cowsheds or dairies altered after notice	13
2		38
(13)	" " " " " " cleansed " " … " " nuisances abated arising from the	30
(13)	the state of the s	4
(14)	Number of slaughter houses altered after notice	12
	,, ,, informal notices served under Public	
(10)	Health and Housing Acts	154
(16)	Number of statutory notices served under Public	
(,	Health and Housing Acts	44
(17)	Number of informal notices complied with under	
	Public Health and Housing Acts	100
(18)	Number of statutory notices complied with under	
	Public Health and Housing Acts	29
(19)	Number of scavenger's notices served	68
(20)	" " premises disinfected on removal of cases	
	of infectious disease	143
(21)	Number of schools disinfected	16

FOOD.

Slaughterhouses and Meat.

There are 36 private slaughterhouses in use in the district, 26 of which are "Registered" and 10 of which are Licensed. As these are scattered throughout the district it can be well understood what great difficulty is experienced, not only in ensuring that the sanitary authority's Bye-laws are complied with, but in making a proper and systematic inspection of car-

cases, which alone can guarantee to the consumer a good and wholesome meat supply.

Since the Public Health (Meat) Regulations, 1924, and the Tuberculosis Order of 1925 (No. 2), a great deal of time has been spent by your officers in visiting various slaughterhouses for the purpose of inspecting meat, so much so that various other duties have had to suffer, and if the construction of a public abbatoir is out of the question at the moment it is at least desirable that the granting of further slaughterhouse licences should be discouraged.

Number of carcases found Cows Calves Pigs Sheep to be unfit for human food 5 2 nil nil

Number of carcases notified under Tuberculosis Order, 1925 (No. 2)—38. Number of carcases condemned and destroyed under Tuberculosis Order, 1925 (No. 2)—33.

Milk.

The district is adequately supplied with milk produced locally, and although most of the cowsheds are now kept in a more cleanly state, many are in a very insanitary condition, the chief defects being inadequate lighting and ventilation, defective floor paving, and the prevalence of low lofts over the cowsheds. In the production of milk there is still room for improvement, in many cases the cattle are seldom groomed, nor are the milkers particular about the condition of their hands while milking, and as the cleanliness or otherwise of the methods adopted in the production and handling of the milk have probably more effect on its purity than have the premises in which it is produced, this too is a matter that is having the serious attention of your officers.

Bread.

There are very few bakehouses in use in the district, as many dealers in bread who previously baked it on their own premises now obtain it for retailing from large bakeries outside the district. Those bakehouses that are still in use are for the most part small and employ only a very few "hands." They are kept fairly clean, though hardly modern in type, and one or two are structurally poor. Here there is room for improvement in the means adopted in the distribution of bread. It is no unusual sight to see loaves being thrown from hand to hand in their naked state, so becoming very unclean, whereas by adopting the modern method of "wrapping" a much cleaner food would be supplied to the consumer.

MATERNITY AND CHILD WELFARE.

The table given on the centre pages is compiled from figures supplied by the various health visitors of the district, and gives

some indication of the vast amount of work they do in connection with this important branch of preventive medicine.

Although the local sanitary authority is not responsible for this work it may interest the individual members to know that a very successful Welfare Centre is held in the Wesleyan Schoolrooms, Cheadle, every Wednesday after noon. This centre was opened about 11 years ago and was organised and controlled by a committee of local ladies, most of whom still take an interest in it, and act as "voluntary workers." Now the County Council is responsible for the work done there, having taken it over some four years ago, and it is shortly their intention to hold at the same premises an antenatal clinic at which expectant mothers will be able to obtain advice calculated to benefit their health and that of the unborn babe.

ISOLATION HOSPITAL.

The Isolation Hospital stands in its own grounds—2 acres—and is situated at Moss Lane, about one mile from the town of Cheadle. Accommodation is provided for patients suffering from Scarlet Fever and from Diphtheria, though it has been found possible to treat cases of other infectious disease, such as Encephalitis Lethargica, Cerebro-spinal Meningitis and Typhoid there when occasion has arisen.

Since the Hospital was built in May, 1904, a total of 2027 cases of infectious disease have been treated there.

During the year 1925 there were admitted to hospital 137 cases of infectious disease, including 93 cases of Scarlet Fever and 44 cases of Diphtheria, the number of these cases in hospital at the end of the year being 19 and 3 respectively.

It will be seen from figures given elsewhere that much greater use is now being made of the facilities offered for both isolation and treatment of these two diseases at the hospital, and as the accommodation there has at times been taxed to its utmost the Council's attention is again drawn to the desirability of providing a bathing room for the observation block, which could then be used for observation of cases, and as a ward in time of need.

Age-incidence of Patients admitted to Hospital during 1925.

Age	Sca	arlet Fever	Diphtheria
Under 5 years of age		12	8
5 years and under 10		39	7
10 years and under 15		19	11
15 years and under 20		10	4
20 years and over		13	14

Table showing the cases treated in Hospital during the preceding 5 years.

			1920	1921	1922	1923	1924	1925
Scarlet Fever			94	171	70	49	54	93
Diphtheria			50	31	14	39	39	44
Typhoid Fever			1	5	_	-	_	-
Encephalitis Let	hargio	a	-	1		-	2	-
Total			145	208	84	88	95	137

SICKNESS AND INVALIDITY.

Table showing distribution of Infectious Disease throughout the District.

Registration Districts	Scarlet Fever	Diphtheria	Tuberculosis	Pneumonia	Ophthalmia Neonatorum	Puerperal Fever	Malaria	Encephalitis Lethargica	Dysentery	Erysipelas	Meningitis	Enteric	Memb. Croup	Acute	Total
Cheadle	28	19	17	23		1		1	2	4				1	97
Dilhorne	16	3	9	3						1	1				34
Ipstones	42	11	15	20	3		5	1	8	13		1			119
Alton	16	6	7	8						2					39

The causes of sickness and invalidity that have been most noteworthy in the district are Influenza and its complications, Pneumonia, Tuberculosis. Scarlet Fever, Diphtheria, Measles, Whooping Cough, Chickenpox and Mumps.

Influenza has been prevalent throughout the whole period and although much milder in type than that of the great pandemic of 1918-19 has been a cause of much sickness and invalidity. Most cases of this disease are treated in their own homes, but the local authority issue pamphlets indicating simple measures that should be taken to prevent and combat this treacherous disease. Pneumonia—still a very fatal disease—and Tuberculosis were also a source of serious illness. The latter does not appear to be diminishing to any great extent in this district, though this may in part be due to improved clinical and X-Ray methods used in the detection of this disease, which can now be diagnosed in a much earlier stage than formerly.

Its early detection and treatment enable many affected persons to be restored to normal health and should eventually lead to a much lessened incidence of this Disease.

Tuberculosis.

	Age Periods		Pulme		No Pulm	on-				Non- lmonary	
			M.	F.	M.	F.	M.	F.	M.	F.	
0			-	-	_	-	-	-	-		
1			-	-	-	-	_	-	1	-	
5			1	1	3	1	-	-	1		
10			1	2	3	1	_	_	_	_	
15			2	1	_	1	_	1	-	1	
20			5	3	_	_	_	_	_	_	
25			3	2	_	1	3	2	-	_	
35			5	3	1	_	1	_	_	_	
45			1	1	_	_	2	1	1	_	
55			2	2	-	_	_	1			
	and upwards		2	_	_	_	3	_	_	_	

Scarlet Fever causes much invalidity each year and is practically endemic in this district. It is however now a comparatively mild form of infectious disease and it is in great part to its mildness that its prevalence is due. Many mild cases have been detected only after careful investigation, and unfortunately after a considerable amount of infection has been disseminated.

Diphtheria, too, appears to be taking a milder form, although still rather prevalent in the district. There are, however, now many cases of this disease notified which in former years would not have been regarded as diphtheria (that is, persons harbouring diphtheria bacilli in their throats though not showing any definite clinical signs of this disease). This is owing to the difficulty in differentiating virulent from avirulent types of the microbe, and although it causes an apparent increase in the incidence of the disease, it has the great advantage that it enables suspects to be isolated and if necessary treated at an early stage.

Much sickness was caused amongst infants and school children by measles, an epidemic of which spread practically throughout the whole district during the early part of the year. This was followed by an epidemic of whooping-cough, which was also very prevalent and caused much sickness amongst young children. Both these diseases are very infectious and are very difficult to check, owing to their infectivity during the incubation stage and before they can be diagnosed, but if parents and guardians would take a more serious view of them much could be done by early isolation to prevent the outbreaks from becoming so widespread.

Chickenpox and mumps have also been a source of invalidity amongst children in certain parts of the district, whilst a few sporadic cases of Encephalitis Lethargica have been notified. There have also been notified from Cheddleton Mental Hospital a few cases of Dysentery—not uncommon in these institutions and a few cases of Malaria, the latter having been caused by innoculation. During the period under review there have been no outbreaks of very fatal infectious disease, but much time is lost to school children by these various infections. It is satisfactory to note that there have been very few cases of epidemic diarrhœa amongst children during the period under review, probably due to the much greater care that is taken in the house to prevent milk being contaminated and to the habit, so common in many families, of boiling milk before using it as a food for infants.

The few cases of Ophthalmia Neonatorum that have been notified have been for the most part treated at home, and this successfully as in no instance does there appear to have been any impairment of vision.

Opthalmia Neonatorum.

	Cases		Vision	Vision	Total	
Notified		ated In hosp'l	unim-	impaired		Deaths
3	3	-	3	-	-	-

Prevalence of and Control over Infectious Diseases.

Disease	Cases	Cases admitted to Hospital	Total Deaths	
Smallpox	 	nil	nil	nil
Scarlet Fever	 	102	93	1
Diphtheria	 	39	44*	1
Enteric Fever	 	1	nil	nil
Puerperal Fever	 	2	nil	1
Pneumonia	 	55	nil	25
Dysentery	 	16	nil	2
Ophthalmia Neonatorum	 	3	nil	nil
Erysipelas	 	20	nil	nil
Encephalitis Lethargica	 	2	nil	1
Malaria	 	5	nil	nil
Poliomyelitis	 	1	nil	nil
Cerebro-Spinal Meningiti		1	nil	1

^{*6} of the cases admitted to hospital proved not to be suffering from Diphtheria.

The County Council has made arrangements for practitioners to have bacteriological examinations made at the County Laboratory, Wissage, Lichfield (recently transferred from Wolverhampton) in suspected cases of Diphtheria, Enteric Fever, Tuberculosis, Cerebro-spinal Fever, Malaria, etc, while facilities are also given for having Masserman reactions tested.

Diphtheria Antitoxin and Influenza Vaccine can be obtained by practitioners on application to the local Medical Officer of Health, and although the latter is not in great demand, much use is made of the facilities given for the early antitoxin treatment of Diphtheria.

During the year the number of bacteriological examinations made at the County Laboratory for this district was 454 for Diphtheria and 36 for Tuberculosis, figures which show to what a large extent laboratory methods are made use of in the detection of these diseases,

Neither the Schick nor Dick tests have been made use of in this district, but when outbreaks of Diphtheria or Scarlet Fever occur amongst school children-and it is chiefly amongst them that these diseases are found—the schools are visited, all contacts are inspected and when considered necessary excluded from school for further observation. It is only when the outbreak points definitely to the disease being contracted at school that the schools are closed, and this chiefly in order that they may be thoroughly cleansed and disinfected. The disinfection of the schools is carried out by officers of the Sanitary Authority, who also take the responsibility of disinfecting private houses after removal of infectious persons to hospital or after their convalescence from infectious disease. There is no steam disinfector in use in the district other than that at the Isolation Hospital, and it is customary for disinfection to be carried out by means of formalin spraying and fumigation, methods which appear to give fairly satisfactory results.

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

General nursing in the home is carried out by the nurses of the District Nursing Associations, of which there are ten in Cheadle Rural District. These associations co-operate with the Staffordshire Nursing Association, with which they are affiliated, and none of them is under the control of the local sanitary authority.

Funds are chiefly derived from voluntary subscriptions, donations and membership subscriptions, and in those areas where the association nurses do school work, health visiting, etc., from grants made by the County Council.

With the exception of measles—for which the County Council have arranged to give nursing assistance to necessitous cases during epidemics—no special arrangements have been made for nursing infectious cases in the home.

Midwifery practice is carried out to a large extent by Midwives, of whom there are 21 trained and 7 untrained practising in the district. None of them is subsidised by the local authority.

An Infant Welfare Centre and a School Clinic are open at Cheadle each Wednesday, both being under the control of the County Council.

No special provision is made for the treatment of Venereal disease locally, but arrangements have been made whereby infected persons can receive treatment at the North Staffs. Royal Infirmary, Stoke-on-Trent.

A Tuberculosis dispensary is open weekly—on Thursdays at Cumberland House, Cheadle, and is attended by a Tuberculosis officer appointed by the Joint Tuberculosis Committee.

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 and has accommodation for the treatment of Scarlet Fever, Diptheria and Enteric Fever.

The Staffordshire Joint Smallpox Hospital, at Bagnall, is in part maintained by the local authority, who have a representative on its committee.

The County Mental Hospital at Cheddleton is the only large hospital in the district. It is controlled by a joint committee and is subsidised to some extent by the local authority.

Outside the district, but receiving patients from the district, are The North Staffs. Royal Infirmary, Stoke-on-Trent; Longton Cottage Hospital, Longton; Longfields Cripples' Home, Stoke-on-Trent. These are all voluntary hospitals, over none of which has the local authority any control, but to two of them annual subscriptions are made.

The Staffordshire, Wolverhampton and Dudley Joint Tuberculosis Committee have provided Sanatoria for the treatment of persons suffering from tuberculosis at Moxley (for males), Grounslow (for females), Yarnfields (for females) and Himley (for children). Provision is made for the care of prospective unmarried mothers, on payment of 40/- per week, at the Mrs. Legge Memorial Home, Wolverhampton.

Homeless children are provided for at Cheadle Cottage Homes, and to some extent at Cheadle Union Infirmary.

The local authority has quite recently provided an ambulance for the use of persons suffering from other than infectious diseases. This ambulance is already in considerable demand and is greatly appreciated.

