### [Report 1950] / Medical Officer of Health, Cheadle R.D.C.

### **Contributors**

Cheadle (England). Rural District Council.

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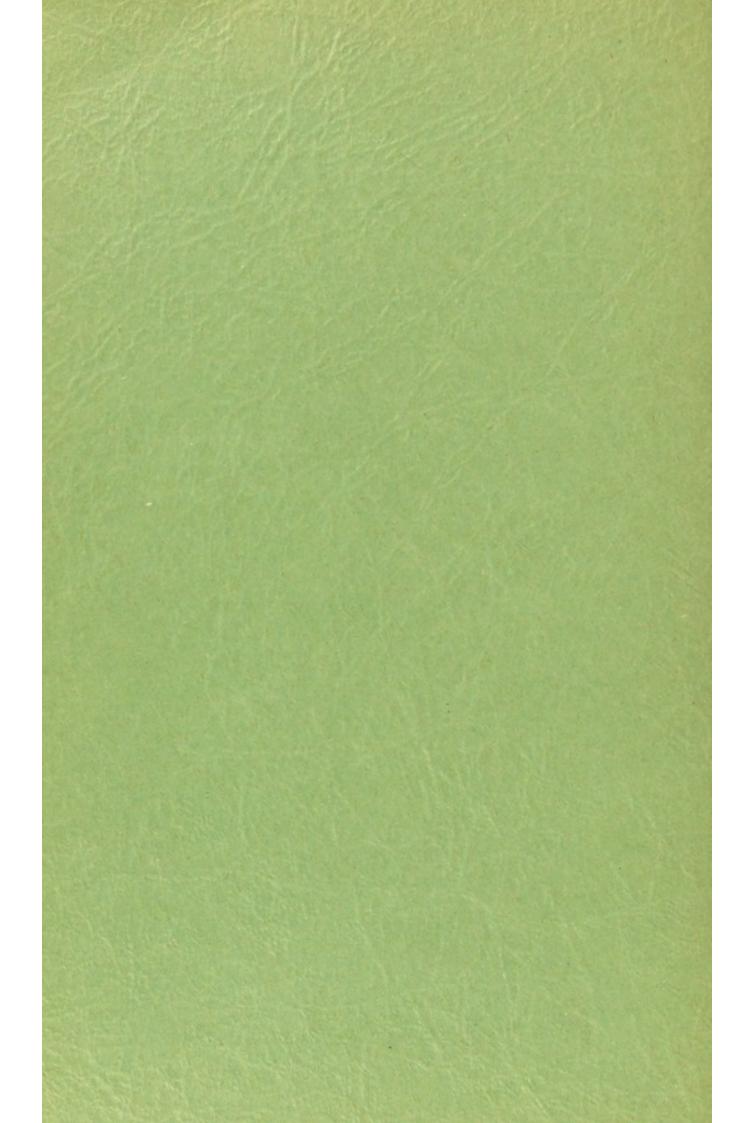


## Cheadle Rural District Council

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## Annual Report of the Medical Officer of Health

for the year ending December, 31st, 1950



### Cheadle Rural District Council.

### REPORT OF THE MEDICAL OFFICER OF

### HEALTH

for the Year ending December 31st, 1950.

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### Cheadle Rural District Council. REPORT OF THE MEDICAL OFFICER OF HEALTH

for the Year ending December 31st, 1950.

### Introduction

To the Chairman and Members of the Cheadle Rural District.

Mr Chairman Ladies and Gentlemen

I have pleasure in presenting my report for the year 31st December,

The arrangement of the Report follows the lines of that submitted in 1949. In certain sections where full comment was made last year you will note little has been made this year, and vice versa. New occurrences, new opinions and certain statistical detail must be included each year, but it has been felt that mere repetition from year to year should be avoided. In effect the report is not a full account of the social and health conditions of the District to-day; as its title implies it is a report for the one year only and should be regarded as a single chapter in the history of the health and sickness of the district and should be considered along with the previous chapters.

As in 1949 the Section on Sanitary Supervision of the District has been provided by your Sanitary Inspectors, Messrs. Keey and Comley and the Appendix, for which I am indebted to your Surveyor, Mr. Burton details the accomplishments of his department in the provision of new services.

My own comment on the happenings of the year is given in the body of the report under the appropriate headings.

I am, Mr. Chairman, Ladies and Gentlemen,

Your obedient servant,

E. H. TOMLIN.

Council Offices, Cheadle, Staffs.

September, 1951

### General Information

Chairman of the Rural District Council: J. BYATT

Vice-Chairman of the Rural District Council: P. CLOWES

### PUBLIC HEALTH COMMITTEE, 1950:

Chairman: MR. W. S. LEES

Members: Mrs. R. Berry, Mrs. H. M. Gardner, Revd. F. W. Henshall, Messrs J. H. Aberley, A. R. Appleby, W. A. Ashton, J. M. Beresford, J. Byatt, R. L. Carr, P. Clowes, J. C. Cope, J. W. Crossley, J. Finnikin, A. E. Foreman, J. R. Goodwin, S. E. Goodwin, W. H. Hewitt, J. S. Jackson, T. H. Martin, T. Mottram, J. Price, G. H. Shaw, J.T. Slack, A. Smith, H. Snow, D. Heath, J. Hurst

### PUBLIC HEALTH STAFF

E. H. TOMLIN, M.D., Ch.B., D.P.H., Medical Officer of Health.
A., P. KEEY, M.S.I.A., Senior Sanitary Inspector, Food Inspector
R. COMLEY, M.S.I.A., M.R,S,I., Sanitary Inspector, Food Inspector.
K. M. HAWKINS, Clerk

A. B. Whittingham, Temporary Sanitary Assistant up to 28th February, 1950

### STAFF, ENGINEER AND SURVEYOR'S DEPARTMENT

JOHN WILLIAM BURTON, M.I.S.E., M.R.San.I., Engineer and Surveyor HAROLD POINTON, Architectural and Town Planning Assistant. TREVOR POULTON HUGHES, A.M.I.Mun.E., Engineering Assistant. JOHN WILFRED HIGGS, Engineering Assistant. KENNETH JOHN RATCLIFFE, Engineering Assistant. KENNETH JOHN RATCLIFFE, Engineering Assistant. HENRY FREDERICK PARRINGTON, A.I.M.S., Town Planning Assistant WILLIAM HENRY HOBSON, Clerk. JOSEPH WILLIAM SHAW, Clerk HYLDA JEAN HOUGH, Shorthand Typist. MOLLIE WRATH, Shorthand Typist.

### GENERAL STATISTICS

Area (in acres)	50,291
Registrar General's estimate of resident population, Mid. 1950	32,640
Number of inhabited houses according to Rate Books, Mid. 1950	8,967
Rateable Value £1	08,780
Sums represented by a penny rate	,£407

### Social Conditions of the Area

No appreciable changes have occurred in the type of industry of

the District and full employment has remained the rule.

The different industries of the District and the numbers employed therein were listed in my report for 1949. Changes have been so small during the past year that it is felt the annual repetition of this list can be discontinued.

Indeed, looking back, surprisingly little change has occurred in the past fifty years so far as the location and types of major industries has occurred, if we except the closing of certain coal mines in the District.

During 1950 a rising cost of living was followed by rising wages. General conversation gave the impression that "times were getting harder" but this did not appear to me reflected in a worsening of the turn-out or state of nutrition of children in the district.

### 4. Health Statistics

Statistical Table A shows the general rates of births and deaths, and also rates of notification and deaths from certain specific diseases for Cheadle in comparison with those for England and Wales as a whole and for certain classes of towns.

Statstical Table B gives details of actual figures of births and deaths

as supplied by the Registrar General.

Statistical Table C (which is for convenience placed in the Infectious Disease Section) shows the numbers and ages of notified infectious disease cases.

The following comment is made:

LIVE BIRTHS

484 live births were registered in 1950 as against 507, 529, 684, 609, and 528 in the preceding years.

This drop in births is of some concern, as a low birth rate may indicate unsatisfactory social, financial or environmental living conditions.

The birth rate in the Cheadle Rural District has shown a steady and continuous decline over the past fifty years, dropping from 30 births per 1,000 of the population in 1900 to just over 15 births in 1950. This decline has twice been interrupted by a brisk rise at the end of each of the two major wars, but this rise has only been very temporary.

This general fall has been common to the whole country and as both environmental circumstances and the financial position of the average family throughout the country has been improved in this 50-year period the main factor contribution to the fall can only be social habit and way

of life.

A more detailed comparison between Cheadle and the whole country over the past six years does however suggest that in Cheadle at any rate some additional factors may be concerned. The suggestion which comes first to mind is, of course, reluctance to marry without a home.

Live birth rates over the past six years have been as follows: 1950 1945 1946 1947 1948 1949 17.1. 19.3. 21.7. 15.7, 16.5, 14.8. Cheadle R.D. England & 16,1, 19,1, 20.5, 17.9, 16.7, Wales 15.8, It will be seen that from 1948 Cheadle has, for the first time, had a birth rate lower than the average.

In making this comparison account is not taken of the possible different age group compositions of the two populations. If the Registrar General's Area Comparability Factor for Births of 1.06 were utilised Cheadle would show a comparative birth rate of 15.7 for 1950. As this Factor for previous years was not to hand it could not be utilised over the whole series.

Figures obtained in the 1951 Census will of course, enable us later to make a true comparison, but in the meantime there remains the suspicion that some small part of the responsibility for the falling birth-rate in Cheadle could be remedied.

### STILL BIRTHS.

With 11 still births a rate of 0.34 (or 0.36 if the Comparability Factor is used) corresponds closely with the average for the country of 0.37 for 1,000 population and gives no cause for dissatisfaction.

### DEATHS.

304 deaths were registered in the year of persons normally resident in the District as against 348, 291, 333, 322, and 320 in the preceding years.

The general death rate of 10.72 per 1,000 of the population (or if the Registrar General's Comparability Factor of 1.04 is used 11.15 per 1,000) compares favourably with one of 11.6 per 1,000 for England and Wales.

This general death rate in the District at the beginning of the century was about 17 per 1,000. It fell until 1922, from which time onwards it has remained remarkably constant at a figure around 11 per 1,000

### CAUSES OF DEATH

Numbers of deaths from selected causes are shown in Table B, the commonest being Heart Disease 91, Cancer 44, and Cerebral haemorrhage 43.

Of the 304 deaths, 190 occurred in people over 65 years, and 73 in people over 45, but under 65.

The remaining 41 deaths in people under the age of 45 were subjected to analysis and the results can be tabulated as follows:

	Under	1-5	AGI 5-15		25-45	Total
	1		0 10		20-10	Lota
Road Traffic Accidents	 Ô	1	1.	1	2	5
Other Accidents	0	0	0	0	3	3
Tuberculosis of Lungs	 0	1	0	1	4	6
Specific Infections	2	0	0	0	1	3
Respiratory Infection	3	1	0	0	0	4
Prematurity	 4	0	0	0	0	4
Congenital Disease	 2	1	0	0	0	3
All other causes	2	0	2	1	8	13

In these deaths of younger people therefore we observe that roughly 20 per cent. are due to accidents which could be prevented, 15 per cent. are due to Tuberculosis which could be prevented, 17 per cent. are due to infections against which preventive measures can be practiced. Over half the total deaths of these younger people could be classified as "preventable." INFANT MORTALITY.

In the Cheadle Rural District this rate shows somewhat wide fluctuations, having in post war years varied between 19 deaths per 1,000 related births in 1945 and 31 in 1949.

The rate of 26.6 per 1,000 related births for 1950 is however satsisfatory when compared with the average of 29.8 for England and Wales. MATERNAL MORTALITY

During the year only one death in the District was directly attibutable to pregnancy or child birth. This gave a Maternal Mortality rate of 2.0 per 1,000 live and still births. The average for England and Wales was 0.9.

### STATISTICAL TABLE A

Birth-rates, Death-rates, Analysis of Mortality, Maternal Mortality and Case-rates for Certain Infectious Diseases in the Year 1950. Provisional figures based on Quarterly Returns.

	ENGLAND & WALES	126 C.B's and Great Towns includ. London.	148 Smaller Towns (Res. Pop. 25,000 - 50,000 at 1931 Census	London Admin. County	Cheadle Rural District.
		Rates 1	ber 1,000	Home Pop	bulation
	(i)	(ii)	(iii)	(iv)	
Live Births	15.8	17.6	16.7	17.8	(v) 14.80
Still Births	0.37	0.45	0.38	0.36	0.34
Deaths					
All Causes	11.6	12.3	11.6	11.8	10.72
Typhoid and paratyphoid	0.00	0.00	0.00	0.00	0.00
Whooping Cough	0.01	0.01	0.01	0.01	0.03
Diphtheria	0.00	0.00	0.00	0.00	0.00
Tuberculosis	0.36	0.42	0.33	0.39	0.25
Influenza	0.10	0.09	0.10	0.07	0.03
Smallpox					
Acute poliomyelitis (includin	g				
polioencephalitis)	0.02	0.02	0.02	0.01	0.00
Pneumonia	0.46	0.49	0.45	0.48	0.09
Notifications (corrected)					
Typhoid Fever	0.00	0.00	0.00	0.01	0.00
Paratyphoid Fever	0.01	0.01	0.01	0.01	0.00
Meningococcal Infection	0.03	0.03	0.02	0.03	0.00
Scarlet Fever	0.50	1.56	1.61	1.23	1.41
Whooping Cough	3.60	3.97	3,15	3.21	5.37
Diphtheria	0.02	0.03	0.02	0.03	0.00

Carporation minimum	(i)	(ii)	(iii)	(iv)	(v)
Erysipelas	0.17	0.19	0.16	0.17	0.46
Smallpox		****		***	
Measles	8.39	8.76	8.36	6.57	14.20
Pneumonia	0.70	0.77	0.61	0.50	1.29
Acute poliomyelitis (includir	ng				
polioencephalitis)					
Paralytic	0.13	0.12	0.11	0.08	0.00
Non-paralytic	0.05	0.05	0.06	0.05	0.00
Food Poisoning	0.17	0.16	0.14	0.25	0.00
Deaths			Rates per	1,000 Live	Births
All causes under 1 year of a	age 29.8(a)	). 33.8	29.4	26.3	26.6
Enteritis and Diarrhoea					
under 2 years of age	1.9	2.2	1.6	1.0	4.1
Notifications corrected	. Rates pe	r 1,000	Total (Live	and Still)	Births
Puereral Fever and Pyrexia	5.81	7.43	4.33	6.03	2.02

### STATISTICAL TABLE "B"

### BIRTHS AND DEATHS IN CHEADLE RURAL DISTRICT, 1950

DEATHS	Male	Female
Total All Causes	169	135
1. Typhoid and Paratyphoid Fevers	0	0
2. Measles	1	0
3. Scarlet Fever	0	0
4. Whooping Cough	0	1
5. Diphtheria	0	0
6. Influenza	0	1
7. Encephalitis Lethargica	0	0
8. Cerebro-spinal Fever	0	0
9. Tuberculosis of respiratory organs	4	2
10. Other Tuberculous Diseases	2	ō
11. Syphilis	0	0
12. Cancer, malignant disease	22	22
13. Diabetes	2	3
14. Cerebral haemorrhage, etc	21	22
15. Heart Disease	51	41
16. Other Circulatory Diseases	12	5
17. Bronchitis	4	4
18. Pneumonia (all forms)	2	1
10 Och an annimatory diagram	2	2
20. Peptic Ulcer	1	0
21. Diarrhoea, etc. (under 2 years)	1	1
22. Appendicitis	C WALLES	
23. Other Digestive diseases		
24. Acute and Chronic Nephritis and Nephrosis	2	6
25. Puerperal Sepsis	0	0
26. Other Puerperal Causes	0	1
27. Congenital debility, premature birth, malformations et		2
90 6-1-14-	4	õ
29. Road Traffic Accidents	3	2
20 Other William	5	4
21 01 16 1	12	9
31. Other defined causes		

DEATHS		Male	Female
Special causes (included in No30 above)			
Smallpox	 	0	0
Poliomyelitis	 	0	0
Polioencephalitis	 	0	0
Enteritis or diarrhoea under two years of age	 	0	0
Deaths of infants under 1 year			
and i	 	10	3
Legitimate	 	8	3
Illegitimate	 	2	0
BIRTHS			
Live Births — Total	 	245	239
Legitimate	 	233	233
Illegitimate	 	12	6
Still Births Total	 	8	3
Legitimate	 	7	3
Illegitimate	 	1	0
Population (Resident)	 		32,640

### Water Supplies

Sources of supply and villages served were detailed in my report for 1949. No major change has taken place.

5.

The provision of a piped water supply to Dilhorne and Caverswall Wood is referred to in Section 9 and extensions of mains in progress are referred to in the Appendix.

Supply of water throughout the year was adequate in both quantity and quality. Details of the amounts pumped by the Council's undertakings are given in the Appendix furnished by the Surveyor and the results of Chemical and Bacteriological analysis of samples taken in 1950 are given below.

During the year a number of water examinations were undertaken on behalf of private owners wishing to obtain a grant in connection with the use of their supplies for agricultural purposes.

Several of these were not of satisfactory standard, liability to pollution being indicated. Appropriate advice was given in these cases by your Sanitary Inspectors to the owners.

# CHEMICAL ANALYSIS OF WATER

4 7	None	None 7.1	None 6.3	of Iron 6.9	6.2	None 6.2	6.4 Nii	None 6.2	intation
- 15	marica			Minute trace	IMAINTEL		Matter	matter	Tomas Metallic contam
	Suspended			Suspended	Suspended		Suspended	Suspended	
	trace	Clear	Clear	trace	Minute	Clear	Minute	Minute	Appearance
0.004	0.0008	0.0008	N	0.008	0.012	NII	0.016	0.032	at 800 F
	2.4	1.7	1.0	1.1	1.2	1.2	1.4	1.5	Chlorine
	1.18	0.3	0.40	0.02	0.05	0.05	0.30	0.1	Nitric Nitrogen
	0.0008	Nil	0.0008	0.0020	0.0008	Z	0.0012	0.0048	Albuminoid Ammonia
	0.0004	Zi	0.0004	NI	0.0008	Ni	0.0008	Z	Bree and Saline Ammonia
	32.5	20.0	22.0	12.5	90	190	140	110	Tarl collide deind of 9190H
Water. Bl'theBridge	Cheadle	Tean	Kingsley	Cauldon	Whiston	Alton	Werrington	Ipstones Foxt	

# BACTERIOLOGICAL EXAMINATION - WATER SAMPLES 1949

faecal coli :  (a) Faecal coli per cent.  (b) Non-faecal coli ,,	form: MacConkey 2 days at 370 Approximate proportions of faecal and non-	Plate Count Yeastrel agar: 2 days 22° C aerobically 2 days 37° C aerobically Probable number of coli-	
1.1	1	11	Ipstones Foxt
11	1	11	Werrington Alton
11	1	11	Alton
	1	11	Whiston
11	1	11	Cauldon Kingsley
11	1	11	Kingsley
11	-	11	Tean
11		11	Cheadle
11	1	11	Potteries Water. Bl'theBridge Area

### Housing

During the year 113 houses were built by the Council and 18 by private enterprise, bringing post war building totals to 441 and 91 respectively.

The need for houses still remains great and can probably most fairly be met by the Council's present policy of building two and three-bedroomed houses.

The time is approaching, however, when this policy will need to be reconsidered. We have an aging population, and with this will come a relative diminution of the need for the "family house". If our housing facilites are to be used to the best advantage everyone should have the opportunity of living in a house the size and rental of which appears to him most suited to his needs.

From the Hobhouse Rural Housing Survey which was completed in 1950 and from the Census of 1951 we should know what housing accommodation we have in the district, and what population will need to be housed in, say, ten or twenty years time.

With this knowledge we should be able to concentrate our building programme towards the type of house which will then be in greatest demand

At the same time we must realise that although the Council is the biggest land-lord in the District there are now only about 800 houses owned by the Council out of a total of over 8,000 in the District.

If the best use is to be made of our houses we will still have the following objects to be attained:

- (1) Encouraging the public to make the best possible use of interchange of houses on a voluntary basis.
- (2) Facilitating inter-change between Council and privately-owned houses, perhaps through some independent body.
- (3) Adjustment of rents, so that rentals are comparable to the facilities and amenities provided.
- (4) Trying to ensure that all houses are kept in good structural repair and attractive condition of decoration so that interchange will prove acceptable in as many properties as possible.

These objects are, of course, not now obtainable. For one thing legislation does not allow this. New Legislation would be needed for the attainment of the third and fourth objects.

It is, however, felt that such a scheme could now be devised and even initiated in a small way. If results proved encouraging and a change of legislature appeared necessary for the scheme's expansion they would give substance to the need.

To bring about a 2 per cent. increase in our total houses would take a full year's building programme. An equivalent reduction in overcrowding could be effected if in every fifty houses it was found there was one case of overcrowding which could be relieved by change of houses with a second tenant who had more room than he required.

The possibilities of such a scheme would appear to warrant further examination.

To return from conjecture to reality further details of the Council's problems and achievements in Housing are given in the section "Sanitary Supervision of the District" and in the Appendix

### 7. Sewerage and Refuse Disposal

Details of extensions of sewers are given in the Appendix, as also are brief details of the Council's refuse collection activities.

### 8. Inspection and Supervision of Food

Details of work done and comment thereon is given in the following section, but as 1950 saw the introduction of the Milk and Dairies Regulations 1949 some comment is offered here on the District's milk supplies

Under the new regulations there is an alarming diversity of authorities concerned with the production of a safe milk supply

Sampling of milk is undertaken by the County Council as a routine. Examinations and reporting on nulk is undertaken by the Ministry of Health Public Health Laboratory.

Routine and special inspections of farms and premises of producerretailers is undertaken by the Ministry of Food Milk Officers.

Routine and special inspections of Dairy Herds is undertaken by the Ministry of Agriculture Veterinary Officers.

Routine and special inspections of the Dairies of retailers who are not producers is undertaken by the District Council's Sanitary Inspectors.

The existence or suspicion of infectious disease in persons employed at a farm or dairy may call for investigation and visiting by the District Council's Medical Officer

It will be realised that to obtain an efficient degree of supervision over all these sides of milk production a consderable amount of liaison is required between the various officers concerned .

Whether this diverse supervision will prove satisfactory will be evident in the course of time.

During the year 456 methylene blue tests for the cleanliness of milk were performed by the Public Health Laboratory on samples taken in the district by the County Sampling Officer. Of these 349 passed the test and 157 failed. Ninety per cent of these milk samples came from producer-retailers and in those cases we had no responsibility for supervision. The remaining ten per cent. came from dairies under our own supervision, but here we worked under the disadvantage of not being able to say that the milk was satisfactory on delivery to the Dairy. We have the unfortunate position of knowing that much of our milk is not up to standard and even a potential danger and of being able to do little about it ourselves but rest in hope that the other members of our team of "milk production supervisors" will effect an improvement.

During the year 325 milk samples were examined for tuberculosis and of these ten were found to be positive. These cases were all investigated by your Council's officers and in six cases it proved necessary to impose restriction on the sale of milk unless heat treated.

During the year 325 milk sample examinations revealed infection with Brucella Abortus in 14 cases and Brucella Melitensis in one case. Both these infections are transmissable to man, although not commonly met with. Innoculation of cattle may in the fullness of time erradicate these infections from our dairy herds, but owing to the difficulty of recognising and dealing with an infected beast the only short term policy for removal of the danger to man is pasteurisation.

### 9. Sanitary Supervision of the District DETAILS SUBMITTED BY YOUR SANITARY INSPECTORS

HOUSING. PUBLIC HEALTH ACT, 1936.

A considerable, indeed, one might say the major portion of your Inspectors' time has been taken up in attemping to bring about improvements in certain housing conditions in the area. Whilst every attempt has been made to bring about the desired repair to properties by informal action, of necessity, in several cases Statutory action has had to be taken and on two occasion it was found necessary to obtain a Court ruling and a Nuisance Order was made. It is obvious that owners of property are not carrying out voluntarily the works of maintenance required by their properties and the reason for this can of course be said to be the great increase of cost of materials and labour. The result of this neglect is seen in the continued deterioration of many properties which if these conditions continue will rapidly come to the end of their useful life, whereas, if maintenance works are carried out in good time the properties could serve a useful purpose for many years

### HOUSING ACT 1949.

This year has been the first full year of experience with this new legislation. Section 20 of the Act which empowers Local Authorities to make grants to private owners for the provision of dwellings by the conversion of houses and other buildings and for the improvement of existing dwellings has not been used to a great extent in the district. Only six applications have been made to the Council under this Section and only two have been recommended to the Ministry for grant. There may be several reasons for this lack of interest in taking advantage of the provision of this Section but until there is a speed-up of approval of recommendations by the Ministry concerned it is not felt that applicants can be expected to wait the lengthy periods of time now being experienced before approval is granted. In this respect two cases were submitted in September 1950 and approval not obtained before the commencement of 1951 (indeed approval was not given until August 1951).

It has also been found in discussing with persons proposing to take advantage of the Section that when it is pointed out that apart from the actual improvements to be carried out, all works of repair and delapidations existing are required to be made good, there is a complete falling off of interest. A third reason for the non-usage of the section is lack of publicity and it is considered that if it is desired that the public take full advantage of the improvement grant then adequate publicity should be given to the provisions laid down

### RURAI HOUSING SURVEY.

This year saw the final completion of the Rural Housing Survey. A total of 5,631 properties having been inspected in detail out of a total for the district of 8,583. Properties not inspected were properties of high rateable value, farms, and business premises.

Categories of the report are as follows.

- 1. 2,221 Satisfactory in all respects.
- 2. 2,095 minor defects.
- 3. 890 Major Repair or structural alteration.
- 5. 515 Unfit.

TA
NOTIFIABLE INFECTIOUS DISEAS

	Scarlet	t Fever	Whoopin	g Cou
Numbers originally notified	M. 18	F. 28	M. 83	F. 93
Final numbers after correction Ages—				
0			4	11
3	5	6	28 22	13 26
5	5 8 2	15	27	41
10	2	3	2	
15	1	2		1
Age unknown		-		1
Total	18	28	83	92
		imonia	Dyse	ntery
	M.	F.	M.	F.
Numbers originally notified	25	17	13	22
Final numbers after correction Ages—				
0	7	6	2	7
5	10	4	6 4	7
45	5	4 2 3 1	1	7 7 3 3 1
65 and over		1		1
Age unknown	25	1 17	12	1
Total	25	17	13 Mening	22
	Erysi	pelas	Infe	ction
Numbers originally notified	M. 9	F. 6	M. 1	F
Final numbers after correction		-		
Ages— 0	P. Tana			
5		1		
15	2	No. of Street, or other Persons		
45	5 2	3 2		
Age unknown	-	4	40.	
Total	9	6		

"C" 1950, BY SEX AND AGE GROUPS

Ac. poliomyelitis	Ac. polioencephalitis	Measles (excluding rubella)	Diphtheria
M. F.	M. F.	M. F. 225	M. F.
		9 8 41 41 51 50 120 113 .12 7 2 1 6	
		236 225	
Smallpox	Ac. encephalitis all forms	Enteric or Typhoid Fever	Paratyphoid fevers
M. F.	M. F.	M, F.	M. F
Food Poisoning	Other Notifiable Diseases	Originally Notified	Final Numbers after correction
M. F.	Puerperal pyrexia Ophthalmia neonatorum Malaria (contracted in England and Wales	M. F. 1 1 1	M. F 1 1

It will be thus seen that as an overall picture 9.1 per cent of the houses surveyed are considered unfit and not capable of repair at reasonable cost.

15.8 per cent. require repair at an expense considered reasonable. 35.6 per cent. require minor repairs

Other points of interest indicated by the survey are -

WATER SUPPLY: Of the 5,631 houses inspected 5,252 or 93.3 per cent. have a piped supply with 87 per cent. having a tap in the house. Although farm premises have been excluded from the survey and possibly a good proportion of these are without a piped supply, these figures are a considerable achievement for a Rural District of this type with an area of 60,291 acres.

SANITARY ACCOMMODATION — Of the houses inspected 3,363 or 59,7 per cent. have water flushed closets, 1,845 or 32.8 per cent have pail closets, 340 privies and 34 waste water closets, again no mean achievement for a district of this type but one which will be further improved on completion of the Draycott, Kingsley and Ipstones sewerage and sewage disposal schemes.

### LETTING OF HOUSES

Again this year much time has been spent in dealing with applications for rehousing. No change has been made in the system of allocating houses by the Council although there have been occasional criticisms, in the main the system had worked satisfactorily to all concerned. There will of course always be criticisms when there are so many applicants for so few houses.

The number of houses occupied during the year ... 116

The number of persons re-housed ... 512

The number of persons housed per dwelling ... 4.41.

### FOOD AND DRUGS ACT 1938

The hygienic handling of food remains a feature well to the fore in national and technical press. Several ways and means of bringing improvements about in the handling of food have been put forward from many parts of the country but it is felt that a district of this type can best deal with the problem rather by personal contact with the food handlers than by a series of lectures; the obvious difficulty being distance of travel to a central lecture room

Early action was taken by the Council in adopting the Model Byelays Series 1 under Section 15 of the Food and Drugs Act 1938 and the approval of the Ministry was obtained in March 1950

The Local Authority, and we, the servants of the Authority, are striving to play our part in supervising the methods of preparaion of food and in the sampling of food for analysis, but the public too, as was stated in our last report can play a great part in demanding that food be properly displayed in retail premises and properly served in food establishments

### OFFENSIVE TRADES

There are three offensive trades carried on in the Rural District and efforts this year have been made to bring about an improvement in both methods and structures of these businesses.

The Knackers Yard has been considerably improved. An additional building has been erected in which all waste is stored. The killing room has been enlarged and new floors and paved areas provided. The drainage

and disposal system of the premises have been reconstructed, sink and water supply have been provided and now structurally the premises are satisfactory

The owner of the Sausage Skin Factory commenced a business of treatment of bones in a steam digester and complaints of obnoxious smells were received from many of the inhabitants of the neighbourhood.

In view of the setting up of this offensive trade the Rural District Council took the matter to Court and an Order was obtained against the owner for establishing the business of fat extracting without prior approval of the Local Authority.

As the business as a whole has increased in volume the present premises are considered unsuitable and action has been commenced to bring about the entire reconstruction of the Factory.

### PUBLIC HEALTH ACT 1936 — SECTION 47

The replacement of existing privies by Water Closets at the joint expense of the owner and the Local Authority.

Efforts continue to be made to bring about the replacement by water closets of privies and this year eighty-one conversions or replacements have been completed. These works have been carried out in some cases by the Council and in others by the owners

Original estimates amounted to £2,115 14s. 9d.; finally completed at £1,802 17s. 4d. and repayment grants amounted to £901 8s. 7d. The average cost of each job being £22 5s. 0d.

### WATER SUPPLY.

### PUBLIC HEALTH ACT 1936 -- SECTION 138, WATER ACT 1945 -- SECTION 30.

A piped supply of water was laid from Weston Coyney to supply the West portion of Caverswall Wood. In the past these properties have been supplied from wells situated in the gardens of each property, some of the wells being provided with rotary pumps and others being merely dip wells. As part of this district is not yet sewered most of the properties had septic tanks and thus the water was liable to the grossest pollution. Where owners did not voluntarily connect their properies to the Council's main it was necessary to require these connections by Notice under the Public Health Act 1936 Section 138 as amended by the Water Act 1945 Section 30 and the connection of fifteen properties were brought about by this means. The Council carried out the work, part by contract and part by direct labour, and the total cost of the work was £383 10s. 5d. and by reason of the £20 limitation placed by the Act only £282 5s. 8d. was recoverable from the owners the cost to the Council thus being £101 4s. 9d.

It is well to reflect on the extra cost which the Council is being required to bear owing to the limitation of cost to owners required under the Public Health Act 1936 Section 138 thus—the Local Authority may require the provision of a piped water supply to any occupied house and are empowered to provide the water in default recovering the cost from the owner providing that the owner shall not be required to pay more than £20 in respect of any one house. Since the date of this Act the costs of materials and labour have increased considerably and the amount of work that can be carried out for the £20 is considerably less. The result of this being that where a house is a distance from the mains, if connection is required by the Council by Notice extra cost has to be borne by the Council

### DILHORNE WATER SUPPLY

Dilhorne has been supplied with water by the Council's mains from Richmoorhill. In the past this village was inadequately provided with water from a private supply.

It was necessary to serve notices on the owners in only a very few cases and in no case was the Council called upon to bear any of the cost of the work, the cost being less than £20 per property

### RODENT CONTROL.

The Council continue to employ a Rodent Operative on a full-time basis. The Council's properties, Sewage Works, Reruse Tips, and Sewers being treated, Private Dwellings are treated without charge, but business premises are charged for the services

The policy of annual contracts for treatment to business premises has continued with benefit to the owner, ensuring regular treatment, thus preventing any build up in rat population

Contracts entered into during the year amount to £127 7s. 6d Number of treatments carried out on such contracts 70 Number of treatments carried out on Local Authority's properties 68

Number of treatments carried out on Local Authority's prope

Number of treatments carried out on private premises 23
INFECTIOUS DISEASES
Number of visits 21
Disinfections carried out 9
SAKEHOUSES Number on Register 9
Number of Visits 25
SLAUGHTERHOUSES
Number of premises in use 6
Number of Inspections 28
OFFENSIVE TRADES
Number on Register 3
Number of Inspections
Number of Notices 3
SHOPS ACT
Number of Inspections
Number of Notices 6
PETROLEUM ACTS
Petroleum Licenses issued 75
Carbide Licenses issued 1
Number of inspections 8
FACTORIES AND WORKSHOPS
Number on Register 122
Number using Mechancial Power 75
Number of Inspections 35
DETAILS OF MISCELLANOUS FOOD SURRENDERED
196 tins of Miscellaneous Foods.
3 stones of Lobster
22 lbs. Bacon
30 lbs. Beef Round
42 lbs. Frozen Mutton
13 lbs. English Mutton
16 lbs. Lambs Liver
TO 100. EMILION EXTEN

	Inspe	ctions	NOT	ICES	
		and	SERV	ED 1	Notices
Description of Visits	obser	vations l	Informal	Formal Co.	mplied
		made			with
Complaints and Nuisances		711	186	37	167
Food Premises		129			
Food Inspection		23			
Slaughterhouses		28			
Dairies		142			
Shops Acts		197	6		6
Bakehouses		25			
Ice Cream		86			
Offensive Trades		79	3		3
Water Samples		108			
Water Supplies		260		21	21
Drainage					
Conversions					45
Housing (re Letting)					
Housing Act 1949		24			
Disinfections		9			
Prevention of Damage by Pests		38			
Housing Act, 1936		17			
Factories and Workshops		35			
Petroleum Act		8			
Pit Shafts		4			
Movable Dwellings		14			
Interviews and other visits		434			
TOTAL			195	103	242

### 10. Factories and Workshops

There are 122 Factories on the register. The Worshops are composed mainly of boot and shoe repairers, bakers and confectioners, milliners and tailors, joiners plumbers and decorators, wheelwrights and motor car and cycle agents and repairers.

Prescribed particulars on the administration of the Factories Act are

shown in the following Table.

1. Inspections for purposes of provisions as to health (including inspections made by Sanitary Inspectors.

Premises equal to the second s	on Register	Inspections	Number of Written Notices	Occupiers
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by				
Local Authorities	47	33		
(ii) Factories not included in (i) in which Section 7 is enforced by the				
Local Authority	75	2		
(iii) Other Premises in which Section 7 is enforced by the Local Authority				
(excluding outworkers premises)				
TOTAL	122	35	***	***

Particulars	Found	Remedied	Referred To H.M Inspector	By H.M. Inspector	Number of cases in which prosecutions were instituted
Want of Cleanliness (S.I.)		.1			
Overcrowding (S2)					
Unreasonable temperature					
Inadequate ventilation					
Ineffective drainage of floors	1	1			
Sanitary Conveniences:					
(a) Insufficient					
(b) Unsuitable or defective		1			
(c) Not separate for sexes					
Other offences against the Act (not					
including offences relating to					
outwork)					
TOTAL	3	3			

### 11. Prevalence and Control of Infectious Disease

Notifications

Details of notifications are shown in Table C. Measles (461 cases) occurred in epidemic form as did Whooping Cough (171 cases). Scarlet Fever (46 cases) was also more prevalent than in the two preceding years. Sonne Dysentery (35 cases) appears to have been wide spread although its presence was only detected at the end of the year and certain cases probably escaped notification

Scarlet Fever.

This disease, once our greatest "killer", has become mild in form and we now have means of effectively treating its more serious complications. The disease too is becoming less defined than in the past. The organism that in one person will produce recognisable Scarlet Fever may, in another person produce merely a Tonsilitis.

For these reasons less insistence is placed on hospitalisation than formerly. Each case is visited and if the patient can be given a room to himself, if the parent appears intelligent and co-operative, if there is no medical reason for hospitalisation and if there are in the house no food-handlers or school teachers then no objection is raised to the case being isolated at home

Of the 46 cases notified in 1950 nineteen cases were home treated, and in two only did a second case appear following isolation.

Where the case was admitted to hospital a second case appeared after the return home of the original one on six occasions It can not be argued from this that home isolation is more effective than hospital isolation as the hospital coses came from the more crowded homes, but it does suggest that hospitalisation can not ensure the absence of futher cases and that there is quite a good chance of home isolation proving effective

Of the 46 cases the source of infection was in fifteen cases traced to another case, in eight cases it was traced to a case of tonsilitis and in the remaining cases it was not possible to trace a source of infection. From this it is obvious that besides the usual routine of isolation, quarantine, disinection, etc., there is a most important factor still to be dealt with if we are to do all we can to prevent Scarlet Fever. This is to teach the public that all sore throats are potentially infectious and should be dealt with as such. No one with a sore throat should mix with others unnecessarily.

Of the 46 cases, 19 were from the village of Kingsley, and 8 from Cheddleton. If these two village outbreaks are excepted it will be seen that 1950 was a year of reasonably low prevalence of Scarlet Fever. Cases notified in the Rural District have fluctuated between 22 cases in 1902 and 211 cases in 1911.

Measles.

With 461 cases 1950 was a year of epidemic prevalence. Medical notifications in the post war years fluctuated between 120 and 240, and in pre-war years notifications from school teachers showed 730 cases in 1926, 440 in 1932 and 390 in 1938. As these last figures did not include children of pre-school age or notification during school holidays the present epidemic can not be considered an exceptionally large one.

The epidemic spread across the District from West to East. In most villages the disease showed one or two self limiting outbreaks covering a period of four to six weeks. In Weston Coyney, however, on the fringe of the Potteries no recognisable outbreak occurred but there were sporadic cases in every month from February to August. In Cheadle Town the main epidemic lasted about ten weeks. The incidence of the disease varied from village to village, Ipstones showing over 50 cases and Kingsley only 12.

The recording of information such as the above is of value in that the behaviour of disease in the past is a guide to its probable behaviour in the future, and may enable advice to be given on the need for preventive precautions under any particular circumstances

While Measles can not be "prevented" in that nearly all children will suffer sooner or later, preventive precaution may enable the very young or debilitated child to escape the disease until he or she is better able to withstand it

Whooping Cough.

With 176 notified cases 1950 has been a year of epidemic prevalence. Post-war medical notifications have fluctuated between about 50 and 125. Prewar notifications from school teachers suggested that 30—100 cases in school children during term time were to be expected and in 1936 just over 200 cases were reported.

In Cheadle Town the cases were evenly spread over the months of September to December, as was the case for the most part elsewhere. In Alton however, the disease showed a clearer epidemic pattern wih a definite wave of ten cases early in November. Cases were still occurring throughout the District in early 1951, so it may be somewhat misleading to regard the figure of 176 cases as the sum total of one "Whooping Cough season."

Although the total notified cases of whooping cough is generally less than that of measles this is probably due to the fact that mild cases of whooping cough may go unrecognised or unproved

Owing to this difficulty in recognising and isolating all cases, and owing too to the fact that recognition is difficult at the onset when the case is most infective it is difficult for the individual to avoid risk of attack durng an epidemic. Fortunately it seems we may soon be able to tell the public with some assurance that in immunisation we have a safe means of lessening the severity of an attack although we can not guarantee its prevention.

For some time whooping cough vaccine have been available to medical practitioners. The Ministry of Health and Public Health Medical Officers have been guarded in their advocacy as different vaccines have shown different protective values.

These vaccines have been used in Cheadle to a limited extent by general practitioners and from their reports as well as from the published interim reports on large scale trials I now feel we may claim it is of value to the individual in that it will at least lessen the severity of an attack and may in many cases prevent one. I feel that it is, however, unlikely that the wider use of the present vaccine will result in a disappearance of whooping cough comparable with that of diphtheria.

Dysentery.

After two years freedom from this disease a case was notified from Cheddleton on 22nd November and two further cases from Ipstones and Cheadle on 27th and 28th November.

Enquiry showed that for two months or more mild cases of diarrhoea had been prevalent in Cheddleton both in the Mental Hospital and in the village. Some of these had most probably been unrecognised cases of Sonne type Dysentery.

General practitioners were warned of the presence of this disease and following this warning 32 more notifications were received during December.

Investigation of these cases showed that we were not dealing with a new and rapidly spreading outbreak but had come across an epidemic which had been firmly established throughout the whole District for some time.

This was not surprising, as to the patient Sonne Dysentery is rarely more than an attack of Diarrhoea causing a few days illness and inconvenience. Dysentery, however, differs from other short duration diarrhoeas in that a carrier state may persist for three or four weeks after clinical recovery. The public health worker, therefore, has to investigate each case to guard against any such carrier returning to work which entails handling food, and to warn all cases of their potential danger to others.

As it appeared probably towards Christmas that the number of notifications might become so great that each case could not be promptly investigated by myself an approach was made to the County Medical Officer with a view to enlisting his Health Visitors in the task of investigating cases and advising on preventive measures in the home.

I must here express my thanks to the County Medical Officer for his co-operation and to the Health Visitors for the assistance they gave me.

The fact that notifications decreased in January (22 cases) confirmed the opinion that we were at the tail end of the epidemic rather than the beginning, and in February only four cases were notified

### Pneumonia.

Statistical Table A shows we had 1.29 notifications of pnuemonia per 1,000 of the population with 0.09 deaths, while England and Wales showed an average of 0.70 notifications with 0.46 deaths.

I do not think there is any reason to think that we had any extraordinary prevalence of mild pneumonia as compared with the whole country as might at first be supposed. Nowadays the Cheadle ratio of one death in every thirteen cases is very much more likely to be correct than the national one of three deaths in just under five cases. All our figures show in comparison with those of England and Wales is that our general practitioners are very much more co-operative in carrying out their legal responsibilities of notification of pneumonia and also perhaps more successful in treating the cases.

In all we had 42 notifications of pneumonia at against 24, 41 and 28 in the preceding years.

### Diphtheria.

As in 1949 we again had no diphtheria cases. Nevertheless situated as we are on the edge of a large urban population we cannot yet take this as evidence that the need for protection by immunisation should be relaxed. During the year 388 children under five and 32 children of over five years received a primary course of immunisation and in addition 39 children received a re-inforcing injection. Corresponding figures for 1949 were 363, 35 and 9.

### Anterior poliomyelitis

Although no case of this disease is shown as having been notified to me one did in fact occur in a boy from Tean. The diagnosis was made a short time after the boy had been admitted to the Stoke City General Hospital and in consequence was officially notified to the City, although the information was passed on so that necessary preventive measures could be taken in the Rural District. No secondary cases occurred. It is thought possible the boy was infected while on a short visit to Uttoxeter. Tuberculosis.

Sixteen new cases of Tuberculosis were notified in residents of the District during the year as against 20 in 1949, 19 in 1948, 25 in 1947 and 31 in 1946.

Eight deaths occurred, as against 10, 8, 11, and 7 in preceding years. Details are shown in the table below.

TUBERCULOSIS — NEW CASES AND MORTALITY 1950

4 8	NEW CASES			DEATHS				
I DE LONG	RESPI	PIRATORY  NON-RESPIRATORY		RESPI	RATORY	NON-RESPIRATORY		
AGE PERIODS	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE
0	0	0	0	0	0	0	0	0
5	0	1	0	1	0	0	0	0
5 15 25 35 45 65 and up-	1 3	1 4	0	0	1 2	0 2	0	0
35	0	1	0	0	0	0	0	Ö
65 and up- wards	0	0	0	0	1	0	0	0
TOTALS	5	7	2	2	1	2	9	0

Hospitalisation.

As the passing of the Isolation Hospitals to the Control of the Regional Boards had in some quarters led to anticipation and comment on new difficulties in getting cases of Infectious Diseases into hospital and so adequately isolated it is worth recording that no such difficulty was experienced in the Cheadle Rural District during the year, Dr. Ewing, Superintendent of the Bucknall Isolation Hospital having met without question all our requests for admission of cases where the prime need for hospitalisation has been due to unsuitable home circumstances rather than the severity of the illness of the patient.

Notifications of actual or suspected Infectious Disease by School Teachers.

These notifications are of considerable value in that they give an indication of prevalence of certain minor infections besides those which are notifiable by Statute by Medical Practitioners.

They are of course not as accurate and comprehensive as those supplied by Statute as they relate only to school children, they are only obtainable during term time, and they do not necessarily denote a confirmed medical diagnosis.

The table below shows notifications received during 1950, the figures in brackets showing the medical notifications of the confirmed disease

in children of school age

Whooping Cough	103	(70)
Measles	202	(252)
Scarlet Fever	17	(26)
German Measles	17	
Chicken Pox	94	
Mumps	1	
Dysentry	1	(35)

Laboratory Diagnostic Facilities.

The extent to which the facilities provided by the Public Health Laboratory at Stafford are being utilised for the diagnosis of infectious disease is indicated in the Table below. Besides sending a report to the doctor who submitted the specimen a copy of the report is sent in confidence to the Medical Officer of Health of the District in which the patient resides.

### ANALYSIS OF PATHOLOGICAL REPORTS 1950

Nature of Specimen	General Practitioners	Tuberculosis qu Officer m	Medical proofficer of Health A	Total	Positive	Negative
Smears for Tuberculosis	35	76	0	111	5 0	106 31 18 22
Cultures for Tuberculosis	. 0	31	0	31	0	31
Throat and Nose Swabs	22	0	2	24	6	18
Faeces Examination		0	16 3	31 24 32	10	22
Enteric Agglutinations	3	0	3	6	1	5
				(abortu	s)	
Blood for Malaria	1	0	0_	1	0	1
Total Specimens	77	107	21	205	28	183

### OUTBREAK OF INFECTIVE DIARRHOEA

Between 6th and 29th September 11 cases of a minor digestive upset characterised by nausea, colic and diarrhoea occurred in a staff of 46 of a residential hotel in the district.

The outbreak first came to our notice on 27th September and caused some concern in view of the possibility of further widespread dissemination.

Features of the outbreak did not suggest it could be classified as food poisoning. The dates of incidence were not of an explosive nature and there was no common place of toilet or eating among those affected. Although the non-resident staff took meals at the hotel there was a significantly greater incidence among the resident staff (7 cases out of 16) than among the non-residents (3 cases out of 30). No cases were known among guests although there had been 11 with a stay of over four days duration and a very great number who had visited for a casual meal. In only one instance did more than one case occur on any one day, that was when two cases occurred on 29th September. No particular article of food could be incriminated and certainly no particular meal or food handler.

Although our investigations only commenced at the end of the outbreak specimens for bacteriological examination were obtained from eight of the eleven cases and all failed to show any pathogenic organism. The three last specimens were obtained within twenty-four hours of the onset of illness.

Samples of drinking water, washing up water, ice cream dipping water, watercress and milk also failed to show any pathogenic organism .

Advice on the isolation of cases and general hygiene was given and as stated above no further cases occurred after 29th September. By 5th October it appeared the outbreak was at an end.

In retrospect it appears the disease was an infective diarrhoea and its dates of onset, the greater incidence in the resident staff and the escape of the guests suggest the epidemic pattern of a respiratory infection such as would be found with the common cold although all the symptoms were of digestive upset

Though the existence of a short duration infective diarrhoea with respiratory transmission is not a recognised medical entity conditions for making an epidemiological study of the short duration diarrhoea are not common and for this reason the out-break is placed on record.

In the investigations I had the assistance of Mr Walters, Chief Bacteriologist of the Milton Deoson Research Department, and am indebted to him for his help and also to Mr. Comley, your Sanitary Inspector.

The Managerial staff of the hotel were most cooperative as it was quickly apparent that our enquiries were for their own benefit as well as that of the general public.

### 12 Provsion of Health Services in the District

Existing facilities and changes arising from the National Health Service Act were outlined in my Report for 1949.

No major changes have occurred and criticisms of the Service have been confined to points of minor detail .

### APPENDIX

### DETAILS SUBMITTED BY THE SURVEYOR

Cheddleton Water Supply.

The amount of water pumped from 1st January 1950 to 31st December, 1950, was 104,409,500 gallons, which gives a daily consumption of 286,053 gallons.

Tean Water Supply

The amount of water pumped from 1st January 1950 to 31st December, 1950, was 19, 384,000 gallons, which gives a daily consumption of 53,106 gallons.

Hollington Water (Hollington Supply)

The amount of water supplied to the general public from this station from 1st January 1950 to 31st December 1950 was 23,916,700 gallons, which gives a daily consumption of 65,525 gallons

Cauldon Low Water Supply

The amount of water pumped from 1st January 1950 to 31st December, 1950 was 15,114,000 gallons, which gives a daily consumption of 41,408 gallons.

### HOUSING

### DEVELOPMENT OF HOUSING ESTATES

Weston Coyney Housing Site.

The preliminary formation of the streetworks on this site has been completed and all foul and surface water sewers and water mains laid complete. During the year 20 houses have been completed and 8 houses are now in course of construction

Cheddleton Housing Site

During the year 18 houses have been completed and 8 houses are in course of construction .

Cheadle Housing Site (Victory Crescent)

The streetworks for this site are nearing final completion. During the year 37 houses have been completed and 1 house still under course of construction.

Cresswell

During the year 20 houses have been constructed and 8 houses are still under construction.

Werrington Site.

During the year 2 houses have been constructed and 12 houses are still under construction.

Itstones Site

During the year 4 houses have been completed on this site.

Foxt.

On this site 4 houses and a small sewerage disposal plant have been completed.

Oakamoor

A site for 4 houses has been acquired and the houses completed.

A site for 6 houses and a small sewage disposal plant has been acquired. The 6 houses and sewage disposal plant have been completed.

Vicarage Road, Tean.

A contract for 6 houses was commenced in June and are now nearing completion.

### SEWER EXTENSIONS

Victoria Cottages, Cheddleton.

A contract consisting of laying a 6-in. diameter gravity sewer, the erection of a diverter chamber for the housing of a diverter type pump and 4-in. diameter pumping main is nearing completion. The proposal will eventually take the drainage from 11 cottages, situated at Victoria Cottages, Station Road, Cheddleton. The gravity sewer, diverter superstructure, and pumping main are completed but progress is held up pending the delivery of the diverter machinery.

Stocks Green, Ipstones.

A contract consisting of the laying of a 6-in. diameter gravity sewer together with manholes has been completed. The sewer will receive drainage from 14 properties at Stocks Green, Ipstones, including two houses at which a nuisance was occurring.

Hockley Cottages, Foxt.

A contract consisting of the laying of a 6-in. diameter gravity sewer together with the construction of a small disposal plant and effluent drain is nearing completion. The plant will take the drainage from 9 properties at Foxt.

Tythe Barn, Alton

A new sewage disposal works consisting of Sedimentation Tanks, Bacteria Bed, Humus Tank and sludge beds is at present under construction by the Council's direct labour staff. The new works will deal with sewage from 45 existing properties which is at present being treated at a small disposal plant at Saltersford Lane. Tenants of houses adjacent to the existing plant are complaining of an aerial nuisance, and the new works will abate this nuisance and provide a more satisfactory final effluent. The previous plant was the septic tank type, whereas the new plant will be the continuous flow sedimentation tanks.

### REFUSE COLLECTION

The Council have extended the direct labour refuse collection service to serve the parish of Blore with Swinscoe. The Council's vehicles now consist of 3 night soil tank vehicles, 6 covered ash collection vehicles and 2 open type lorries. The latter are used where the larger vehicles cannot negotiate access, such as narrow lanes, etc.

### WATER EXTENSIONS

Cauldon Lowe Water Scheme.

Work on the above scheme, consisting of the laying of 1,462 yards of 6-in. diameter, 8,774 yards of 4-in. diameter and 9,208 yards of 3-in. diameter C.I. water mains is now nearing completion. The whole scheme will serve the hamlets of Cotton, Moneystone, Winkhill, Waterfall and Back o' the Brook, together with farms en route. Considerable delay has taken place due to the original contractors going into liquidation.

Tickbill Water Main Extension.

The laying of 320 yards of 3-in. diameter water main to afford a supply to three farms situated at Tickhill is nearing completion.

Wallmyres Borehole No. 2.

Work has been commenced on the sinking of a new borehole on the site of an existing well at Wallmyres Pumping Station. The new borehole is being sunk in order to provide a duplication of the existing borehole and pumping machinery at these works as a safeguard against a mechanical breakdown of the present pumping machinery

