

[Report 1955] / Medical Officer of Health, Colchester Borough.

Contributors

Colchester (England). Borough Council.

Publication/Creation

1955

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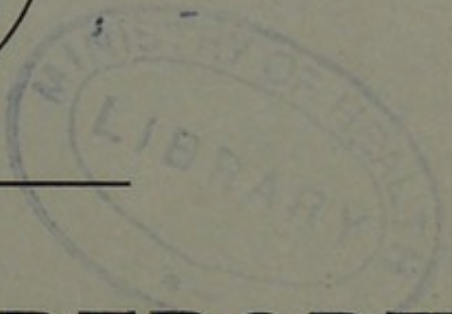
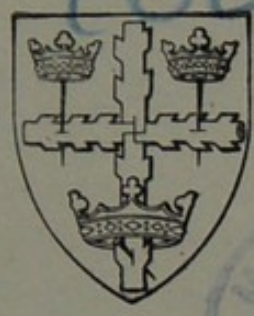


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BOROUGH OF COLCHESTER



ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

JOHN D. KERSHAW

M.D., B.S., London ; M.R.C.S., England ;
L.R.C.P., London, D.P.H.

MEDICAL OFFICER OF HEALTH

PORT MEDICAL OFFICER

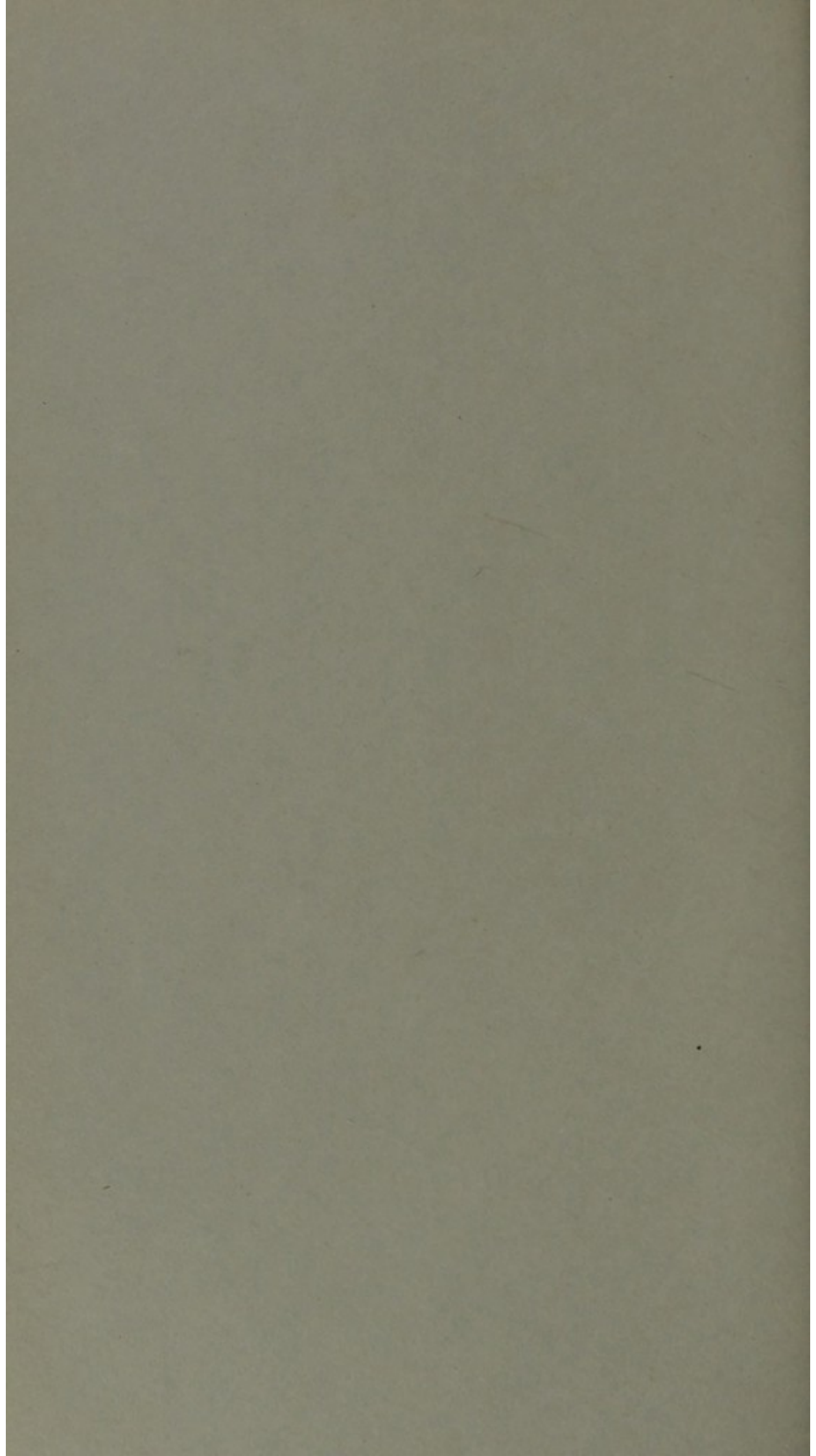
DIVISIONAL SCHOOL MEDICAL OFFICER

AREA MEDICAL OFFICER

CONSULTANT IN INFECTIOUS DISEASES

MYLAND HOSPITAL, COLCHESTER

1955



BOROUGH OF



COLCHESTER

BOROUGH AND PORT HEALTH COMMITTEE, 1955

THE RIGHT WORSHIPFUL THE MAYOR

ALDERMAN A. CRAIG

Chairman :

COUNCILLOR I. T. BROWN

Deputy-Chairman :

COUNCILLOR MRS. G. B. ENOCH

Members :

ALDERMAN MISS K. E. SANDERS, A.R.R.C., J.P.

COUNCILLOR BRIGADIER D. F. PANTON, C.B.E.

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COUNCILLOR C. W. PELL

COUNCILLOR W. L. THOMAS

COUNCILLOR REVD. P. H. WARWICK BAILEY

PART-TIME STAFF

Medical Officer of Health, etc. :

JOHN D. KERSHAW, M.D., B.S.(LOND.), D.P.H.

Assistant Medical Officers :

E. A. HARGREAVES, M.R.C.S., L.R.C.P., D.P.H.

ELEANOR M. SINGER, M.Sc., M.R.C.S., L.R.C.P., D.C.H.

Veterinary Surgeon :

C. T. MURPHY, M.R.C.V.S.

Public Analyst :

J. E. WOODHEAD, B.Sc., F.I.C., Ph.C.

WHOLE-TIME STAFF

Senior Sanitary Inspector :

†* L. H. ENGLAND

Deputy Senior Sanitary Inspector :

†* O. R. WARNER

Additional Sanitary Inspectors :

†* C. J. JACOBI

†* D. H. POOLE

†* E. H. LAND

†* B. A. J. TURNER

† Sanitary Inspector's Certificate.

* Meat Inspector's Certificate.

Clerks :

R. D. SARGEANT, A.C.C.S.

L. G. NICHOLLS

A. T. G. PEPPER

Disinfector :

A. E. CUDMORE

Rodent Operators :

T. E. CROWE, W. CHAPMAN

HEALTH DEPARTMENT,
TRINITY STREET,
COLCHESTER.

19th September, 1956

MR. MAYOR, LADIES AND GENTLEMEN,

I have the honour to present to you my report on the health of the Borough of Colchester for the year 1955.

Vital Statistics

I have nothing of major importance to mention under this head. Both our birth-rate and our death-rate are close to, and a shade lower than, the national average. The infantile mortality rate, at 21·7, is lower than in 1954 and below the national average of 24·9. Once more the town has confirmed its reputation as a place where people live long, for out of the 745 residents who died during the year, no fewer than 452 had passed the age of 70, and of these 186 were aged 80 or over.

Infectious Disease

Measles, a disease which has always recurred in epidemic form at intervals of two years, was expected to strike during the winter months between November, 1954 and February, 1955, but for some reason unexplained the epidemic did not reach Colchester until the early spring. When it struck it struck hard, 1,091 cases being notified, but the incidence of complications was exceptionally low, probably because the season was one of mild weather. One case only was fatal and only 27 were sufficiently serious to need admission to hospital.

The town shared in the national epidemic of poliomyelitis, with a total of 17 cases. Happily, most of the cases were mild and there were no deaths from the disease.

I commented last year on the somewhat misleading figures which are given under the head of "food poisoning," but part of that comment might usefully be repeated. Most cases of food poisoning are mild—an unpleasant bout of diarrhoea and possibly vomiting which clears up within 24 hours. The sufferer accepts it as one of the ordinary and inevitable accidents of life and does not bother to call in the doctor, so that notification does not take place. In most cases no particular harm results from this failure to notify and I do not expect that any serious or wide-spread outbreak of food-borne infection would escape notice. The prevention of outbreaks is a more urgent and important matter than the locking of the stable door after the horse has escaped, and

though notification certainly has its uses, the development of measures of food hygiene is the answer to the food poisoning problem.

The apparently high total of 54 cases of puerperal pyrexia gives no cause for concern. The notifications include all cases of moderate rise of temperature during the puerperium, from whatever cause, and only the merest handful are cases in which the pyrexia is due to what in the old days was known as "puerperal fever."

Scarlet fever continues to be generally mild in character. This disease is notoriously one which changes its character over the years and on many previous occasions it has dwindled into harmlessness, only to resume, after a lapse of twenty years or so, its classical severe form. There is a tendency at present to assume that penicillin and the kindred drugs have defeated the disease, but it would be premature to be complacent. If history repeats itself and, in a few years' time, the severe form returns it might be that these new drugs will prove less effective than we are at present tempted to believe.

It is not impossible that the same phenomenon may be occurring in the case of diphtheria. Once again, not a single case has occurred in the town. About half our local children have been immunised against the disease, but though this proportion of immunisation is enough to prevent a serious epidemic, I certainly do not regard it as sufficient in itself to prevent the occurrence of occasional individual cases. It is more than likely that the mass immunisation campaigns have coincided with a weakening of the virulence of the diphtheria bacillus and that if virulence returns we shall again see some of the serious cases which are so desperately dangerous. In some parts of the country there have, in fact, been signs of such a return.

I am concerned that in the absence of active diphtheria there is a tendency among the public to assume that the danger is one which can be ignored, so that parents are not bothering to have their children immunised and the proportion of protected children is falling. There is no proof that the old enemy is dead, and he may well be sleeping until his opportunity comes. The fewer children who are immunised the greater is that opportunity, and the wise parent should be forewarned and take advantage of the immunisation scheme now.

It is interesting to note that many observers are remarking on changes in the general picture of infectious disease throughout the country. The use of antibiotic drugs—the penicillin "family"—seems to be upsetting the balance of nature among the organisms which cause disease, and while the bacterial diseases are more easily controlled, the virus diseases, which do not respond to antibiotics, are becoming more active. It would even seem that new diseases are appearing. The much-publicised epidemic at the Royal Free Hospital in 1955, was certainly not one of the known

diseases and a brief outbreak of what was almost certainly the same disease occurred in North-East Essex, though no cases were reported in Colchester. It is an old saying that the price of freedom is unceasing vigilance and this is certainly true of freedom from disease.

Food Hygiene

The end of the year saw the appearance of two important pieces of food legislation, the Food and Drugs Act, 1955, and the Food Hygiene Regulations. Though neither actually comes into force until 1956, the Regulations in particular deserve some comment here.

They are a considerable step forward in the direction of clean food handling. Premises and equipment of "food businesses," which now include Civic restaurants, school kitchens and Government office canteens, must be brought up to satisfactory standards, which are more clearly defined than ever before, and hot and cold water supplies for food handlers as well as facilities for washing food and equipment are required. The use of newspapers for wrapping food—except uncooked vegetables—and the carrying in food delivery vans of animals or articles which might contaminate the food is prohibited. Food handlers suffering from conditions which might cause infection are required to report the fact to their employers. Stalls and mobile shops come within the Regulations, and their application to the food stalls in the Colchester street market will require some consideration.

But the proverb about leading the horse to the water still holds good; however adequate and up-to-date may be the facilities, they are valueless unless they are intelligently used. Not only every proprietor and manager, but every individual worker in a food business will have to understand the Regulations and apply them conscientiously to himself at all times and not merely when the boss or a Sanitary Inspector is known to be in the neighbourhood.

In "handling" food there is one thing which is even better and safer than clean hands, namely "no hands." Colchester shops still have some way to go in this direction. Raw meat, which is cooked before being eaten and fruit and vegetables which are, I hope, washed before they are eaten are difficult to manage in the shop without touching, but practically every other article of food can be, and should be, manipulated with fork, tongs or scoop. The handling of cooked meats and of cakes is always risky, because disease germs grow readily on meat and on such things as cake fillings and artificial cream, while these foods are commonly kept in the home for long enough for germs to multiply. However good the washing facilities the busy shop assistant cannot always keep his or her hands clean all the time, especially if also handling money, and the risk if dirty fingers touch food, even briefly, may be quite considerable.

The public have a part to play. If they really want food hygiene they can have it ; if they prefer to take risks they will undoubtedly pay the penalty. My advice is to shop at the shops where hygienic methods are practiced and to show disapproval when they see something careless. They might also show approval when they see steps taken for their protection. Not long ago a large fish shop in the town decided, under progressive management, to keep its fish in a refrigerated glass case instead of leaving it out on the traditional slab to collect any dirt which happened to be floating about in the air. Sales went **down** and in self-defence the shop went back to the old methods. People who show no more common-sense than this in their shopping deserve to contract food poisoning. We are not yet able to prosecute members of the public who handle food and put it back or who cough all over the food on the counter, but it is possible to guard against this danger by covering or screening food and in most other civilised countries such screening is taken as a matter of course.

Meat Handling

The return to " freedom " and the abolition of war-time controls, has led, among other things, to the restoration of pre-war arrangements for the slaughter of food animals. Since early in the War all slaughtering had been centralised in one abattoir under Ministry control, but now it is spread among five licensed slaughterhouses, four of which have been in active use during the year. They are reasonably well-constructed and are satisfactorily managed, the proprietors co-operating well with the Department. They are not, however, ideally situated and, as old buildings, they have their structural limitations.

The small private slaughterhouse has never been the best answer to the meat-handling problem. It is undesirable that cattle should be housed and later slaughtered in close proximity to houses and shops and the town is only too well aware of the disadvantages which arise from the driving through the streets of animals intended for food. The best facilities for lairage, slaughter and handling can undoubtedly be provided in the publicly owned abattoirs and the experience of towns which have municipal abattoirs is uniformly encouraging. While the Government's recent White Paper is cautious on the subject and makes no definite promises, this principle is supported and a measure of control of slaughtering is proposed within the next few years. I hope that Colchester will be ready to move toward establishing a municipal abattoir when the time arrives.

Housing

My last Annual Report referred to the probable effects of the Housing (Rent and Repairs) Act, 1954, but necessarily remained inconclusive. During 1955 we have seen the Act in operation, but it is still difficult to make any long-term forecast of the difference

it will make to the housing position. Requests for Certificates of Disrepair have been few (6) and in most cases repairs have eventually been carried out satisfactorily so that the Certificate has been cancelled. It was one of the main purposes of the Act to encourage landlords to repair houses by allowing them to make rent increases in appropriate cases and so obtain some return for the money spent on repairs. Short of making another complete housing survey of the Borough it is impossible to say to what extent landlords in the town have spontaneously started on the repair of houses of doubtful fitness, but information available gives the impression that a number of houses in our "intermediate" classification have received more attention than we should otherwise have expected. There is no obvious sign that the bulk of the houses in this group are receiving major attention and present evidence suggests that, as I forecast a year ago, we shall find a good many of these houses falling due for closure or demolition during the next ten years or so.

A start has been made on the unfit houses noted in the general survey of 1954-55, though not much progress was made before the end of 1955. As I previously pointed out, we have no considerable slum areas and the largest group found unfit in the survey was one of five adjoining dwellings. We are therefore acting by seeking closing or demolition orders on individual unfit houses. Our most awkward problems arise where one or two grossly unfit houses form part of the same block as one or more houses which are in rather better condition. To demolish the worst would be to leave the less bad houses in a structurally unsatisfactory or even dangerous state, while the closing of the bad houses in such a block merely accelerates their decay and postpones the need for block demolition without permanently solving the problem. The most practical answer is to deal with the block as a whole fairly soon, and this policy is being followed in certain cases.

The threatened tragedy of the Dutch Quarter promises to have a happy ending. Some very useful information and help was given by our neighbours in Norwich, whose assistance I should like to acknowledge here. A visit by Councillors and Officers to that city suggested certain lines of procedure and a three-party consultation between the Borough Engineer, my own Department and the Colchester Preservation Society produced an amicable agreement in the selection of a number of houses which we had condemned as unfit but which the Society considered worth preserving and the Engineer felt were suitable for acquisition by the Corporation and preconditioning. Posterity will, I hope, be grateful for what is being done in this way to save the oldest part of the town, but there will be more immediate gratitude from a number of old people who will be enabled to live out their lives in the neighbourhood which they like and from which their removal would be a personal tragedy. Even the ratepayers will have some cause to rejoice, since the preconditioning project is going to provide some useful housing

units at a cost lower than that of building anew upon the housing estates. The whole scheme is a gratifying example of the way in which differing interests can agree on a common policy when all parties approach the problem in a spirit of goodwill and realism.

The number of persons submitting medical certificates in support of re-housing applications rose from 133 to 154, while the number of such cases re-housed during the year fell from 230 to 90. There is, and always has been, for obvious reasons, a time-lag between the receipt of the certificate and the re-housing of the applicant, and many of the persons so re-housed in 1954 had submitted their certificates in 1953. The fall in the number re-housed is, therefore, not so great as would appear at first sight but the fact remains that the recent reduction in the Borough's housing allocation has made things more difficult. Not by any means all the people submitting certificates are seriously ill and in urgent need of re-housing on health grounds, but all save a very few have some illness or disability which is being worsened by their housing conditions or which makes life in their existing circumstances exceedingly trying.

As I have previously pointed out, the Housing Committee grants urgent priority in the very few cases in which this is absolutely essential on health grounds, but this cannot be claimed except in such cases as those of "open" and infectious tuberculosis. Otherwise my powers are limited to the recommending of acceleration of re-housing by not more than six months or of transfer from "Group II" (householder category) to "Group I." When the normal waiting period is as long as eighteen months or two years my recommendations are of little use to a family newly on the housing list. There are, of course, hardships other than those of illness and if we gave considerable priority to **all** applications on health grounds we should delay the re-housing of those not yet ill and might, in addition to causing them hardship, bring about illness.

I would, however, like to plead the cause of some of the overcrowded and of households where the existing accommodation might be tolerable for a childless couple, but is grossly unsuitable for the bringing up of children. Under the old "points" scheme a substantial points award could be made on these grounds; at present we can help only in very exceptional cases where the circumstances are so extraordinarily bad that special consideration has to be given. These conditions insidiously produce ill-health and if we are going to pay more than lip-service to the preventive ideal this ought to be acknowledged and something done about it. As I have implied above, we are to a large extent the victims of policies outside our control. There is no doubt that the number of houses becoming available is not enough to meet all needs—the size of the waiting list proves that—and until substantially more houses are built people are going to suffer. Whatever the financial

position of the country I cannot reconcile myself to an official policy which fails to accept the improvement of housing as an important national investment which will pay dividends in improved health. I hope that in this matter the "credit squeeze" will be relaxed in the very near future.

General

It is a pleasure to record once again that your health services are working, so to speak, in a happy climate. Though I have referred earlier to instances of lack of public understanding and knowledge, I have no cause to complain of lack of goodwill. Those whose business it is to minister to the public's welfare, the town's doctors and our County Council colleagues in the health and welfare, not only seek our help but readily give us theirs; those whose concern is less direct, the teachers and the shopkeepers, for example, are developing an equally co-operative spirit. The credit for this must go largely to those members of the Department's staff who have direct dealings with people outside, and I thank them not only for the work they have done, but for the way in which they have done it. And finally, I would on their behalf as well as my own thank our partners in the other municipal departments and, by no means least, yourselves for making our work easier.

I remain, Mr. Mayor, Ladies and Gentlemen,

Your obedient servant,

JOHN D. KERSHAW,

Medical Officer of Health, etc.

Report of the Medical Officer of Health for the year 1955

*A Report as directed by Circulars 28/54 and 17/55 of the
Ministry of Health*

STATISTICAL SUMMARY

Population (R.G. Estimate) with Military (at 30/6/55) (Census 1951, 57,449)	63,090
Area (Census, 1951)	12,011 acres
Number of inhabited houses (Census 1951) ..	15,069
Number of inhabited caravans (Census 1951) ..	69
Rateable Value (1/4/55)	£433,189
Product of a penny rate	£1,744
Birth Rate (884 legitimate births, 39 illegitimate)	14·63
„ „ England and Wales	15·0
Stillbirths (23) Rate per thousand live and stillbirths	24·3
England and Wales	23·1
Death Rate per 1,000 of the population (Corrected)	11·2
(Crude)	11·8
„ „ England and Wales	11·7
Percentage of total deaths occurring in Public Institutions	56·4
Women dying in, or in consequence of, childbirth	1
Infantile mortality rate per 1,000 related live births— Legitimate (20 deaths), 22·62. Illegitimate (no deaths), 0·0. Total (20 deaths)	21·7
Infantile Mortality Rate, England and Wales ..	24·9
Pulmonary Tuberculosis Death Rate	0·09
Other Tuberculosis Diseases Death Rate	0·016
Cancer Death Rate	1·8
Neonatal Deaths (i.e. those occurring in the first 4 weeks of life) : 16, giving a rate of 17·3 per 1,000 related live births. The England rate was	17·3

DEATHS OF CIVILIAN RESIDENTS, 1955

<i>Cause of Death.</i>	<i>M.</i>	<i>F.</i>	<i>Total.</i>
Respiratory Tuberculosis	6	—	6
Other	1	—	1
Syphilitic Disease	3	—	3
Meningococcal infection	1	—	1
Measles	1	—	1
Cancer, Stomach	11	7	18
,, Lung, Bronchus	11	2	13
,, Breast	—	13	13
,, Uterus	—	6	6
,, Other sites	33	29	62
Leukæmia	2	1	3
Diabetes	1	5	6
Vascular Lesions, Nervous System ..	38	52	90
Coronary Disease, Angina	72	48	120
Hypertension with Heart Disease ..	8	13	21
Other Heart Disease	49	95	144
Other Circulatory Disease	9	16	25
Influenza	—	1	1
Pneumonia	20	15	35
Bronchitis	17	10	27
Other Respiratory Diseases	3	1	4
Ulcer of Stomach and Duodenum ..	9	6	15
Gastritis, Enteritis and Diarrhœa ..	1	4	5
Nephritis and Nephrosis	4	7	11
Hyperplasia of Prostate	5	—	5
Pregnancy, Childbirth, Abortion ..	—	1	1
Congenital Malformations	2	3	5
Other defined diseases	32	35	67
Motor Vehicle Accidents	6	1	7
All other Accidents	14	6	20
Suicide	6	3	9
	365	380	745

1955. DEATHS OF COLCHESTER RESIDENTS OVER 70 YEARS OF AGE

	Aged 70 and under 80	Aged 80 and under 90	Aged 90 and over	Total
Male	128	62	8	198
Female ..	138	106	10	254
Total	266	168	18	452

Eight persons were aged 90, four aged 91, one aged 92, two aged 93, one aged 94, and two aged 95.

LABORATORY, 1955

Specimen and Examination.	Positive.	Negative.	Total.
Urine, abnormalities	6	289	295
Milk for T.B.	—	3	3
Blood ? Anthrax	—	2	2
	<hr/>	<hr/>	<hr/>
	6	294	300
	<hr/>	<hr/>	<hr/>

An examination of some foreign matter in a loaf proved a length of jute fibre.

In addition, 109 samples of water were bacteriologically examined, 1 for presence of metals (iron ++) and 1 for identification of particles (fine sand grains).

	Samples	Satisfactory	Unsatisfactory
Well Water Supply	1	1	—
Town Water Supply	108	106	2

Four samples of well waters were submitted to the Counties Public Health Laboratory for chemical analysis. Three were satisfactory, and one of poor organic quality.

Examinations by the Public Health Laboratory Service (Ipswich) numbered 15 Bacteriological (9 satisfactory and 6 unsatisfactory).

NURSING HOMES

General and surgical beds available are 22, and maternity 2. There are now four Homes registered in the Borough.

PREVALENCE OF AND CONTROL OVER INFECTIOUS DISEASES

Notifiable Diseases (other than Tuberculosis) during the Year 1955.

(Civilian and Military Cases).

Disease	Total Cases Notified	Total Cases in Age Groups											Cases admitted to Hospital		
		Under 1 Year	1	2	3	4	5-9	10-14	15-19	20-34	35-44	45-64		65 and Over	
Ophthalmia Neonatorum ..	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—
Typhoid Fever acute	1	—	—	—	—	—	—	—	—	—	1	—	—	—	1
Poliomyelitis ..	17	—	—	2	—	—	5	1	3	5	—	1	—	—	16
Meningococcal Infection ..	3	1	—	—	—	1	—	—	—	—	1	—	—	—	3
Pneumonia ..	43	1	1	3	—	2	3	1	2	6	1	14	9	—	15
Dysentery ..	36	—	—	1	4	—	2	1	3	4	1	10	10	—	6
Interperal Pyrexia	54	—	—	—	—	—	—	—	7	42	5	—	—	—	—
Erysipelas	4	—	—	—	—	—	—	—	—	—	1	1	2	—	—
Malaria	2	—	—	—	—	—	—	—	—	1	—	1	—	—	2
Scarlet Fever ..	44	—	1	3	2	6	28	3	—	1	—	—	—	—	13
Infectious Hepatitis ..	5	—	—	—	—	—	1	1	1	1	—	—	—	1	2
Food Poisoning	17	—	1	—	—	3	2	—	1	6	2	2	—	—	9
Measles	1091	17	81	118	119	134	579	30	9	1	1	2	—	—	27
Whooping Cough	22	4	2	3	1	4	8	—	—	—	—	—	—	—	—
Totals ..	1340	24	86	130	126	150	628	37	26	67	13	32	21	—	94

Deaths from notified diseases : Pneumonia 5, Measles 1.

Deaths from unnotified diseases : Pneumonia 14, Cerebro-spinal Fever 1.

Total deaths from infectious diseases : 21.

Percentage of cases treated in Hospital—7·0 per cent.

Tuberculosis

Age Periods	New Cases				Deaths			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M.	F.	M.	F.	M.	F.	M.	F.
Under 1 .. ..	..	..	..	..	..	..	..	..
1 .. ..	..	..	..	..	..	..	..	..
2-4 .. ..	..	..	..	..	..	..	..	..
5-9	1	1	..	1	..	..	..	..
10-14.. ..	..	2	..	..	..	..	..	..
15-19.. ..	2	1	1	..	..	..	..	..
20-24.. ..	..	1	1	..	..	..	..	..
25-34.. ..	2	6	..	..	..	..	..	..
35-44.. ..	2	1	..	..	..	..	..	..
45-54.. ..	2	1	..	..	..	..	..	..
55-64.. ..	7	..	..	..	..	..	1	..
65 and upwards	8	..	..	1	6	..	..	..
Totals	24	13	2	2	6	..	1	..

The percentage of cases that have died of Tuberculosis during the past four years, without having been previously notified, were :

1952	1953	1954	1955
61.5%	27.2%	25.0%	57.1%

Tuberculosis Register

	1952	1953	1954	1955
Pulmonary Cases	250	278	297	311
Other Forms of Tuberculosis ..	57	55	54	36

Prevention and Treatment of Tuberculosis.

Section 172, Public Health Act, 1936.

Prevention and Treatment of Blindness.

Section 176, Public Health Act, 1936.

No action was required under these Sections.

National Assistance Act, 1948.

Section 47.

A Court Order was obtained in respect of an old lady of 93 years. She was admitted to Hospital on 17-5-55 and died on 4-6-55 from arterio-sclerosis and senility.

Essex County Council Act, 1933.

Nine establishments are registered under the above Act for massage or special treatment.

PET ANIMALS ACT, 1951

Three sets of premises were registered as at 1/1/56.

HOUSING APPLICATIONS, 1955

* Number of persons seeking re-housing supported by medical certificates	154
Number of such cases re-housed during year	90

*Group 1 (97), Group 2 (33), Transfers to other Council House accommodation (24).

MEDICAL EXAMINATIONS OF BOROUGH EMPLOYEES FOR SUPERANNUATION OR FOR ROAD TRAFFIC ACT PURPOSES DURING 1955

Primary Examinations	68 passed, 2 failed
Examinations after absences ..	11

SANITARY CIRCUMSTANCES OF THE AREA

The main sewerage work carried out in 1955 was that on the Southern Outfall Relief Scheme which was started in June.

Five new Cesspools were authorised to be built by the Borough Engineer's Department during the year, and nine were done away with.

Water.

The consumption per head per day, including water supplied to the Military, was 38·65 gallons. The length of pumping distribution mains is 112·589 miles. Details of water supply remain as in report for 1944. There are 554 metered supplies of water.

Refuse Collection and Disposal.

No changes in this service during the year.

SANITARY INSPECTION

General Summary of Work carried out by Sanitary Inspector's Department under Public Health Acts, Housing Acts, By-laws, etc.

Defects found	3,131
Defects remedied	2,688
Factories and Workshops inspected	613

Housing.

Sinks, Waste Pipes, etc., provided or renewed ..	7
Floors or walls or ceilings repaired	263
Doors or windows provided or repaired	443
Ovens or firegrates repaired or renewed	31
Stairs repaired	26
Rooms cleansed	222
Roofs repaired (including rain-pipes and gutters) ..	274
Chimneys repaired or renewed	47
Damp houses remedied	53
Yards paved or repaired	4
Other housing repairs	41

Drainage.

Repairs and improvements	291
Water Closets provided or repaired	196
Cesspools : abolished (1), provided (-), repaired (-) ..	1

Other Sanitary Work.

Under Shops Act	28
Under Factories Act	192
Under Food and Drugs Act	411
Houses disinfected	18
Clothing and other articles disinfected	1,658
Well water sampled	19
Mains supply provided to existing houses	2
Dustbins provided	54
Re-visits in connection with Sanitary Notices	6,348
Offensive accumulations removed	2
Pig-keeping nuisances abated	—
Matters referred to other Departments	261
Other nuisances or matters attended to	57

FACTORIES ACT, 1937

Prescribed particulars on the administration of the Factories Act, 1937.

PART I OF THE ACT

1.—**INSPECTIONS** for purposes of provisions as to health (including inspections made by Sanitary Inspectors).

Premises	Number on Register	Number of		
		Inspections	Written notices	Occupiers Prosecuted
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	48	97	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	450	546	24	—
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	—	—	—	—
Total ..	498	643	24	—

2.—**CASES IN WHICH DEFECTS WERE FOUND**

Particulars	Number of cases in which defects were found				Number of cases in which prosecutions were instituted
	Found	Remedied	Referred To H.M. Inspector	By H.M. Inspector	
Want of cleanliness (S.1) ..	1	3	—	—	—
Overcrowding (S.2)	—	—	—	—	—
Unreasonable temperature (S.3)	—	—	—	—	—
Inadequate ventilation (S.4) ..	—	—	—	—	—
Ineffective drainage of floors (S.6)	—	—	—	—	—
Sanitary Conveniences (S.7)					
(a) insufficient	5	7	—	1	—
(b) unsuitable or defective ..	37	48	—	4	—
(c) not separate for sexes ..	1	1	—	—	—
Other offences against the Act (not including offences relating to Outwork)	5	—	5	—	—
Total ..	49	59	5	5	—

PART VIII OF THE ACT

OUTWORK

(Sections 110 and 111)

Nature of Work	Section 110			Section 111		
	No. of outworkers in August list required by Sect. 110 (1) (c)	No. of cases of default in sending lists to the Council	No. of prosecutions for failure to supply lists	No. of instances of work in unwholesome places	Notices served	Prosecutions
Wearing and making, etc.	61	—	—	—	—	—
apparel | Cleaning and washing	—	—	—	—	—	—
Household linen	2	—	—	—	—	—
Lace, lace curtains and nets	—	—	—	—	—	—
Curtains and furniture hangings	4	—	—	—	—	—
Furniture and upholstery	3	—	—	—	—	—
Electro-plate	—	—	—	—	—	—
File making	—	—	—	—	—	—
Brass and brass articles	—	—	—	—	—	—
Fur pulling	—	—	—	—	—	—
Iron and steel cables and chains	—	—	—	—	—	—
Iron and steel anchors and grapnels	—	—	—	—	—	—
Cart gear	—	—	—	—	—	—
Locks, latches and keys	—	—	—	—	—	—
Umbrellas, etc.	—	—	—	—	—	—
Artificial flowers	—	—	—	—	—	—
Nets, other than wire nets	—	—	—	—	—	—
Tents	—	—	—	—	—	—
Sacks	—	—	—	—	—	—
Racquet and tennis balls	—	—	—	—	—	—
Paper bags	—	—	—	—	—	—
The making of boxes or other receptacles or parts thereof made wholly or partially of paper	—	—	—	—	—	—
Brush making	—	—	—	—	—	—
Pea picking	—	—	—	—	—	—
Feather sorting	—	—	—	—	—	—
Carding, etc., of buttons	—	—	—	—	—	—
Stuffed toys	—	—	—	—	—	—
Basket making	—	—	—	—	—	—
Chocolates and sweetmeats	—	—	—	—	—	—
Cosaques, Christmas crackers, Christmas stockings, etc.	—	—	—	—	—	—
Textile weaving	—	—	—	—	—	—
Lampshades	—	—	—	—	—	—
Total	70	—	—	—	—	—

OFFENSIVE TRADES AND KNACKER'S YARD

	Number.	Inspections.
Gut Scraper	1	7
Tallow Melter	1	6
Rag, Bone and Skin Dealer	5	10
Bone Boiler	1	6
Tripe Boiler	1	4
Total	9	33
Horse Slaughterer	1	7

These occupations have been carried out satisfactorily and no complaints have been received during the year.

COMMON LODGING HOUSE

There is one Common Lodging house in the Borough providing accommodation for 27 lodgers. Inspections have been made on various occasions and cleansing and maintenance have been attended to satisfactorily.

ERADICATION OF BED BUGS

Dwelling Houses Infested—Council 6, Others 13	19
Dwelling Houses Disinfested—Council 6, Others 13	19
Rooms in these—Infested and Disinfested	60

In addition 22 dwelling houses, including 10 Council, were treated for the eradication of fleas.

RATS AND MICE

During the year 3,892 inspections and re-inspections were made by the Rodent Operators and 602 premises were freed.

Three hundred and forty-seven complaints of rat infestation were received and dealt with. Three informal notices were served.

Number of rats known to have been killed	859
Number of mice known to have been killed	172

The public sewers were twice treated during the year and poison laid in those manholes where takes of pre-bait had been recorded. Forty-eight manholes were poison baited as a result of the first treatment and sixty-one as a result of the second treatment. This is a slight improvement on the previous year when the figures were sixty-six and sixty-five respectively.

HOUSING

Statistics for the Year 1955.

New Houses completed—292.

New Flats completed—56.

Additional units of accommodation provided by conversions 2

I.—*Inspection.*

Number of dwelling houses inspected 1,946

Number of dwelling houses found to be unfit for human habitation 24

Number of dwelling houses found not to be in all respects reasonably fit for human habitation .. 767

II.—Number of defective houses rendered fit by Informal Action 617

III.—*Action under Statutory Powers.*

Under Sects. 9, 10 and 16, Housing Act, 1936—

Number of dwelling houses in respect of which notices were served for repairs —

Number rendered fit—

(a) By owners —

(b) By Local Authority in default —

Under Public Health Acts—

Number of dwelling houses in respect of which notices were served for repairs 88

Number complied with—

(a) By owners 86

(b) By Local Authority in default 3

C. Proceedings under Sections 11 and 13 of the Housing Act, 1936—

(1) Number of dwelling houses in respect of which Demolition Orders were made.. .. . 10

(2) Number of dwelling houses demolished in pursuance of Demolition Orders 6

(3) Number of undertakings not to re-let given by owners 7

D. Proceedings under Section 12 of the Housing Act, 1936.. .. . 1

HOUSING REPAIRS AND RENTS ACT, 1954

Application for Certificates of Disrepair 6

Certificates of Disrepair granted 7

Applications for revocation of Certificates of Disrepair .. 4

Revocations of Certificates of Disrepair granted 4

LEGAL PROCEEDINGS

Proceedings were taken against an owner for failing to comply with the requirements of a Statutory Notice to carry out repairs. A Nuisance Order was made and costs of 13s. imposed by the Magistrates. The owner defaulted and the repairs were carried out by the Council.

An owner appealed against the service upon him of a Notice to provide a dustbin. The appeal was successful and the Magistrates held in this case that the dustbin should be provided by the tenant.

HOUSING SURVEY

During the year a Housing Survey was carried out in the central area of the town and certain outer districts which contained old house property. The survey was the subject of a special report to the Health Committee and the following summarises the report :

The majority of the houses in Colchester are in a state of repair varying from fair to good, are reasonably well spaced, and are not likely for many years to require serious attention from this Department. Some of them, no doubt, will have housing defects, but they will be defects readily capable of repair. In many cases the repairs will be effective without any pressure from the Local Authority. In other cases they will come to light either as a result of routine inspection by the Sanitary Inspectors or by complaints by the occupiers. It has been possible by viewing exteriors to assess such houses as being those not requiring serious treatment and by so doing save valuable time of the Inspectors making the survey. There are, however, some areas, and particularly in the older and more central parts of the Borough, where many of the houses are in such a condition that a detailed inspection is the only method by which their future life can be assessed, and it is to these areas that attention has, in the main, been directed. Altogether some 2,271 houses have been inspected, and arising out of the inspections classified as under :

A. Houses in a reasonable state of repair or with defects capable of readily being repaired ..	1,468
B. Houses in a poor state of repair, but capable in the main of being restored to a reasonable standard	689
C. Houses so defective or so lacking in natural light and ventilation as to warrant early closing or demolition	114

Of the houses classified " B " many have deteriorated during and since the war as the result of almost complete cessation of major housing repairs, and in some instances are borderline with category " C ". These houses will have to be reviewed at a later date, and it can confidently be assumed that it is, in the main, from houses in this classification that further individual houses for demolition or areas for clearance will come during the years following the completion of the first five-year programme.

INSPECTION AND SUPERVISION OF FOOD

Inspections of food premises are shown in the following table :

Premises	Number.	Inspections.
Slaughterhouses	5	1,170
Bakehouses	30	112
Bakehouses (Underground)	1	
Dairies and Milk Shops	20	135
Provisions	—	312
Fish Shops—Wet	17	91
Fish Shops—Fried	22	87
Butchers' Shops	44	165

HOTELS AND RESTAURANT KITCHENS

During the year 327 visits were made to hotel and restaurant kitchens and 53 visits to canteens.

Table showing repairs or improvements carried out at Food Premises :

Constant hot water supply provided	12
Handbasins or sinks provided	12
Towels	6
Walls—decorated or cleansed	80
„ rendered or tiled	9
Ceilings—new	1
„ decorated or cleansed	72
Floors—new	1
„ repaired	6
„ cleansed	7
Refrigerators renovated	2
Roofs repaired	4
Water closets—new or repaired	57
„ „ “ Wash your hands ” notices	24
Miscellaneous	69
Coppers Provided	1
Refuse Receptacles Provided	23

MEAT INSPECTION

The inspection of animals slaughtered for food continued to receive the attention of the Department. There are five licensed slaughterhouses in the Borough, four of which are in regular use. The number of animals slaughtered during the year was slightly less than for the previous year, and after slaughter all were examined for evidence of disease by the Borough Sanitary Inspectors.

Carcases and Offal Inspected and Condemned in whole or in part

	Cattle excluding Cows	Cows	Calves	Sheep and Lambs	Pigs	Horses
Number killed (if known)	—	—	—	—	—	—
Number inspected ..	4,079	136	460	6,053	7,852	—
All diseases except Tuberculosis and Cysticerci :						
Whole carcasses condemned ..	—	—	1	6	12	—
Carcases of which some part or organ was condemned ..	851	11	—	23	170	—
Percentage of the number inspected affected with disease other than tuberculosis and cysticerci	20.86 %	8.09 %	.22 %	.48 %	2.32 %	—
Tuberculosis only :						
Whole carcasses condemned ..	2	1	—	—	—	—
Carcases of which some part or organ was condemned ..	132	17	—	—	97	—
Percentage of the number inspected affected with tuberculosis ..	3.28 %	13.23 %	—	—	1.25 %	—
Cysticercosis :						
Carcases of which some part or organ was condemned ..	12	—	—	—	—	—
Carcases submitted to treatment by refrigeration ..	17	—	—	—	—	—
Generalised and totally condemned	1	—	—	—	—	—

Parts of Carcasses or Organs Condemned

	Beasts including Cows	Calves	Sheep	Pigs	Total
Parts of Carcasses	lb. 367	lb. —	lb. 32	lb. 1,353	lb. 1,752
Organs	12,226	—	36	449	12,711

In addition to the above, 614 lb. of Imported Beef, 31 lb. of Imported Mutton and 6 lb. of Imported Ox Liver were condemned.

The total weight of meat condemned as unfit for human consumption was :—

9 tons 1 qr. 20 lb.

Unsound meat was collected by a local firm engaged in the manufacture of commercial grease.

<i>Type of Food.</i>	OTHER FOOD INSPECTION						<i>Weight in lb.</i>
Ham	111
Butter	16
Cheese	445
Sugar	5
Bacon	195
Sausages	53
Flour	91
Fish	1,424
Biscuits	45
Dried Fruit	73
Frozen Rabbits	11
Tongue	24
Corned Beef	6
Sweet Fat	55
Veal	20
Confectionery	870
Other Foods	9
							3,453

The total weight of meat and other foods listed above unfit for human food and condemned was :—

10 tons 11 cwts. 1 qr. 1 lb.

In addition the following foods were condemned :

Tinned Milk	..	..	..	..	..	..	160 Tins
Other Tinned Goods	..	..	..	..	..	..	1,805 Tins
Packeted Foods	..	..	..	..	..	..	738 Pkts
Bottled Foods	..	..	..	..	..	..	251 Bots
Fish Cakes	..	..	..	..	..	..	29
Meat Pies	..	..	..	..	..	..	4
Swiss Rolls	..	..	..	..	..	..	575
Cakes	..	..	..	..	..	..	403

All other condemned food was destroyed by the Cleansing Department.

MILK AND DAIRIES ORDERS AND REGULATIONS

There are 8 dairies and 31 distributors on the register, and during the year 135 inspections of premises were made.

The Milk (Special Designations) (Specified Areas) Order, 1955 came into operation in the Borough on December 6th, after which date it was illegal for any person to sell by retail for human consumption any milk other than milk sold as specially designated milk in accordance with the provisions of The Milk (Special Designation) (Raw Milk) Regulations, 1949 to 1954 or The Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949 to 1953. The majority of our distributors were already selling only designated milk, and the introduction of the new Order operated smoothly.

Milk (Special Designation) (Raw Milk) Regulations, 1949-1954

Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949-1953

Licences issued for Sale of Graded Milk

Pasteurised	18
Tuberculin Tested	19
Pasteurised, Producer	3
Sterilised	1
Supplementary	6

Pasteurised and Sterilised Milk.

During the year 112 samples of pasteurised milk and 5 samples of sterilised milk were submitted for examination. One of the Pasteurised samples failed to pass the phosphatase test. This sample was followed up and subsequent samples proved satisfactory.

Of the 117 samples taken, 105 were of milk pasteurised in Colchester, the remaining 12 being of milk pasteurised or sterilised outside the Borough and brought in for retail sale.

Milk—Biological Test.

Seventeen samples of milk were taken for submission to the biological test for the presence of tubercle bacillus. One sample was found to be positive and the Divisional Veterinary Inspector was informed. The milk concerned was already being delivered to an establishment for pasteurisation, and no further action under the Milk and Dairies Regulations was necessary.

FOOD AND DRUGS ACT, 1938

Samples	No. of Samples	Samples below Standard	Nature of Deficiency	
Milk	33	2	Deficient in Milk Fat 4% Extraneous Water 3½%	
Condensed Milk	1			
Cream	2			
Margarine	5			
Butter	8	1	Contained 3½% of water in excess of maximum amount permitted.	
Lard	5			
Sausages	3			
Sausage Meat	1			
Pork Luncheon Meat	1			
Suet	2			
Self Raising Flour	3			
Pork Pies	3			
Creamed Rice	1			
Mincemeat	5			
Ground Almonds	1			
Marzipan	1	1		Contained two small pieces of steel wire.
Marmalade	2			
Jam	3			
Lemon Curd	2			
Table Jelly	1			
Orange Drink	1			
Orange Squash	1			
Apples	1			
Sweets	2			
Soup	5			
Sauce	3			
Pickle	1			
Salad Cream	1			
Salad Oil	1			
Chicken Broth	1			
Tinned Ham and Chicken	1			
Minced Chicken	1			
Cheese Spread	3			
Salmon Spread	1			
Meat Paste	2			
Fish Paste	1			
Steak and Kidney Pudding	1			
Glycerine of Thymol	1			
Olive Oil	1			
Chemical Food	1			
Cherry Cough Linctus	5	2	Deficient in Sugar 25% Deficient in Sugar 15%	
Camphorated Oil	1			
Lemon Juice	1			
Honey	1			
Tinned Garden Peas	1			
Ground Nutmegs	1			
Vinegar	2			
Fish Cakes	2			
	127	6		

Observations.

CHERRY COUGH LINCTUS—SAMPLE No. 22 : Deficient in sugar to the extent of 25 per cent. of the amount stated on the label.

CHERRY COUGH LINCTUS—SAMPLE No. 87 : Deficient in sugar to the extent of 15 per cent. of the amount stated on the label.

The matter was taken up with the manufacturer.

MILK—SAMPLE No. 56 : 4 per cent. deficient in milk fat.

MILK—SAMPLE No. 59 : $3\frac{1}{2}$ per cent. extraneous water.

These contraventions were due to the method of operation of a pasteurising plant. A letter of caution was sent to the firm concerned by the Town Clerk.

BUTTER—SAMPLE No. 94 : A sample of farmhouse butter purchased from the central depot of a women's organisation was found to contain $3\frac{1}{2}$ per cent. of water in excess of the maximum amount permitted. A letter of caution was sent to the Controller of the premises and to the person who manufactured the butter.

MARZIPAN—SAMPLE No. 109 : An informal sample of marzipan was found to contain two small pieces of wire. A letter of caution was sent to the manufacturer by the Town Clerk and the information passed to the Local Authority in whose district the marzipan was manufactured.

BREAD : Proceedings were taken against a baker for selling a loaf of bread containing a portion of a cigarette. A fine of £5 was imposed.

CAKE : A complaint was received concerning the presence of pins in cut cake. It was found that pins were used by the firm in question to attach price tickets to cakes. A letter of warning was sent by the Town Clerk.

MEAT PASTIES : A complaint was received concerning two meat pasties affected with mould. The matter was taken up with the firm concerned and a letter of caution sent by the Town Clerk.

Ice Cream (Heat Treatment, etc.) Regulations

Visits to premises where ice cream is manufactured or sold	376
Samples taken	47
Results of samples—Grade I	36
Grade II	8
Grade III	2
Grade IV	1

There are now only two manufacturers of ice cream in the Borough and both of these are caterers.

JOHN D. KERSHAW, M.D., D.P.H.,
*Medical Officer of Health
of the Borough of Colchester.*

PUBLIC HEALTH DEPARTMENT,
TRINITY STREET.

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