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I

THE RURAL DISTRICT COUNCIL
OF
GAINSBOROUGH

ANNUAL REPORT
OF THE
MEDICAL OFFICER OF HEALTH
1972

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Medical Officer of Health

J. S. Robertson, M.B., Ch.B., M.R.C.S., D.P.H., D.I.H.

Deputy Medical Officer of Health

A. V. Sheard, M.B., Ch.B., D.Obst.R.C.O.G., D.P.H.

Office: Public Health Department, The Cedars, Bigby Road, Brigg.
Tel: Brigg 3604/5

Clerks: Mrs. M. H. Akester, Mrs. N. A. Titman, Mrs. M. E. Jackson

Surveyor and Chief Public Health Inspector

F. Archer, A.M.I.C.E., M.A.P.H.I.

Assistant Surveyor and Public Health Inspector

D. G. Clixby, Cert. S.I.B.,
Certified Inspector of Meat and Other Foods

Office: 26, Spital Terrace, Gainsborough.
Tel: Gainsborough 2215

The Cedars,
Bigby Road,
BRIGG,
Lincolnshire.

October. 1973.

Mr. Chairman, Ladies and Gentlemen,

In my report to you last year I drew attention to the unreliability of statistics based on very small numbers. The point is very well illustrated by the apparently unsatisfactory illegitimate infant mortality rate of 111 due to the fact that a single baby died out of a total of only 9 illegitimate live births. The number of illegitimate births was the same as in 1971, and our illegitimacy rate of only 4 per cent must be one of the lowest in the country. Total births fell from 243 in 1971 to 207 in 1972. This is a most welcome step in the right direction but further efforts will be needed to bring the birth rate down to match the death rate and stabilise population.

The mid-year population estimate may well be misleading. Certainly the sudden influx of 1,200 Commonwealth citizens into Hemswell camp following their expulsion from Uganda by General Amin increased our population at least temporarily by 10 per cent during the second part of the year. Rates based on an estimate which does not take account of so substantial a rise in the population at risk are necessarily misleading. Against this background the fall in number of notifications of infectious disease from 55 in 1971 to 19 in 1972 is good. All three of the notifications of pulmonary tuberculosis included in this total were Ugandan Asians whose condition was revealed by X-ray on arrival. Although the number of cases found in this way was 8, only the 3 for whom official notification was made are included in the table.

Other political changes began to affect the quality of life in agricultural areas during the year. The change from our previous cheap food policies and the opportunities forseen by farmers as consequence of entry to the E.E.C. proved a strong incentive to intensification of livestock production. I had occasion to draw your attention to some of the pollution problems and risks of

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spread of infection between animals and from animal to man which result from the spraying of manure slurries from such units. The change from a subsidised agriculture to a system more responsive to market forces will have many other consequences. World population growth and industrial expansion are beginning to bring pressure on the earth's resources, and as shortages develop prices will rise. In the past, when resources seemed vast in relation to demand production was increased in response to shortage-induced price rises, and our economic system was thereby stabilised. We have now entered a new era in which the limitations of the earth's resources will prevent any massive increase in production of foods or fuels from flooding the market and stabilising prices again. Prices may instead continue to rise until rationing by price matches demand to supply. We face, therefore, a kind of inflation which is virtually world wide and not amenable to the traditional cures. In order to protect the poor from its effects the Government is having to make a number of changes in policy. How these will effect the well being of a rural community such as ours remains to be seen. It may be that the agricultural worker, for so long the poor cousin of the urban industrial worker, may come into his own during the next few years as the demand for foodstuffs rises and the supplies of fuels and raw materials for some of the manufacturing industries become depleted. Any such change in their fortunes is still far off, and the effect in 1972 of Government efforts to control inflation merely prevented the unfortunate farm workers from receiving the pay increase which they had just been awarded. They remained one of the least affluent groups in our society.

Preparation for the forthcoming changes in Local Government and for the proposed re-organisation of the National Health Service were major features of 1972. Despite their feelings of insecurity and preoccupation with preparation for re-organisation your staff were able to maintain all services, but some effect on performance was inevitable. Another factor which affected particularly the Public Health Inspectors was the increase in numbers of applications for improvement grants resulting from the temporary availability of 75 per cent as opposed to 50 per cent grant aid.

Attendance at special courses in preparation for the forthcoming re-organisation of the National Health Service caused my absence from the area for seven weeks during the year, and I am indebted to my deputy, Dr. Sheard, for so

spread of infection between animals and from animals to man which results from the spraying of manure sludges from such units. The change from a municipal agriculture to a system more responsive to market forces will have many other consequences. World population growth and industrial expansion are beginning to bring pressure on the earth's resources, and as shortages develop prices will rise. In the past, when resources seemed vast in relation to demand production was increased in response to shortage-induced price rises, and our economic system was thereby stabilized. We have now entered a new era in which the limitations of the earth's resources will prevent any massive increase in production of food or fuels from flooding the market and stabilizing prices again. Prices may instead continue to rise until rationing or price freezes demand to supply. We face, therefore, a kind of inflation which is virtually world wide and not amenable to the traditional cure. In order to protect the poor from the effects the Government is having to make a number of changes in policy. How these will affect the well being of a rural community such as a remains to be seen. It may be that the agricultural worker, for so long the poor cousin of the urban industrial worker, may come into his own during the next few years as the demand for foodstuffs rises and the supplies of fuels and raw materials for some of the manufacturing industries become depleted. Any such change in their fortunes is still far off, and the effect in 1975 of Government efforts to control inflation merely prevented the unfortunate farm workers from receiving the pay increases which they had just been awarded. It remained one of the least affluent groups in our society.

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Attendance at special courses in preparation for the forthcoming re-organization of the National Health Service caused by absence from the area for seven weeks during the year, and I am indebted to Mr. Sheppard for

ably coping with the problems which arose. These were numerous. It was during my absence at such a course that the Uganda crisis occurred, and although I was able to return at week-ends to help, Dr. Sheard bore the brunt of this work. I am indebted to him for the following account of this episode.

"The arrival from Uganda of over 1,200 political refugees between 28th September and 8th November caused considerable problems for the Department, which had only a few days notice of the event.

They were housed at Hemswell R.A.F. Camp, which is in a remote situation but was suitable in that the buildings were in good condition and the camp had a central kitchen, water supply, communal heating and a sewage treatment plant in working order.

The arrangements were in the hands of the Ugandan Asian Resettlement Board. The District Council was responsible for prevention of infectious disease and waste disposal.

Hemswell became the main receiving camp between 28th and 30th September and continued to admit plane loads intermittently up to early November. After arrival at Stansted or Heathrow airports the refugees were immediately sent by bus to Hemswell. They were very tired after an almost non-stop journey from Africa, and had no medical check since arriving in England.

Immediately on arrival at Hemswell their vaccination documents were checked, brief medical inspections were made and chests X-rayed.

Only six did not have a valid smallpox vaccination certificate, and these were kept under daily surveillance for fourteen days.

The routine chest X-ray proved useful in that thirty-nine conditions of different kinds were revealed, most of them minor, but including eight cases of tuberculosis. Of these, four were considered infectious and were immediately taken to the Lincoln Chest Hospital. The detection of seven cases of tuberculosis per thousand compares with the current rate of 0.6 per thousand in mass radiography surveys in the United Kingdom.

Apart from minor septic skin conditions, no other infectious diseases were found. A small proportion had non-infectious conditions or handicaps.

Two children in one family developed diarrhoea the day after arrival and this proved to be associated with a dysentery organism. This caused some concern in view of the over-crowding in the camp and the Administrator promptly arranged for separate accommodation to be provided as an isolation unit. Fortunately no further cases of dysentery developed.

The refugees were unfamiliar with the pedestal lavatory at first but rapidly learnt and showed high standards of cleanliness and hygiene. Without this an epidemic of dysentery might have occurred.

Catering was efficiently undertaken by a large experienced commercial firm. In the early days they were short of equipment and staff, but these were soon obtained. Twenty-one of the refugees who worked in the kitchen were tested for possible enteric diseases. The tests of blood and faeces were entirely negative.

Mr. Archer and his staff arranged for disposal of food waste and general refuse, and made daily visits to supervise this as well as giving advice on general hygiene.

Most of the refugees had already had the same immunisations as are given in England, excepting those for measles and tuberculosis. After the first few weeks it was possible to arrange to give these. Measles vaccine was offered to those under 16 years and B.C.G. tuberculosis vaccine, after preliminary skin test, to those under thirty years.

General medical services were at first provided by local doctors on a temporary basis. Perhaps inevitably there were difficulties in that many of the women and older refugees did not speak English, and it was not easy for the doctors to gain a clear picture of the patients' symptoms and to assess the degree of urgency. This was resolved by the appointment of an Indian doctor who is resident in the camp.

The Health Department of the County Council arranged for a nurse to be on duty in the camp throughout the day and for a health visitor to call on and advise families with young children. A family planning clinic was also arranged.

The Education Department of the County Council set up primary and

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The refugees were unfamiliar with the hospital laboratory at first but rapidly learnt and showed high standards of cleanliness and hygiene. With this an epidemic of dysentery might have occurred.

Catering was efficiently undertaken by a large experienced community team. In the early days they were short of equipment and staff, but these were soon obtained. Twenty-one of the refugees who worked in the kitchen were later found to be suffering from the disease. The tests of blood and faeces were entirely negative.

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Most of the refugees had already had the same immunizations as are given in England, excepting those for measles and tuberculosis. After the first few weeks it was possible to arrange to give these. Measles vaccine was offered to those under 15 years and B.C.G. tuberculous vaccine, after preliminary skin test, to those under thirty years.

General medical services were at first provided by local doctors on a temporary basis. Perhaps inevitably there were difficulties in that many of the women and other refugees did not speak English, and it was not easy for the doctors to gain a clear picture of the patients' symptoms and to assess the degree of urgency. This was resolved by the appointment of an Indian doctor who is resident in the camp.

The Health Department of the County Council arranged for a nurse to be on duty in the camp throughout the day and for a health visitor to call on and advise families with young children. A family planning clinic was also arranged.

The Education Department of the County Council set up primary and

secondary schools within the camp and places were found in the nearby R.A.F. primary school and in local secondary schools. Also, classes in English language and other subjects were arranged for adults who wished to attend.

For pre-school children a playgroup was run by voluntary staff organised by the local pre-school playgroups association.

Social workers from the County Council's Gainsborough area office provided advice and support, particularly for the handicapped. A number of severely handicapped people were identified who had no early prospect of leaving Hemswell, and to provide some interest for them a day centre was set up staffed by a craft instructor and social workers.

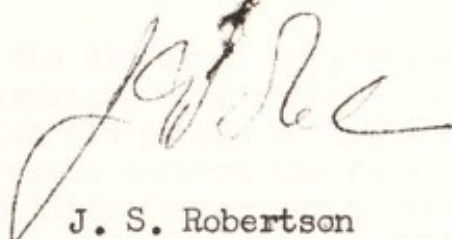
The W.R.V.S. and other voluntary organisations are giving invaluable assistance - they have helped people to settle in and provided warm clothing and are helping with transport, taking meals to the sick and in numerous other ways.

The majority of the refugees have moved on from Hemswell to houses and jobs throughout the country. At the time of writing Hemswell is one of the few camps still in operation and many hundreds of refugees from other camps have been transferred in. There are inevitable problems in resettling the unskilled and handicapped but the Resettlement Board is hoping to complete this and close the camps in 1973."

I am indebted to Mr. Archer and to Mr. Clixby for their work during the year. In particular the extra time they had to devote to arranging for services at Hemswell Reception Centre and in the supervision of hygiene there deserves special mention. Details of their work is as usual included in the pages which follow.

I am,

Your obedient servant,



J. S. Robertson
Medical Officer of Health.

Causes of Death in the District during the year 1972

(Registrar General's Figures)

Causes of Death	0-	1-	15-	25-	45-	65+	Total	
							M	F
Malignant Neoplasm, Oesophagus	-	-	-	-	-	1	-	1
Malignant Neoplasm, Stomach	-	-	-	-	-	1	-	1
Malignant Neoplasm, Intestine	-	-	-	-	2	3	2	3
Malignant Neoplasm, Lung, Bronchus	-	-	-	-	3	4	5	2
Malignant Neoplasm, Breast	-	-	-	-	1	-	-	1
Malignant Neoplasm, Prostate	-	-	-	-	-	1	1	-
Leukaemia	-	-	-	-	1	-	1	-
Other Malignant Neoplasms	-	-	-	-	2	-	1	1
Diabetes Mellitus	-	-	-	-	-	2	1	1
Anaemias	-	-	-	-	-	1	-	1
Other Diseases of Nervous System	-	-	-	-	1	-	1	-
Hypertensive Disease	-	-	-	-	1	2	1	2
Ischaemic Heart Disease	-	-	-	1	12	39	32	20
Other Forms of Heart Disease	-	-	-	-	1	8	5	4
Cerebrovascular Disease	-	-	-	-	4	21	15	10
Other Diseases of Circulatory System	-	-	-	-	1	4	2	3
Influenza	-	-	-	-	-	1	1	-
Pneumonia	1	-	-	-	-	11	8	4
Bronchitis and Emphysema	-	-	-	-	1	2	3	-
Other Diseases of Respiratory System	-	-	-	-	-	1	1	-
Cirrhosis of Liver	-	-	-	-	1	-	-	1
Other Diseases of Digestive System	-	-	-	-	1	-	-	1
Hyperplasia of Prostate	-	-	-	-	-	1	1	-
Other Diseases, Genito-Urinary System	-	-	-	-	-	1	1	-
Congenital Anomalies	2	-	-	-	-	-	1	1
Birth Injury, Difficult Labour, etc.	1	-	-	-	-	-	-	1
Motor Vehicle Accidents	-	-	-	1	-	-	1	-
All Other Accidents	-	1	1	-	-	4	3	3
TOTAL:	4	1	1	2	32	108	87	61

NOTIFICATION OF INFECTIOUS AND OTHER DISEASES

BY AGE GROUPS

DISEASES	0+	1+	2+	3+	4+	5+	10+	25+	A.U.	TOTAL
Measles	-	2	1	1	-	2	3	1	-	10
Dysentery	-	1	-	-	-	-	-	2	2	5
Pulmonary Tuberculosis	-	-	-	-	-	-	-	-	3	3
Scarlet Fever	-	-	-	-	-	-	-	1	-	1
Total:	-	3	1	1	-	2	3	4	5	19

WATER SUPPLY

Reports on samples of water taken by the Lincoln and District Water Board

(1) Lea Road No. 3 Borehole

Chemical Analysis in mg./l.

Appearance - Clear and Bright

Colour (° Hazen)	-	Turbidity (Silica Scale)	1.0
Odour & Taste - Nothing significant		Conductivity at 20° (Recip. Megohms)	565
Total Dissolved Solids (180°)	375	pH	7.72
Total Hardness as CaCO ₃	290	Alkalinity as CaCO ₃	172
Non-Carbonate Hardness as CaCO ₃	118	Calcium Hardness as CaCO ₃	178
Magnesium Hardness as CaCO ₃	112	Free Carbon Dioxide as CO ₂	6.5
Chloride as Cl	20.5	Fluoride as F	0.07
Phosphate as PO ₄	0.06	Silica as SiO ₂	12
Sulphate as SO ₄	121		
Free Ammoniacal Nitrogen as N	0.05	Albuminoid Nitrogen as N	0.02
Nitrate Nitrogen as N	< 0.5	Nitrite Nitrogen as N	-
Oxygen absorbed from Permanganate (4 hr at 27°)			Nil
Iron as Fe	0.06	Manganese as Mn	Nil
Potassium as K	5.6	Sodium as Na	13.8
Heavy Metals (copper, lead and zinc)		Lead =	< 0.01
Other parameters	-		

(2) Glenthams Pumping Station

Chemical Analysis in mg/l.

Appearance - Clear and Bright

Colour ($^{\circ}$ Hazen)	-	Turbidity (Silica Scale)	Nil
Odour & Taste - Nothing significant		Conductivity at 20° (recip. Megohms)	825
Total Dissolved Solids (180°)	600	pH	7.25
Total Hardness as CaCO_3	462	Alkalinity as CaCO_3	282
Non-Carbonate Hardness as CaCO_3	180	Calcium Hardness as CaCO_3	380
Magnesium Hardness CaCO_3	82	Free Carbon Dioxide as CO_2	33
Chloride as Cl	38.5	Fluoride as F	0.16
Phosphate as PO_4	0.06	Silica as SiO_2	12
Sulphate as SO_4	175		
Free Ammoniacal Nitrogen as N	0.08	Albuminoid Nitrogen as N	0.04
Nitrate Nitrogen as N	< 0.5	Nitrite Nitrogen as N	-
Oxygen absorbed from Permanganate (4 hr. at 27°)			0.20
Iron as Fe	0.03	Manganese as Mn	Nil
Potassium as K	2.6	Sodium as Na	25.0
Heavy metals (copper, lead and zinc)		Lead =	< 0.01
Other Parameters	-		

Bacteriological Examination

250 samples of water were taken for bacteriological examination from pumping stations serving the area. All were satisfactory.

ANNUAL REPORT OF THE CHIEF PUBLIC HEALTH INSPECTOR, 1972

HOUSING

Total number of dwelling-houses and flats in the district	4,845
Total number of new houses erected during the year:	86
(1) By the local authority	21
(2) By other local authorities	None
(3) By other bodies or persons	65
(4) Number allocated for replacing houses subject to Demolition Order or otherwise demolished	Nil
Inspection of dwelling-houses during the year:	
(1) Total number of dwelling-houses inspected for housing defects (under the Public Health or Housing Acts)	241
(2) Number of inspections made for the purpose	488
Remedy of defects during the year without service of formal notice:	
Number of defective dwelling-houses rendered fit in consequence of informal action by the local authority or their officers	18
Action under statutory powers during the year:	
(1) Proceedings under the Public Health Acts:-	
Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	14
Number of dwelling-houses in which defects were remedied after service of formal notices:	
(a) By owners	12
(b) By local authority in default of owners	Nil
(2) Proceedings under the Housing Acts:-	
Number of dwelling-houses in respect of which notices were served requiring repairs	3
Number of dwelling-houses which were rendered fit after service of formal notices:	
(a) By owners	1
(b) By local authority in default of owners	Nil
Number of certificates of disrepair issued	Nil

(3) Slum Clearance - proceedings under the Housing Acts:-

Number of dwelling-houses in respect of which Demolition Orders were made	19
Number of dwelling-houses demolished in pursuance of Demolition Orders	18
Number of dwelling-houses, or parts, subject to Closing Orders	Nil
Number of dwelling-houses, or parts, rendered fit by undertakings	Nil
Number of dwelling-houses included in confirmed Clearance Orders	Nil
Total number of dwelling-houses on which Demolition Orders are operative and to which are still occupied except under the provisions of Section 34, 35 & 46 of the Housing Act, 1957	15
Total number of dwelling-houses occupied under Section 34, 35 & 46 of the Housing Act, 1957	Nil
Houses demolished or closed voluntarily by owners which would otherwise have been the subject of statutory action to secure demolition or closure	11

Nissen Huts or similar hutments.

Number still occupied	Nil
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Estimated number of dwellings remaining to be dealt with under:-

(a) The Housing Act, 1957, Sections 16 & 18	297
(b) The Housing Act, 1957, Section 42	Nil

Housing Acts - Overcrowding.

Number of cases of overcrowding relieved during the year	Nil
Number of dwellings overcrowded at the end of the year	2
Number of families dwelling therein	2
Number of persons dwelling therein	14

Housing Act, 1969

Number of dwellings for which applications for grants have been made -

(a)	Standard Grant (Section 8)	14
(b)	Improvement Grant (Section 2)	81
(c)	Special Grants (Section 13)	Nil

Number of dwellings subject to grant -

(a)	Standard Grant	13
(b)	Improvement Grant	76
(c)	Special Grant (including dwellings in improvement areas)	Nil

Number of declared General Improvement Areas None

Moveable Dwellings, Tents, Vans etc.

Caravan Sites and Control of Development Act, 1960.

Number of site licences 11

Total number of caravans permitted under such licences 727

Number of inspections during the year -

(a)	Sites	44
(b)	Caravans	16

Number of contraventions remedied 8

Number of sites exempt from licence Nil

Number of holiday chalets 24

Public Health Act, 1936

Number of site licences 14

Number of individual licences 12

Number of inspections -

(a)	Sites	Nil
(b)	Dwellings	8

Number of contraventions remedied Nil

FOOD PREMISES

Bakehouses:

Number in district	2
Number of inspections made	4
Number of contraventions found	1
Defects remedied	1

Ice Cream:

Number of manufacturers on register	1
Number of premises licensed for the sale of ice cream	41
Number of inspections made	68
Number of contraventions found	6
Number of contraventions remedied	5
Number of samples taken	Nil

Meat Products:

Number of premises registered for the manufacture of meat products	9
Number of inspections made	19
Number of contraventions found	4
Number of contraventions remedied	4

Other Food Premises:

Number of other food premises	89
Number of inspections made	61
Number of contraventions found	2
Number of contraventions remedied	2

FOOD PREMISES

Dishwashers:

3	Number in district
4	Number of inspections made
1	Number of contraventions found
1	Defects remedied

Ice Cream:

1	Number of manufacturers on register
41	Number of premises licensed for the sale of ice cream
68	Number of inspections made
6	Number of contraventions found
5	Number of contraventions remedied
111	Number of samples taken

Meat Products:

2	Number of premises registered for the manufacture of meat products
12	Number of inspections made
4	Number of contraventions found
4	Number of contraventions remedied

Other Food Premises:

89	Number of other food premises
61	Number of inspections made
2	Number of contraventions found
2	Number of contraventions remedied

DRAINAGE AND SEWERAGE

Closets:

Number of houses with pail closets	230
Number of houses with water closets	4,644
Number of water closets substituted for pail closets	21
The Council does not operate a pail closet emptying service	

Cesspools and Septic Tanks:

Number of cesspools and septic tanks emptied, cleansed etc.	129
Number of cesspools and septic tanks abolished	20
The Council operates a cesspool/septic tank emptying service	
Number of vehicles in use for emptying cesspools	1

Sewerage and Sewage Disposal:

Areas or villages where provision has been made of new sewers or where existing sewerage arrangements improved:

Laughton village sewered and sewage pumped to Blyton works. 90% houses connected. Major schemes for Brampton, Torksey Lock and Torksey in south of district and Northorpe in the north commenced.

Areas or villages where provision has been made of new sewage disposal facilities or existing arrangements improved:

Northorpe and Torksey - commencement soon.

WATER SUPPLIES

Number of houses supplied from public mains - in house	4,846
Standpipe/outside tap	10
Number of houses supplied from private sources - in house	4
not in house	12
Number of houses with unsatisfactory supplies	9
Number of houses supplied therefrom	9

Swimming and Paddling Pools

	<u>Swimming Pools</u>	<u>Paddling Pools</u>
Number in operation	4	1
Number fitted with continuous mechanical filtration and chlorination	2	-

GENERAL

Offensive Trades:

Number of premises in the district	Nil
------------------------------------	-----

Knackers Yard:

Number licensed	1
Number of inspections made	8
Number of contraventions remedied	2

Office Shops and Railway Premises Act, 1963:

Number of premises licensed	21
Number of inspections made	30
Number of defects found	1
Number of defects remedied	1

Disinfection and Disinfestation:

Rooms or premises disinfected -

(a) Infectious disease other than tuberculosis	None
(b) Tuberculosis	None

Number of premises subject to disinfestation	3
--	---

Refuse Collection and Disposal:

Number of premises from which refuse is collected	4,800
Frequency of collection	fortnightly
Type of receptacle used	plastic bin liners

Disposal is by controlled tipping

Number of tips	1
Number of refuse collection vehicles	4
Estimated amount of refuse disposed of during the year on local authority tips -	

domestic (tons)	3,600
trade	None

Number of sites established under the Civic Amenities Act, 1967, Section 18	1
---	---

The Council makes special collection of bulky household refuse which is too large for normal collection on payment.

Details of Nuisances abated:

	<u>After informal intimation</u>	<u>After statutory notice</u>
Refuse	22	-
Foul ditches, ponds and stagnant water	23	-
Drainage	84	-
Poultry and Animals	16	-
Dangerous Premises	2	1
Miscellaneous Nuisances	4	-
	<hr/>	<hr/>
Total:	151	1
	<hr/>	<hr/>

Rodent Control:

Number of rodent operatives employed	1
Number of premises treated	
	(a) Dwelling-houses 194
	(b) Other premises 45

There are no serious reservoirs of rats in the district

The service covers domestic and business premises only.

FACTORIES ACT, 1961

Part 1 of the Act

1. Inspections for purposes of provisions as to health

Premises	Number on Register	Inspections	Number of Written Notices	Number of Occupiers Prosecuted
(i) Factories in which Section 1, 2, 3, 4 and 6 are to be enforced by the local authority	-	-	-	-
(ii) Factories not included in (i) in which Section 7 is enforced by the local authority	52	107	5	-
(iii) Other premises in which Section 7 is enforced by the local authority (excluding out-workers premises) Building Sites	3	16	-	-
TOTAL:	55	123	5	-

2. Cases in which defects were found

Particulars	Number of cases in which defects were found				Number of cases in which pro-secution was instituted
	Found	Remedied	Referred To H. M. Inspector By H. M. Inspector		
Want of cleanliness	2	2	-	-	-
Overcrowding	-	-	-	-	-
Unreasonable temperature	-	-	-	-	-
Inadequate ventilation	-	-	-	-	-
Ineffective drainage of floors	2	-	-	-	-
Sanitary Conveniences:					
(a) Insufficient	1	1	-	-	-
(b) Unsuitable or defective	2	2	-	-	-
(c) Not separate for sexes	-	-	-	-	-
Other offences	-	-	-	-	-
TOTAL:	7	5	-	-	-

Part VI of the Act

Out-work

Details of out-work (Sections 133 and 134) carried on in the district

Number of out-workers in the district (Section 133)	4
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Nature of work - Making wearing apparel, etc. (cleaning and washing)

Number of instances of work in unwholesome premises (Section 134)	Nil
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Part VII of the Act

Out-work

Details of out-work (Sections 133 and 134) carried on in the district

Number of out-workers in the district (Section 133)

4

Nature of work -- Making wearing apparel, etc. (cleaning and washing)

Number of instances of work in unwholesome premises (Section 134)

III
