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BOROUGH of GOSPORT

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ANNUAL REPORT

of the

MEDICAL OFFICER OF HEALTH

P. V. PRITCHARD

M.D., F.R.C.P.(Edin.), F.R.F.P.S.(Glas.), D.P.H.

For the Year

1 9 5 5

HEALTH COMMITTEE

1955-56

His Worship The Mayor  
Alderman H.T.ROGERS, O.B.E.

Chairman: Alderman J.A.WHEELER, J.P.  
Vice-Chairman: Councillor C.W.L.GILES  
Aldermen: A.R.NOBS, O.B.E., J.P. L.C.OLD  
Councillors: F.J.BAILEY T.V.BRITTON Mrs B.CARTER  
W.A.CHIDLOW A.K.DIBLEY J.KEAST  
E.T.W.LANDER H.R.PINK H.D.THWAYTES

Alterations for 1956-57:-

Alderman I.C.T.MORGAN in place of Alderman A.R.NOBS, O.B.E., J.P.  
Councillor W.ROGERS " " " Councillor T.V.BRITTON

HOUSING COMMITTEE

1955-56

His Worship The Mayor  
Alderman H.T.ROGERS, O.B.E.

Chairman: Alderman A.R.NOBS, O.B.E., J.P.  
Vice-Chairman: Alderman L.C.OLD  
Aldermen: H.TURNER J.A.WHEELER, J.P.  
Councillors: Sir W.AGNEW Mrs B.CARTER A.K.DIBLEY  
C.W.L.GILES E.A.R.GRINDEY E.G.HABENS  
H.G.C.M.JARRETT I.NICHOLLS E.W.J.PAYNE  
F.G.ROBERTS

Alteration for 1956-57:-

Councillor S.W.MABEY in place of Councillor E.A.R.GRINDEY

STAFF

Medical Officer of Health

G.W.FLEMING, L.R.C.P & S, L.R.F.P & S, D.P.H. (Retired 6.2.55)  
P.V.PRITCHARD, M.D., F.R.C.P.(Edin), F.R.F.P.S.(Glas), D.P.H. (Since 7.2.55)

Senior Public Health Inspector

H.G.COPE, M.R.San.I, Meat & Food Insp Cert

Public Health Inspectors

A.W.P.ROBINSON, Cert R San I, Meat & Food Insp Cert  
J.M.MELROSE, Cert R San Assoc Scot  
F.O.ELLIOTT, Cert R San I

Shops Acts Inspector

A. E. GORMAN

Senior Clerk

H. J. MOORE

Assistant Clerks

Miss J. G. FISHER  
A. BELL (National Service from 1.2.55)  
Miss J. M. CLEVERLEY (From 12.4.55)

Rodent Control Operator

P. DOWSETT

Mortuary Attendant and Disinfecter

F. J. EVANS

Mosquito Sprayer and Deputy Mortuary Attendant and Disinfecter

S. G. BENNER

Divisional School Health Department Clerks (County Council)

Miss M. THOMPSON  
Mrs. M. I. TOVEY

Town Clerk

E. G. J. ADDENBROOKE, O.B.E., B.A.(Oxon), F.R.G.S.



SECTION A

INTRODUCTION and GENERAL COMMENTS

To The Mayor, Aldermen and Councillors of the Borough of Gosport.

Mr. Mayor, Ladies and Gentlemen,

1. I have the honour to present this ANNUAL REPORT on the first year of my service to Gosport.
2. This is a suitable occasion and proper place to make some GENERAL OBSERVATIONS.
3. HEALTH has been defined by the World Health Organisation as being the state of Physical, Mental and Social wellbeing.
4. Public Health, or to use the more modern title, SOCIAL MEDICINE, is based on this definition. It is the science which studies the causes and cures of the deviations from the accepted normals of the Physically Mentally and Socially fit.
5. A PUBLIC HEALTH DEPARTMENT, if it is doing its job properly, should ensure that a service covering these three basic principles is provided for the community.
6. It is accepted that many of the above deviations are preventable and that it is the duty of the PREVENTIVE MEDICINE service, which is another title for the Public Health Department, to attack the problem from that angle.
7. It is furthermore accepted in modern practice that the Department must take special measures to establish POSITIVE HEALTH.
8. Briefly then we have A DUTY to prevent the preventable accidents to health in its World Health Organisation definition. We must go further and ensure that the people are assisted in maintaining a healthy standard and we must encourage the practice of Positive Health.
9. Where these duties are carried out successfully THE BENEFIT is not confined to the actual person concerned. Everybody shares. As a child he is less trouble to his parents. His schooling has a stronger foundation. As an adult he is a better unit in the community and a parent in the family. He will be less of a charge on the public purse by his fewer calls on the Medical and Social Services. It is, therefore, in a long term policy, an economy in every respect to provide a sound Public Health Service.
10. The problem of TREATMENT VERSUS PREVENTION is one which will have to be given greater consideration in the near future. The costs of the treatment side of the Health Services - the General Practitioners, the prescriptions, the Hospitals and the Specialists - are rising rapidly. Much can be done to relieve that burden by providing a comprehensive Public Health Scheme. At present only a small fraction of the total and colossal expenditure on Health and Welfare is being directed to this branch. A Stitch in Time Saves Nine!
11. Lest any reader might wish to challenge MY DUTY AND RIGHT in bringing these matters to your attention may I draw attention to what the Ministry of Health's Chief Medical Officer has to say about Annual Reports such as is now being presented to you:-

"The preparation of the Medical Officer of Health's ANNUAL REPORT should not be considered as a purely repetitive labour. Factual statements they must, of necessity, contain, but reports of this kind should be something more than a mere catalogue of routine activities. Where in an introduction or in interspersed comment, these social documents, for such they are, should bear evidence of constructive thought and of a desire to convey to members of the local authority and of the public alike a clear exposition of the purpose and function of the Health Department, of its past and present contributions and of the problems which remain to be solved. The



Medical Officer of Health should also look upon his annual report not only as a valuable instrument of health education, but also as a source of inspiration and encouragement to those co-workers who are concerned with him in maintaining the health of the community."

12. There does seem to me to be some misunderstanding as to the FUNCTIONS OF A MEDICAL OFFICER OF HEALTH. The Ministry's memorandum on the subject and their Reports set out certain fundamental advice. Let me quote some extracts:-

"The chief function of the Medical Officer of Health is to safeguard the health of the area for which he acts by such means as are at his disposal, and to advise his Authority how knowledge of public health and preventive medicine can be made available and utilised for the benefit of the community. He should endeavour to acquire an accurate knowledge of the influences, social, environmental and industrial, which may operate prejudicially to health in the area, and of the agencies, official or unofficial, whose help can be invoked in amelioration of such influences. While he has special duties for the prevention of infectious diseases, all morbid conditions contributing to a high sickness rate or mortality in the area from these or other causes should be studied with a view to their prevention or control..... this officer must possess not only clear and comprehensive vision which can

Look into the seeds of time  
and say which grain will grow  
and which will not

but he must have courage, discernment and patience."

13. The basic need for a successful Public Health Scheme in any area is knowledge of the subject. This must be kept up-to-date by the staff, the relevant committees and public. This is the problem of HEALTH EDUCATION. The Ministry, reporting on this say... "Special attention was directed to the need for regarding public health education as an essential part of any National Health Policy.....Progress which at first was slow and uneven has now so far developed that there must be few Public Health Departments in the country where health education receives indifferent action....It is now regarded as a primary activity of local authorities."

Lord Woolton, as President of the Central Council for Health Education, described Health Education as

"a new attitude towards health in which the individual is no longer content merely to be not ill but strives to achieve a state of positive, abounding health."

In my experience where this has been properly presented to the public the demand is for more and more to satisfy a natural desire for knowledge about how to attain better Physical, Mental and Social Health.

14. Gosport has a problem of having the Health Services Administered by two Authorities THE COUNTY for the mainly personal side and THE BOROUGH for the mainly environmental side. The need for local co-ordination under one officer must be obvious to any student of the situation. It is needed to insure that the available staff and services are used economically and to the best advantage for the people of Gosport. While much has been done towards this day-to-day local control a much more generous and definite delegation of County responsibilities, as was recommended by the Ministry in circular 118 in 1947, is necessary.

15. One result of the SPLIT CONTROL AND RESPONSIBILITY is that my Annual Report cannot be a complete one for all the Health actions, activities and aims in Gosport. It is the Report of the Medical Officer of Health to the Gosport Borough Council. To get the complete report for the town it is necessary to study the County's Public Health and School Health Reports as well.

#### COMMENTS on TABLES

##### 16. AGE and SEX DISTRIBUTION of POPULATION (Table 3)

- (a) The RAPID GROWTH of GOSPORT in recent years is evident from noting that in 1921 the Population was 35,000. Ten years later it had risen by only 3,000 to 38,000. In the next 20 years however it increased by 20,000 to 58,000. Since the 1951 Census it has gone up to the Estimated Mid-Year figure of nearly 62,000.
- (b) This Table also records that nearly 3,000 of the inhabitants are over 70 years of age. This problem of OLD AGE and the care of these OLD PEOPLE is increasing year by year as the proportion to the total population increases. There are about



20,000 young persons under 20 years of age so that some 23,000 inhabitants are mainly dependent on the efforts of the remaining 40,000. A large proportion of these are women who are not out at work. The situation is that more elderly people are in need of assistance in some form or other than before and in proportion there are fewer potential sources of contribution to the public purse to provide the necessary financial help.

17. LIVE BIRTHS and BIRTH RATES (Table 4)

Gosport's rate of 16.8 against 15.0 for the country as a whole is a comparatively high return. In Table 11 it is noted how the rate has fallen since 1911 in Gosport. The average for the period 1911-1915 was 25.4, the average for 1951-1955 was 17.3.

18. DEATHS by AGE PERIODS AND SEX (Table 6)

- (a) This table is set out in the form of Isotype information. It clearly shows the age periods of greatest death risk. There were 522 deaths in 1955 and 466 in 1954.
- (b) A study of the last two columns shows that the increase in the total deaths was mainly in persons of 60 years and over.

19. CAUSES of DEATHS (Table 7)

- (a) The MAIN CANCER GROUPS show marked increase of 12 deaths from 29 in 1954 to 41 in 1955. There is a general increase in the Country. Great interest, by laymen and scientists, is being taken in the subject. Many accepted authorities on Cancer are of the opinion that much can be done to reduce the incidence of advanced disease and death by suitable Health Education.
- (b) The Table also shows a rise in mortality from the CIRCULATORY AND HEART DISEASES groups from 221 deaths in 1954 to 290 deaths in 1955. As in all studies of statistics a single year's changes in a relatively small population must be used, for any general conclusions, with reservations. In 1953 there were 252 deaths in this group.
- (c) Deaths from HOME ACCIDENTS and those not associated with Motor Vehicles have risen from 11 to 14. I have on several occasions drawn your attention to the fact that the Ministry and most Authorities agree that many, if not most, Home Accidents are preventable and that the Health Committee and Department should accept Accident Prevention as one of their important duties. This rise indicates need for reconsideration of your present policy.

20. DEATHS and DEATH RATE (Table 8)

Gosport's rate of 10.3 compares very favourably with the Country's 11.7.

21. INFANT MORTALITY and RATE (Table 10)

Gosport's rate of 22.9 is better than the rate of 24.9 for the Country as a whole which is a record for England & Wales.

22. HEALTH PICTURE COMPARISON (Table 11)

- (a) In this Table an old five year period 1911-1915 is compared with the last five year period 1951-1955.
- (b) As is to be expected there has been an all round improvement in some cases to a remarkable degree. The most outstanding differences are found in statistics dealing with children. The deaths of children then averaged 126 a year in Gosport in a much smaller population. Now we average 35 deaths a year. The change for infants is from a Mortality Rate of nearly 100 to our present average of 24.3.

23. INFECTIOUS DISEASES NOTIFICATIONS and DEATHS (Table 12)

- (a) FOOD POISONING shows a marked increase in incidence. It is accepted that the number of notified cases is only a small fraction of the actual cases occurring. It is a disease due mainly to the careless handling and exposure of food. It is by no means unassociated with very severe illness and death. I have on several occasions drawn your attention to the rising incidence in Gosport and to the need for a vigorous campaign to educate the public and food handlers. When we are staffed to enforce the new Food Hygiene Regulations there should be an improvement in the way food is prepared and exposed for sale.
- (b) The incidence of MEASLES rose from 15 in 1954 to 1,202 in 1955. This was greater than the expected swing every second year. It was also somewhat out of season.
- (c) The rise in PUERPERAL PYREXIA from 3 to 13 has been noted as requiring some careful attention.
- (d) There were two cases of ACUTE POLIOMYELITIS of the paralytic type. Both recovered.



#### 24. IMMUNISATION against DIPHTHERIA and WHOOPING COUGH (Tables 14-18)

- (a) Table 14 shows that whereas Gosport has a better record for DIPHTHERIA IMMUNISATION IN INFANCY than for the County, Urban and Rural, it is not so well protected as some areas such as Fareham and Winchester.
- (b) Table 15 shows a better state in respect of WHOOPING COUGH IMMUNISATION IN INFANCY. Our percentage is much higher than the County as a whole and higher than the other areas used for comparison.
- (c) Table 16 breaks down the RETURNS FOR THE YEAR. Immunisation can be for either Diphtheria or Whooping Cough separately or for both diseases together. Whooping Cough protection was only introduced in May, 1955, as part of the official County Scheme. There are therefore no previous statistics. The Table deals with age groups. Each of these are broken down for the number of children immunised by the double antigen or either of the single with the resultant total of children protected against each disease. All of this is given separately for the Primary Course and the Booster. The Table shows a satisfactory response to the new Whooping Cough Scheme. The uptake for Primary Courses for Diphtheria, 437 out of a rough potential of 1,000 in the first year group, is poor. Even the total of 885 in all age groups does not produce a safety level for the Community. When the returns for the Booster protection are considered and it is noted that the grand total was only 524 for the potential 1,000 the level of immunity must be classed as being below reasonable safety. This demonstrates the need for more Health Education to stimulate interest in this problem.
- (d) Table 17 is a COMPREHENSIVE "LADDER" SURVEY of the state of PROTECTION AGAINST DIPHTHERIA year by year up to school leaving age. This Table should be studied together with Table 16. We have a natural increase of births over infant deaths of about 1,000 a year. Thereafter this 1,000 unit is taken as the rough measure of the potential number of children to be protected. To interpret the Table read down any column to note how many children born in a particular year are protected by a Primary Course or Booster Dose. Take the first column for children born in 1941, for example. By 1955 in this group only 500 had received a Primary Course and less than 300 had received a subsequent Booster dose. Likewise analyse the group born in 1949. By the time these children were 2 years old less than 600 had been protected. The figure of under 500 Boosters is well below a level of reasonable protection. Study the column on the right for the totals. Take the immunisations carried out in 1955. There were 885 Primary Courses and 524 Booster doses. The 885 would for our approximate 1,000 potential in any year, have been excellent if the number referred to protection in the first or by the latest, the second year. The fact is that it included 267 children immunised at a later age. These children had been neglected, they had been allowed to remain in an unprotected state too long. This and our problem of the comparatively poor response to the offer of the Booster dose protection is something which should be remedied.
- (e) Table 18 is a similar "Ladder" survey of the state of PROTECTION AGAINST WHOOPING COUGH. It is the first year of any official scheme and therefore no comparison in statistics can be provided.

#### 25. VACCINATION against SMALLPOX (Tables 19-20)

Our main concern is PRIMARY VACCINATION in infancy. Gosport holds and has held a lead in this over the County as a whole and the other areas used in this Report for comparison. It does not mean however, that the state of Vaccination here is at a safe level. It would not successfully meet any introduction of Smallpox. There is need for more persuasion and Health Education relevant to the need for a greater degree in protection against this disease.

#### 26. TUBERCULOSIS (Tables 21-24)

- (a) THE REGISTER (Table 21)

As each new case is notified the name gets added to THE REGISTER. This leads to an increase in numbers on that record as the removals from it do not keep pace with the additions. The Register changes cannot therefore be used to analyse the prevalence or otherwise of the disease in an area. As expected the Register figures show an increase each year in the Table as do the returns for attendance at the Chest Clinic. The number of patients sent in to Sanatorium, however, show a steady decline as more treatment with our ever increasingly effective drugs is given at the Clinic and at home.

- (b) AGE and SEX DISTRIBUTION (Table 22)

- (i) A study of this Table helps to answer the question of PREVALENCE and MORTALITY.
- (ii) During the last three years the NEW CASES added to the Register have been 98, 56, and 76 in 1955.
- (iii) The DEATHS have been, for those years, 9, 10, and 2 in 1955. This is a very outstanding low figure, a record.



(c) DEATH RATE (Table 23)

Gosport has persistently had a better rate than England & Wales as a whole since 1949. The Table shows a continuous trend of improvement in our Town in respect of Deaths from Tuberculosis.

(d) RATE of INCIDENCE COMPARISON with OTHER AREAS (Table 24)

Gosport's RATE of INCIDENCE as recorded from the notifications of Respiratory Tuberculosis has fluctuated from 1.33 in 1950, through 1.58, 1.21, 1.36, 0.77, to 1.11 in 1955. For the corresponding years the Rate for the County, as shown in the Table was 0.69, 0.78, 0.69, 0.79, 0.64, and 0.58. This indicates lower Rate of Notifications in the County. This should be identical with the Rate of Incidence if diagnosis and notifications are carried out uniformly in the areas under comparison. The Table includes figures for Portsmouth, Southampton and Bournemouth and the Western Area Hospital Board cover as well as the County. Last year Gosport showed a better "Incidence" or "Notifications" picture than the three towns but was not as good as the other areas under comparison. This year Gosport is only better than Southampton in the Table. As stated in my paragraph 4 (b) conclusions in a small population cannot be made from one return. The situation must be, and is being, watched.... The facts as stated in paragraph 4 (b) above, relevant to Deaths, have to be considered here when dealing with Incidence.

27. WORK of PUBLIC HEALTH INSPECTORS - GENERAL SANITARY DUTIES (Table 30)

The reports on the work of the Public Health Inspectors are set out in a new form this year under more definite headings. Their visits and interviews show an increase over the past few years. The returns set out in this General Sanitation Table - that is, excluding visits etc., under the Housing and Food Control Sections - show a total of 8,409 against 7,727 for last year. This produces an average of 2,100 such visits per inspector per year. Much of this increase follows greater activity by the public in lodging complaints and in requests for specific attention or action. The increase is greater and out of proportion to the rate of increase of the population. It is important to note that legislation requires that these inspectors shall keep themselves informed of the sanitary circumstances of the area by regularly covering their districts irrespective of complaints. This duty is not being carried out to the necessary safety extent owing to the shortage of sanitary staff. There is urgent need for an additional inspector.

28. RODENT CONTROL - GENERAL (Table 38)

- (a) The returns for this section show an increase in the calls upon us and work carried out by the staff. The comparative figures are for inspections and advice 2,346 and 3,312 and for treatment by our staff 323 and 377.
- (b) Although the number of complaints have increased the number of major infestations have decreased. Many of the complaints arise from the twice-yearly movements of rats, in Spring when they move from under cover to the open and in Autumn when the movement is in the opposite direction. The use of Warfarin has proved very successful and other poisons are now used only in special cases. The demolition of houses in the Town Area contained in the Compulsory Purchase Orders will no doubt bring about a temporary increase in infestation of other properties remaining.

29. RODENT CONTROL - SEWER SECTION (Table 39)

Owing to the illness of the Rodent Operator it was not possible to carry out a second treatment in 1955. This may have resulted in a build-up in the rat population using the sewers but a major treatment will be undertaken to correct this should it be found necessary. New Methods of sewer treatment have been found and will be put into practice as and when advised by the Infestation Division of the Ministry of Agriculture and Fisheries.

30. HOUSING - ACTION under STATUTORY POWERS (Table 45)

Following the acceptance by the Council of representations by me in respect of properties in the Town Area it was resolved that 10 Clearance Areas be made in the Clarence Square and Haslar districts. These Clearance Areas were presented as Compulsory Purchase Orders. Other relevant properties in the districts which were not considered to be subject to Representation were included in the Compulsory Purchase Orders. A number of objections were received and a Public Enquiry was held on 27th - 29th September, 1955, under the chairmanship of S.D. Igglesden Esq., A.R.I.B.A. The findings were not



given until December 1955 in the case of Clarence Square Areas and January 1956 in the case of the Haslar Areas. As a result of the action taken 79 houses out of 88 represented were confirmed as unfit by the Minister. These were:-

Clearance Area No.51 (1-5 incl Sweets Place, 1-6 incl Richards Terrace, 28,30,32, 36,38,40 Haslar Street, 1,1a,2,3,4,5 Haslar Row)  
Clearance Area No.52 (3,4,5,6,8,9 Chapel Row)  
Clearance Area No.54 (17,18,19 Chapel Row)  
Clearance Area No.55 (1-12 incl, 14,16 Mount Street, 7-11 incl Clarence Square)  
Clearance Area No.56 (1-3 incl St Matthews Square)  
Clearance Area No.57 (3,4,22a,24,25,28 York Street)  
Clearance Area No.58 (15,17,17a,17b,18,20,21 York Street)  
Clearance Area No.60 (34,35,37,38,39,40,42 Clarence Sq. 12-16 incl Seahorse St)

### 31. ESTIMATED CONDITIONS OF HOUSING (Table 49)

- (a) This is an extract from the Survey Report I presented in June, 1955. It analyses the situation briefly.
- (b) In the Survey it was estimated that it would require a period of five years to deal with the houses represented for demolition.
- (c) Previous Reports were based on specially selected areas. This survey was not selective. It covered all the houses in the Borough.

### 32. ICE CREAM SAMPLING (Table 60)

The need for strict control of the sale of Ice Cream was demonstrated by the fact that 28 out of 112 samples fell into Grades 3 and 4. One firm, manufacturing outside Gosport was mainly responsible. Following repeated pressure from our Department this firm closed down. The premises were converted for other uses. Ice Cream is no longer a child's "extra". It is a food eaten by all ages. It is unfortunately a food which can easily become contaminated with bacteria with the risks of Food Poisoning. It must be manufactured from pure ingredients, in hygienic conditions and maintained thus up to the time of eating. Pre-packed ice-cream is the ideal presentation for sale.

### 33. WORK OF PUBLIC HEALTH INSPECTORS - FOOD CONTROL DUTIES (Table 61)

- (a) The ever increasing importance of Food Control is obvious from many observations. In the country there has been a steady continuous rise in the incidence of Food Poisoning. In paragraph 23 (a) above your attention has been drawn to the marked increase in Gosport. Because of this I found it necessary to divert the Inspectors to spend much more time in protecting the public against potential dangers from food which was "unsound" or "unfit". Their total Visits and Inspections for 1955 were 2,076 against 1,057 for the previous year.
- (b) The Ministry are well aware of the importance of the rise of Food Poisoning incidence. The Food and Drugs Act and Food Hygiene Regulations which came into force in 1956 are proof of the need for more vigorous actions to protect the public.

34. Section G is set out mainly for references. It briefly reviews the GENERAL PERSONAL HEALTH SERVICES which are available for Gosport. The majority are provided by the County as Health or Education Authority.

35. The County has "devoluted" some of their responsibilities to the DISTRICT HEALTH SUB-COMMITTEE. As stated in paragraph 14 I am of the opinion that greater economy and efficiency would be achieved by a more definite delegation of this local day-to-day control.

36. The HOME HELP SERVICE (Table 65) deserves special mention. It is an excellent example of how a sound Public Health Scheme can result in a saving of public expenditure. It provides at a comparatively reasonable cost a service at home and thus avoids the much more costly institutional care which would in many cases, be the alternative.

37. The SCHOOL CLINIC (Table 68) is being changed from a Minor Ailments Treatment centre to the more modern clinic the focus of all the School Health activities very much on the lines as advised by the Ministry. It is used for detailed examinations and supervision which can be better carried out there than in Schools. It is being used more and more as a place where parents, teachers and even General Practitioners can join in dealing with our common problems.



38. The MINOR ORTHOPAEDIC CLINIC (Table 67(b)) serves a most useful demand. It is not sufficiently appreciated that minor orthopaedic defects can and often do develop into major conditions. It is a fallacy to say that minor conditions generally rectify themselves. They may remain stationary. However slight the defect is it puts an unnecessary strain on the body, wasting much energy. Early treatment is essential. The time allocated to this special clinic is insufficient and many cases are now seen at the School Clinic to avoid a long delay in attention.

39. May I conclude by saying that I feel very much at home in Gosport due to the way in which you have received my efforts and services and for this I wish to express my thanks.

I would also like to record MY APPRECIATION to the Council's staff for their cordial co-operation and to my own staff and in particular Mr. Cope and Mr. Moore for their ever willing assistance in what has been a very heavy year of re-organisation and work.

I have the honour to be, Sir, Ladies and Gentlemen,

Your obedient Servant,

*Gertrude W. Pritchard*

Medical Officer of Health.

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EXAMPLES of STATISTICS ILLUSTRATED by ISOTYPES

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SOME of the PRINCIPAL CAUSES of DEATH in GOSPORT during 1955

Tuberculosis - All Forms	i i
Diabetes	• T
Motor Vehicle Accidents	• T
All Other Accidents	T T T
Stomach and Intestinal Diseases	T T
Respiratory Diseases	T T T T T T
Vascular Lesions of Nervous System	T T T T T T T T T T T T T T T
"Cancer" - All Forms	T T T T T T T T T T T T T T T T
Coronary Disease; Angina	T T T T T T T T T T T T T T T T
Other Heart and Circulatory Diseases	T T

Each T represents Approximately 5 Deaths

" i " 1 Death

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GENERAL STATISTICSTable 1 GEOGRAPHICAL INFORMATION

The Borough of Gosport covers an area of 6,185 acres.

It is peninsular, being bounded on the land side to the north-west by Fareham U.D.C. and by the sea - the Solent (on the south-west from the western extremity of Lee-on-Solent past Browdown, Stokes Bay to Fort Gilkicker and on the south-east from Fort Gilkicker to Fort Blockhouse at the entrance to Portsmouth Harbour) and Portsmouth Harbour (on the north-east).

Its greatest length, east to west or south-east to north-west, is about  $4\frac{1}{2}$  miles.

Its greatest breadth, north-east to south-west, is about  $3\frac{1}{4}$  miles.

Table 2 GENERAL INFORMATION

Estimated Mid-Year Home Population.....61,860 (decrease 760)

Number of Inhabited Houses (end of 1955 according to Rate Books).....17,669

Rateable Value.....£498,657 (increase £16,831)

Estimated Product of Penny Rate (Financial Year 1955/56)...£1,989 (increase £44)

Table 3 AGE and SEX DISTRIBUTION of POPULATION Census 1951

S....Single M....Married W....Widowed D....Divorced

Age	Males					Females					Total in Population
	S	M	W	D	Total	S	M	W	D	Total	
Under 1	506	-	-	-	506	526	-	-	-	526	1,032
1 - 4	2,460	-	-	-	2,460	2,414	-	-	-	2,414	4,874
5 - 9	2,598	-	-	-	2,598	2,345	-	-	-	2,345	4,943
10 - 14	2,034	-	-	-	2,034	1,835	-	-	-	1,835	3,869
15 - 19	3,230	26	-	-	3,256	1,682	117	-	1	1,800	5,056
20 - 29	3,185	2,483	5	3	5,689	1,163	3,066	14	9	4,252	9,941
30 - 39	494	3,505	19	36	4,054	388	3,696	108	63	4,255	8,309
40 - 49	275	3,395	51	40	3,761	296	3,215	235	48	3,794	7,555
50 - 59	192	2,352	87	20	2,651	255	2,132	409	34	2,830	5,481
60 - 69	112	1,509	187	6	1,814	239	1,376	811	6	2,432	4,246
70 - 74	34	462	111	-	607	88	337	413	2	840	1,447
75 - 79	15	259	122	-	396	58	148	304	1	511	907
80 - 84	3	77	66	1	147	25	42	184	-	251	398
85 - 89	5	23	36	-	64	16	12	92	-	120	184
90 - 94	-	2	10	-	12	1	2	19	-	22	34
94 plus	-	-	-	-	-	-	-	3	-	3	3
Totals	15,143	14,093	694	119	30,049	11,331	14,143	2,592	164	28,230	58,279

The Estimated Mid-Year Population for 1955.....61,860

Previous Census Population Figures.....1931.....38,443 1921.....35,607

Table 4 LIVE BIRTHS and BIRTH RATE

Year	Illegitimate			Legitimate			Total Live Births	Birth Rate per 1,000 Home Population	
	M	F	Total	M	F	Total		Gosport	Eng & Wales
1951	19	22	41	527	480	1007	1,048	17.8	15.5
1952	26	33	59	531	513	1044	1,103	18.5	15.3
1953	23	23	46	524	485	1009	1,055	17.6	15.5
1954	33	20	53	503	454	957	1,010	16.0	15.2
1955	22	24	46	559	445	1004	1,050	16.8	15.0

The Gosport Birth Rate Correction Factor (0.99 for 1955) has been applied above to make the comparison on a comparable population distribution as for the whole country.

Table 5 STILL BIRTHS

	1951	1952	1953	1954	1955
Illegitimate	1	-	2	1	1
Legitimate	28	30	15	25	21
Total	29	30	17	26	22

A child which has issued forth from its mother after the twenty-eighth week of pregnancy and which did not at any time after being completely expelled from its mother breathe or show any other signs of life is said to be still-born.



Table 6

DEATHS in GOSPORT by AGE PERIODS and SEX

Age last Birthday	Number of Deaths		Yearly Totals						Accumulative Totals	
			1955			1954			Totals	
	Males	Females	M	F	Total	M	F	Total	1955	1954
Under 1 yr	MMMMMMMMMMMM	FFFFFFFF	14	10	24	15	12	27	24	27
1 yr									24	28
2 yrs	M		1		1	1		1	25	29
3 "									25	29
4 "	M		1		1				26	29
5 - 9 "	M	F	1	1	2	2		2	28	31
10 - 14 "	MMM	F	3	1	4	2		2	32	31
15 - 19 "									32	34
20 - 24 "	MM	FF	2	2	4	1	5	6	36	40
25 - 29 "	M	F	1	1	2	1	3	4	38	44
30 - 34 "	MMMMM	FF	5	2	7	5	1	6	45	50
35 - 39 "	MM	FFF	2	4	6	5	3	8	51	58
40 - 44 "	MMM	FFF	4	3	7	5	3	8	58	66
45 - 49 "	MMMMMMMMMMMMM	FFFFFFF	13	9	22	11	7	18	80	84
50 - 54 "	MMMMMMMMMMMMMMMM	FFFFFFF	18	9	27	15	9	24	107	108
55 - 59 "	MMMMMMMMMMMMMMMMM	FFFFFFF	17	11	28	18	10	28	135	136
60 - 64 "	MMMMMMMMMMMMMMMMM	FFFFFFF	37	14	51	25	22	47	186	183
65 - 69 "	MMMMMMMMMMMMMMMMM	FFFFFFF	34	21	55	39	16	55	241	238
70 - 74 "	MMMMMMMMMMMMMMMMM	FFFFFFF	37	40	77	42	29	71	318	309
75 - 79 "	MMMMMMMMMMMMMMMMM	FFFFFFF	46	39	85	45	20	65	403	374
80 - 84 "	MMMMMMMMMMMMMMMMM	FFFFFFF	34	23	57	21	24	45	460	419
85 - 89 "	MMMMMMMMMMMMMMMMM	FFFFFFF	14	26	40	11	22	33	500	452
90 - 94 "	MMMMMMMMM	FFFFFFF	8	14	22	3	10	13	522	465
95 and over							1	1	522	466
Totals:-			292	230	522	268	198	466		

M = One Male Death

F = One Female Death

M = One Male Death

F = One Female Death



Table 7 CAUSES of DEATH

Causes of Death	1955			1954
	Males	Females	Total	Total
Tuberculosis : Respiratory	1	1	2	7
" Other Forms	-	-	-	3
Syphilitic Disease	-	-	-	1
Diphtheria	-	-	-	-
Whooping Cough	-	-	-	-
Meningococcal Infections	1	-	1	-
Acute Poliomyelitis	-	-	-	-
Measles	-	-	-	-
Other Infective and Parasitic Diseases	-	1	1	-
Malignant Neoplasm: Stomach	5	5	10	7
Lung, Bronchus	7	4	11	13
Breast	1	13	14	8
Uterus	-	6	6	1
Other Malignant and Lymphatic Neoplasms	30	18	48	59
Leukaemia, Aleukaemia	6	2	8	2
Diabetes	3	4	7	5
Vascular Lesions of Nervous System	42	41	83	66
Coronary Disease, Angina	59	25	84	66
Hypertension with Heart Disease	5	8	13	8
Other Heart Disease	44	41	85	59
Other Circulatory Disease	12	13	25	22
Influenza	5	2	7	-
Pneumonia	6	1	7	21
Bronchitis	9	8	17	14
Other Diseases of Respiratory System	5	-	5	1
Ulcer of Stomach and Duodenum	4	1	5	12
Gastritis, Enteritis and Diarrhoea	2	2	4	3
Nephritis and Nephrosis	3	2	5	7
Hyperplasia of Prostate	4	-	4	2
Pregnancy, Childbirth, Abortion	-	-	-	2
Congenital Malformations	2	3	5	2
Other Defined and Ill-defined Diseases	19	24	43	51
Motor Vehicle Accidents	4	1	5	9
All Other Accidents	11	3	14	11
Suicide	2	-	2	3
Homicide and Operations of War	-	1	1	-
Totals All Causes	292	230	522	466

Table 8 DEATHS and DEATH RATE.

YEAR	DEATHS			DEATH RATE	
	All Causes			Per 1,000 Home Population	
	M	F	Total	Gosport	Eng & Wales
1951	266	287	553	11.5	12.5
1952	276	237	513	10.2	11.3
1953	279	245	524	10.3	11.4
1954	268	198	466	9.1	11.3
1955	292	230	522	10.3	11.7

The Gosport Death Rate Correction Factor (1.22 for 1955) has been applied above to make the comparison on a comparable population distribution as for the whole country.

Table 9 MATERNAL MORTALITY and RATE

	Gosport		Eng & Wales
	Number	Rate	Rate
1951	1	0.93	0.80
1952	1	0.88	0.72
1953	Nil	Nil	0.76
1954	2	1.93	0.69
1955	Nil	Nil	0.64



Table 10

## INFANT MORTALITY and RATE

		No. of Deaths under 1 Year			Infant Mortality Rate		
		Legitimate	Illegitimate	All Infants	Legitimate	Illegitimate	All Infants
Gosport	1951	22	-	22	21.8	-	20.9
"	1952	20	2	22	19.1	33.9	19.9
"	1953	32	1	33	31.7	21.8	31.2
"	1954	25	2	27	26.1	37.7	26.7
"	1955	24	-	24	23.9	-	22.9
England & Wales	1955	-	-	16,515	-	-	24.9

- Notes. (a) Infant Mortality Rate is the number of Deaths of Infants Under One Year of Age per 1,000 Live Births in the same category, i.e. Legitimate, Illegitimate or "All Live Births".  
 (b) The Rate of 24.9 for England and Wales is the lowest on record.

Table 11

## HEALTH PICTURE COMPARISON

1911 - 1915 and 1951 - 1955

	Yearly Average For 5 Years 1911-1915	Yearly Average For 5 Years 1951-1955	Increase	Decrease
Population	32,327	62,320	92.78%	
Birth Rate	25.4	17.3		31.88%
Total Live Births	823	1,053	27.94%	
Infant Mortality Rate	91.1	24.3		73.32%
Death Rate	13.3	10.2		23.30%
Total Deaths	428	520	21.49%	
Deaths Under 1 Year	75	26		65.33%
" 1 - 4 Years	37	5		86.49%
" 5 - 14 Years	14	4		71.42%
Total Deaths of Children	126	35		72.19%

CONTROL over INFECTIOUS and OTHER DISEASESTable 12 NOTIFICATIONS and DEATHS - Infectious Diseases

	1955		1954	
	Cases	Deaths	Cases	Deaths
Acute Poliomyelitis (paralytic)	2	-	-	-
Dysentery	4	-	2	-
Erysipelas	11	-	12	-
Food Poisoning	12	-	-	-
Measles	1202	-	15	-
Meningococcal Infection	-	1	-	-
Pneumonia	41	7	56	21
Puerperal Pyrexia	13	-	3	-
Scarlet Fever	17	-	79	-
Whooping Cough	75	-	208	-
Ophthalmia Neonatorum	-	-	2	-
Paratyphoid Fever	-	-	1	-
Enteritis & Diarrhoea under 2 years (not notifiable)	-	-	-	2

Table 13 ADMISSIONS TO INFECTIOUS DISEASES HOSPITAL

1955

Group.....1	Measles.....4
Diarrhoea.....2	Mumps.....1
Dysentery.....1	Observation.....13
Encephalitis.....1	Pneumonia.....3
Gastro Enteritis.....15	Poliomyelitis (Paralytic).....1
German Measles.....4	Puerperal Pyrexia.....8
Glandular Fever.....1	P.U.O.....3
Healthy Babies.....7	Ringworm.....1
Hepatitis.....6	Food Poisoning.....2
Whooping Cough.....1	

Table 14 VACCINATION against DIPHTHERIA

COMPARISON with OTHER AREAS

Area	Population	Births	Primary Course				Booster Dose All Ages
			Under 1 Year %	No.	1 - 14 Years	Total	
GOSPORT	61,860	1,050	42.95	451	434	885	524
Aldershot	40,190	597	25.29	151	290	441	285
Fareham	47,890	818	44.62	365	328	693	735
Winchester County	27,280	330	53.03	175	137	312	305
Urban Areas	396,200	6,430	34.57	2,213	3,307	5,520	4,694
Admin. County Hampshire	680,600	10,848	34.25	3,700	5,417	9,117	8,511

Table 15 VACCINATION against WHOOPING COUGH

COMPARISON with OTHER AREAS

Area	Population	Births	Primary Course				Booster Dose All Ages
			Under 1 Year %	No.	1-14 Years	Total	
GOSPORT	61,860	1,050	35.8	376	324	700	261
Aldershot	40,190	597	23.95	143	181	324	17
Fareham	47,890	818	23.34	191	129	320	58
Winchester County	27,280	330	34.84	115	92	207	12
Urban Areas	396,200	6,430	24.82	1,396	2,138	3,734	607
Admin. County Hampshire	680,600	10,848	24.60	2,676	3,450	6,126	975



Table 16

IMMUNISATION against DIPHTHERIA and WHOOPING COUGH

BY OPERATOR and AGE at DATE of PRIMARY COURSE or BOOSTER DOSE

Age at Date of Completion of Primary Course or Booster Dose			Age at Date of Completion of Primary Course or Booster Dose			Age at Date of Completion of Primary Course or Booster Dose			Age at Date of Completion of Primary Course or Booster Dose			Age at Date of Completion of Primary Course or Booster Dose			Age at Date of Completion of Primary Course or Booster Dose			Age at Date of Completion of Primary Course or Booster Dose			Age at Date of Completion of Primary Course or Booster Dose		
0 - 1 yr			1 - 2 yrs			2-3 yrs			3-4 yrs			4 - 5 yrs			5 - 10 yrs			10-15 yrs			TOTAL 0 - 15 yrs		
Combined D. only W.C. only TOTAL D. TOTAL W.C.			Combined D. only W.C. only TOTAL D. TOTAL W.C.			Combined D. only W.C. only TOTAL D. TOTAL W.C.			Combined D. only W.C. only TOTAL D. TOTAL W.C.			Combined D. only W.C. only TOTAL D. TOTAL W.C.			Combined D. only W.C. only TOTAL D. TOTAL W.C.			Combined D. only W.C. only TOTAL D. TOTAL W.C.			Combined D. only W.C. only TOTAL D. TOTAL W.C.		
40 237 247 3 250			50 275 225 1 226			8 23 15 1 16			9 21 12 - 12			2 18 16 1 17			3 12 9 - 9			2 2 - - -			114 638 524 6 530		
G.Ps 5 - 5 5 - 5			6 10 4 - 4			- - - - - -			1 1 1 1 1 1			1 1 1 1 1 1			6 7 13 7 7 13			1 - 1 - - 1			16 31 9 25		
S.M.O. (Sch.Clinic) Asst.C.M.Os (C.M.Cs and DN)			25 51 26 2 28			1 6 5 2 7			1 2 1 1 2			4 5 4 - 4			2 5 7 - - 2			- - - - - -			140 216 5 145		
TOTAL PRIMARY 83 437 354 3 357			81 336 255 3 258			9 29 20 3 23			11 24 13 2 15			4 24 20 2 22			15 32 17 7 24			2 3 1 - 1			205 885 680 20 700		
G.Ps - - - - - -			- - - - - -			- - - 1 1 1			- - - - - -			35 88 53 - 53			164 351 187 - 187			23 29 6 - 6			246 468 246 1 247		
S.M.O. (Sch.Clinic) Asst.C.M.Os (C.M.Cs and DN)			- - - - - -			- - - - - -			- - - - - -			3 3 - - -			6 14 - - 6			2 2 - - -			6 13 19 - - 6		
TOTAL BOOSTER - - - - - -			- - - - - -			1 - 1 2 2 3			1 1 - - -			47 105 58 - 58			191 385 194 - 194			26 32 6 - 6			265 524 259 2 261		







Table 19

## VACCINATION against SMALLPOX

	Primary Vaccinations						Re-Vaccinations				TOTAL
	Under 1 yr	1 yr	2-4 yrs	5-14 yrs	15 yrs & Over	Total	2-4 yrs	5-14 yrs	15 yrs & Over	Total	
Jan-June	260	15	20	9	20	324	6	18	74	98	422
July-Sep	155	12	6	7	12	190	5	10	25	40	230
Oct-Dec	250	11	14	11	17	303	2	13	28	43	346
Year 1955	(a) 663	38	40	27	49	817	13	41	127	181	998
Year 1954	(b) 623	43	40	28	36	770	6	53	139	198	968

(a) = 63.1% of potential (i.e. of babies born in 1955)

(b) = 61.7% " " " " " " " " 1954)

Totals (Vaccinations &amp; Re-Vaccinations) during 1955:-

	Jan-June	July-Sep	Oct-Dec	Total
By General Practitioners	422	250	284	956
" At Child Welfare Centres	-	-	62	62
				998

\* Vaccinations at C.W.Cs commenced Sept. 1955

Table 20

## VACCINATION against SMALLPOX

COMPARISON with OTHER AREAS

	Primary Vaccinations					Re-Vaccinations			TOTAL
	Under 1 Year %	1 Year No.	1-2 yrs	After 2 yrs	Total	Under 15 yrs	After 15 yrs	Total	
GOSPORT	63.14	663	38	116	817	54	127	181	998
Aldershot	30.48	182	10	62	254	24	76	100	354
Fareham	62.1	508	23	88	619	60	112	172	791
Winchester	54.54	180	20	29	229	26	103	129	358
County									
Urban Areas	55.42	3,564	170	640	4,374	339	930	1,269	5,643
Admin. County									
Hampshire	57.66	6,253	303	1,066	7,622	696	1,667	2,363	9,985

Note The number of babies vaccinated before their first birthday is shown in the first column as a percentage of the potential, that is of the number of babies born in the period.

Table 21

## TUBERCULOSIS - THE REGISTER

	On Register			Attending Chest Clinic			Admitted To Sanatoria		
	1955	1954	1953	1955	1954	1953	1955	1954	1953
<u>Pulmonary</u>									
Adult Males	340	322	314	280	267	267	33	48	47
" Females	269	252	229	212	205	199	30	34	45
Children	37	39	35	37	39	33	4	3	5
Total	646	613	578	529	511	499	67	85	97
<u>Non-Pulmonary</u>									
Adult Males	30	28	23	14	15	11	2	2	3
" Females	43	40	40	25	23	22	2	1	2
Children	18	18	20	12	11	13	2	2	2
Total	91	86	83	51	49	46	6	5	7
TOTAL (All Cases)	737	699	661	580	560	545	73	90	104



Table 22 TUBERCULOSIS - AGE and SEX DISTRIBUTION (New Cases/Deaths/Register)

	New Cases				Deaths				Cases on Register at end of year			
	Pulm		Non-Pulm		Pulm		Non-Pulm		Pulm		Non-Pulm	
	M	F	M	F	M	F	M	F	M	F	M	F
Under 5 Years	1	1							3	1		1
5-14 "	3		1						19	14	11	6
15-24 "	12	11		1					35	56	12	13
25-44 "	10	18	2	1		1			158	164	10	21
45-64 "	10	1		1	1				127	42	7	8
65 yrs & over		2		1					20	7	1	1
Totals	36	33	3	4	1	1	-	-	362	284	41	50
Totals for 1955	{ 69		7		2		-		646		91	
	{ 76				2				737			
" " 1954	{ 48		8		7		3		613		86	
	{ 56				10				699			
" " 1953	{ 86		12		7		2		578		83	
	{ 98				9				661			

Table 23 TUBERCULOSIS - DEATH RATE

	Gosport	Eng & Wales
1955	0.04	0.15
1954	0.16	0.18
1953	0.18	0.20
1952	0.18	0.24
1951	0.22	0.31
1950	0.32	0.36
1949	0.54	0.45
1948	0.56	0.51

Note - Death Rates above are deaths from all forms of Tuberculosis per 1,000 Population corrected by our population factor.

Table 24 TUBERCULOSISNOTIFICATIONS of RESPIRATORY TUBERCULOSIS (All Ages)

## COMPARISON with OTHER AREAS

	1950		1951		1952		1953		1954		1955	
	No.	Rate per 1000 Pop.	No.	Rate per 1000 Pop.	No.	Rate per 1000 Pop.	No.	Rate per 1000 Pop.	No.	Rate per 1000 Pop.	No.	Rate per 1000 Pop.
GOSPORT+	73	1.33	x98	1.58	76	1.21	x86	1.36	48	0.77	69	1.11
Hants County (incl. Gosport but excluding Portsmouth, Southampton & Bournemouth)	439	0.69	498	0.78	456	0.69	535	0.79	426	0.64	399	0.58
Portsmouth	288	1.20	256	1.08	210	0.86	252	1.02	194	0.80	160	0.67
Southampton	184	1.02	192	1.06	213	1.21	262	1.48	250	1.28	292	1.49
Bournemouth	80	0.57	127	0.91	141	1.01	98	0.70	136	0.96	117	0.82
Western Area of S.W.M.R. Hosp. Board (i.e. Hants Dorset, Wilts and I.O.W.)	1290	0.77	1429	0.85	1330	0.77	1418	0.82	1268	0.73	1202	0.69

x = Mass Radiography Unit visited Gosport in these years.

# SECTION D

## SANITATION and GENERAL SERVICES

Table 25      WATER Public Supply

The main supply is a typical chalk water remaining practically constant in quality, neutral in reaction and free from deposit on standing. It has no plumbo-solvent action. It is hard in character but is much softened on boiling. The water is chlorinated before it reaches the mains.

The supply has been satisfactory in quality and quantity.

The following table shows the number of samples taken during the year and the results of analysis were all satisfactory:-

	<u>Chem.Exam</u>	<u>Bact.Exam</u>	<u>Total</u>
Water from Public Supply Mains	5	37	42
Water before chlorination	1	1	2

No action in respect of any form of contamination was required during the year. So far as it is known all except two of the dwelling houses in the borough have direct main supplies.

Table 26      DRAINAGE and SEWERAGE

The following additional lengths of sewers were laid in the borough during the year:-

### New Foul Sewers

4,000 yds. main sewer, Rowner, varying from 18" to 21".

540 "	12"	} on the Rowner Housing Estate.
780 "	9"	
1,020 "	6"	
1,060 "	4"	

### New Storm Water Sewers

180 yds	18"	} on the Rowner Housing Estate.
760 "	15"	
580 "	12"	
465 "	9"	
455 "	6"	

Table 27      RIVERS and STREAMS

There was no pollution in the area requiring any action.

Table 28      CLOSET ACCOMMODATION

There were two conversions of pail closets to water closets during the year. The use of 11 pail closets was also discontinued during the year.

Number of water closets	18,614
Number of pail closets	12

Table 29      PUBLIC CLEANSING

Household refuse is collected once weekly by the Corporation.  
Emptying of cesspools is carried out by Hants Cleansing Service under contract.



Table 30      WORK of PUBLIC HEALTH INSPECTORS - GENERAL SANITATION DUTIES

VISITS and INSPECTIONS

<u>A. Under the Public Health Acts</u>			
	Dwelling Houses	1,190	
	Complaints	359	
	Drainage	283	
	Common Lodging House	45	
	Offensive Trades	6	
	Tents, Vans and Sheds	49	
	Stables and Piggeries	160	
	Offensive Accumulations and Refuse Disposal	123	
	Mosquito Control	51	
	Verminous Premises	46	
	Re-visits to Premises under Notice	2,298	
	Smoke Abatement	14	
	Cesspools and Ditches	22	4,651
<u>B. Under Infectious Diseases Legislation</u>			
	Visits and Re-visits to Cases of Infectious Disease	304	304
<u>C. Under the Factories Acts</u>			
	Visits to Factories (Power)	123	
	" " " (Non-Power)	40	163
<u>D. Under Public Conveniences Control Duties</u>			
	Maintenance Supervision visits	1,495	1,495
<u>E. Under Rodent Control Duties</u>			
	Visits - exclusive of those made by Rodent Operator and reported elsewhere	277	277
<u>F. Under the Pet Animals Act 1951</u>			
	Inspections and Re-inspections of Premises	24	24
<u>G. Gosport Swimming Baths and Lee-on-Solent Swimming Bath and Paddling Pool</u>			
	Visits re Water Supplies	63	63
<u>H. Interviews</u>			
	With Owners, Agents, Builders, etc.	939	939
<u>I. Other Visits not detailed above</u>			
	Central Laboratory and Public Analyst	30	
	Westfield Road Depot re choked sewers, etc.	38	
	St. Matthew's Yard	11	
	Various Doctors at request of M.O.H.	13	
	Delivering Statutory Notices or to Post Office for despatch by registered post	48	
	Complaints which upon Visit did not come within Scope of Department.	56	
	Requests to Call - found to be made to wrong Department.	24	
	Various Departments at Town Hall and Portland Place	50	270
<u>J. Miscellaneous Visits not included above</u>			
		223	223
			<u>8,409</u>

Table 31 SUMMARY of SANITARY WORK CARRIED OUT (After Representation by this Dept.)

<u>Houses</u>	Roofs	183	Additional Ventilation	2
	Walls (external)	49	" Lighting	1
	Chimneys and Stacks	24	Stairs	5
	Rainwater Pipes	43	Doors	33
	Eaves Guttering	96	Vermin	23
	Yards and Passages	2	Fireplaces	30
	Coalhouses	1	Cooking Ranges	1
	Dampness Abated	119	Sinks (Provision of)	10
	Wallplaster	54	" (Repair and Renewal)	3
	Ceilings	39	Sink Waste Pipes	10
	Floors	56	Internal Water Supplies Provided	9
	Windows	91	Repairs to Water Supplies	14
	Sashcords	82	Food Stores Provided	2
			Miscellaneous	25
<u>Drainage</u>	Drains Cleared	98	New Drains	5
	" Repaired	24	Other Defects	19
<u>Water Closets</u>	New Pans Provided	26	New Cisterns Provided	16
	" Seats Provided	14	Repaired ed	23
<u>Miscellaneous</u>	Offensive Accumulations	23	Dustbins Provided	2
<u>Contraventions</u>	Food Premises	59	Factories	19
	Stables and Piggeries	67	Other Premises	3

Total Defects Remedied 1,405

Table 32 NOTICES

Informal Notices Served

Under Public Health Acts	389
Under Food and Drugs Act	104
Under Factories Act	30
Total	523

Statutory Notices Served 109

Notices Complied With 466

Table 33 SHOPS ACT and YOUNG PERSONS (EMPLOYMENT) ACT

Visits Made	1,903
Informal Notices Served	3
" " Complied With	3
Statutory Notices Served	Nil

Table 34 CAMPING SITES

The only camping site in the Borough is that at Stokes Bay owned and administered by the Council. Regular inspections were made. Conditions were found to be satisfactory.

Table 35 SMOKE ABATEMENT

There is no serious smoke problem in the Borough. Three complaints of nuisance were received during the year and no formal action was necessary to secure abatement.

Table 36 SWIMMING BATHS and POOLS

The Inspectors paid 63 visits in this section of work.

The Gosport Bath is equipped with an efficient filtration and chlorination plant. Conditions were found to be satisfactory at all inspections and for all tests.

The Paddling Pool at Lee-on-the-Solent is filled from a fresh water spring. The Swimming pool at Lee-on-the-Solent is filled at convenient tides from the sea. Both pools at Lee-on-the-Solent were given special supervision, during the year following some unsatisfactory samples of water.



Table 37 DISINFESTATION

Twenty premises were disinfested for Bugs and/or Fleas during the year.

Table 38 RODENT CONTROL - General

One man was employed whole-time on rodent control throughout the year. In addition casual labour was employed when required on sewer treatment for lifting of manhole covers etc.

The following work was done during the year:-

Private Dwellings Inspected	2,481
" " Treated	353
Business Premises Treated (Costs recoverable)	24

Table 39 RODENT CONTROL - Sewer Section

Sewers in the Borough are divided into sections and the following maintenance treatments were carried out during the year:-

Sewer Section	Number of Manholes Baited	
	10% tests	Treatments
Lee-on-the-Solent	15	14
Town	7	13
Christchurch and Newtown	20	18
Mill Lane	10	-
Lees Lane - Anns Hill	10	14
Beryton Road	8	-
Avery Lane - B'hurst Rd - Frater	9	-
Eastbourne Ave - Hastings Ave	8	-
Chantry, Palmyra and Rydal Roads	8	-
Grove Road and Hardway	7	10
Grange Estate	8	-
Leesland and Whitworth Roads	8	13
Bury Rd - Anglescy Rd - The Avenue	9	-
Fareham Road	10	-
Privett Road - Vectis Road	9	-
Clayhall	10	-
Bridgemary Estate	33	-
Total Manholes Baited	189	82

Complaints of Infestations received and attended to during the year.....303

Table 40 MOSQUITO CONTROL

In the light of new knowledge and following an investigation into the types of mosquito found in the Borough, the use of an oil-bound spray was discontinued and a dispersible powder brought into use. This proved very effective and enabled the work of spraying to be accelerated because it was not necessary for the water with which the powder is mixed to be carried by the operator as was the case with oil.

Regular spraying took place at all known and potential breeding sites under our care. Special attention was given to private premises, and occupiers were advised as to the need for care and treatment of water butts, ponds, etc.,

The filling in of low-lying land both by the controlled tipping of household refuse and by the dumping of builders' rubble in privately-owned hollows is helping to reduce the breeding of mosquitoes.

The cost for wages, material and transport was £362 : 3 : 0d for the year ending December 1955.

Table 41 PUBLIC CONVENIENCES

(a) There are 18 Public Conveniences in the Borough. They are administered by the Public Health Department through a special Sub-Committee.

(b) The Conveniences have suffered considerable wanton damage. The cost of replacement and repair has amounted to several hundred pounds. This raises the question of having full time attendants rather than merely cleaners at intervals. The matter is under consideration.

(c) It will be noted from Table 30.D that the Public Health Inspectors made 1,495 visits for supervisory purposes.



Table 42 FACTORIES ACTS 1937 and 1948A. INSPECTIONS for purposes of PROVISIONS as to HEALTH

Premises	No. on Register	Inspections	Written Notices	Occupiers Prosecuted
1. Factories in which Sections 1,2,3,4 & 6 are to be enforced by Local Authorities	10	30	6	-
2. Factories not included in (1) in which Sect 7 is enforced by the Local Authority	94	173	19	-
3. Other Premises in which Section 7 is enforced by Local Authority (excluding outworkers' premises)	3	10	1	-
<b>TOTAL</b>	<b>107</b>	<b>213</b>	<b>26</b>	<b>Nil</b>

B. CASES in which DEFECTS were FOUND

Particulars	Defects Found Remedied		Referred To By H.M.I. H.M.I.		Prosecutions instituted
Want of Cleanliness (Sect. 1)	4	6	-	3	-
Overcrowding (Sect. 2)	-	-	-	-	-
Unreasonable Temperature (Sect. 3)	-	-	-	-	-
Inadequate Ventilation (Sect. 4)	-	-	-	-	-
Ineffective Drainage of Floors (Sect. 6)	1	1	-	-	-
Sanitary Conveniences (Sect. 7):-					
(a) Insufficient	3	3	-	1	-
(b) Unsuitable or Defective	9	10	-	-	-
(c) Not separate for sexes	-	-	-	-	-
Other offences against the Act (excluding offences relating to outwork)	2	2	-	-	-
<b>TOTAL</b>	<b>19</b>	<b>22</b>	<b>Nil</b>	<b>4</b>	<b>Nil</b>

C. OUTWORK (Sections 110 and 111)

Nature of Work	Section 110			Section 111		
	Out-workers in August List	Cases of default in sending Lists to the Council	Prosecutions for failure to supply Lists	Work in unwhole-some premises	Notices Served	Prosecutions
Wearing Apparel - Making etc	20	-	-	-	-	-
Others	-	-	-	-	-	-
<b>TOTAL</b>	<b>20</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>



SECTION E

HOUSING

Table 43      INSPECTION of DWELLING HOUSES during the YEAR

1(a) Total number of dwelling houses inspected for housing defects (under the Public Health or Housing Acts)	1,242
(b) Number of Inspections made for the purpose	3,061
2(a) Number of dwelling houses (included under sub-head 1 above) which were inspected and recorded under Housing Consolidation Regulations 1925 & 1932	740
(b) Number of inspections made for the purpose	1,421
3. Number of dwelling houses found to be in a state so dangerous of injurious to health as to be unfit for human habitation	77
4. Number of dwelling houses (exclusive of those referred to under the pre- ceeding sub-head) not in all respects reasonably fit for human habitation	421

Table 44      REMEDY OF DEFECTS during the YEAR - WITHOUT SERVICE of FORMAL NOTICES

Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their officers	304
--	-----

Table 45      ACTION under STATUTORY POWERS during the YEAR

A. Proceedings under Sections 9, 10 & 16 of the Housing Act 1936	Nil
B. Proceedings under Public Health Acts:-	
1. Number of dwelling houses in respect of which notices were served requiring defects to be remedied	76
2. Number of dwelling houses in which defects were remedied after service of formal notices:- (a) By Owners	71
(b) By Local Authority in default of owners	Nil
C. Proceedings under Section 11 & 13 of the Housing Act 1936 and/or Sections 10 & 11 of the Local Government (Miscellaneous Provisions) Act 1953:-	
1. Number of dwelling houses in respect of which Demolition Orders were made	3
2. Number of dwelling houses in respect of which Closing Orders were made	5
3. Number of dwelling houses in respect of which Undertakings were accepted	1
D. Proceedings under Sections 25-29 of the Housing Act 1936:-	
1. Number of Clearance Orders made (later dealt with as Compulsory Purchase Orders)	2
2. Number of Areas contained in above Orders	8
3. Number of dwelling houses Confirmed as Unfit in above Orders	79

Table 46      HOUSING ACT 1936 - Part IV - OVERCROWDING

A. 1. Number of overcrowded dwellings on our register at the end of the year	3
2. Number of families dwelling therein	3
3. Number of persons dwelling therein	30
B. Number of new cases of overcrowding reported during the year	Nil
C. 1. Number of cases of overcrowding relieved during the year	1
2. Number of persons concerned in such cases	9
D. Particulars of any cases in which dwellings have again become overcrowded after the Local Authority have taken steps for the abatement of overcrowding	Nil

Table 47      SLUM CLEARANCE - POSITION at 31st DECEMBER 1955

Total Number of Houses Demolished	395
-----------------------------------	-----

Table 48      HOUSING PROGRESS

		<u>During</u> <u>1955</u>	<u>Total</u> <u>Post-War</u>
<u>New Houses Built</u>	Permanent (By Local Authority)	211	} 3,191
	(By Private Enterprise)	190	
	Temporary (Prefab. by Local Authority)	-	600
<u>War Destroyed Houses Re-Built</u>		-	170



Table 49      ESTIMATED CONDITION of HOUSING

(As contained in Special Housing Survey Report, June 1955)

Group A.	Sound Houses (suitable as modern homes)	11,182
Group B.	Unfit Houses    For Closure or Demolition (cannot be made fit for human habitation at a reasonable expense)	180
Group C.	Good Houses (unsuitable as modern homes, require improvement or conversion)	1,776
Group D.	Unfit Houses (can be made fit for human habitation at a reasonable cost)	2,405
Group E.	Houses being Dealt With by Local Authority (In Clearance Areas 89 : Individually Unfit 6)	95
		<u>15,638</u>

Table 50      WORK of PUBLIC HEALTH INSPECTORS - HOUSING DUTIES(not recorded elsewhere)

Inspections for Overcrowding	10
Inspections for Houses-let-in-Lodgings	28
Inspections re Applications for Council Houses	54
	<u>92</u>

SECTION F

I N S P E C T I O N and S U P E R V I S I O N of F O O D

Table 51      MILK SAMPLING

Testing to note compliance with the  
Milk (Special Designations) (Raw Milk) Regulations 1949  
and  
Milk (Special Designations)(Pasteurised and Sterilised Milk) Regulations 1949  
was carried out with the following results:-

Class of Milk	Number of Samples Examined	Tests	Number of Samples	
			Passed	Failed
Pasteurised	106	Phosphatase	106	-
		Methylene Blue	97	9
T.T. Pasteurised	22	Phosphatase	21	1
		Methylene Blue	20	(2 Test void)

The Phosphatase Test is for adequacy of Heat-treatment and the  
Methylene Blue Test for keeping quality and bacterial count.

Table 52      TESTING of MILK BOTTLES

24 sample milk bottles were submitted for tests of sterility.  
21 of the bottles were satisfactory and 3 were unsatisfactory.

Table 53      TESTING OF CLEANSING FLUIDS (MILK CONTROL)

8 samples of fluid used for cleansing of milk bottles, utensils etc.,  
were submitted for examination and all were satisfactory.

Appropriate action was taken on all unsatisfactory reports

Table 54      REGISTRATIONS (MILK CONTROL)

Under Milk and Dairies Regulations 1949: Dairies (other than dairy farms) 5  
Distributors 5



Table 55 LICENCES (MILK CONTROL)

(a) Under Milk (S.D.) (P. and S.M.) Regulations 1949		
Pasteurisers		3
Dealers (Pasteurised)		2
" " Supplementary		1
" (Sterilised)		1
" " Supplementary		1
(b) Under Milk (S.D.) (R.M.) Regulations 1949		
Dealers (Tuberculin Tested)		5
" " " Supplementary		1

Table 56 MEAT and OTHER FOODS CONDEMNATIONS

Our meat - except for 81 pigs and 1 beast slaughtered at one private slaughter-house in the Borough - came from slaughterhouses outside the Borough under the Ministry of Food Control.

278 lbs Beef, 6 lbs Calf Tongues,  $7\frac{1}{4}$  lbs Pork, 86 lbs Pigs' Liver, 2 pairs Pigs Lungs and 114 lbs Frozen Ox Cheeks and 38 lbs Frozen Ox Liver were condemned.

Other foodstuffs condemned as unfit for human consumption were as follows:-

Government Victualling Establishment

Baked Beans	82 tins	Potatoe Powder Mash	67 lbs
Beef Extract	8 botts	Rice	81 lbs
Biscuits	162 lbs	Solid Packed Apples	10 tins
Celery Seed	3 tins	Tea & Coffee	$57\frac{1}{2}$ lbs
Cereals	101 tins	Tinned Bacon	394 tins
Chocolate	326 lbs	" Cheese	$10\frac{1}{2}$ "
De-hydrated Vegetables	24 lbs	" Fish	753 "
Dried Fruit	6606 "	" Fruit	1051 "
" Vegetables	451 "	" Jam & Marmalade	136 "
Frying Oil	184 "	" Meat	2619 "
Jams & Syrups	$41\frac{1}{2}$ "	" Meat &	
Lard	7 tins	Vegetables	1466 "
Malt & Yeast	$283\frac{1}{2}$ lbs	" Milk	2045 "
Meat Extract	32 tins	" Rice Puddings	306 "
Milk Powder	38 lbs	" Sausages	353 "
Oatmeal	49 "	" Tomatoes	390 "
Pickles	129 jars	" Vegetables	4305 "

Others

Bacon	$15\frac{3}{4}$ lbs	Lemon Squash	1 bott
Calf Tongues	6 "	Margarine	6 lbs
Cereals	8 pkts	Pickled Onions	1 jar
Cheese Spread	7 pkts	Sausages	35 lbs
Chicken	$10\frac{1}{2}$ lbs	Sultanes	1 lb
Crabs	325 "	Tinned Chocolate Drink	1 tin
Fish	932 "	" Fish	7 tins
" Cakes	$36\frac{1}{2}$ "	" Fruit	359 "
" Roes	14 "	" Meat	462 "
Flour	1 "	" Milk	119 "
Frozen Egg	28 "	" Soup	20 "
Gravy Salt	8 oz.	" Vegetables	428 "
Ham	$157\frac{3}{4}$ lbs	Turkey (Irish)	1

Table 57 FOOD &amp; DRUG SAMPLES

Taken Under Food and Drugs Act 1938

	Genuine			Unsatisfactory			Total		
	Formal	Informal	Total	Formal	Informal	Total	Formal	Informal	Total
Milk	45	16	61	-	-	-	45	16	61
Other Foods	4	96	100	-	9(a)	9	4	105	109
Drugs	-	9	9	-	2(b)	2	-	11	11
Total	49	121	170	-	11	11	49	132	181

Table 58

## FOOD &amp; DRUG SAMPLES - ACTION TAKEN re UNSATISFACTORY SAMPLES

1 Informal Sample of Milk (Fat 3.5%, Solids-not-Fat 8.4%, Freezing Point Depression 0.54) was found to be 1.1% Deficient of Solids-not-Fat but was reported genuine as freezing point indicated that this was due to the condition of the cows and not to the presence of added water.

(a)(1) Tomato Ketchup	Label offence. Failed to give name and address of packer or state "Registered Trade Mark".	Managing Director of Manufacturers interviewed by appropriate Sampling Officer. Discrepancy on small labels due to printers using a contraction - larger labels satisfactory - and small labels to be re-printed to conform.
(2) Ham Cheese Spread	Unsatisfactory designation. Emphasis given to Ham whereas the sample is essentially Cheese Spread with Ham Flavour.	New labels printed "Cheese Spread with Ham".
(3) Baking Powder	Label Offence. Failed to give address of packer or state "Registered Trade Mark."	Manufacturers to print new labels to include "Registered Trade Mark."
(4) Cake Flour	Unsatisfactory designation. Should be described as Cake Flour Mixture because Cake Flour is a description for a special type of flour. List of ingredients did not disclose sugar in the order of proportion by weight.	Manufacturers interviewed by appropriate Sampling Officer. Carton no longer in use. Carton in current use satisfactory.
(5) Shredded Suet (Prepacked)	Unsatisfactory designation. Contained 1% of fibrous tissue, and therefore the appropriate designation is "Chopped Raw Suet."	Manufacturer advised accordingly.
(6) Pork Sausages	Contained 23% lean Meat 42% fat. In my opinion not more than half the meat content should consist of fat. In this sample 9% of lean meat has been replaced by fat.	Analyst's comments conveyed to Manufacturer by Town Clerk on instructions from Health Committee.
(7) Pork Sausages	Total meat 59 per cent instead of not less than 65 per cent. Contained 220 p.p.m. sulphur-dioxide preservative.	Manufacturer Warned.
(8) Custard Powder (Prepacked)	Label offence. No name and address of packer or registered trade mark given.	Individual packets which had been taken from damaged (but correctly labelled) carton and sold separately. Vendor warned.
(9) Crab Paste	Inferior quality. Contained protein equivalent to 58 per cent of average crab meat.	The sample was of Norwegian origin. It is understood that Norwegian Canneries claim that natural variation of protein in Norwegian Crabs extends over a wide range. This point is under consideration by the Association of Public Analysts.



(b)(1) Eastons Syrup	Deteriorated. Contained crystalline deposit of iron phosphates. Deficient of 42 per cent of Ferrous Phosphate in solution.	Very old stock. Remainder of Stock destroyed.
(2) Zinc Ointment	Unsatisfactory ointment base. Oxidised to a hard waxy consistency by long storage.	Very old stock. remainder of stock destroyed.

Table 59 ICE CREAM. REGISTRATION of PREMISES

For Manufacture only	2
For Sale only	161

Table 60 ICE CREAM SAMPLING

No. of Samples Taken	Samples Reported				% in Grade 1	% in Grades 1 or 2	% in Grade 3	% in Grade 4
	Grade 1	Grade 2	Grade 3	Grade 4				
112	56	28	19	9	50%	75%	16.9%	8.1%

The Public Health Laboratory Service advises that samples should be judged on results of a series and suggests that over a six-monthly period

	50%	of Samples should fall into Grade 1
	80%	" " " " " Grades 1 or 2
Not more than	20%	" " " " " Grade 3
and no		" " " " " Grade 4

In addition 33 Iced Lolly Samples were examined and all except 3 were satisfactory.

In all cases of unsatisfactory reports the manufacturer and retailer were advised verbally and by circular letter re precautions to be taken to prevent contamination.

Table 61 WORK of PUBLIC HEALTH INSPECTORS - FOOD CONTROL DUTIES

#### VISITS and INSPECTIONS

<u>A. Inspections of Premises</u>			
	Bakehouses	45	
	Butchers shops	183	
	Fishmongers and Poulterers	95	
	Greengrocers and Fruiterers	93	
	Grocers and Other Food shops	343	
	Food Preparing premises	59	
	Dairies and Milkshops	48	
	Ice-Cream premises	213	
	Preserved Food premises	49	
	Cafes	198	
	Hawkers	64	
	Slaughterhouse	19	1,409
<u>B. Visits in Connection with Sampling</u>			
	Food and Drugs sampling	181	
	Ice-Cream sampling	145	
	Milk sampling	160	
	Water sampling	21	507
<u>C. Inspection of Food</u>			
	Number of Visits to All types of Premises in Connection with Inspection of Food	153	133
<u>D. Miscellaneous Visits</u>		27	27
			<u>2,076</u>

GENERAL PROVISIONofHEALTH SERVICES for the AREATable 62      LABORATORY FACILITIES

Public Health Laboratory Service,  
Central Laboratory, Milton Road, Portsmouth (Port. 74785)

Public Analyst's Laboratory,  
Trafalgar Place, Clive Road, Portsmouth (Port. 5482)

Table 63      AMBULANCE FACILITIES

The Ambulance Station in the Borough is situated in Privett Road and is one of the five stations (Fareham, Gosport, Havant, Hedge End, Petersfield) in the South-Eastern Division of the County Ambulance Service. The work of these Stations is co-ordinated at the Main Station at Fareham and it is there that all calls for ambulances are received. Written requests for transport should be sent to the County Ambulance Station, The Tannery, North Wallington, Fareham, and verbal requests telephoned to Fareham 2170.

The Local Health Authority is not under obligation to make arrangements for the conveyance of all persons suffering from illness but only of those for whom special transport such as the Ambulance Service provides is necessary. Under normal circumstances, therefore, transport can be provided only on the authority of a doctor but in an emergency an ambulance can be obtained by anyone using the "999" system provided by the Post Office telephone service.

Table 64      HOME NURSING and MIDWIFERY

Nurses and Midwives, unless out on urgent cases, can normally be reached at their own homes before 9 a.m., between 1.0 and 2.0 p.m., and in the evening.

District Nurses

Miss D. Bransbury,	59 The Croft, Stubbington.	(Stubb. 295)
Mrs. D. Cox,	78 Rothesay Road, Gosport	(Gosp. 88905)
Mrs. E. Green,	25 Bay Road, Alverstoke.	(Gosp. 8533)
Miss B.M. Lawrence,	11 Fieldmore Road, Hardway	(Gosp. 89292)
Mrs. I. Martin,	15 Dorrien Road, Elson	(Gosp. 88495)
Miss V. M. Morgan,	96 Sydney Road, Gosport	(Gosp. 88722)
Miss S. M. Pearce,	263 Forton Road, Gosport	(Gosp. 8039)

Midwives

Miss M.E. Fisher,	89 Anns Hill Road, Gosport	(Gosp. 89330)
Mrs. P. Fisher,	36 Cuckoo Lane, Stubbington	(Stubb. 301)
Mrs. C. Gow,	146 Beauchamp Ave, Bridgemary	(Gosp. 88513)
Miss G. Larcombe,	6 Elmore Close, Lec-on-Solent	(Lec. 79479)
Mrs. D. O'Neill,	34 Windsor Road, Gosport	(Gosp. 89974)
Mrs. N. Pettigrew,	84 Privett Road, Gosport	(Gosp. 8047)
Mrs. F. Thompson,	21 Thorton Road, Elson	(Gosp. 89997)
Miss R. Topley,	1 James Close Bridgemary	(Fareham 3237)

Table 65      HOME HELP SERVICE

The County Council has established a Home Help Service to give help on medical recommendation to households where, owing to sickness, pregnancy, lying-in, old age or other reason, such help is necessary and cannot be obtained otherwise. Charges are made in accordance with the domestic circumstances. A leaflet on the service giving full particulars is obtainable from,

The local Home Help Organiser,  
Mrs. D. Moore, 145 High Street, Gosport (Tel. Gos. 89131)



Table 66      MATERNITY and CHILD WELFARE(a)      HEALTH VISITORS

Mrs. E.M. Edwards,      32 Findon Rd, Elson, GOSPORT  
 Miss K.P. Glistler,      49 Kings Rd, GOSPORT.  
 Miss F.E. Jones,      61 Rothesay Rd., Elson, GOSPORT Tel. 8461  
 Mrs. M.E. Lutman,      41 Prideaux-Brune Avenue, BRIDGEMARY, Gosport

Health Visitors can normally be reached at their own homes before 9 a.m. and after 5 p.m.

- (b)      ANTE-NATAL RELAXATION CLASSES Are held at the Blake Maternity Home on Monday afternoons. The instruction is given by the County Midwives.
- (c)      ANTE-NATAL CLINICS are held at the Blake Maternity Home on Thursday at 2 p.m.
- (d)      CHILD WELFARE CENTRES are held as under:-

<u>ELSON</u>	Blake Maternity Home	Every Tuesday 2 p.m.
<u>FORTON</u>	Crossways Social Hall	Every Monday 9-30 a.m. to 12 noon 2 to 4 p.m.
<u>BRIDGEMARY</u>	Holbrook School, Fareham Road	Every Thursday 9-30 a.m. to 12 noon 2 to 4 p.m.
<u>HALL of CHRIST the KING</u>	Wych Lane	Every Thursday 9-30 a.m. to 12 noon
<u>HOLBROOK SCHOOL</u>	Fareham Road	Every Thursday 2 to 4 p.m.
<u>STOKE ROAD</u>	Methodist Sunday School room	Every Wednesday 9-30 a.m. to 12 noon 2 to 4 p.m.
<u>LEE-ON-SOLENT</u>	The Lowry Hut	1st and 3rd Tuesdays in each month from 2 p.m.

Table 67      COUNTY COUNCIL SPECIAL CLINICS

The following Clinics are held at "The Gables" Spring Garden Lane (Tel Gos.8032)

(a)      CHILD GUIDANCE CLINIC

Dr. L. Rosenberg, Psychiatrist, holds a clinic every Wednesday, all day.  
 Psychologist attends every Thursday, all day.  
 Psychiatric Social Worker attends both clinics.  
 Children are seen by appointment only.

(b)      MINOR ORTHOPAEDIC CLINIC

This is attended by Dr. P.V. Pritchard every second Tuesday in the month in the mornings. Cases are seen by appointment only.

(c)      SPEECH CLINIC

Attended by Miss K.M.L. Dickson, L.C.S.T.  
 For treatment of speech disorders in children under school age and children attending maintained schools. Patients are seen, by appointment only, Mondays a.m., Wednesdays and Fridays all day.

Table 68      SCHOOL and MINOR AILMENTS CLINIC

This Clinic is held at the Divisional Health Office, 2 Stoke Road,  
 (Tel. Gosp. 89131)

It is open daily, except Saturdays, at 9-30 a.m.

It is attended by Dr. P.V. Pritchard, The Divisional School Medical Officer.  
 Children are referred to it for treatment of minor ailments and injuries, for special medical examinations and supervision, and immunisation.

It is also used by parents, teachers and doctors for consultations with the Medical Officer.

Adults are also examined for superannuation and such like purposes.

The County Audiometrician attends every second Wednesday afternoon in the month to test children only by appointment with the gramophone audiometer. These are cases referred to this clinic because they have, or are suspected to have, defective hearing.



Table 69      DENTAL CLINIC

This clinic is held at the Divisional Health Office, 2 Stoke Road, (Tel. Gosp. 89131) It is open daily and alternate Saturday mornings. It is attended by one Full-time Dental Officer - Surg. Rear-Admiral (D) F.R.P. Williams C.B.E. and part-time Dental Officer Mr. W.J.A. Reed.

About half the Gosport area is now covered for routine inspection and treatment; those schools unfortunately excluded, owing to lack of staff, are the following:- Forton St. John, Grove Road, Privett, Holbrook, Bridgemary, Bedenham and Woodcot.

Emergency treatment for the relief of pain is available for children attending the Schools in the "uncovered" areas and a clinic for such treatment is held on Tuesday mornings.

On reference to the County Medical Officer by the Doctor booked or by a doctor in charge of an ante-natal clinic or by the Health Visitor, or midwife any expectant or nursing mother can obtain any necessary dental treatment, including dentures, free, through the County Dental Service. Treatment can also be obtained for any pre-school child in Gosport on application to the Dental Officer at the Clinic.

Table 70      HOSPITAL BOARD SPECIAL CLINICS

The following clinics for our children are held at "The Gables", Spring Garden Lane by arrangement with the Regional Hospital Board:-

(a)      MAJOR ORTHOPAEDIC CLINIC

Surgeon's Day      3rd Tuesday morning in the odd months of year  
Remedial Day      Every Friday, all day.

(b)      OPHTHALMIC CLINIC

Every Wednesday afternoon.

(c)      THE TUBERCULOSIS or CHEST CLINIC

This Clinic is for patients of all ages.

<u>Mondays</u>	9-45 a.m. to 12 noon. Old Patients and 2 p.m. New Patients
<u>Tuesdays</u>	9-30 a.m. By appointment only 1-30 p.m. Refill Session
<u>Monday</u>	5-30 p.m. Every third Monday in month an evening clinic.

Table 71      EAR, NOSE and THROAT CLINIC

Cases for examination by an Ear, Nose and Throat Specialist are referred to the Gosport War Memorial Hospital Special Department.

Table 72      VENEREAL DISEASES CLINIC

Clinics are held at St. Mary's Hospital, Portsmouth (Tel. Port. 2476)

For Males	Tuesdays	10 - 12 noon
	Thursdays	5 - 7 p.m.
For Females	Mondays	5 - 7 p.m.
	Wednesdays	2 - 4 p.m.
	Fridays	10 - 12 noon

Table 73      HOSPITAL and NURSING HOME Service for the Area is:-

War Memorial Hospital (General).....	Tel. Gosport 8157
Infectious Diseases Hospital.....	Tel. Portsmouth 2046
Blake Maternity Home.....	Tel Gosport 8535
Hasler Hospital (Naval).....	Tel. Portsmouth 74571
Ballard Lodge Nursing Home (Private).....	Tel. Gosport 8143
Langdale Nursing Home (Private).....	Tel. Gosport 89618
"Thalassa" 79 Western Way (Private).....	Tel. Gosport 89978



Table 74      DAY NURSERY

Podds House, 185 Brookhurst Road, Gosport (Tel Gosport 89508)  
Accommodates 70 children between the Ages of 0 and 5 years.

A Priority System is in operation in regard to admission to County Council nurseries, and Priority Cases are as follows:-

- (a) Children whose mothers are obliged to work as sole or main supporter of the family, i.e. unmarried mothers and widows, or cases where the husband is unable to follow full-time employment on account of ill-health.
- (b) Children whose mothers are ill or are unable, for some reason, to care for them themselves.
- (c) Cases of overcrowded or unsuitable home conditions, where it is necessary in the interests of the child on health grounds.

Children not coming within the above categories are admitted on the understanding that if the vacancy should be required for a priority case, the child will be withdrawn.

Table 75      OCCUPATION CENTRE FACILITIES

St. Faith's Institute, Leesland Road, Gosport.

Children if suitable for admission are admitted from Gosport, Fareham, Shedfield, Swanmore and Wickham. Also from any place within reasonable distance having regard to transport facilities and age and ability of defective.

Table 76      VACCINATION against SMALLPOX

This is normally carried out by the family doctor, but Medical Officers attached to Child Welfare Centres will also carry out this service on request.

Table 77      IMMUNISATION

The Official Scheme was extended in May 1955 to include Whooping Cough as well as Diphtheria. The Scheme has been further extended in 1956 to include Tetanus in Triple Antigen form only.

Table 78      REMOVAL of PERSONS in NEED of CARE and ATTENTION

- i ii This is Borough responsibility under Section 47 of the National Assistance Act 1948 and the National Assistance (Amendment) Act 1951.

One aged and infirm female - detained in hospital accommodation under these provisions - died before the first date in the year on which application for Renewal of the Court Order was due to be made.

In the case of another aged and infirm female - who had previously been detained in hospital accommodation under these provisions, but had been allowed to return home - it was found necessary to make application to the Court for another Removal Order. This Order and continuing quarterly Renewals were granted by the Court and the old lady was detained in an institution which specifically cares for such cases.

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