

[Report 1958] / Medical Officer of Health, Guisborough U.D.C.

Contributors

Guisborough (England). Urban District Council.

Publication/Creation

1958

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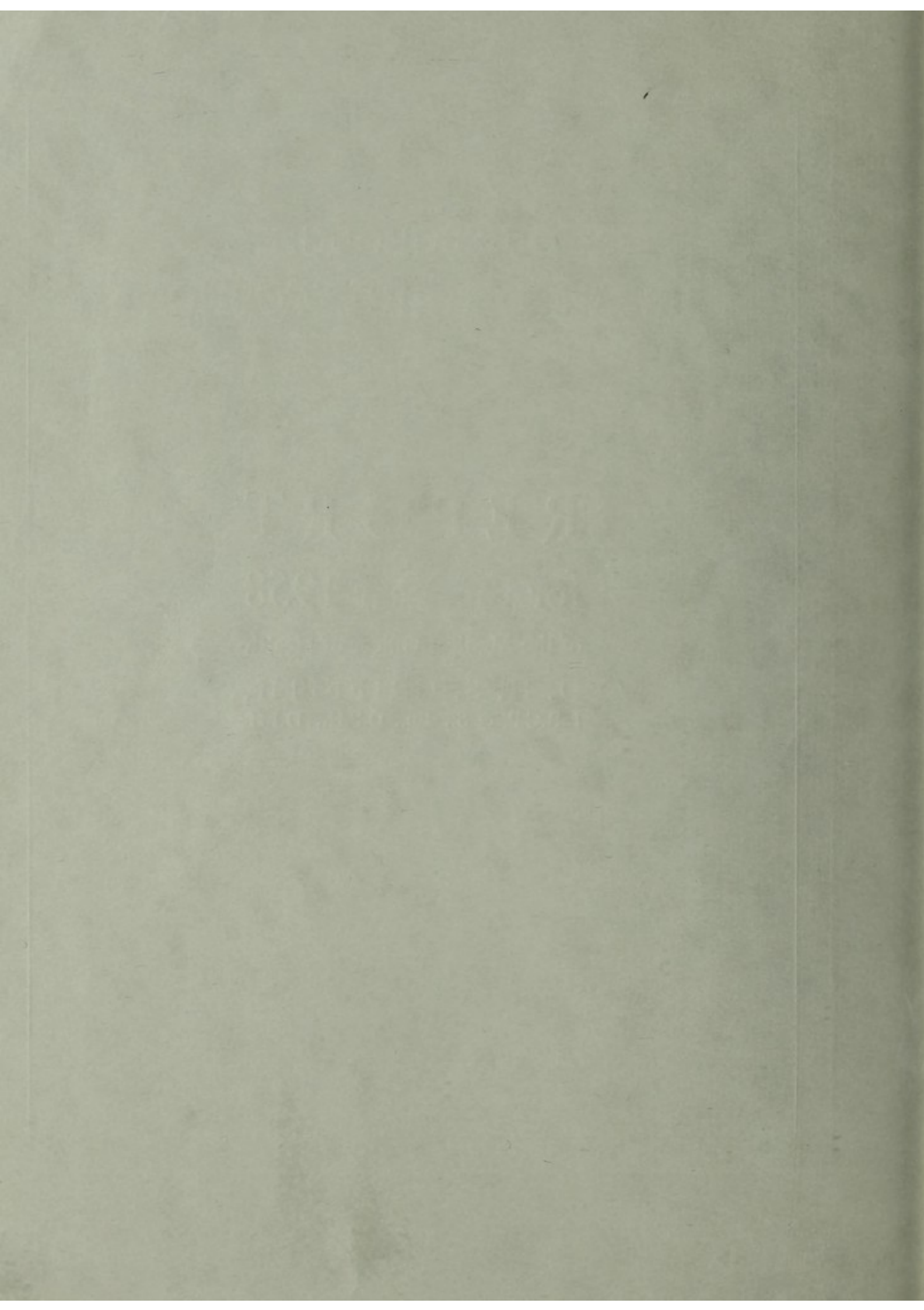
GUISBOROUGH
URBAN DISTRICT COUNCIL

REPORT
for the Year 1958

of the Medical Officer of Health

D. H. S. GRIFFITH,
L.R.C.P. & S., Ed., D.P.H., D.I.H.





TO THE CHAIRMAN AND MEMBERS
OF THE
GUISBOROUGH URBAN DISTRICT COUNCIL

MR. CHAIRMAN AND GENTLEMEN,

I have the honour to submit to you my annual report for the year 1958.

It is with very much regret that I have been obliged to end my association with the Council so short a time after my worthy predecessor Dr. W. H. Butcher. Although my term with you has been short, nevertheless it has been most pleasant and I should like to express my thanks for the courtesy which you have always afforded me.

During the year I have had the opportunity to report to you on the conditions of some of the property in the district. It is unfortunate that many of the houses which give the town its air of charm are in fact no more than slums. There is nothing which can be said for living in damp, badly lit houses, some of which provide neither water nor proper sanitary conveniences.

It is worthwhile noting that of the houses inspected more than 50% have been occupied by older and often elderly people. Disrepair, dampness, indifferent water supply and outside toilets may well add an intolerable burden to incapacity. There will be a need for more and more rehousing of old people in the next twenty years and I would ask the Council in its future housing plans to look ahead into the provision of sufficient housing for the aged. In addition to bungalows there is a need for more accommodation for the single old person. The provision of room, bathroom and kitchenette private to the individual but grouped together in one building under the care of a warden is a worthwhile means of housing the solitary. It avoids loneliness and at the same time assures privacy. By insuring unobtrusive supervision combined with individual responsibility for one's own personal needs, it averts the lost and vacant attitude too often seen in old people's homes and institutions. At the present time there is not nearly sufficient housing of this type provided by local authorities.

It is welcome to note that in regard to slum clearance progress is being made. A regular programme is being pursued. Some 70 houses are to come for consideration during the next 2 years. In addition there should be no overcrowding problem in the District within the next year if the housing programme is maintained.

I should not like to close this statement without further reference to the elderly in the community. Those over 65 form some 10% of the population. I have been concerned to note in visiting old people how often little is known about their circumstances. These are sometimes not as good as they could be and in some instances are deplorable.

There is a need for improved services to keep old people in their own homes. Many of those who are disabled are not sick enough to enter hospital but are not well enough

to be admitted to places where they might for a time receive care. In this, appropriate housing can help along with temporary rest accommodation. At the present time I find I am asked to visit usually when circumstances are so bad that help is urgently needed. It would be of great service to the public health worker if local doctors, hospitals and voluntary organisations would advise the District Health Office of aged persons who come under their aegis whether in fact they require assistance at the time or not. Over and above this a system of notification to the Health Office by the local Ministry of Pensions of all persons applying for the Old Age Pension, would solve much of the difficulty in finding the whereabouts of people who might require assistance. As regards assistance, this is at present a County service provided by nursing, visiting and domestic aid. Much of this work is carried out during the daytime. Little help is available to the disabled old person in the evening or at night. I do not think we can expect such cases to confine their disability to office hours. A group of kindly and understanding men and women prepared to give up some of their free time in the evenings would not only bring interest and life into the homes of many of the incapacitated elderly but would serve as additional cover in their care.

In concluding, I should like to express my thanks to Mr. Beel for his always friendly advice and to Mr. Pallister and Mr. Ward for their willing and active co-operation in maintaining the sanitary services in the District. I must acknowledge also the great help and hard work of Mr. Nuttall and Miss Knaggs in the District Health Office.

I am, Sirs,

Your obedient servant,

DONALD H. S. GRIFFITH,

Medical Officer of Health.

October, 1959.

TABLE 1
Public Health Officers

Whole Time Officers	Guisborough Urban District	Skelton & Brotton Urban District	Loftus Urban District
Medical Officer of Health who is also Asst. County Medical Officer No. 4 Area N.R.C.C. and School Medical Officer, N.R.C.C.	Dr. D. H. S. Griffith		
Public Health Inspectors	*Mr. A. T. Pallister	Mr. J. H. Rhodes	*Mr. W. C. Ranson
Additional Public Health Inspector	Mr. E. Ward		Mr. A. N. Errington

*Also Surveyor of the district concerned

County Public Health Staff attached to the Guisborough Area.

Miss H. M. Bell	Health Visitor/School Nurse
Mrs. R. E. Alderson	District Nurse/Midwife
Mrs. E. M. Faye	District Nurse/Midwife
Mrs. F. E. Potter	District Nurse (Part-time)
Mr. R. K. Nuttall	Senior Clerk
Miss P. Knaggs	Clerk Typist

SECTION 1

Statistics and Social Conditions of the Area

Population

The Registrar-General's estimate of the population of the district in the mid-year 1958 is 9,830, as compared to an estimate of the population in the mid-year 1957 of 9,630.

General Statistics

I am indebted to the Financial Officer of the Council for the following figures:—

1. Area of the District in acres	18,948
2. No. of inhabited houses according to the rate books	3,079
3. Rateable Value	£213,059
4. Sum represented by a penny rate	£885

Social Conditions

Industrial development is the same as in 1957. Towards the end of the year there has been a slowing down of progress. Council and private housing development has continued to advance. New development is now governed by the Bye-laws appropriate to the Clean Air Act of 1956. The provision of water supplies has been taken over by the Tees Valley Water Board. Work has been planned to improve the treatment of raw sewage.

TABLE 2

Vital Statistics

		MALE	FEMALE	TOTAL
Live Births	....	105	102	207
Legitimate	....	104	100	204
Illegitimate	....	1	2	3
Still Births	....	2	4	6
Legitimate	....	2	4	6
Illegitimate	....	—	—	—

Deaths of Infants under 1 year of age

				MALE	FEMALE
Total	....	....	....	4	5
Legitimate	....	....	....	4	5
Illegitimate	....	....	....	—	—

The number of births registered is 207, giving the birth rate of 21.0 per 1,000 population. Allowing for the differing age and sex distribution of the population in different areas, the birth rate corrected by this comparability factor is 20.58 compared with the Registrar General's provisional rate of 16.4 for England and Wales.

9 infants under the age of 1 year died, giving an infant mortality of 43.5 per thousand live births compared to the rate for England and Wales of 22.5. Eight of the infants who died were under 4 weeks of age. The causes of death of these infants were as follows:—

AGE	CAUSE OF DEATH	PLACE
1 day	Haemorrhagic Disease of the Newborn	Hospital
8 hours	Haemorrhagic Disease of the Newborn	Hospital
3 Weeks	(1) Haemorrhagic Disease	Hospital
	(2) Prematurity	Hospital
4 days	Prematurity	Hospital
30 minutes	Prematurity and placenta praevia	Hospital
2 hours	Prematurity	Hospital
6 hours	Cerebral birth trauma	Hospital
2 weeks	(1) Cardiac failure	Home
	(2) Broncho-pneumonia	
2 months	Acute bronchitis	Home

The first seven deaths shown represent the difficulties besetting the obstetrician in his attempt to reduce still further the infant mortality rate. It will be noted that 6 of these infants died shortly after birth. Not enough is yet known of the factors involved in these conditions. Even when the infants are born in hospital, as all the above were, it seems that at the present little can be done. At the same time the infant mortality rate is almost double that of the country as a whole. While the rate for England and Wales has been falling steadily, the rate for the district has not. It gives grave cause for thought. Are mothers receiving all the antenatal instruction and advice they should have? Are patients calling out their practitioners in good time? Is the distance to hospital a factor aggravating the situation? Would it be better to have the specialist make the journey rather than the mother? The answer to these questions requires much further investigation, but until this is done it would appear that the early death of infants will continue. On the other hand it is pleasing to note that of the other 200 children born in the district only one died during the year.

TABLE 3 — Vital Statistics

CAUSES OF DEATH

			MALE	FEMALE
Tuberculosis, Respiratory	....	....	—	—
Tuberculosis, other	....	....	—	—
Syphilitic disease	....	....	—	—
Diphtheria	....	....	—	—
Whooping Cough	....	....	—	—
Meningo-coccal infections	....	....	—	—
Acute Poliomyelitis	....	....	—	—
Measles	....	....	—	—
Other Infective and Parasitic Diseases	....	....	—	—
Malignant Neoplasm of Stomach	....	....	1	—
Malignant Neoplasm of Lung, Bronchus	....	....	1	—
Malignant Neoplasm of Breast	....	....	—	1
Malignant Neoplasm of Uterus	....	....	—	2
Other Malignant and Lymphatic Neoplasms	....	....	3	5
Leukaemia	....	....	—	—
Diabetes	....	....	—	—
Vascular Lesions of the Nervous System	....	....	8	13
Coronary Disease, Angina	....	....	8	4
Hypertension with Heart Disease	....	....	2	2
Other Heart Diseases	....	....	9	13
Other Circulatory Diseases	....	....	—	1
Influenza	....	....	—	—
Pneumonia	....	....	2	1
Bronchitis	....	....	10	6
Other Diseases of Respiratory System	....	....	—	1
Ulcer of Stomach and Duodenum	....	....	—	—
Gastro-enteritis and diarrhoea	....	....	—	—
Nephritis and Nephrosis	....	....	2	—
Hyperplasia of Prostate	....	....	3	—
Pregnancy, child-birth, abortion	....	....	—	1
Congenital malformations	....	....	—	—
Other defined or ill-defined diseases	....	....	5	4
Motor vehicle accidents	....	....	1	—
All other accidents	....	....	1	1
Homicide and operations of war	....	....	—	—
ALL CAUSES	....	....	56	55

The deaths are classified under the headings based on the Abbreviated List of International Classification of Diseases, Injuries and Causes of Death, 1948. The 111 deaths give a death rate of 11.3 per thousand of population as compared to 11.7 per thousand for England and Wales. There was an increase in the number of deaths due to bronchitis and pneumonia. This may reflect the effects of influenza, particularly amongst the older members of the community. It will be noted that heart diseases, cancer and vascular lesions of the nervous system ("strokes") are the commonest causes of death.

TABLE 4
Vital Statistics 1884-1958

Period	Average Mid-Year Population	Births	Average Annual Birth Rate	Average Annual Death Rate	Average Annual Infant Death Rate
1884-88	6,100	1,100	36.1	17.1	146
1889-93	5,623	849	30.2	14.6	108
1894-98	5,630	910	32.4	14.7	108
1899-1903	5,645	932	33.0	16.6	142
1904-1908	6,300	1,026	32.6	16.2	129
1909-1913	7,062	1,044	29.6	15.4	122.5
1914-1918	6,600	997	30.2	16.6	106
1919-1923	7,104	964	27.1	13.9	97.5
1924-1928	6,656	651	19.6	13.2	81.5
1929-1933	6,888	575	16.7	14.1	62.5
1934-1938	7,987	665	16.6	12.7	46.5
1939-43	7,556	685	18.1	15.0	55.5
1944-48	8,048	779	19.3	12.2	55.6
1949-53	8,743	776	17.7	12.3	34.4
1954-58	9,508	940	19.5	11.6	36.0

I have added for your information a table upon the statistics over the whole period since these first became available in the area. The figures are for five-yearly periods and although not entirely accurate are a fair approximation for purposes of comparison.

The changes in population, births, deaths and infant mortality are evident. At present, the population is increasing rapidly. Fewer children are born today than at the turn of the last century but the birth rate is higher than the national average. Infant mortality has fallen over the years, but gives no cause for satisfaction as yet.

TABLE 5
NOTIFIABLE DISEASES 1958
(other than Tuberculosis)

	All Ages	Under 1 year	1 year	2	3	4	5—	10—	15—	25—	35—	45—	65—	Age Un- known
Scarlet Fever	16	—	2	—	4	—	10	—	—	—	—	—	—	—
Puerperal Pyrexia	2	—	—	—	—	—	—	—	—	—	—	—	—	2
Pneumonia	2	—	—	—	—	—	—	—	1	—	—	—	1	—
Polio myelitis	3	—	—	1	—	—	1	—	—	1	—	—	—	—
Dysentery	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles	7	—	—	—	4	2	1	—	—	—	—	—	—	—
Whooping Cough	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Erysipelas	1	—	—	—	—	—	—	—	—	—	—	1	—	—

SECTION II

Infectious Diseases

Table 5 shows the incidence of notifiable diseases except tuberculosis and Table 6 that of tuberculosis.

TABLE 6
Tuberculosis

AGE GROUPS YEARS	RESPIRATORY FORM		NON-RESPIRATORY FORM	
	Male	Female	Male	Female
0 to 4	—	—	—	—
5 to 9	—	—	—	—
10 to 14	—	—	—	—
15 to 19	—	—	—	—
20 to 24	—	1	—	—
25 to 44	—	—	—	1
45 to 54	—	—	—	—
55 to 64	2	—	—	—
65 to 74	—	—	—	1
TOTAL	2	1	—	2

No deaths from tuberculosis occurred in 1958.

TABLE 7
Immunisation and Vaccination

Diphtheria Immunisation

	UNDER 1	1 TO 4	5 TO 14	TOTAL
Completed	29	16	11	56
Reinforcing doses	—	14	63	77

Whooping Cough Immunisation

	UNDER 1	1 TO 4	5 TO 14	TOTAL
Completed	69	6	1	76

Combined Whooping Cough and Diphtheria Immunisation

	UNDER 1	1 TO 4	5 TO 14	TOTAL
Completed	45	9	1	55

It can be seen that 74 infants under 1 year received immunisation against diphtheria during the year. This is available either from the family doctors or at the two clinics in the area, at Guisborough and Lazenby. During the year, because of the possibility of a slight risk in aggravating poliomyelitis by combined immunisation the policy was altered to separate diphtheria and whooping cough injections. Now that so many people are coming forward for poliomyelitis vaccination it is to be hoped that there will be a reversion to the combined immunisation. Including poliomyelitis vaccination a child now receives no less than 7 injections over as many months. Not only does this increase the work of the clinics but causes needless discomfort to the child. Further, in a comparatively rural area no protection is given against tetanus. There is a great need for a combined product incorporating all four protective inoculations.

With some 200 births in the district the number of diphtheria immunisations represents only 37% protected. This figure falls far short of safety for the community. It is essential that double the number be immunised if diphtheria is to be avoided in the area. Not only does immunisation protect the child, but the more children immunised the less likely is diphtheria to show itself.

Smallpox

PRIMARY VACCINATION

66

REVACCINATION

3

Vaccination is available from the family doctor and at the Clinic in Guisborough. As with diphtheria not enough children are being vaccinated. The best time for primary vaccination is when the child is in early infancy.

Poliomyelitis

COMPLETED 1958

876

COMPLETED PRIOR TO 1958

472

Vaccination is being extended to those under 26 in 1959. "Booster" doses are also to become available to those previously vaccinated.

SECTION III

The General Provision of Health Services in the District

1. Laboratory Facilities.

This work is now done at the Public Health Laboratory, Middlesbrough, only the the biological test for tuberculous milk being carried out at the Public Health Laboratory, Northallerton.

2. National Health Service Act, 1946

With certain exceptions the Guisborough Area Health Sub-Committee of the Health Committee of the County Council exercises the functions of the Local Health Authority in supervising the day to day administration of the services provided under this Act. The Committee met every two months at Guisborough. It is composed of members of the County Council, of the three District Councils of Guisborough, Skelton and Brotton and Loftus, and of certain co-opted members. Among the services administered are the following:—

Domestic Help Service.

Home Nursing.

Prevention of illness: Care and After Care.

Health Visiting.

Ambulance Service.

Midwifery.

Vaccination and Immunization

Care of Mothers and Young Children.

3. Guisborough Area Voluntary Care Committee

I would like to record the work done by this Body for the welfare of persons suffering from tuberculosis and other illnesses. Whereas in connection with the welfare of the tuberculous the Committee has certain funds allocated to it, for the welfare of other sufferers it depends entirely on voluntary contributions. Enquiries and requests for assistance may be made to the Honorary Secretary, District Health Office, Park Lane, Guisborough (Telephone: Guisborough 321).

4. National Assistance Acts, 1948 and 1951 — Section 47.

It has been possible to avoid advising the Local Sanitary Authorities to have recourse to the procedure laid down in these Acts.

SECTION IV—WATER SUPPLIES

1. Water

The Council's undertaking was taken over on April 1st, 1958 by the Tees Valley Water Board forming a part of the Tees Valley and Cleveland Water Board.

Number of Dwellings supplied by Public Supply:—

(a)	Direct to houses	....	....	....	2972
(b)	By means of Standpipes	....	....	....	31
(c)	Number of dwellings receiving water from various private sources	....	....	....	108
					(including various farms)

Water Samples

(a) Tees Valley & Cleveland Water Board

Number of samples taken and submitted for

Bacteriological Examination	....	6
Chemical Analysis	....	1

SECTION V

Inspection and Supervision of Food

Ice-cream, 1958

Number of samples examined	....	....	21
Number of samples Grade 1	....	....	21

Two premises are on the register for the manufacture of ice-cream, one of which makes a cold mix for use only in his cafe. In addition there are 20 premises where ice-cream pre-packed by the producers is sold. These were inspected regularly; 21 samples of ice-cream were taken and conveyed to the Public Health Laboratory at Middlesbrough under approved conditions and submitted to the Methylene Blue Test. The results given in the above table show a good standard of bacterial purity.

Food Poisoning

No outbreak of food poisoning has been reported.

Section 21 — Milk and Dairies Regulations, 1949

No action was taken during the year under the above Regulations.

Milk Supply

There are sixteen milk distributors. Four visits were made to cowsheds.

Bakehouses

There are 4 bakehouses. 24 inspections and visits were made and no defects found.

Fish and Chip Shops

There are seven. Twenty-eight inspections were made.

Food Hygiene Regulations 1955

Informal action was taken on several occasions, the requirements asked for being provided.

Food Retail Premises and Meat Inspections

73 visits were made to food premises and 123 to slaughterhouses, of which there are 6 licensed, 7 premises are licensed under Section 16 of the Food and Drugs Act, 1955 for the making of sausages, etc.

359 pounds of meat were voluntarily surrendered as unfit for human consumption and 69 tins of canned food weighing 142½lbs.

TABLE 8
Carcases and Offal inspected and condemned in whole or in part

	Cattle exclud- ing cows	Cows	Calves	Sheep & Lambs	Pigs	Horses
Number killed (if known)	468	105	56	1506	677	None
Number inspected	171	7	—	482	255	None
All diseases except Tuber- culosis & Cysticerci						
Whole carcasses condemned	—	—	—	1	—	—
Carcasses of which some part or organ was condemned	5	—	—	—	—	—
Percentage of the number inspected affected with dis- ease other than tubercu- losis and cysticerci	3%	—	—	0.2%	—	—
Tuberculosis only :						
Whole carcasses condemned	—	—	—	—	—	—
Carcasses of which some part or organ was condemned	—	—	—	—	—	—
Percentage of the number inspected affected with tuberculosis	—	—	—	—	—	—
Cysticercosis						
Carcasses of which some part or organ was condemned	—	—	—	—	—	—
Carcasses submitted to treat- ment by refrigeration	—	—	—	—	—	—
Generalised and totally con- demned	—	—	—	—	—	—

There are 6 licensed slaughterhouses in the Area, and ten licensed slaughtermen.

SECTION VI — HOUSING

Housing

The Road and Sewer contract in connection with the Council's Hutton Lane Development was commenced in April 1957 and the Building Contractors commenced the erection of 386 houses in September 1957.

The work has proceeded and to date 64 houses have been completed and occupied.

Road and Sewer works in connection with two further sites, namely Hollymead Drive and Park Lane, were commenced during the year. The erection of some forty-four Aged Persons Bungalows and six houses on these sites commenced at the latter end of the year.

73 houses were erected for private occupation during the year.

The provisions of the Housing Act, 1949 as amended by the Housing Repairs and Rents Act, 1954 (in connection with grant aid for the conversion and improvement of existing premises) continued to be operated by the Council during the year.

A total of 3 applications was received during the year, approval was given in each case involving a total amount of £749/0/0.

The improvement proposal to the Almshouses, Kirkleatham submitted by the Trustees of the Sir William Turner Hospital were approved by the Ministry of Housing and Local Government under Section 31 Housing Act, 1949 and the work has proceeded during the year.

Slum Clearance

As a first instalment of the Council's slum clearance programme detailed inspections of some eleven houses in the town were carried out.

A programme of Slum Clearance has been agreed and it is hoped to deal with some seventy properties during the coming year.

Housing Statistics

New houses erected in 1958

(a)	By private owners	....	....	....	73
(b)	By the Council	....	....	....	64

Inspection of dwellinghouses during the year

1.	(a)	Total number of dwellinghouses inspected for housing defects (under Public Health or Housing Acts)	....	....	242
	(b)	Number of inspections made for the purpose	....	....	621
2.	(a)	Number of dwellinghouses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 and 1932	....	....	0
	(b)	Number of Inspections made for the purpose	....	....	0
3.		Number of dwellinghouses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	....	....	1

Section VI—Housing Statistics—continued

4.	Number of dwellinghouses (exclusive of those referred to under the preceding sub-head) found to be not in all respects reasonably fit for human habitation	....	....	....	46
<i>Remedy of defects during the year without service of formal notices</i>					
(1)	Number of defective dwellinghouses rendered fit or repaired in consequence of informal action by the local authority or their officers	....	....	....	83
<i>Action under Statutory Powers during the year</i>					
A.	Proceedings under Sections 9, 10 and 16 of the Housing Act, 1957				
(1)	Number of dwellinghouses in respect of which notices were served requiring repairs	....			0
(2)	Number of dwellinghouses rendered fit after service of formal notices				
(a)	By Owners	....	....	....	—
(b)	By Local Authority in default of owners	....		....	—
B.	Proceedings under Public Health Acts				
(1)	Number of dwellinghouses in respect of which notices were served requiring defects to be remedied	....		....	0
(2)	Number of dwellinghouses in which defects were remedied after service of formal notices				
(a)	By Owners	....	....	....	—
(b)	By Local Authority in default of owners	....		....	—
C.	Proceedings under Section 17 of the Housing Act, 1957				
(1)	Number of dwellinghouses in respect of which Demolition Orders were made	....	....	....	5
(2)	Number of dwellinghouses demolished in pursuance of Demolition Orders	....	....	....	0
D.	Proceedings under Section 16, 17, 18, 26 and 35, Housing Act, 1957				
(1)	Number of separate tenements or underground rooms in respect of which closing orders were made	....		....	0
(2)	Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit	....	....	....	0
<i>Housing Act, 1936, Part 4, Overcrowding</i>					
Some overcrowding exists but no accurate figures are available.					
<i>Housing Act, 1949, and Housing Repairs and Rents Acts, 1954</i>					
(1)	(a) Number of Improvement Grants made	....		....	3
	(b) Number of Improvement Grants refused	....		....	0
(2)	(a) Number of Certificates of Disrepair issued	....		....	0
	(b) Number of Certificates of Disrepair revoked	....		....	0

Section VI—Housing Statistics—continued

Rent Act 1957. Application for Certificates of Disrepair.

1. (a)	Number of applications for Certificates of Disrepair	....	....	12
(b)	Number of Decisions to issue Certificates			
	(1) in respect of some but not all defects	....	....	10
	(2) in respect of all defects	....	....	2
(c)	Number of undertakings given by landlords under paragraph 5 of First Schedule	....	....	6
(d)	Number of undertakings refused by Local Authority under proviso to paragraph 5 of the First Schedule	....	....	—
(e)	Number of Certificates of Disrepair issued	....	....	6
2.	<i>Application for Cancellation of Certificates of Disrepair</i>			
(a)	Applications by landlord to Local Authority for cancellation of Certificate	....	....	0
(b)	Objections by tenants to cancellation of Certificate	....	....	0
(c)	Decisions by Local Authority to cancel in spite of tenants objection			0
(d)	Certificates cancelled by Local Authority.	....	....	0

SECTION VII

Sanitary Circumstances of the District

Nuisances

Total number of inspections made for nuisances only	365
Nuisances found	342
Nuisances in hand previous year	92
Total needing abating	434
Abated during the year	409
Outstanding at end of year	25
Notices served — informal 146, complied with — 121	
Number of summonses or legal proceedings — Nil.	

Drainage and Sewerage

Normal extension to the sewerage system in the District has taken place in connection with Housing Development

The work of improvement and modernisation of the Dunsdale Sewage Disposal Works was commenced in 1957 and completed and brought into operation during 1958.

Owing to the development of the town it has been found necessary to consider the question of extensions to the Sewage Disposal Works. The Council's Consulting Engineers, Messrs. D. Balfour & Sons, have been asked to prepare and submit a report to the Council. This has been done and is now with the Ministry.

452 inspections were made to old and new drainage systems, 381 tests being made to new systems.

Closet Accommodation

20 Sanitary Pans were converted to Water Closets by the Council under the provisions of Section 47 Public Health Act 1936.

11 Sanitary Pans were converted to Water Closets by the owners of the premises.

With the exception of those properties to be included under the Council's Slum Clearance Programme the whole of Guisborough is now on the water carriage system.

Twenty-four houses at Mount Pleasant, Guisborough still require conversion, this work being held up owing to the lack of adequate sewage disposal facilities. Several properties in Yearby Village together with the whole of Upleatham Village also require conversion, again the work being held up owing to the lack of adequate sewage disposal facilities. In the Wilton Parish the whole of South Lackenby and Old Lackenby, approximately 54 houses and farms require conversion; this work is tied up with the construction of Eston's Trunk Sewer and cannot be carried out by main drainage until this sewer is in operation.

137 water closets were provided for new buildings in Guisborough during the year.

141 new water closets were added to the existing sewerage system in Guisborough.

24 new water closets were added to the existing sewerage system in Lazenby.

3 new water closets were added to the existing sewerage system in Newton.

Public Cleansing (Refuse and Disposal)

There has been no change in the system of Public Cleansing and very few complaints were received regarding irregular collections. Refuse is disposed of by means of Controlled Tipping.

Smoke Abatement

No action was necessary during the year.

The Council have adopted the Model Byelaws made under Section 61, Public Health Act 1936 and Section 24, Clean Air Act 1956 in connection with the arrangement in buildings for the prevention of smoke. As approximately 50% of the smoke in the air of urban districts is caused by domestic fires the adoption of the byelaws should, in time, considerably reduce the smoke pollution of the atmosphere.

Common Lodging House

There is one in the district. This is one of the dwellings to be dealt with under the Council's Slum Clearance programme.

Eradication of Bed Bugs, Cleansing, etc.

The advice of the department was sought regarding the identification and destruction of the *Drosoprilla* (Fruit Fly) and *Ptinus Tectus* (Australian Spider), which were found to be infesting houses in the area.

Rodent Control

During the year the Council's Sewers and Refuse Tip were treated twice in accordance with the Technique recommended by the Ministry of Agriculture and Fisheries (Infestation Control Division). Routine surveys have been carried out in connection with farms, business premises, dwelling houses, etc. and at the year end 36 houses, 9 business premises, 2 schools and 1 church had been treated. The poisons used so far have been "Antu", Zinc Phosphide, Arsenious Oxide and Warfarin.

Tents, Vans and Sheds

There are no licensed Caravan Sites in the Urban District. The odd caravan appears in the District and informal action is then taken for its removal.

Shops Act 1934, Sections 10 and 13 (3)

73 visits were paid under the above Act. No unsatisfactory conditions were found.

Mortuaries

One at the Admiral Chaloner Hospital.

Byelaws in force in the District

Byelaws in respect of cleansing of footpaths and pavements; nuisances; common lodging houses and slaughterhouses; 24th July 1893.

Byelaws with respect to tents, vans and sheds: 16th November, 1917.

Byelaws in respect of new streets and buildings: 27th April, 1925.

Building Byelaws: 10th March, 1939.

Byelaws with respect to swimming baths and bathing pools: 18th October, 1946.

Byelaws in connection with the handling, wrapping and delivery of Food and Sale of

Food in the open air: 10th July, 1950.

Byelaws in respect of Smoke Prevention: 1st August, 1957.

SECTION VIII : Factories Act, 1937 and 1948

The following figures have been returned to the Director of Statistics, Ministry of Labour and National Service, regarding factories in the district.

TABLE 9

1. Inspections for the purposes of provisions as to health (including inspections made by Public Health Inspector)

Premises	No. on Register	No. of Inspections	No. of written Notices	Occupiers Prosecuted
(I) Factories in which Section 1, 2, 3, 4, and 6 are to be enforced by Local Authorities	11	5	—	—
(II) Factories not included in (I) in which Section 7 is enforced by Local Authority	24	67	—	—
(III) Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	—	—	—	—
TOTAL	35	72	—	—

