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THE
HEALTH OF HARLOW
IN THE YEAR
1960







THE HEALTH OF HARLOW in the year 1960


being the

ANNUAL REPORT

of the

MEDICAL OFFICER OF HEALTH

**Incorporating the Report of the
Chief Public Health Inspector**



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PUBLIC HEALTH COMMITTEE

as at

31st December, 1960

Chairman :

Councillor W. JARVIS

Vice-Chairman :

Councillor Mrs. E. DRUCE

Members :

Councillor Mrs. S. ANDERSON

Councillor A. F. SMITHERS

Councillor Mrs. M. BASS

Councillor R. J. WARD

Ex-Officio Members :

Councillor J. H. HARRIS, J.P.

Chairman of the Council

Councillor G. B. MARRIOTT, J.P.

Vice-Chairman of the Council

STAFF OF THE PUBLIC HEALTH DEPARTMENT

Medical Officer of Health :

I. ASH, M.D., D.P.H.

Deputy Medical Officer of Health : *(Part-time)*

A. POWELL, M.C., M.B., D.P.H. (to 1.7.60)

L. S. FRY, M.D., D.P.H., (from 1.8.60)

Office: Netteswell Hall, Harlow, Essex.

Telephone: HARLOW 26601

Chief Public Health Inspector : H. J. HEELEY, M.A.P.H.I., F.R.S.H.,
M.R.I.P.H.H., (1), (3) and (6) (Retired
30.6.60)

H. L. HUGHES, D.P.A., M.A.P.H.I., M.R.S.H.,
(2), (3) and (4), (Commenced 1.7.60).

*Senior Additional Public Health
Inspector :* S. A. EADE, M.A.P.H.I., M.R.S.H.,
(2), (3), (4), (5) and (7).

*Additional Public Health
Inspector :* H. C. REEVE, M.A.P.H.I., A.R.S.H.,
(2), (3), (4) and (5).

*Personal Administrative Assistant
to Medical Officer of Health :* Mrs. V. LEMON (from 1.7.60).

Chief Clerk : Miss A. E. A. ROTHWELL.

Clerk : Miss R. L. BOSANQUET.

Junior Clerk : Miss J. CLEGHORN (11.1.60 to 7.10.60).

Miss J. Rodwell (from 10.10.60).

- (1) Certificate of Sanitary Inspectors' Examination Board
- (2) Certificate of the Royal Sanitary Institute and Sanitary Inspectors Examination Joint Board
- (3) Royal Sanitary Institute (Meat and Other Foods) Certificate
- (4) Diploma of the Royal Society of Health for Smoke Inspectors
- (5) Certificate in Sanitary Science, Royal Sanitary Institute
- (6) Diploma in Practical Sanitary Science, London
- (7) Diploma in Hygiene, Royal Institute of Public Health and Hygiene

To the Chairman and Members of the Harlow Urban District Council.

MR. CHAIRMAN, LADIES AND GENTLEMEN,

In presenting my Annual Report for 1960 I can look back on the first five full calendar years of the existence of Harlow as an independent Local Authority. The picture is one of continuous progress, as can be seen from statistics covering that period. In fact, the resident population has increased by almost 70%, the death rate has fallen by 1.2 per thousand population, and the infant mortality rate has been almost halved.

The extremely low crude death rate is, of course, due to the young average age of the residents of the town and is bound to go up as the population ages. On the other hand, the birth rate will at the same time gradually come down to a level nearer the national one, and the trend towards this is already evident. However, infant, neonatal and perinatal mortality rates are not greatly influenced by the age structure of the population, and the remarkably low rates are the result of the excellent housing conditions, good nutrition and high standard of medical and public health services.

The year under review was free from any major outbreaks of disease, and the general standard of health, as judged by the number of new sickness benefit claims, in the absence of more reliable morbidity statistics, was very good.

A new problem which presented itself to the Public Health Department was the question of the safe disposal of radioactive waste. It arose out of an application from a local research laboratory for permission to discharge liquid radioactive material into the sewers and to deposit solid waste on to the Council's refuse tip. Under the existing legislation the Local Authority has powers to either give or refuse such permission, and it is the Medical Officer of Health who has to advise on this matter because of the possible hazard to the health of the community. It is true that he can consult the Radiochemical Inspectors of the Ministry of Housing and Local Government or the Radiological Protection Service but he must be able to speak to them with a sound basic knowledge of the subject. It also falls upon him to translate scientific matters into everyday language for his lay committee and for the population in general. Even after the Radioactive Substances Act, 1960, comes into force and powers to authorize the disposal of radioactive waste are vested in the Minister of Housing and Local Government and the Minister of Agriculture Fisheries and Food, the Local Authority concerned will have to be consulted, and they will turn to their Medical Officer for advice. Unfortunately, the great majority of Medical Officers of Health have so far had very little opportunity to acquire the necessary knowledge about the public health aspects of ionizing radiations and there still does not appear to be any government programme for their training.

The staff of the Public Health Department has coped extremely well with the ever-increasing work caused by the steady expansion of the town and its population. In particular, the detailed survey of most properties in Harlow's first Smoke Control Area has been a considerable additional burden. I should like to take this opportunity to express my appreciation of their excellent service. I also wish to acknowledge the ready help and co-operation received from other departments of the Council and from various organizations and individuals.

The Public Health Committee and the Council have continued to give me their full support and have thus made many of my tasks much easier.

I am,

Your obedient Servant,

I. ASH, M.D., D.P.H.,

Medical Officer of Health.

Netteswell Hall,
Harlow, Essex.

31st August, 1961.

SECTION "A" - TEXT

ADMINISTRATION AND PERSONNEL

In accordance with a resolution of the Council, the Medical Officer of Health moved in July into premises provided for him in Harlow. Prior to that he only had an office in Epping which was administered by the Medical Services (Administration) Joint Committee consisting of representatives of the Epping and Harlow Urban District Councils and the Epping and Ongar Rural District Council.

Although over 72% of the Medical Officer of Health's County and County District work was centred on Harlow, the Epping and Ongar Rural District Council did not agree to his joint office being transferred to this town and insisted on him having an office on their premises in Epping. The result of this is that the Medical Officer of Health has now to divide his time between two completely separate offices, one in this town exclusively for the Harlow Urban District Council and the other in Epping for the Epping Urban and the Epping and Ongar Rural District Councils. Because of these changes there was no longer any reason for the continuation of the Medical Services (Administration) Joint Committee and it was consequently dissolved.

The establishment of an office in Harlow took place at the same time as the move of the whole Public Health Department to that part of Netteswell Hall which had been vacated by the Clerk of the Council. The new premises, situated in pleasant surroundings, are spacious, adequately furnished and well-equipped. The department is now fully integrated and the Medical Officer of Health is in a better position to supervise all the public health services for which he is statutorily responsible to the Council and to the Minister of Health.

The reorganization and move of the Public Health Department coincided with the retirement of Mr. H. J. Heeley, the Chief Public Health Inspector. He had forty years of service in Local Government and thirty-five of these were spent in this area. Mr. Heeley joined the then Epping Rural District Council in 1925 and when Harlow Urban District Council was formed in April, 1955, he became its first Chief Public Health Inspector. He brought with him not only considerable experience in public health but also intimate knowledge of the local conditions, both of which he used to good effect.

Mr. H. L. Hughes, formerly Deputy Chief Public Health Inspector of the Borough of Walthamstow, has succeeded Mr. Heeley. He has quickly settled in his new post and has gained the confidence and respect of all the members of the Public Health Department.

Other changes in the Department included the appointment of Mrs. V. Lemon as the Medical Officer of Health's Personal Administrative Assistant. She held a similar position in his Epping Office.

Miss J. Cleghorn, Junior Clerk, resigned after only six months' service and was replaced by Miss J. Rodwell.

Finally, Mr. H. C. Reeve, the Additional Public Health Inspector, obtained in October the Diploma of the Royal Society of Health for Smoke Inspectors.

COMMENTS ON VITAL STATISTICS

Population

According to the Registrar General's estimate, the population of the town increased by only 3,750 in the past twelve months and at mid-year was 49,000. This is the smallest annual increase so far recorded, and was due mainly to a decline in inward migration, though the falling birth rate has also been a contributory factor.

The table overleaf shows that the excess of births over deaths represents a relatively small percentage of the total increase of population. Nevertheless, this percentage has been steadily going up over the past years whilst at the same time

the share in the increase attributable to migration has been falling.

| | <u>1956</u> | <u>1957</u> | <u>1958</u> | <u>1959</u> | <u>1960</u> |
|--|-------------|-------------|-------------|-------------|-------------|
| Population | 28,830 | 35,690 | 40,890 | 45,250 | 49,000 |
| Numerical increase ... | 5,170 | 5,860 | 5,200 | 4,360 | 3,750 |
| % of increase due to natural increase | 16.2 | 17.0 | 22.3 | 26.6 | 31.4 |
| % of increase due to migration | 83.8 | 83.0 | 77.7 | 73.4 | 68.6 |

Births

Mention has already been made of the declining birth rate. The crude rate has fallen from 33.9 per 1,000 population in 1956 to 27.8 in the year under review. This decline is also reflected in the adjusted (standardised) rate which is now very close to that for England and Wales.

| | <u>1956</u> | <u>1957</u> | <u>1958</u> | <u>1959</u> | <u>1960</u> |
|-------------------------|-------------|-------------|-------------|-------------|-------------|
| Crude birth rate | 32.9 | 32.3 | 32.7 | 29.8 | 27.8 |
| Adjusted birth rate ... | 21.7 | 21.0 | 20.9 | 19.1 | 17.8 |
| England and Wales ... | 15.7 | 16.1 | 16.4 | 16.5 | 17.1 |

The percentage of illegitimate births was lower than in the previous years. The number of still births, on the other hand, increased but their rate per 1,000 births was still very much lower than the national one. Only one of the still-born infants was illegitimate.

Deaths

It is most gratifying to report a steady and significant decline in the total crude death rate as well as in the infant and (except for 1959) in the neonatal mortality rates.

This is shown in the following table:—

| | <u>1956</u> | <u>1957</u> | <u>1958</u> | <u>1959</u> | <u>1960</u> |
|---|-------------|-------------|-------------|-------------|-------------|
| Crude death rate per 1,000 population | 5.0 | 4.3 | 4.3 | 4.1 | 3.8 |
| Infant mortality rate per 1,000 live births ... | 23.4 | 22.2 | 20.2 | 19.3 | 12.4 |
| Neonatal mortality rate per 1,000 live births ... | 15.3 | 14.7 | 13.5 | 15.6 | 6.6 |

The figures for 1960 are very low indeed and it may not be possible to maintain them at this level in the future.

The average age at death was 56.9 years (males 53.3 years; females 60.6 years). As in the past, this somewhat low age is due to the fact that the mean is influenced by a relatively large number of deaths at one extreme of the age scale (17 deaths under one year). A more accurate picture is, therefore, presented by the median age at death which was 62.5 years (males 55.5 years; females 76.4 years). The considerably higher age at which women died as compared with men conforms with the general trend in the country.

Amongst the causes of death, coronary disease again held first place (19% of all deaths). The average age of the 36 persons who died from it was 59.9 years (males 57.7 years, females 65.8 years). Coronary disease was followed in order of frequency by other heart diseases (9.5%), vascular lesions of the nervous system (9.5%) and cancer of the lung (6.5%). The number of persons who died from the latter was 12, the same as in the previous year, and the average age at death was 63.1 years (males 62 years; females 68.5 years). Of the four cases of death from

accidents other than motor vehicle accidents, all were females. Their ages ranged from two weeks to fifty-five years.

Seventeen infants died before reaching the age of 1 year and 9 of them were less than 4 weeks old. Of these, 3 were premature, 2 had congenital malformations, 3 died of cerebral haemorrhage and 1 of asphyxia from inspired vomit.

COMMENTS ON COMMUNICABLE DISEASES

Harlow again had a year without any outbreaks of serious disease. It is particularly worth noting that there was not a single case of poliomyelitis. This can be attributed to a high state of immunity against the disease, produced by an intensive vaccination programme.

Whilst 1960 was an off-peak year for measles, the number of reported cases of whooping cough was double that in 1959. It is doubtful, however, how much reliance can be placed on notifications because, as with measles, if there are several cases in one family a doctor is often called only to the first one, and the others are therefore not reported.

All other communicable diseases showed a decline of varying degree over the previous year, with the exception of infective hepatitis, of which there were 29 cases compared with 4 in 1959. This is a disease which is extremely difficult to control because of its long incubation period and still rather obscure mode of transmission.

Whenever warranted, the necessary preventive measures, such as exclusion from school or work, were taken to limit the spread of communicable diseases.

Tuberculosis

In the course of the year 24 new cases of tuberculosis (20 pulmonary, 4 non-pulmonary) were notified. Although the incidence rate per 1,000 population was not excessive, concern was caused by the fact that many of the persons affected were young and in some of them the disease was far advanced and affected both lungs. An effort was, therefore, made to arrange an early mass radiography survey of the population but the Chest X-ray Unit in whose area Harlow lies was fully booked and could not bring forward their visit which was due in the following spring. Plans were, therefore, made for an intensive campaign in May, 1961, and for this purpose the help of an additional mass X-ray Unit was secured.

During the year under review 53 old and known cases of tuberculosis came to reside in the town. They were all notified to the Chest Clinic and were placed under observation. During the same period 33 cases were removed from the register for various reasons so that at the end of the year the tuberculosis register had 428 names—44 more than at the end of 1959.

PROBLEM FAMILIES

The Committee for the Co-ordination of Prevention of Break-up of Families continued to meet at quarterly intervals. It dealt with three old cases brought forward from the previous year and with eight new ones. Usually arrears of rent and consequent danger of eviction caused these families to be brought to the attention of the Committee but their financial difficulties were only a symptom of underlying serious mental, emotional and social inadequacy. In some of these cases the family had already broken up or was in danger of doing so. At the end of the year three of the eleven families were still under active supervision. Four cases were closed because of considerably improved conditions and three others because the families refused to accept help or advice of any kind. One family left the district.

CARE OF OLD PEOPLE

Three old people came to the notice of the Public Health Department as being in need of help. In one case the person concerned had to be removed urgently to an old people's home and in another admission to hospital was necessary. The third case concerned an old lady who, although physically fit for her age, was somewhat mentally confused, could not get on with her neighbours and had difficulty in looking after her money. The Development Corporation transferred her to more suitable premises, and the Health Visitor of the district helped her to manage her affairs.

Supervision of another old lady whose case was mentioned in a previous report continued throughout the year.

The Harlow and District Old People's Association continued to give assistance to the aged people of the town. Although they stopped the provision of meals because of lack of demand, and the chiropody service was taken over by the Local Health Authority, their activities did not decrease. Funds no longer required for meals were used to provide recreation and holidays. Many volunteers helped with gardening, miscellaneous repairs and other tasks which the old people could not do themselves. The Association also succeeded in arranging transport to old people's clubs for those who otherwise would not have been able to make their own way there.

MEDICAL EXAMINATION OF COUNCIL STAFF

The continuously expanding services of the Council necessitated the employment of more officers and workmen, all of whom had to be medically examined. The table below shows how the number of staff medical examinations has increased in the last five years:—

| <u>1956</u> | <u>1957</u> | <u>1958</u> | <u>1959</u> | <u>1960</u> |
|-------------|-------------|-------------|-------------|-------------|
| 29 | 50 | 50 | 84 | 115 |

Of the 115 persons examined in the course of the year, 95 were fit and were recommended for admission to the Superannuation and/or Sick Pay Scheme. In the case of 10 persons reservations were made as to certain types of employment, and two were referred for further examinations in from six to twelve months' time. One other, a registered disabled person, was found to be fit except for disabilities for which he was registered, and 7 were found altogether unfit for employment.

HEALTH EDUCATION

The activities of the Public Health Department in health education continued throughout the year.

An attractive exhibit on home safety was prepared for the Crime, Accident and Fire Prevention Exhibition organized by the Essex County Constabulary and held at Stone Cross Hall in March. This exhibition had a fairly good attendance but a substantial proportion of visitors, especially in the younger age groups, was apparently more interested in the stands dealing with crime than in those showing how to prevent accidents.

In July another exhibition was arranged in connexion with the official opening of the new Town Hall and here all aspects of the work of the Public Health Department were illustrated by means of photographs, charts, posters and three-dimensional models.

Health education was also carried on by means of posters dealing with various health subjects and through the daily contact which the members of the Public Health Department had with the public.

The Accident Prevention Sub-Committee met at regular intervals and took an

active part in the "Check that Fall," "Lock Away Dangers in the Home" and "Water Safety" campaigns promoted by the Royal Society for the Prevention of Accidents. One of the window displays illustrating the danger to small children of accidental poisoning was considered by some members of the public as being too morbid. Their complaints probably proved that the message had struck home.

Further efforts were made to educate the general public and particularly employees of food shops and catering establishments in food hygiene. The Chief Public Health Inspector gave a talk on the subject to the staff of the local biscuit factory and plans have been made for a course for food handlers to be held in the Autumn of 1961. This will be in conjunction with a food hygiene exhibition.

NEW LEGISLATION

In 1960 several Acts of Parliament having a bearing on public health received Royal Assent, and a number of Regulations and Orders made under existing Acts came into force. Only those which directly affect Harlow are listed below. It will be noted that the Regulations made under the Mental Health Act, 1959, have been omitted despite their obvious importance to all. This is because Harlow is not a Local Health Authority and has, therefore, no mental health functions or responsibilities.

Acts

- Noise Abatement Act, 1960.
- Oil Burners (Standards) Act, 1960.
- Caravan Sites and Control of Development Act, 1960.
- Radioactive Substances Act, 1960.

Regulations and Orders

- The Skimmed Milk with Non-Milk Fat Regulations, 1960.
- Food Hygiene (General) Regulations, 1960.
- Milk (Special Designation) Regulations, 1960.
- Arsenic in Food (Amendment) Regulations, 1960.
- Registration (Birth, Still Births, Deaths and Marriages) Amendment Regulations, 1960.
- Public Health (Infectious Diseases) Amendment Regulations, 1960.
- Factories (Fire Certificate Application) Order, 1960.

It is not possible in the context of a report such as this to comment on all new legislation, but mention must be made of the Noise Abatement Act, which is the first attempt made to come to grips with the ever-increasing problem of noise in an industrial society. The future will show whether the provisions of this Act are adequate to achieve the desired results.

The Caravan Sites and Control of Development Act gives Local Authorities more powers to control caravan sites both from a planning and a public health aspect. Although this Act is of great importance to the country in general, Harlow, for reasons stated elsewhere, is little affected by it.

The Radioactive Substances Act has received Royal Assent but is not expected to come into force before 1962. It regulates the keeping and use of radioactive materials and makes provision as to the disposal and accumulation of radioactive waste.

THE HEALTH SERVICES ADMINISTERED BY THE ESSEX COUNTY COUNCIL

The Essex County Council administers the "personal" health services through the Forest Health Sub-Committee and the Forest Educational Executive. All

statistical data and other information concerning these services have been supplied by Dr. F. G. Brown, the Area and Divisional Medical Officer.

Attendances at the Ante-Natal and Child Welfare Clinics increased by almost 5% in comparison with the previous year, although there were only 1.5% more births. Detailed figures are given in the statistical section.

The resignation of several Health Visitors and the difficulty experienced in replacing them is reflected in the drop in the number of visits made. Nevertheless, through judicious selection of cases requiring the assistance of the Health Visitors it was possible to maintain neo-natal care at a high level.

The domiciliary midwifery service continued to be fully stretched. Home confinements obviated not only a very large number of hospital admissions but enabled the parturients to remain in their more natural and pleasant family surroundings. This, of course, did not generally apply to first and complicated confinements which received the necessary hospital care.

Very considerable help to the General Practitioners was given by the District Nurses, and the Domestic Help Service also greatly contributed to the maintenance of health in the district.

The immunization programme was successfully continued throughout the year, the General Practitioners playing the major part in it. The fall in the number of vaccinations against poliomyelitis was anticipated, since a large number of children and young persons had already been immunized as the result of major efforts made in previous years.

The School Health Service played a necessary complementary role in the general provision of health services. The modified scheme of medical inspections referred to in the previous Report enabled the School Medical Officers to devote more time to children with suspected or definite health defects. A number of them, mainly physically or mentally handicapped pupils requiring special educational treatment, were seen at the School Clinics at Addison House and Nuffield House.

The Orthopaedic, Physiotherapy, Ophthalmic, Orthoptic, Speech Therapy and Child Guidance Clinics were fully occupied. In fact, it was necessary to increase the number of sessions of the Physiotherapist and additional sessions were also held at the Enuresis Clinic in order to reduce the long waiting list of patients.

Tuberculin testing of school entrants continued in all infants' schools and over 70% of parents gave their consent to the test. However, the percentage of parents of secondary school children who agreed to B.C.G. Vaccination was very disappointing (49.4%) and, as in the previous year, was the lowest in the Forest Division.

Under the auspices of the Ministry of Health a five year dental health education campaign was started in the schools. It consists of exhibitions, film shows, display of posters and talks. A Dental Officer seconded from the Ministry has carried out dental inspections of a cross section of school children of various age groups and these will be re-examined in due course to assess the effectiveness of the campaign.

GENERAL PROVISION OF MEDICAL SERVICES

There have been no important changes in the services provided under Parts II and IV of the National Health Service Act. The General Practitioners' coverage remained adequate although two of the doctors in Old Harlow gave up their independent practices, one through retirement, the other on leaving the district.

The building of the first stage of the hospital was behind schedule and was not expected to be completed before the spring of 1961. It will have at first only Out-Patient, Radiology and Physiotherapy Departments.

The excellent co-operation between the staff of the Honey Lane Hospital, Waltham Abbey, where most of the infectious disease cases were treated, and the Public Health Department continued throughout the year. A number of

infectious disease beds at that hospital were allocated for other purposes because of the falling demand for them.

The Pathological Laboratory of St. Margaret's Hospital and the Public Health Laboratory Service continued to give very great help to the Department. The Counties Public Health Laboratories undertook the examination of samples of cooked meats and frozen food, an aspect of food hygiene in which the Chief Public Health Inspector has a particular interest.

SANITARY CIRCUMSTANCES AND INSPECTIONS

The Chief Public Health Inspector reports as follows:—

Water Supply

On 1st April, 1960, the Herts and Essex Water Company, which had been providing this area with water, joined with several other smaller water undertakers to form the new Lee Valley Water Company. This change was made largely for administrative purposes and follows the national trend for the amalgamation of small water companies.

The increase in the supply to the district has continued parallel with the development of the area. Bacteriological and chemical examinations of samples taken both by the Company and the Public Health Department have given consistently good results and shown the water to be pure and wholesome.

Bathing Facilities

Samples of water from the three swimming pools in the town were taken regularly during the year. The bad results reported previously from the private pool owned by an industrial firm were obtained again in 1960. Water from the other two pools, at Brays Grove County Secondary School and Broadfield County Primary School, was found on analysis to be of satisfactory quality.

Moves are afoot in a number of schools in the area to provide small open-air swimming pools by the combined efforts of teachers and parents. The next year or so will see several of these pools coming into use. In all cases the Head Teachers are seeking and being given the advice of the Department on the public health aspects of the management of swimming baths. This enterprise by teachers and parents is to be admired and welcomed because it provides the children with additional amenities which otherwise would not be available.

Sewerage

Although 1960 was notorious for its wet summer and autumn, the sewerage system of the town was remarkably free from blockages and also from flooding due to surcharging of the sewers. The only area which gave trouble in this latter respect was The Oxleys in the old part of the town and here, thanks to the remedial work carried out on the sewers by the Engineer and Surveyor's Department, the flooding was minor in character compared with previous years.

An application from a local research laboratory to discharge liquid radioactive waste into the sewers was refused by the Council. This was done because of objections raised by the Lee Conservancy Catchment Board and the Metropolitan Water Board despite the fact that the quantity and activity of the material were well within the internationally accepted safety limits, and the Ministry of Housing and Local Government had also given their unofficial approval.

The Council's policy to eliminate pail closets in the area has continued. Few cases now remain where the Council have powers to enforce connexion to the sewer under the Public Health Act, and the majority of those pail closets left are in agricultural cottages which await extensive modernization or the development of

the area to bring a sewer within reach. Negotiations with the Harlow Development Corporation on such modernisation and conversion schemes has proceeded throughout the year, but actual progress has been rather slow.

Atmospheric Pollution

The apparatus maintained by the Public Health Department for the measurement of atmospheric pollution comprised a daily instrument for smoke and sulphur dioxide, a lead peroxide candle and a deposit gauge—all sited at Netteswell Hall, and a lead peroxide candle at Purford Green County Primary School. In order to achieve a greater accuracy in the assessment of smoke stains from the daily instrument a reflectometer was purchased and has been in use since April, 1960. In addition a portable daily instrument to investigate localized areas of pollution was acquired in November and installed in one of the factories on the Templefields Industrial Estate.

The results obtained with the daily instrument at Netteswell Hall during the year show the usual variation between summer and winter. This can clearly be seen from the graph of the monthly average readings recorded since the instrument was installed, which is reproduced in section "B" of the Report.

The portable daily instrument has not been in operation for a sufficient length of time to enable definite conclusions to be drawn, but it will be of great value to compare the results obtained from the industrial site with those from the residential area around Netteswell Hall. The indications at present are that there is little difference in the smoke concentration but the average concentration of sulphur dioxide on the industrial estate considerably exceeds that recorded at Netteswell Hall. It is likely, of course, that there is a great variation between one point and another in the same industrial area and the instrument will later be re-sited to determine this point.

The readings are reported every month to the Atmospheric Pollution Division of the Department of Scientific and Industrial Research, and are published in a monthly summary of results from places all over the country. From this one can see that Harlow compares very well with other towns.

The Standing Conference of Co-operating Bodies for the Investigation of Atmospheric Pollution which is under the auspices of the Department of Scientific and Industrial Research, and to which the Council appoints representatives, set up a working party to advise on any changes that should be introduced into the present national scheme for measuring and recording pollution. Their report in November draws attention to the limitations of the deposit gauge and the lead peroxide candle and it seems likely that the use of these instruments will be discontinued everywhere.

Work on the preparation of details for the first Smoke Control Area in the district was completed during the year and in November an Order was made and submitted to the Minister for confirmation. It is expected to become operative on November 1st, 1961. The survey of the area showed that the proportion of smokeless fuel users is already high, being in the region of 75%. This is perhaps not surprising since, with few exceptions, all houses are fitted with approved appliances capable of burning coke. The general impression gained from the survey is that the people who already burn smokeless fuel do so because they are convinced that it is cleaner and more efficient, particularly for heating water in a back boiler; they would not think of reverting to coal.

The 25% who still burn bituminous coal generally do so on the ground that hundredweight for hundredweight it is cheaper than coke, or because they have a prejudice against the latter and a desire to see flames in the grate. A few do so because there is some defect in the grate or flue which has thwarted their attempts at burning coke in a satisfactory manner.

Three applications for prior approval of the installation of furnaces under

Section 3 of the Clean Air Act, 1956, were received and granted by the Council. Two of these were in respect of incinerators, and in each case two-stage combustion using an auxiliary fuel was insisted on.

Three complaints about smoke were received. One of these related to nuisance from the burning of refuse; the other two were in connexion with smoke from factory chimneys. All were dealt with satisfactorily.

Plans of new buildings where the installation of furnaces was proposed were examined and the required chimney heights assessed by the staff of the Department using Sutton's Cold Gas Formula.

Housing

Of the 18 applications received for Standard or Discretionary Improvement Grants under the Housing (Financial Provisions) Act, 1958, or the House Purchase and Housing Act, 1959, 15 were granted, 2 refused and 1 withdrawn. This is double the number of applications as compared with the previous year, and indicates that the public are becoming increasingly aware of the availability of such grants. However, the problem of inadequate amenities in pre-1939 houses is far from solved and much progress has yet to be made before it can be said that the provisions made for such grants are having the effect intended by the Government when the legislation was created.

Movable Dwellings

Caravans have not caused any problems because the Harlow Development Corporation and the Harlow Urban District Council own or control most of the land within the boundaries of the town. The new Caravan Sites and Control Development Act will ensure that no difficulties arise in the future.

Two licences were issued under the Act for single caravan sites.

Food

During the year, 53 complaints were received from the public, and in 17 cases proceedings were authorized by the Public Health Committee. All 14 of the cases heard resulted in convictions; three remained to be heard in 1961. The number of complaints from the public about foodstuffs sold out of condition or containing foreign bodies of some sort continues to increase and is proportionately higher than in many London Boroughs and other Urban Districts. This is no doubt due to the concern which the many young families in the town feel for the health of their small children, but it also shows increasing awareness amongst the public of the necessity for maintaining the highest standards of food hygiene and their wish to support the Local Authority's efforts on their behalf. The Public Health Committee have consistently and resolutely enforced the Food and Drugs Act in cases of offences reported by the public. Many Local Authorities do not agree with such a policy and maintain a lenient attitude, authorizing only advice and warning to offenders. A strong policy has, however, much to commend itself. It is fair that all who infringe the law should be treated alike rather than that one of a dozen should be chosen to be made an example of. Moreover, an indignant mother, making a long journey to the Public Health Department with a mouldy pie which was intended for the children's meal, is not easily satisfied with a mere warning to the trader concerned. She may, and usually does, expect the matter to be treated seriously, and failure to do so only lowers her respect for the Local Authority. There is no doubt that the Public Health Committee, by taking a strong line of action in all such offences under the Food and Drugs Act, is meeting the wishes of the public in Harlow.

Routine sampling of cooked meats was introduced in October. Samples are

purchased from the display in retailers' premises and subjected to a laboratory examination to determine their bacteriological condition at the time of sale. This sampling programme has the object of making retailers aware of the difficulties of handling cooked meats, and of the need to adopt a strict code of hygiene. As these meats are particularly liable to contamination and undergo no further cooking before consumption, they require more careful attention than any other commodity handled by butchers and grocers. Mouldy meat pies have been all too frequently the subject of complaints which invariably have been followed by legal proceedings and heavy fines. In all cases the pies concerned were grossly over-age at the time of sale, and the complaints could have been avoided by reasonable care on the part of the sellers. In the code of practice on the handling of cooked meats, which has been distributed by this Department, the retailers are advised that at all times they should be aware of the age of the meat products on sale in their shops, and are recommended to mark the wrapper or tray in a simple way which will indicate to the staff the date of delivery of that particular product. In spite of this recommendation many retailers still do not take this precaution, and still fail to realize that they have an absolute responsibility in the sale of such perishable products.

As the population of the town considerably exceeded the legally required minimum of 40,000, the Council decided to apply to the Minister to be designated as a Food and Drugs Authority within the meaning of the Food and Drugs Act, 1955. Unfortunately the application met with a legal hitch because the relevant section of the Act is so worded that it was not possible to overcome the difficulty that at the time of the last census (1951) the Urban District did not yet exist. The Council, therefore, asked the County Council for the delegation to Harlow of their powers and functions under the Food and Drugs Act, 1955. It is hoped to receive this delegation some time in 1961.

Ice-Cream Premises

Regular sampling of ice-cream from registered premises and itinerant vendors was carried out as usual. The general standard of this product sold in the area remains very high. A feature worth noting has been the increase in the number of ice-cream vans retailing in the area, and few sections of the town are free from the succession of visiting salesmen, each with his distinctive signature tune sounded through an amplifier on the vehicle. The Noise Abatement Act of 1960 has eliminated the worst of the abuses caused by chimes on vans. Prior to this the ever-mounting competition among the vendors often resulted in the chiming of bells up to 10 p.m.

One of the itinerant retailers was reported to the Public Health Committee for failing to comply with the Food Hygiene Regulations and legal proceedings were authorized. The Public Health Department will continue to carry out spot checks of all ice-cream vehicles to ensure that they are clean and equipped with all items required by the Regulations, including hot water, soap and towels.

Milk and Dairies

There are six registered dairies in the town, and all of these are distribution depots. The Milk (Special Designation) Regulations, 1960, transferred the powers to licence dealers in designated milk from the Local Authority to the Food and Drugs Authority, in this instance from the Harlow Urban District Council to the Essex County Council. This change in procedure is described by the Ministry of Agriculture Fisheries and Food in the accompanying memorandum to the Regulations as "designed primarily to reduce the amount of routine work involved in the administration of the Regulations". In effect it transfers the duties of inspection and licensing of this particular type of food shop which sells milk from the local Public

Health Inspector, who in any case visits all shops regularly, to an Inspector of the Essex County Council who travels some 20 miles to Harlow to do such work. It is difficult to see how this reduces the amount of routine work involved in administration. Indeed, the new arrangement not only results in the duplication of inspections but seems certain to increase the costs of administration; moreover, it removes from the District Council a function which is best administered locally, and which should be subject to the control of the Public Health Committee.

Rodent and Pest Control

In dealing with complaints from the public it could be ascertained that the degree of rat infestation in the district remained very moderate and was mainly of a minor surface nature.

Two new pest control services were authorized by the Council: the destruction of wasp nests and the disinfestation of dwellings. The former is carried out free of charge but during the year under review the demand for this service was not great because the bad weather in the summer did not provide favourable conditions for wasps.

The treatment of houses infested with insects is carried out by the Rodent Operative and a charge of 10s. per room is levied for this service.

Factories

The number of factories in the area continues to increase as new ones are added to the industrial estates. Generally speaking the standard of sanitary conveniences, canteens and other amenities provided for the workers is very high.

During the year the functions relating to the control of the means of escape from fire were transferred from the County District Councils to the County's Fire Department. This was in accordance with the provisions of the Factories Act, 1959. Although Harlow Urban District Council have in past years always properly carried out their responsibilities in enforcing these provisions it cannot be disputed that the Fire Service is the competent authority on fire protection of every kind.

SECTION "B" – STATISTICS

(Figures in parenthesis refer to 1959)

GENERAL DATA

| | | |
|---|----------|------------|
| Area (in acres) | 6,313 | (6,313) |
| Number of houses (mid-year) | 14,670 | (13,745) |
| Number of houses per acre (average) | 2.3 | (2.2) |
| Number of persons per acre (average) | 7.7 | (7.2) |
| Number of persons per house (average) | 3.3 | (3.2) |
| Ratable value (mid-year) | £783,352 | (£714,228) |
| Product of a penny rate (financial year 1960/61) | £3,330 | (£2,950) |
| The rate in the pound (financial year 1960/61) | 23/4d. | (22/2d.) |

POPULATION

| | | |
|---|--------|----------|
| Resident population (Registrar General's mid-year estimate) | 49,000 | (45,250) |
| Increase over the previous year | 3,750 | (4,360) |
| Proportion of increase due to excess of births over deaths | 1,176 | (1,162) |
| Balance of inward migration | 2,574 | (3,198) |

BIRTHS

| | M. | F |
|---|-------------|-----------|
| (a) LIVE BIRTHS | | |
| Legitimate | 663 (659) | 680 (663) |
| Illegitimate | 11 (10) | 11 (15) |
| Total | 674 (669) | 691 (678) |
| Crude rate per 1,000 population | 27.8 (29.8) | |
| Adjusted rate " " " | 17.8 (19.1) | |
| England and Wales " " " | 17.1 (16.5) | |
| (b) ILLEGITIMATE LIVE BIRTHS PER CENT OF | | |
| TOTAL LIVE BIRTHS | 1.6 (1.8) | |
| " " " " England & Wales | 5.4 (5.1) | |
| (c) STILL BIRTHS | | |
| Legitimate | 15 (14) | 8 (6) |
| Illegitimate | — (—) | 1 (1) |
| Total | 15 (14) | 9 (7) |
| Rate per 1,000 total live and still births ... | 17.3 (15.3) | |
| " " " " England & Wales | 19.8 (21.0) | |
| (d) TOTAL BIRTHS (live and still) | | |
| Legitimate | 678 (673) | 688 (669) |
| Illegitimate | 11 (10) | 12 (16) |
| Total | 689 (683) | 700 (685) |

DEATHS

| | M. | F. |
|---|-------------|---------|
| (a) ALL AGES | 99 (95) | 90 (90) |
| Crude rate per 1,000 population | 3.8 (4.1) | |
| Adjusted rate " " " | 10.1 (10.8) | |
| England and Wales " " " | 11.5 (11.6) | |
| (b) INFANTS UNDER 1 YEAR OF AGE | | |
| (i) Legitimate | 9 (9) | 8 (17) |
| Legitimate infant mortality rate per 1,000 legitimate live births | 12.6 (19.7) | |
| " " " " England & Wales | * (22.0) | |
| (ii) Illegitimate | — (—) | — (—) |
| Illegitimate infant mortality rate per 1,000 illegitimate live births | — (—) | |
| " " " " England & Wales | * ((27.0) | |
| (iii) Total Infant Mortality Rate Per 1,000 live births | 12.4 (19.3) | |
| " " " " England & Wales | 21.9 (22.2) | |
| (c) NEONATAL DEATHS (infants under 4 weeks of age) | | |
| (i) Legitimate | 3 (9) | 6 (12) |
| (ii) Illegitimate | — (—) | — (—) |
| Total | 3 (9) | 6 (12) |
| Neonatal mortality rate per 1,000 live births | 6.6 (15.6) | |
| " " " " England & Wales | 15.6 (15.8) | |
| * Figures not available. | | |
| (d) EARLY NEONATAL DEATHS (infants under 1 week of age) | | |
| (i) Legitimate | 3 (8) | 3 (12) |
| (ii) Illegitimate | — (—) | — (—) |
| Total | 3 (8) | 3 (12) |
| Early neonatal mortality rate for 1,000 live births | 4.4 (14.8) | |
| " " " " England & Wales | 13.4 (13.3) | |
| (e) PERINATAL MORTALITY (still births and deaths under 1 week combined, per 1,000 live and still births) | 21.6 (30.0) | |
| " " " " England & Wales | 32.9 (34.2) | |
| (f) MATERNAL DEATHS (including abortion) | | |
| Maternal mortality rate per 1,000 live and still births | — (—) | |
| " " " " England & Wales | 0.4 (0.4) | |

Causes of Death

| | <i>Male</i> | <i>Female</i> | <i>Total</i> |
|---|-------------|---------------|--------------|
| All Causes | 99 (95) | 90 (90) | 189 (185) |
| 1. Tuberculosis, respiratory | — (—) | — (—) | — (—) |
| 2. Tuberculosis, other | 1 (—) | — (—) | 1 (—) |
| 3. Syphilitic diseases | — (1) | — (—) | — (1) |
| 4. Diphtheria | — (—) | — (—) | — (—) |
| 5. Whooping cough | — (—) | 1 (—) | 1 (—) |
| 6. Meningococcal infections | — (1) | — (—) | — (1) |
| 7. Acute poliomyelitis | — (—) | — (—) | — (—) |
| 8. Measles | — (—) | — (—) | — (—) |
| 9. Other infective and parasitic diseases | — (—) | — (—) | — (—) |
| 10. Malignant neoplasm, stomach ... | 2 (4) | 2 (3) | 4 (7) |
| 11. Malignant neoplasm, lung, bronchus | 10 (10) | 2 (2) | 12 (12) |
| 12. Malignant neoplasm, breast ... | — (—) | 5 (3) | 5 (3) |
| 13. Malignant neoplasm, uterus ... | — (—) | 1 (—) | 1 (—) |
| 14. Other malignant and lymphatic neoplasms | 12 (6) | 5 (6) | 17 (12) |
| 15. Leukaemia, aleukaemia | 3 (—) | — (—) | 3 (—) |
| 16. Diabetes | — (—) | — (2) | — (2) |
| 17. Vascular lesions of nervous system | 5 (4) | 13 (6) | 18 (10) |
| 18. Coronary disease, angina | 26 (14) | 10 (14) | 36 (28) |
| 19. Hypertension with heart disease ... | 1 (1) | 1 (2) | 2 (3) |
| 20. Other heart disease | 6 (10) | 12 (12) | 18 (22) |
| 21. Other circulatory disease | 2 (4) | 4 (3) | 6 (7) |
| 22. Influenza | — (4) | — (—) | — (4) |
| 23. Pneumonia | 4 (5) | 6 (7) | 10 (12) |
| 24. Bronchitis | 5 (6) | 2 (1) | 7 (7) |
| 25. Other diseases of respiratory system | 1 (—) | 1 (—) | 2 (—) |
| 26. Ulcer of stomach and duodenum ... | 2 (—) | — (1) | 2 (1) |
| 27. Gastritis, enteritis and diarrhoea ... | 1 (—) | 2 (—) | 3 (—) |
| 28. Nephritis and nephrosis | — (—) | — (1) | — (1) |
| 29. Hyperplasia of prostate | 3 (—) | — (—) | 3 (—) |
| 30. Pregnancy, childbirth and abortion ... | — (—) | — (—) | — (—) |
| 31. Congenital malformations | 4 (2) | 5 (3) | 9 (5) |
| 32. Other defined and ill-defined diseases | 6 (14) | 11 (20) | 17 (34) |
| 33. Motor vehicle accidents | 3 (5) | — (—) | 3 (5) |
| 34. All other accidents | — (3) | 4 (4) | 4 (7) |
| 35. Suicides | 2 (1) | 2 (—) | 4 (1) |
| 36. Homicide and operations of war ... | — (—) | 1 (—) | 1 (—) |

Communicable Diseases (except Tuberculosis)

| | Notifications according to age groups | | | | | | | | | | | Total | Harlow | Incidence rate per 10,000 population England & Wales | | |
|--|---------------------------------------|----|----|----|----|-----|-----|-----|-----|-----|-----|-------|--------|---|----------------|------------|
| | 0- | 1- | 2- | 3- | 4- | 5- | 10- | 15- | 25- | 45- | 65- | | | | Age unknown | |
| Scarlet Fever ... | 1 | 2 | 12 | 19 | 15 | 72 | 15 | 1 | 1 | — | — | — | 138 | 28.2 | 7.9 | |
| Whooping cough ... | 20 | 20 | 25 | 17 | 19 | 68 | 12 | 4 | 2 | — | — | — | 187 | 38.2 | 10.5 | |
| Poliomyelitis-paralytic non-paralytic | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | .06 .02 |
| Measles ... | 7 | 29 | 58 | 50 | 47 | 133 | 1 | — | 1 | — | — | — | 326 | 66.5 | 34.8 | |
| Dysentery ... | — | 1 | 1 | 2 | 1 | 5 | — | 1 | 4 | 2 | — | — | 17 | 3.5 | 9.5 | |
| Diphtheria ... | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | .01 |
| Meningococcal infection | — | — | — | — | — | 1 | — | — | — | — | — | — | 1 | .2 | .14 | |
| Acute pneumonia ... | 1 | — | 1 | — | — | 1 | 1 | 1 | 2 | 2 | 1 | 1 | 11 | 2.2 | 3.2 | |
| Paratyphoid ... | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | .05 |
| Erysipelas ... | — | — | — | — | — | — | — | 1 | — | 4 | — | 1 | 6 | 1.2 | .07 | |
| Food Poisoning ... | — | — | 3 | 2 | — | 1 | 1 | 5 | 2 | 1 | — | — | 15 | 3.1 | 1.7 | |
| Infective hepatitis ... | — | — | — | — | — | 17 | 2 | 4 | 6 | — | — | — | 29 | 5.9 | * | |
| Puerperal pyrexia ... | — | — | — | — | — | — | — | — | 1 | — | — | — | 1 | .2 | * | |
| Acute encephalitis: infective ... | — | — | — | — | — | — | — | — | — | — | — | — | — | — | — | .03 |
| post-infectious ... | — | — | — | — | — | 1 | — | — | 1 | — | — | — | 2 | .4 | .02 | |

* Figures not available.

B.C.G. Vaccination

| | | | | | | | |
|--|-----|-----|-----|-----|-----|------|--------|
| Number to whom offered | ... | ... | ... | ... | ... | 540 | (739) |
| Number given tuberculin test after parents' consent obtained | | | | | | 267 | (423) |
| Percentage | ... | ... | ... | ... | ... | 49.4 | (57.2) |
| Number who gave a positive reaction to tuberculin test | ... | | | | | 19 | (35) |
| Number vaccinated with B.C.G. | ... | ... | ... | ... | | 242 | (342) |

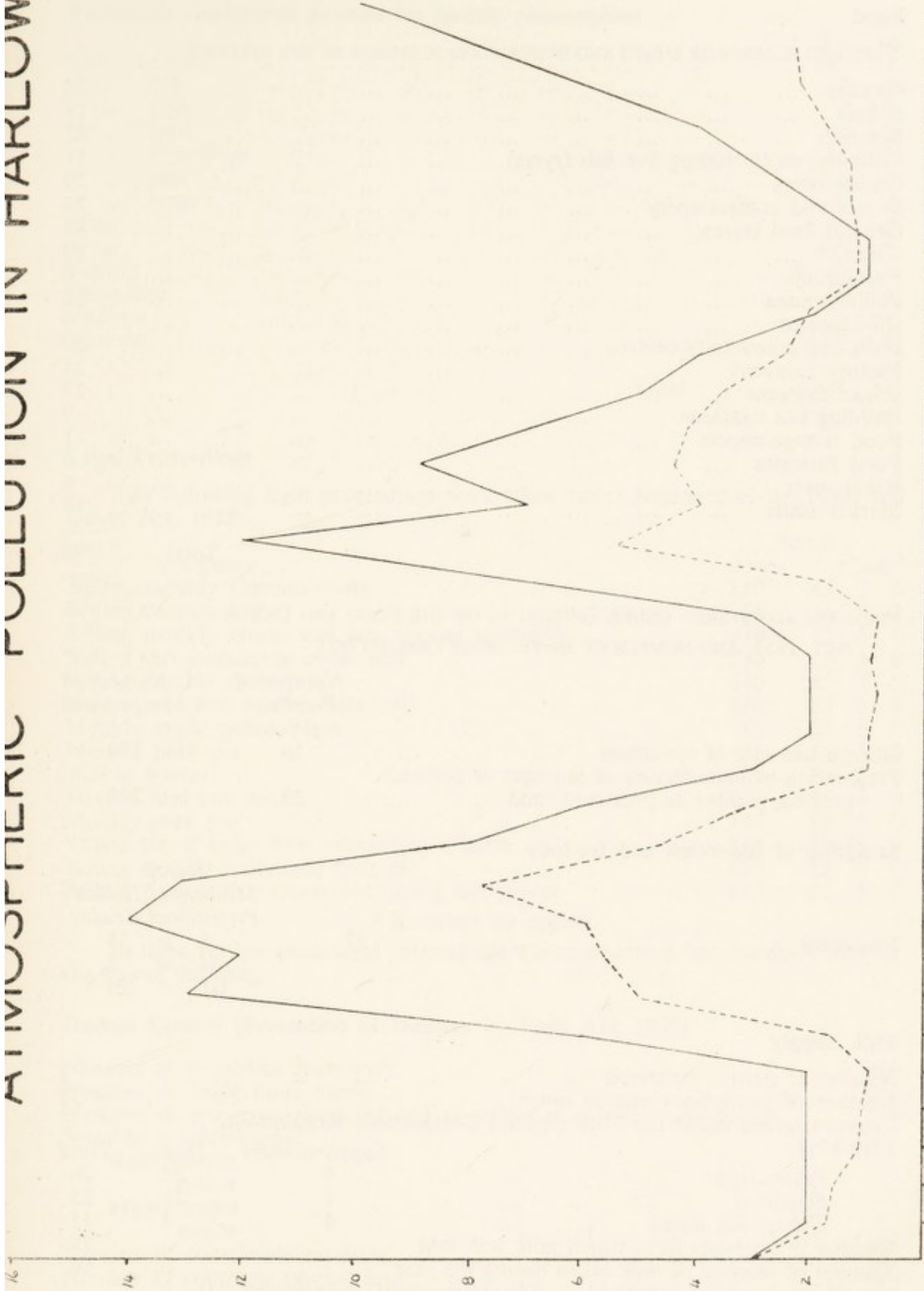
SICKNESS BENEFIT CLAIMS

Table showing the monthly number of new claims submitted to the Harlow Office of the Ministry of Pensions and National Insurance

| <i>Month</i> | | | | | | | | | | <i>Claims</i> | |
|--------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|---------------|---------|
| January | ... | ... | ... | ... | ... | ... | ... | ... | ... | 755 | (665) |
| February | ... | ... | ... | ... | ... | ... | ... | ... | ... | 712 | (1,331) |
| March | ... | ... | ... | ... | ... | ... | ... | ... | ... | 832 | (1,203) |
| April | ... | ... | ... | ... | ... | ... | ... | ... | ... | 472 | (527) |
| May | ... | ... | ... | ... | ... | ... | ... | ... | ... | 581 | (438) |
| June | ... | ... | ... | ... | ... | ... | ... | ... | ... | 494 | (694) |
| July | ... | ... | ... | ... | ... | ... | ... | ... | ... | 433 | (411) |
| August | ... | ... | ... | ... | ... | ... | ... | ... | ... | 505 | (352) |
| September | ... | ... | ... | ... | ... | ... | ... | ... | ... | 454 | (523) |
| October | ... | ... | ... | ... | ... | ... | ... | ... | ... | 661 | (575) |
| November | ... | ... | ... | ... | ... | ... | ... | ... | ... | 806 | (729) |
| December | ... | ... | ... | ... | ... | ... | ... | ... | ... | 583 | (715) |

ATMOSPHERIC POLLUTION IN HARLOW

— Monthly Average Smoke Concentration in Milligrams per 100 cubic metres.
 - - - Monthly Average Sulphur Dioxide Concentration in Parts per 100 million.



Apr. May June July Aug. Sept. Oct. Nov. Dec. Jan. Feb. Mar. April May June July Aug. Sept. Oct. Nov. Dec.

Food

TYPE AND NUMBER OF SHOPS AND OTHER FOOD PREMISES IN THE DISTRICT

| | | | | | | | | | | |
|--|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| Grocers | ... | ... | ... | ... | ... | ... | ... | ... | ... | 38 |
| Bakers | ... | ... | ... | ... | ... | ... | ... | ... | ... | 11 |
| Butchers | ... | ... | ... | ... | ... | ... | ... | ... | ... | 22 |
| Fishmongers (including five fish fryers) | ... | ... | ... | ... | ... | ... | ... | ... | ... | 11 |
| Greengrocers | ... | ... | ... | ... | ... | ... | ... | ... | ... | 20 |
| Sweets and confectionery | ... | ... | ... | ... | ... | ... | ... | ... | ... | 24 |
| General food stores | ... | ... | ... | ... | ... | ... | ... | ... | ... | 24 |
| Cafés | ... | ... | ... | ... | ... | ... | ... | ... | ... | 10 |
| Restaurants | ... | ... | ... | ... | ... | ... | ... | ... | ... | 6 |
| Public houses | ... | ... | ... | ... | ... | ... | ... | ... | ... | 22 |
| Off-Licences | ... | ... | ... | ... | ... | ... | ... | ... | ... | 6 |
| Halls and community centres | ... | ... | ... | ... | ... | ... | ... | ... | ... | 20 |
| Factory canteens | ... | ... | ... | ... | ... | ... | ... | ... | ... | 25 |
| School canteens | ... | ... | ... | ... | ... | ... | ... | ... | ... | 27 |
| Building site canteens | ... | ... | ... | ... | ... | ... | ... | ... | ... | 7 |
| Food storage depots | ... | ... | ... | ... | ... | ... | ... | ... | ... | 1 |
| Food factories | ... | ... | ... | ... | ... | ... | ... | ... | ... | 3 |
| Bakehouses | ... | ... | ... | ... | ... | ... | ... | ... | ... | 4 |
| Market stalls | ... | ... | ... | ... | ... | ... | ... | ... | ... | 17 |
| Total | | | | | | | | | | 298 |

PREMISES REGISTERED UNDER SECTION 16 OF THE FOOD AND DRUGS ACT, 1955, AND NUMBER OF INSPECTIONS CARRIED OUT

| | <i>Number of Premises registered</i> | <i>Number of inspections</i> |
|--|--|----------------------------------|
| Storage and sale of ice-cream | 56 | 280 |
| Preparation or manufacture of sausages or potted, pressed, pickled or preserved food | 27 | 293 |

Sampling of Ice-cream and Ice-lolly

| | <i>Result Ministry of Health's Provisional Grades</i> |
|-----------|---|
| Ice-cream | 37 |
| | I = 35 |
| | II = 2 |
| | III = Nil |

Milk Supply

| | | | | | |
|--|----------------------|---------------|--------------|-----|----|
| Number of dairies registered | ... | ... | ... | ... | 7 |
| Number of inspections carried out | ... | ... | ... | ... | 37 |
| Licences issued under the Milk (Special Designation) Regulations, 1949-1954: | | | | | |
| | <i>Supplementary</i> | <i>Dealer</i> | <i>Total</i> | | |
| Pasteurized | 4 | 22 | 26 | | |
| Sterilized | 4 | 21 | 25 | | |
| Tuberculin tested | 4 | 7 | 11 | | |
| Number of premises from which milk was sold | ... | ... | ... | ... | 25 |
| Number of samples of milk taken during the year | ... | ... | ... | ... | 50 |
| (Pasteurized 23, sterilized 4, tuberculin tested—pasteurized 23) | | | | | |

Foodstuffs condemned as unfit for human consumption

| | lbs. | oz. |
|--------------|--------------|-----------|
| Canned meat | 843 | 11 |
| „ fish | 2 | 0 |
| „ milk | 2 | 7½ |
| „ fruit | 94 | 3½ |
| „ vegetables | 15 | 15 |
| „ jam | 8 | 0 |
| „ soup | 5 | 2 |
| Ham | 19 | 0 |
| Meat | 450 | 8 |
| Poultry | 67 | 0 |
| Chocolate | 15 | 0 |
| Rabbits | 30 | 0 |
| Various | 2 | 7 |
| Total | 1,633 | 14 |

Legal Proceedings

The following legal proceedings were taken under Section 2 of the Food and Drugs Act, 1955:

| <i>Offence</i> | <i>Result</i> | |
|---|---------------|--------------|
| | <i>Fine</i> | <i>Costs</i> |
| Selling mouldy Cornish pasty | £10 | £3 3 0 |
| Selling mouldy loaf | £5 | £5 5 0 |
| Selling mouldy cream and jam sponge sandwich | £10 | £5 5 0 |
| Selling tart containing metal nail | £10 | £5 5 0 |
| Selling mouldy meat pie | £10 | *£5 5 0 |
| Washer and bolt in chocolate lolly | £10 | £5 5 0 |
| Mouldy apple puff | £5 | £5 5 0 |
| Mouldy pork pie | £5 | £5 5 0 |
| Nail in scone | £5 | £5 5 0 |
| Mouldy iced bun round | £25 | £5 5 0 |
| Mouldy pork pie | £20 | £5 5 0 |
| Selling tin of baby food containing a larva | £10 | £10 15 0 |
| Selling mouldy individual fruit pie | £20 | £5 5 0 |
| Selling packet of currants containing live larvae | £10 | £5 5 0 |

* Reversed on appeal

In three further cases legal proceedings were authorized but not dealt with by the end of the year.

Rodent Control (Prevention of Damage by Pests Act, 1949)

| | |
|---|-------|
| Number of properties dealt with | 460 |
| Number of inspections made | 1,051 |
| Number of properties inspected and no evidence of infestation found | 14 |
| Number of infestations: | |
| Rats—major | 1 |
| minor | 136 |
| Mice—major | Nil |
| minor | 74 |
| Number of complaints received | 234 |
| Number of contracts entered into | 69 |
| Number of infestations treated by the Council | 218 |

Factories

FACTORIES ACTS, 1937 AND 1948

(a) Inspections

| | <i>No. on register</i> | <i>Inspections</i> | <i>Written Notices</i> | <i>Occupiers prosecuted</i> |
|--|------------------------|--------------------|------------------------|-----------------------------|
| (i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities | 8 | 11 | — | — |
| (ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority | 117 | 87 | — | — |
| (iii) Other premises in which Section 7 is enforced by the Local Authority (excluding outworkers' premises) | 37 | 19 | — | — |

(b) Cases in which defects were found :

| Particulars | <i>Found</i> | <i>Remedied</i> | <i>Referred to by H.M. Inspector</i> | | <i>Number of prosecutions</i> |
|---|--------------|-----------------|--------------------------------------|----------|-------------------------------|
| Sanitary conveniences (Section 7): | | | | | |
| (a) Insufficient ... | — | — | — | — | — |
| (b) Unsuitable or defective ... | 1 | 1 | — | 1 | — |
| Other offences against the Act (not including offences relating to outwork) ... | 2 | 2 | — | 3 | — |
| | <u>3</u> | <u>3</u> | <u>—</u> | <u>4</u> | <u>—</u> |

(c) Outwork

One hundred and sixty-four outworkers were on the register at 31st December, 1960, and were engaged mainly on work in connection with wearing apparel.

(d) Means of escape from fire

| | |
|------------------------------------|----|
| Certificates issued | 4 |
| Certificates amended | 9 |
| Visits made for the purpose | 71 |

Summary of other work carried out by the Public Health Inspectors

| | | | | |
|--|-----|-----|-----|-------|
| Number of complaints investigated and action taken | ... | ... | ... | 250 |
| Total number of intimation notices served | ... | ... | ... | 51 |
| Number of inspections of food shops | ... | ... | ... | 824 |
| Number of inspections of food premises, including market stalls, itinerants' vans and bakehouses | ... | ... | ... | 1,550 |
| Number of inspections of shops other than food shops | ... | ... | ... | 62 |
| Number of inspections of premises in connexion with duties under the Petroleum (Consolidation) Act, 1928 | ... | ... | ... | 60 |
| Number of inspections of hairdressers' establishments | ... | ... | ... | 14 |
| Number of inspections of swimming pools | ... | ... | ... | 16 |
| Number of inspections of schools—general | ... | ... | ... | 43 |
| Number of inspections in connexion with refuse collection | ... | ... | ... | 21 |
| Number of inspections of drainage | ... | ... | ... | 245 |
| Visits in connexion with infectious diseases | ... | ... | ... | 126 |
| " " " " movable dwellings | ... | ... | ... | 70 |
| " " " " complaints and nuisances (other than housing matters) | ... | ... | ... | 278 |
| Visits in connexion with insect infestations | ... | ... | ... | 120 |
| " " " " Smoke Control Area | ... | ... | ... | 2,500 |
| " " " " other duties under Clean Air Act, 1956 | ... | ... | ... | 76 |
| Number of inspections of places of entertainment | ... | ... | ... | 7 |
| Number of visits in connexion with water supplies | ... | ... | ... | 21 |
| Sundry other visits | ... | ... | ... | 59 |

