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Borough of Haslingden



ANNUAL REPORT

of the

Medical Officer of Health

for the year ending

31st December, 1952

and


THE REPORT

of the

Chief Sanitary Inspector

for the year ending

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HEALTH COMMITTEE

HIS WORSHIP THE MAYOR (ex-officio)

ALDERMAN F. SLATER, J.P. (To May, 1952)

ALDERMAN T. B. HARGREAVES, J.P. (From May, 1952)

ALDERMAN T. BROWN (Chairman)

COUNCILLOR J. W. HOLGATE (Vice-Chairman)

Alderman W. Boyson, J.P.

Councillor G. H. Slater

Alderman W. H. J. Cowpe

*Councillor T. Waller

Councillor J. Entwistle

*Councillor F. Greenwood

Councillor W. J. Everett, C.C.

†Councillor E. Russell

Councillor J. Walsh

†Councillor J. Ratcliffe, J.P.

Councillor A. Bussey

Councillor Mrs. G. M.

Warburton

† Member of Committee to May, 1952

* Member of Committee from May, 1952

STAFF

Town Clerk:

L. M. BURTON

Medical Officer of Health:

C. H. T. WADE, M.D., Ch.B., B.Sc., D.P.H.

Chief Sanitary Inspector:

W. DAWSON, M.R.San.I., M.S.I.A., A.M.Inst.P.C.

Public Health Clerks:

H. Camm

E. Law, (Miss)

August, 1953.

*To the Mayor and Members of the Haslingden
Borough Council*

I have the honour to present the Annual Report for the year 1952 on the health and sanitary conditions of the district.

According to the Registrar General's estimate the population shows a slight decrease to 14,280. The adjusted* birth rate was 14.8 and the adjusted death rate 13.8 per 1,000 of the population.

The corresponding rates for England and Wales were 15.3 and 11.3 respectively. The infant mortality rate of 26 per 1,000 live births was again better than the national rate which was 27.6. There were no maternal deaths.

Infectious disease apart from tuberculosis was limited to scarlet fever, measles and whooping cough and there were no deaths. No cases of diphtheria were reported for the sixth year in succession but parents are reminded that freedom from this disease depends on the protection given by immunisation.

Two outbreaks of smallpox (one in the current year) have occurred in districts not far away and contacts in Haslingden were closely supervised. The protection given by vaccination of babies is being neglected by many parents. The vaccination rate in Haslingden is very low—approximately one in eleven babies were vaccinated in 1952.

Four persons died from pulmonary tuberculosis and there were 11 new cases of the disease and three new cases of non-pulmonary tuberculosis.

Three out of 51 samples of milk were found to contain tuberculous infection and four out of 55 samples did not pass the recognised bacteriological test. There is no doubt

*Adjusted means corrected to a standard population for the purpose of comparison with other districts.

that ordinary raw milk or the "Accredited" variety is liable to contain tuberculous infection from time to time. In October 1954 the sale of such milk will be prohibited by law and in the meantime parents have a simple remedy in their own hands. They can protect the health of their children by refusing to buy untreated raw milk unless it comes from tuberculin tested cattle (T.T. milk). Alternatively they can buy heat treated milk, i.e. pasteurised or sterilized milk.

Continued attention has been given to foodshops and food producing premises. There were no cases of food poisoning reported during the year.

The public mains water supply was generally satisfactory. Two out of 93 samples were bacteriologically below standard. A very different state of affairs was found on the examination of private water supplies. Fifty per cent of the samples (20 out of 41 samples) were bacteriologically unsatisfactory. Wherever possible connection to the public mains supply is recommended.

Forty three new houses were completed during the year and 110 houses were in hand at the end of the year. A really determined effort is required to deal with the housing situation which is without doubt the biggest health and social problem of the Borough. At least 500 houses are required particularly of the two and three bedroom type. It is not considered that there is any real overcrowding but there is a shortage of separate houses of modern construction containing four rooms with fixed bath, freshwater closet, and adequate cooking facilities.

There are over 250 back to back houses and nearly 100 houses built into the earth and a similar number of other houses without through ventilation.

Separate closet accommodation for every house is particularly desirable. Approximately 250 households have to use communal lavatories. Some of these are situated an intolerable distance away from the houses and it is clear that the sick and aged cannot possibly make use of them. About half the houses in Haslingden have no baths. The kitchen accommodation is often inadequate and in many cases can rightly be described as primitive.

The 1951 census showed that in England and Wales 30% of all households had no fixed bath. In Haslingden 52% of households are without a fixed bath. The figures for Manchester and London were 34% and 44% respectively.

In regard to water closets, in England and Wales one household in thirteen was entirely without, whereas in Haslingden one household in two was without a fresh water closet, but the remainder had waste water closets (tipplers) except for about 250 households—a proportion of one in twenty—who have to share closets. There are still about 144 closets on the conservancy system (pail type) in the outlying districts.

The state of disrepair and lack of facilities in certain groups of houses is such that their complete demolition is required. It is hoped that the worst of these will be dealt with as clearance areas in the near future. These facts are well known but there is a real danger that the unsatisfactory state of these houses and the lack of primary facilities in others, such as baths, closets and kitchens, will be accepted as the prevailing standard. Clearly this is a big problem but it is a fundamental one in respect of the health and wellbeing of the population.

I would like to express my appreciation of the help and advice received from Members of the Council and Officers during the year. Much has been done and much remains to be done.

I am, Ladies and Gentlemen,

Your obedient servant,

C. H. T. WADE,
Medical Officer of Health.

Section A

**Statistics
and
Social Conditions**

STATISTICS

Area in acres	8,195
Population (census 1951)	14,505
Registrar-General's estimate of mid-year population for 1952	14,280
Number of inhabited houses (census 1931)	4,856
Number of inhabited houses (end of 1952, according to Rate Books)	5,330
Rateable Value	£89,771
Sum represented by a penny rate	£352

Population :

The Registrar-General's estimate of the mid-year population for 1952 shows a decrease of 130 in the total population, on 1951. It is now estimated as being 14,280. The 1951 census population was 14,505.

Live Births :

	Legitimate	Illegitimate	Total
Male	104	3	107
Female	86	3	89
	<hr/>	<hr/>	<hr/>
	190	6	196
	<hr/>	<hr/>	<hr/>

Still Birth :

Male	5	...	5
Female	1	...	1
	<hr/>	<hr/>	<hr/>
	6	...	6
	<hr/>	<hr/>	<hr/>

Total Registered Births for 1952 ... 202

Total Registered Births for 1951 ... 210

Total Registered Deaths :

	Male	Female	Total
For 1952	116	110	226
For 1951	126	128	254

Total Deaths of Infants under 1 year:

For 1952:

	Legitimate	Illegitimate	Total
Male	1	...	1
Female	4	...	4
	<hr/> 5	<hr/> ...	<hr/> 5

For 1951:

Male ... ..	...	...	...
Female	4	...	4
	<hr/> 4	<hr/> ...	<hr/> 4

Death of Infants under 4 weeks of age:

For 1952:

	Legitimate	Illegitimate	Total
Male	1	...	1
Female	1	...	1
	<hr/> 2	<hr/> ...	<hr/> 2

1951:

No deaths under 4 weeks old.

TABLE I

	Live Births		Deaths (all causes)		Stillbirths		Maternal Mortality		Infant Mortality			Pulmonary Tuberculosis		
	No. Regis- tered	Rate per 1000 pop'n	No. Regis- tered	Rate per 1000 pop'n	No. Regis- tered	Rate per 1000 Total Births	No. of Deaths Regis- tered	Rate per 1000 Total Births	Total		Neo-natal		No. of Deaths Regis- tered	Rate per 1000 pop'n
									No. of Deaths Regis- tered	Rate per 1000 Live Births	No. of Deaths Regis- tered	Rate per 1000 Live Births		
Year 1952 ...	196	13.7*	226	15.8*	6	30	Nil	Nil	5	26	2	10	4	0.28
Year 1951 ...	204	14.2	254	17.6	6	29	Nil	Nil	4	20	Nil	Nil	5	0.35
„ 1950 ...	202	13.8	260	17.7	5	24	Nil	Nil	8	40	6	30	5	0.34
„ 1949 ...	202	13.8	257	17.6	9	43	Nil	Nil	9	45	—	—	2	0.14
„ 1948 ..	250	17.1	219	15.0	3	11	Nil	Nil	16	64	—	—	2	0.13
„ 1947 ...	287	20.1	232	16.3	7	23	1	3.40	17	59	—	—	2	0.14
Avg. 5 years - 1947—1951	—	15.8	—	16.8	—	26	—	0.7	—	45	—	—	—	0.22

* Adjusted—Live Birth-rate (comparability factor, 1.08) = 14.8 per 1,000

Death-rate (comparability factor, 0.87) = 13.8 per 1,000

As in previous years heart disease is again responsible for the greatest number of deaths, 88 being certified as due to this cause.

This is somewhat less than last year when 110 deaths from heart disease were recorded.

Details of the principal causes of death during 1952 are given in Table II.

TABLE II.

PRINCIPAL CAUSES OF DEATH DURING 1952

Causes of Death.	Number of Deaths
Tuberculosis of respiratory system	4
Tuberculosis, other forms	—
Syphilitic diseases	—
Diphtheria	—
Whooping Cough	—
Meningococcal Infections	—
Acute Poliomyelitis	—
Measles	—
Other infective and parasitic diseases	—
Cancer, malignant disease, all forms	34
Leukaemia	—
Diabetes	2
Vascular lesions of the nervous system	42
Heart disease	88
Other circulatory disease	13
Influenza	—
Pneumonia	6
Bronchitis	9
Other diseases of the respiratory system	1
Ulcer of stomach and duodenum	—
Gastritis, enteritis and diarrhoea	1
Nephritis and Nephrosis	3
Hyperplasia of prostate	2
Pregnancy, childbirth, abortion	—
Congenital malformations	2
Other defined and ill-defined diseases	13
Motor vehicle accidents	1
All other accidents	3
Suicide	2
Homicide and operations of war	—

Section B

**General Provision
of
Health Services.**

General Provision of Health Services for the Area

Under the National Health Service Act the County Council is responsible for the local health services.

The examination of pathological specimens and milk and water samples is undertaken without charge by the Public Health Laboratory at Monsall Hospital, Manchester

The following matters are the responsibility of the Borough Council:—The control of infectious disease; provision of suitable water supplies; control of cleansing and disposal of refuse; inspection of all food and food-preparing premises; sampling of foodstuffs (milk, ice-cream, etc.) for bacteriological examination; sanitary accommodation to houses, factories, shops and other premises; inspection of houses with regard to fitness for human habitation; nuisances and defects; rodent control; offensive trades; smoke abatement; and many other matters concerned with environmental health.

Hospital facilities are now under the Regional Board and Management Committees and patients are admitted without regard to local boundaries.

Ambulance, District Nursing, Midwifery and Maternity and Child Welfare Services are provided by the County Council and administered under the Divisional Health Service Scheme.

Section C

**Prevalence of and Control over
Infectious and other Diseases**

TABLE III.

NOTIFICATIONS OF INFECTIOUS DISEASES (other than Tuberculosis) RECEIVED DURING
THE YEAR 1952

"Notifiable" Diseases	Total Cases Notified														Total Deaths	Hospital	
	Total Cases at all Ages	Years														Total cases removed to Hospital from district	Deaths in Hospital of persons belonging to district
		Un-der 1	1 to 2	2 to 3	3 to 4	4 to 5	5 to 10	10 to 15	15 to 20	20 to 35	35 to 45	45 to 65	65 and over				
Scarlet Fever ...	28	...	4	6	6	11	1	...	...	...	...	...	...	11	...	...
Measles ...	54	4	6	5	7	13	17	...	1	1	...	...	...	3	...	...
Dysentery ...	1	...	...	...	...	...	1	...	...	...	...	...	...	1	...	...
Whooping Cough ...	24	2	1	5	7	1	7	...	...	...	1	...	...	3	...	...
Erysipelas ...	3	...	...	...	...	...	...	...	...	...	2	1	...	...	...	...
Totals...	110	6	7	14	20	20	36	1	1	1	3	1	...	18	...	...

Infectious Disease :

Cases of Infectious Disease are treated without charge at the infectious disease hospital and similarly pathological examinations are made without charge at the Public Health Laboratory, Monsall Hospital, Manchester.

The National Health Service Act requires that copies of all notifications of infectious disease must be forwarded without delay to the County Medical Officer. In practice these notifications are sent to the Divisional Medical Officer so that he may correlate action within the health division and to enable the Divisional Committee to gain a regular knowledge of the incidence of infectious disease throughout their area.

Diphtheria immunisation is now the responsibility of the County Council but close co-operation between the Borough Council and the County Council is maintained particularly for propaganda purposes. During the year, 166 children under five years of age were immunised and 23 between the ages of 5 and 14.

In addition to the above, 117 children received a reinforcement injection during 1952.

NUMBER OF CHILDREN WHO HAD COMPLETED COURSE OF IMMUNISATION AT ANY TIME UP TO 31/12/52.

Age at 31/12/52 i.e. born in year	under 1	1	2	3	4	5-9	10-14	Total
	1952	1951	1950	1949	1948	1943 1947	1938-1942	under 15
Number Immunised	22	87	188	162	130	666	679	1934

Table IV shows the number of cases of infectious disease treated in hospital during 1952.

TABLE IV
CASES OF INFECTIOUS DISEASE TREATED
IN HOSPITAL DURING 1952

Cases	Disease			
	Scarlet Fever	Dysen- tery	Whoop'g Cough	Measles
In Hospital at begin- ning of year ...	...	...	...	...
Admitted during the year ...	11	1	3	3
Discharged during the year ...	11	1	3	3
Died in Hospital ...	...	...	...	...
Remaining in Hos- pital at end of year	...	...	...	...

Bacteriological and Pathological Examination:

Table V shows the results of bacteriological examinations made during the year.

TABLE V.
BACTERIOLOGICAL EXAMINATIONS DURING
1952.

Particulars of Examination	Positive	Negative	Total
Diphtheria—Throat Swabs ...	...	30	30
Other Swabs ...	...	...	...
Virulence Tests	...	...	...
Other Examinations—			
Haemolytic Streptococci	13	62	80
Salmonella ... ..	...	2	2
Dysentery ... ..	...	2	2
Influenza ... ..	...	3	3

Tuberculosis :

Each case of tuberculosis is visited by the Tuberculosis Health Visitor of the Lancashire County Council as soon as possible after receipt of notification. Fifty-five cases were visited during the year, the number of visits paid being 302. Where desirable, Sanatorium or Hospital treatment is arranged for after consultation between the Chest Physician and the Medical Practitioner concerned.

At the beginning of the year there were 103 cases of tuberculosis on the register, 14 cases were added and 32 cases taken off the register, leaving a total of 85 cases on the register at the end of the year. The following gives an analysis of the cases on the register during the year.

TABLE VI.

PARTICULARS OF CASES OF TUBERCULOSIS ON THE REGISTER DURING 1952.

	Pulmonary			Non-Pulmonary			Total Pulmonary and Non-Pulmonary		
	Males	Females	Total	Males	Females	Total	Males	Females	Total
Number of Cases of tuberculosis on the Register at the commencement of the year. ...	35	20	55	25	23	48	60	43	103
(as corrected in March Quarter)									
Number of Cases added to the register during the year ...	8	3	11	1	2	3	9	5	14
Number of Cases of tuberculosis removed from the register during the year on account of:									12
(a) having died ...	7	2	9	...	1	1	7	3	10
(b) having left the district ...	3	2	5	1	...	1	4	2	6
(c) having recovered ...	1	...	1	7	6	13	8	6	14
(d) diagnosis of tuberculosis not being confirmed ...	...	...	...	2	...	2	2	...	2
Number of Cases remaining on the register at the end of the year ...	32	19	51	16	18	34	48	37	85

Table VII gives the age of the cases of tuberculosis notified and deaths from the disease during 1952.

TABLE VII.
TUBERCULOSIS.
NEW CASES AND MORTALITY DURING
THE YEAR 1952.

Age Periods	New Cases				Deaths			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	Males	Females	Males	Females	Males	Females	Males	Females
Years								
0-1	...	...	...	...	...	...	...	...
1-5	...	...	...	...	...	...	...	...
5-10	1	...	...	1	...	...	...	...
10-15	...	...	...	...	...	...	...	...
15-20	2	...	...	...	...	...	...	...
20-25	1	2	...	...	...	...	...	...
25-35	...	...	...	...	1	...	...	...
35-45	2	1	...	1	2	...	...	...
45-65	2	...	1	...	...	...	...	...
65 and upwards	...	...	...	...	1	...	...	...
	8	3	1	2	4	...	...	...
	11		3		4		...	

N.B. Primary notifications only included in the above table.

The examination of sputum for the presence of tubercle bacilli is carried out at the Blackburn Royal Infirmary. Of 27 such specimens examined during 1952, two were positive and 25 negative.

In no instance has there been any wilful neglect or refusal to notify; the notification of tuberculosis in this district being satisfactory.

There does not appear to be any excessive incidence of, or mortality from tuberculosis in any particular occupation in the area.

It has not been necessary to take action during the year under the Public Health (Prevention of Tuberculosis) Regulations, 1925, relating to persons suffering from pulmonary tuberculosis employed in the milk trade, or under the Public Health Acts relating to the compulsory removal to a hospital of persons suffering from tuberculosis.

Table VIII gives particulars of disinfection during the year.

TABLE VIII
DISINFECTION DURING 1952

Disease, etc.	Number of Rooms	Number of Articles
Tuberculosis	5	48
Other Causes	3	214

(Number of houses 5)

Room fumigation for diseases other than tuberculosis and smallpox is no longer recommended. Experience has shown that thorough cleansing with soap and water and disinfectant together with efficient ventilation of the rooms is adequate.

Infection, in the cases of diseases like scarlet fever and diphtheria, is nearly always due to personal contact or to the infection of food and drink.

Section D

Sanitary Circumstances

Borough of Haslingden

Public Health Office,
Blackburn Road,
Haslingden.

August, 1953.

SANITARY INSPECTOR'S REPORT

To the Chairman and Members of the Health Committee

I have the honour to submit for your consideration my sixth Annual Report on sanitary conditions in the area and progress recorded in 1952.

Some progress can be recorded with regard to repair of existing houses, although it is not by any means certain that the repairs effected are keeping step with the rate of deterioration which is inevitable in aging properties.

Housing presents our major public health problem in the Borough and can conveniently be divided into four sections (a) the rehousing of families living in lodgings or overcrowded in their present dwellings (b) the demolition of unfit houses and the rehousing of the tenants (c) the repair of houses not yet ripe for demolition (d) modernising of structurally sound existing older houses.

In Haslingden, the problem of the overcrowded family or the family in lodgings, is fast being met by the provision of new houses let under a points scheme which confers priority on such families. This particular section of the housing problem should not long be with us. With regard to (b) and (c), in theory at least, statutory powers exist, but certain important obstacles arise to prevent full

use of the powers. To make effective the clearance of old unfit houses on any considerable scale, it seems essential that a lead should be given by the Government, to overcome the serious financial problems involved, particularly the rent that can be paid by the displaced families. In this respect one recalls the very successful Clearance Schemes of the nineteen thirties when this was treated as a special problem requiring additional financial aid. The problem of repairing existing houses and particularly the requirement of the Housing Act that "houses must be rendered fit for habitation at a reasonable expense" is a major impediment to progress in this direction, having regard to high cost of repair and a fixed rental. Public Health Departments receive much unfair criticism for not surmounting a serious difficulty which is entirely out of their control. It appears that national legislation will be required to overcome this problem, which is causing distress to owner and tenant alike. The creation of a **workable** scheme to modernise existing structurally sound houses seems to offer great possibilities — it is to be regretted that the provisions of the Housing Act 1949 do not seem to have made any important contribution towards the solution. Any considerable effort in this direction would deal with the repair of such houses, the provision of modern facilities such as internal W.C., hot water and bath, modern cooking arrangements and the like at a cost of a fraction of that of a new house. It is probable this would result in the withdrawal of many applications for council houses, for the reconditioned houses would offer most of the advantages of the council houses at a lower rental. Here again new legislation, or at least amendment of existing legislation, is required.

Limited progress has been made on the survey and conversion of private water supplies to towns water. The

technical and inspection work on schemes of this type is considerable and staff limitation is the chief barrier to progress in this field.

During the year the Meadow Well Tip was worked up, apart from the top dressing of the land. In October, tipping was commenced on rough land near the Paragon Works, Rising Bridge. The scheme is to raise the level of this land to that of the adjoining road so that the area concerned can be utilised in the future for industrial development.

Throughout the year attention has been given to hygiene in connection with food shops and all places where food is prepared. The whole object is to prevent food poisoning cases arising and to secure that food is presented in a wholesome and attractive manner to the customer. There is much to be done in this field before any one can be in any way complacent and here again staff limitation restricts the progress that could be made.

Many other subjects are set out in the report in the following pages, dealing with less prominent, but none the less important matters of environmental hygiene.

My appreciation and thanks are due to all Members and Officials of the Council for their interest, encouragement and valuable assistance, and to the staff for their loyal co-operation in all the work of the Department.

I am,

Mr. Chairman, Ladies and Gentlemen,

Your obedient servant,

W. DAWSON,

Chief Sanitary Inspector.

Water :

The water supply of Haslingden is obtained mainly from the Irwell Valley Water Board, partly from the Accrington and District Water Board, and partly from springs and wells. Of the 5,330 inhabited houses on the rate books at the end of 1952, approximately 5,000 houses are supplied by the two Water Boards, whilst approximately 330 houses obtain their supply from springs and wells. The Irwell Valley Water Board supply 90.5 per cent of the houses, Accrington and District Water Board, 3.3 per cent and private supplies, 6.2 per cent. All the water supplied by the Irwell Valley Water Board and by the Accrington and District Water Board is delivered direct to the consumer, neither of these authorities delivering water by stand pipe.

Of the 5,330 houses in the area approximately 48 per cent are fitted with their own baths.

Extensions of 807 yards to the existing mains of the Irwell Valley Water Board were laid during the year, for the purposes of new housing development and new services to existing properties.

The bulk of the water supplied in this area is now treated with lime for plumbo-solvency and the results of this treatment are proving satisfactory.

Ninety three bacteriological and 20 chemical analyses of the treated water going into supply were made in 1952 and with two exceptions were satisfactory.

Lime treatment of the water is applied at the reservoirs.

All water is chlorinated at the source.

During the year three existing houses have been supplied with water from the public mains in lieu of unsatisfactory private supplies.

Forty-one samples from private water supplies were submitted for bacteriological examination during the year. Twenty-one were satisfactory whilst twenty were below standard.

Drainage and Sewerage:

The sewage disposal works are under the control of a Joint Board and deal with the sewage of the three Rossendale Valley Towns, Bacup, Haslingden and Rawtenstall. The plant is situated at the lowest point in the area, and the method of treatment is precipitation and filtration with outfall into the River Irwell.

There are still a number of houses not connected to public sewers, but these are mostly in outlying districts and farms.

Sanitary Accommodation:

The figures below show the closet accommodation of the Borough at the end of the year.

1. Number of pail closets	144
2. Number of waste-water closets	2293
3. Number of fresh-water closets	2617
4. Number of dry ashpits (excluding middens)	9
5. Number of movable ashbins	5148

One hundred and forty-four pail closets are still in use. These are sited mainly on the perimeter of the Borough, and the work of conversion is being held up owing to the absence of suitable sewers or the lack of town's water supply, in many cases the head of water not being sufficient to feed the flushing cisterns of fresh-water closets.

Table IX shows the particulars of conversions during 1952.

TABLE IX
CONVERSIONS

No. of pail closets	$\left\{ \begin{array}{l} \text{To fresh w.c's.} \\ \text{To waste w.c's.} \end{array} \right.$	<div style="text-align: center;">2 Nil</div>
No. of waste w.c's. to fresh w.c's.		3
No. of trough closets to fresh w.c's.		Nil
No of houses at which movable ashbins have been substituted for fixed receptacles		Nil

Public Cleansing :

The vehicles used for cleansing are as follows: Two freighters are used entirely on collection of household refuse. One freighter is used for the collection waste food, and the collection of night-soil (in a special tank fitted to the vehicle).

Household refuse is collected bi-weekly and nightsoil weekly. All household refuse has been disposed of by controlled tipping at Meadow Well and Paragon Tips, nightsoil is discharged to the sewers by means of a special night-soil chute and waste-food is sold to a processing plant.

Tipping on the Meadow Well Tip ceased in October, and a tip on rough land near the Paragon Works, Rising Bridge was commenced on 20th October.

The refuse collection wagons have dealt with the following material during the year:

	Loads
Ashbin refuse	2456
Waste food	107
Nightsoil	144
Salvage	24
Cover	41
Total	2772

The following shows particulars of the materials dealt with on the Meadow Well and Paragon Tips:

	Loads	
	Meadow Well	Paragon
Loads tipped by refuse wagons ...	1949	507
Sweepings from Borough Surveyor's Department	123	26
Loads tipped by private traders ...	702	116
Total	<u>2774</u>	<u>649</u>

SALVAGE

During the early part of the year waste paper was in demand and sold at a good price. In April the bottom dropped out of the waste paper market, prices tumbled down and demand almost disappeared. This has had a very marked effect on the expected income for the financial year.

Salvage was collected and sold as follows:

	Tons	Cwts.	Qrs.
Paper	41	8	1
Rags		4	2
Metals	3	5	0
Waste food	106	15	1
Total	<u>151</u>	<u>13</u>	<u>0</u>

Gross Value:—£768 11s. 3d.

SANITARY INSPECTION OF THE AREA

Details of the inspection work carried out during 1952, are shown in Table X.

TABLE X

INSPECTIONS MADE DURING THE YEAR

Public Health Acts	389
Consolidated Regulations	24
Meat and Food Inspections:—	
Food Inspection	69
Slaughter-houses	5
Butchers' Shops	39
Other food preparing places	47
Market	221
Farms	32
Milk Samples	55
Ice-Cream Premises	24
Ice-Cream Samples	7
Dairies and Bottled Milks	52
Bakehouses	12
Restaurant Kitchens	32
Common Lodging Houses	10
Infectious disease and disinfection	51
Shop Acts	52
Water Samples	48
Rodent Control	126
Work completed	155
Smoke observations	10
Water supply	70
Outworkers	8
Schools	6
Factory and Workshops	71
Piggeries	4
Swimming Baths	2
Places of Public Entertainment	3
Pet Shops	10
Caravans and Sites	3
Public Cleansing	390
Drains and Water Closets	191
Nuisance from Animals	1
Miscellaneous	363
	<hr/>
	2582

In Table XI are given particulars of:—

- (a) Notices served and complied with;
- (b) Defects and nuisances found and remedied.

TABLE XI

(a) NOTICES

	Served	Complied with
Formal notices	10	15 (6 were 1951 notices)
Informal notices	128	110

(b) NUISANCES AND DEFECTS

	Discovered	Abated
Dwellinghouses :		
Dampness	28	16
Defective ashbins	268	266
Insanitary pail closets	10	10
Defective waste water closets	164	154
Defective fresh water closets	6	5
Defective drains	87	79
Chimneys	1	1
Roofs	11	3
Eaves-gutters	7	5
Rain-water-pipes	7	7
Pointing	1	—
Defective plaster	12	5
„ windows	7	4
„ floorboards	5	3
Others	39	28
Totals	653	586

Legal proceedings were taken in one instance. A court order was made to carry out the work in 28 days. Proceedings taken under Section 93, Public Health Act 1936.

Smoke Abatement:

Ten routine observations of the emission of smoke from mill chimneys were taken during the year, and in none of these cases did the emission of dense smoke exceed the time limit of two minutes per half hour.

Swimming Baths:

The Corporation Swimming Baths provide one plunge bath, eight slipper baths and two medicinal (Zotofoam) baths.

The water in the plunge bath is treated by filtration, chlorination and aeration under pressure and is chemically treated by sulphate of alumina and soda. The water is tested daily for pH value, for residual chlorine and for temperature. The pool capacity is approximately 76,000 gallons and there is complete turnover of the water each $3\frac{1}{2}$ hours. A bacteriological sample of the water was taken by the Health Department, and was reported to be satisfactory.

Eradication of Bed Bugs:

No cases had to be dealt with during the year.

Camp Sites:

There have been no licenses issued by the local authority and no areas are used for camping purposes.

Schools:

The sanitary conditions in the schools with certain exceptions are reasonably satisfactory. All schools are supplied with water from the town's mains. At Helmsore County Primary School 12 auto-flush closets were converted to 12 normal fresh water closets.

Rodent Control:

In March and September routine treatment of the Town's sewers for destroying rats was carried out. One hundred and thirty two baits were laid and 23 complete takes were registered. The highest incidence of infestation is around the Town Centre.

During the year 19 private premises were dealt with for rodent infestations, all cases being of a minor character

Including sewer treatment work and inspection and treatment of private premises 126 visits were made in 1952. This figure does not include many routine inspections for the presence of rodents.

Offensive Trade:

There is one offensive trade carried on within the Borough viz: soap boiling. The premises receive periodic inspection.

Factories Act, 1937:

The following table shows inspections made for the purpose of provisions as to health, including inspections made by the Sanitary Inspector.

TABLE XII

Premises	Number of		
	Inspections	Written Notices	Prosecutions
Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	8	—	—
Factories not included in above in which Section 7 is enforced by the Local Authority	62	4	—
Other premises under the Act : (including works of building and engineering construction, but not outworkers premises)	—	—	—
Total	70	4	—

The following table gives the number of defects found and remedied during the year.

TABLE XIII

Particulars	Found	Remedied	Refer'd by H.M. Inspector	Numb'r of Prosecutions.
Want of cleanliness	—	—	—	—
Overcrowding	—	—	—	—
Unreasonable temperature	—	—	—	—
Inadequate ventilation	—	—	—	—
Ineffective drainage of floors	—	—	—	—
Sanitary Conveniences :				
Insufficient	—	—	—	—
Unsuitable or defective ..	7	5	5	—
Not separate for sexes... ..	—	—	—	—
Other offences against the Act (not including offences relating to outwork)	4	4	—	—
Total	11	9	5	—

There were eight outworkers on the register at the beginning of the year, of which six ceased to be so employed before the year end, leaving two on the register. All were inspected.

Shops and Offices :

Fifty-two routine visits and inspections were made, during the year, of shops in the district. No action was found necessary with regard to offices.

Common Lodging Houses :

At the end of the year there was only one Common Lodging House in the district. This is situated in Town Ward.

The Common Lodging House reported last year as sub-standard was closed by the owners in May, 1952, following representations from this Department.

Rag Flock Acts, 1911 and 1928 :

There are no premises in the town where rag flock is manufactured and so far as is known none is being sold or used.

Section E

Housing

Housing Conditions:

The position with regard to substandard houses is much the same as reported last year.

The repair to existing houses is still presenting some difficulty due to the economic problem of low rents and high repair costs, and in some instances, due to the completely worn out condition of the structures making repair almost an impossibility. At the end of 1952 there were 484 applicants on the register for Council Houses.

This Department continues to carry out an important function in the letting of Council Houses.

The House Letting Sub-Committee indicates which applications require pointing, under the sub-section of the Scheme which deals with existing conditions at the applicant's home, and this Department carries out the inspection and reports to the Sub-Committee.

Where serious illness, such as tuberculosis, is claimed by the applicant to be a reason for special consideration, the Sub-Committee receives a report from the Medical Officer of Health.

In this way, applications receive a most minute examination by the Sub-Committee and a high degree of fairness and impartiality is achieved—a fact not always appreciated by disappointed applicants.

Statistics:

Number of new houses erected during the year: —

		Prefabricated Houses		Traditional
		Temporary	Permanent	Permanent Houses
(a)	By Local Authority	—	—	37
(b)	By other Local Authorities	—	—	—
(c)	By other bodies or persons	—	—	6
Totals ...		—	—	43

Houses in hand at end of December, 1952	110
Houses contemplated at end of December, 1952	100

Housing Act, 1936—Overcrowding:

When calculated by the number of houses in the Borough (5,330) and the estimated population (14,280) overcrowding would seem to be non-existent, as an average of only 2.68 persons per house is shown. Uneven occupation of houses where four and six roomed houses have only one occupant, can lead to overcrowding in others. Without a re-survey it is impossible to state the exact position. Building of "old persons" houses may help to abate any overcrowding by releasing larger houses for families.

1. Inspection of dwellinghouses during the year.

(1) (a) Total number of dwellinghouses inspected for housing defects (under Public Health and Housing Acts)	260
(b) Number of inspections made for the purpose	413
(2) (a) Number of dwellinghouses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations 1925 and 1932	9
(b) Number of inspections made for the purpose	15
(3) Number of dwellinghouses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	1
(4) Number of dwellinghouses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	128

2. Remedy of defects during the year:

Number of defective dwellinghouses rendered fit in consequence of informal action by the Local Authority or their Officers	110
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3. Action under Statutory Powers during the year:
- (a) Proceedings under Sections 9, 10, and 16 of the Housing Act, 1936:
- (1) Number of dwellinghouses in respect of which notices were served requiring repairs ... 1
- (2) Number of dwellinghouses which were rendered fit after service of formal notices:
- (a) By owners ... 1
- (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 ... 9
- (2) Number of dwellinghouses in which defects were remedied after service of formal notices.
- (a) By owners ... 14
- (b) By local authority in default of owners —
- (c) Proceedings under sections 11 and 13 of the Housing Act, 1936:
- (1) Number of dwellinghouses in respect of which Demolition Orders were made ... —
- (2) Number of dwellinghouses demolished in pursuance of Demolition Orders ... —
- (d) Proceedings under section 12 of the Housing Act, 1936:
- (1) Number of separate tenements or underground rooms in respect of which Closing Orders were made ... 1
- (2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit ... —
4. Number of houses demolished without service of Demolition Orders ... —
5. Housing Act, 1949:
- A few verbal approaches made from private individuals but no actual schemes submitted.

Section F

**Inspection and Supervision
of Food**

Milk:

During the year 84 inspections were made at farms and dairies in the Borough. Many of the visits were in connection with water supplies, a matter now receiving the close attention it deserves.

Six bacteriological samples were taken from farm water supplies.

Fifty-five samples were taken of milk produced and retailed by farmers in this locality. Fifty-one were submitted for examination for tubercle bacilli and 55 for the Methylene Blue test.

Three gave positive results and were reported to the Ministry of Agriculture and Fisheries for action under the Tuberculosis Order. Four of the samples failed to satisfy the Methylene Blue test whilst 51 were satisfactory.

Four samples of pasteurised milk were submitted for Phosphatase and Methylene Blue Tests. All were satisfactory.

At 31st December there were 47 Distributors of Milk on the register, in addition to farmers retailing their own milk.

Milk (Special Designation) Regulations, 1949 (Raw Milk) (Pasteurised and Sterilized Milk):

The following held licences under the Special Designations Regulations at the end of December, 1952:

- 39 Dealers' Licences for Sterilized Milk.
- 9 Dealers' Licences for T.T. Milk.
- 8 Dealers' Licences for Pasteurised Milk.
- 2 Supplementary Licences for T.T. Milk.
- 1 Supplementary Licence for Pasteurised Milk.

Examination of Milk Supplies:

Particulars of the bacteriological examination of milk during 1952 are given in Table XIV.

TABLE XIV
BACTERIOLOGICAL EXAMINATION OF MILK
DURING 1952.

Particulars of Examination	No. of Samples				
	Total	Neg. active	Posi- tive	Satis- factory	Not Satis- factory
Biological for Tuberculosis	51	48	3	48	3
Methylene Blue ...	55	...	...	51	4
Phosphatase ...	4	...	...	4	...

Inspection of Meat and Other Food:

Inspections are made at retailers shops including butchers' shops, where foodstuffs are stored, exposed for sale or in course of preparation for sale. The Market is visited each Market Day i.e. Tuesday and Friday. The number of visits paid for the purpose of meat and food inspection during the year was 280.

During the year 10 pigs were inspected. In all cases permits to slaughter had been received. All were satisfactory except the liver in one pig which was affected by cysts and condemned.

Food Poisoning:

No cases of food poisoning or suspected food poisoning have been reported during the year.

Food Condemned:

The following foodstuffs were condemned during 1952 as unfit for human consumption and have been dealt with as directed by the Government.

Tinned Meat	301 lbs.
Tinned Fruit	961 lbs.
Tinned Vegetables	77½ lbs.
Tinned Milk	60 lbs.
Tinned Soup	38 lbs.
Tinned Fish	2¼ lbs.
Fresh Meat	19 lbs.
Bacon	4¾ lbs.
Rabbits	360 lbs.
Sauces	3 lbs.
Baby Foods	3½ lbs.
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Total	1830 lbs.

Food Premises:

The ideal of regular inspection of food premises cannot be achieved by the present staff, but inspections are carried out as frequently as possible.

Attention has been given to catering establishments of all sizes, but particularly to the smaller type where proper food storage facilities and kitchen hygiene often leave much to be desired, and improvements have been effected in a number of cases.

During the year four premises were registered for the sale of ice-cream. Altogether 43 premises are now on the register. Most of these purchase prepacked ice-cream and sell either in cartons or wrapped.

Ten samples of ice-cream were submitted for bacteriological examination with the following results: 6 in grade 1; and 2 in grade 2. In the case of the other two samples there was no result given due to a failure in the apparatus.

Bakehouses :

There are 39 bakehouses on the register, some of these being very small businesses. There are still a few underground bakehouses.

Public Health (Shell Fish) Regulations, 1934 :

No action was taken under these Regulations during the year.

Adulteration, Chemical and Bacteriological Examinations of Food :

The administration of the Food and Drugs Act, 1938, and Regulations concerned with adulteration are under the control of the Lancashire County Council and their Officers take samples in this district. The bacteriological examination of foodstuffs is dealt with by the Borough Council and samples are submitted for bacteriological examination to the Public Health Laboratory at Monsall Hospital, Manchester.

