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Contributors

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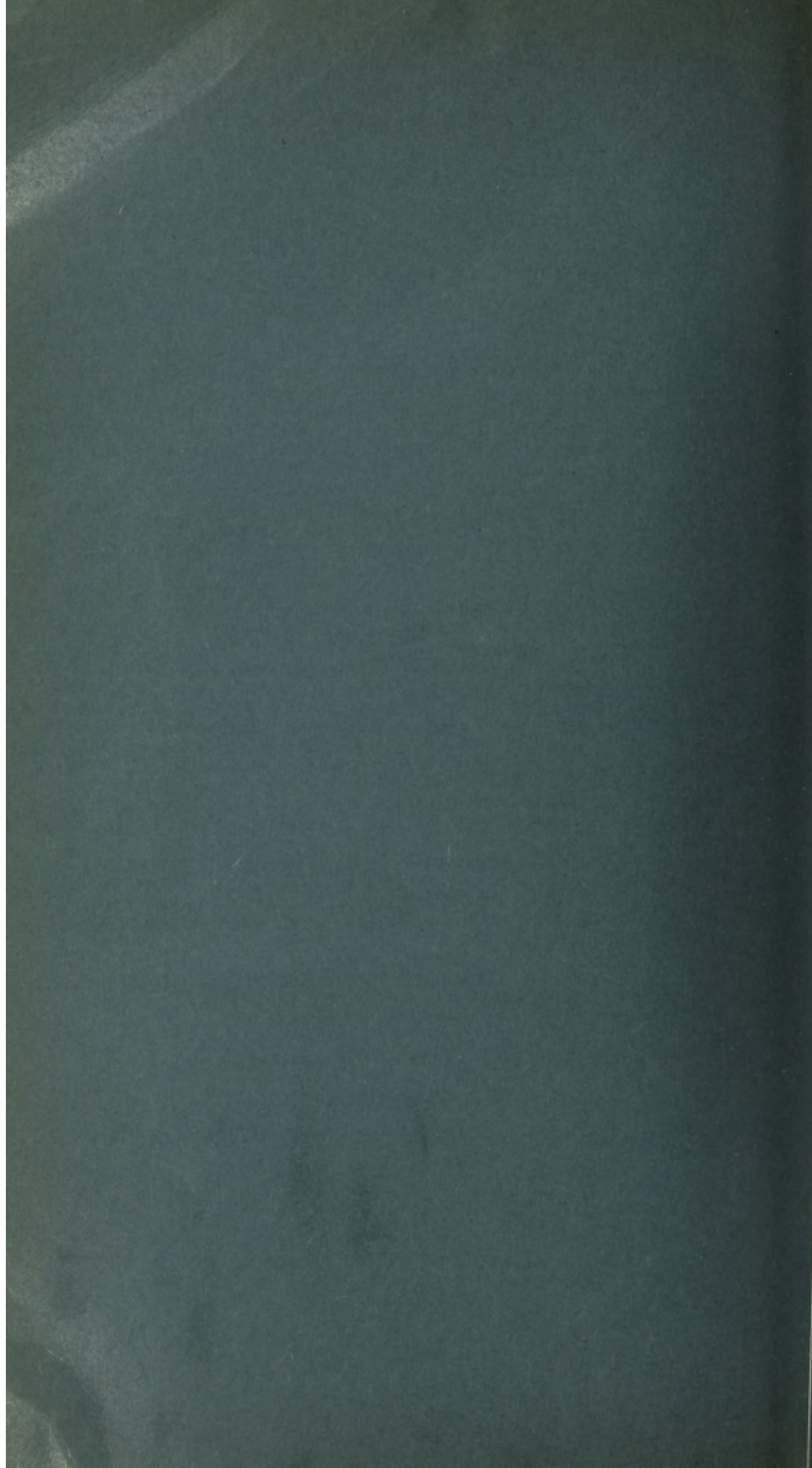
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Public Health Department,
West Hill House,
West Hill,
EPSOM,
Surrey.

July, 1960.

To the Chairman and Members of the
Leatherhead Urban District Council

Ladies and Gentlemen,

I have the honour to submit an annual report for the year 1959. The request for this report is made in Ministry of Health Circular 1/60 in which there is reference to Regulations 5 (3) and 15 (5) of the Public Health Officers Regulations, 1959. The report is in a form which meets the requirements of the Ministry as summarised in the circular.

The vital statistics for the year indicate that it was one in which conditions for good health prevailed. The crude birth rate was the highest since 1948, the death rate was lower than in the two preceding years and the infant mortality rate, though higher than last year, was considerably below the national figure.

The year was uneventful so far as the incidence of infectious disease was concerned. Numerically the epidemic of measles, continued from the previous year, was the outstanding feature and the number of cases of scarlet fever increased. For the second year in succession there were no cases of poliomyelitis. The natural hope is that this was due to the effect of the campaign of vaccination against this disease. So far as the population under 18 years of age is concerned, it could have been so, for it is estimated that over 90% have been treated. In the population over 18 years of age and below 40 years, which is the present upper age limit for the scheme, not more than 35% have been vaccinated. Those untreated in this section of the community may run an enhanced risk of infection if the virus became active in the district.

Once again I wish to bring to the notice of the Council the conscientious work of the Chief Public Health Inspector (Mr. W. Whiting) and all other members of the Public Health Department, and the assistance which I have received from the Chief Officers of other departments of the Council's administration.

I take this opportunity of thanking the Council and particularly the Chairman and Members of the Public Health Committee for their continued support and encouragement during the year.

I am, Mr. Chairman and Councillors,

Your obedient Servant,

CYRUS IVE.

Medical Officer of Health.

LEATHERHEAD URBAN DISTRICT COUNCIL

PUBLIC HEALTH COMMITTEE

1959 - 1960

Chairman

Mrs. K. Collett

Vice-Chairman

Mr. S. R. Sulston

Mr. S. E. D. Fortescue

Mr. E. A. Griffin

Mr. T. Kille

Mr. H. Leyland

Mr. H. Smith

Lt. Cdr. R. W. M. Walsh

Ex Officio Members

The Chairman of the Council

Mr. R. Bishop, J.P.

Vice-Chairman of the Council

Mr. H. H. Fuller-Clark

Representatives of the Council

(1) CENTRAL DIVISIONAL (HEALTH) SUB-COMMITTEE

Mr. W. E. Dickinson

Mr. S. E. D. Fortescue

Mrs. I. R. Mooring

Mr. L. O. Stanbury (died December 1959)

Mr. H. Smith (Vice Mr. Stanbury)

(2) EPSOM AND LEATHERHEAD TUBERCULOSIS CARE COMMITTEE

Mr. R. Bishop

LEATHERHEAD URBAN DISTRICT COUNCIL

STAFF OF THE PUBLIC HEALTH DEPARTMENT

Medical Officer of Health

Cyrus Ive, M.B., B.S., (Lond.), M.R.C.P., (Eng.), L.R.C.P., (Lond.), D.P.H.

Chief Public Health Inspector

+ William J. Whiting M.R.S.H., M.A.P.H.I.

Additional Public Health Inspectors

+ C. J. Lynch M.A.P.H.I.

+ R. H. Sandford M.A.P.H.I.

Medical Officer of Health's Clerical Staff

Secretary/Clerk: Miss E. E. Nolan
Clerk/Telephonist: Mrs. M. E. Joseph
Junior Clerk: Miss G. F. Skidmore

Chief Public Health Inspector's Clerical Staff

Clerks: A. C. Milne
A. Griffin

The Medical Officer of Health and his Clerical Staff act in a similar capacity for the Borough of Epsom and Ewell, the Dorking Urban District and the Dorking and Horley Rural District.

+ Holds the Royal Sanitary Institute Certificate as Inspector of Meat and other Foods.

+ Holds the Smoke Inspectors' Certificate of the Royal Sanitary Institute.

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH
FOR
THE YEAR 1959

1. STATISTICS AND SOCIAL CONDITIONS OF THE AREA

Area (acres)	...	...	...	...	...	11,187
Population (Census 1951)	...	...	...	...	...	27,206
Population (estimated mid-year 1959)	...	...	...	...	...	34,630
Density (persons per acre)	...	...	...	...	...	3.9
Number of inhabited houses at 31st December, 1959	...	...	...	...	...	10,400
Rateable value at 31st December, 1959	...	...	...	...	...	£632,144
Sum represented by a Penny Rate	...	...	...	...	...	£2,546

EXTRACTS FROM VITAL STATISTICS FOR THE YEAR

Live Births Total Male Female

Total	518	267	251
Legitimate	502	258	244
Illegitimate	16	9	7

Live Birth rate per 1,000 population	15.0
Standardised Birth rate " "	14.8
Illegitimate live births per cent of total live births	3.1

Still Births

Total	16	11	5
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Still Birth rate per 1,000 live & still births	30.0
--	------

Deaths of Infants under 1 year of age

Total	8	7	1
Legitimate	8	7	1
Illegitimate	-	-	-

Infant Mortality Rate per 1,000 live births, total	15.4
" " " " " " " " legitimate	15.9
" " " " " " " " illegitimate	-

Neonatal Mortality

Deaths of infants under 4 weeks of age per 1,000 live births	13.5
--	------

Early Neonatal Mortality

Deaths of infants under 1 week of age per 1,000 live births	11.6
---	------

Perinatal Mortality

Still births and deaths under 1 week per 1,000 live & Still births	41.1
--	------

Maternal Mortality

Maternal deaths (including abortion)	-
Maternal Mortality Rate per 1,000 live & Still births	-

Deaths

Total	304	154	150
Crude Death rate per 1,000 population	...	...	8.8
Standardised Death rate	...	...	9.0

**ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH
FOR
THE YEAR 1927**

STATISTICS AND SOCIAL CONDITIONS OF THE AREA

Area (square miles)	11.13
Population (Census 1921)	27,306
Population (estimated mid-year 1927)	28,000
Density (persons per square mile)	2,511
Number of inhabited houses at first of January, 1927	10,400
Estimated value of first of January, 1927	\$2,321,144
Rate represented by a family rate	\$2,321,144

STATISTICS FROM VITAL STATISTICS FOR THE YEAR

Live Births	Total		
	1927	1926	1925
Legitimate	238	244	244
Illegitimate	10	9	7

Live Birth rate per 1,000 population

Standardized Birth rate

Illegitimate live births per cent of total live births

Still Births	Total		
	1927	1926	1925

Still Birth rate per 1,000 live & still births

Deaths of Infants under 1 year of age

Total	Total		
	1927	1926	1925
Legitimate	7	7	7
Illegitimate	1	1	1

Infant Mortality rate per 1,000 live births, total

Legitimate

Illegitimate

Neonatal Mortality

Deaths of infants under 1 week of age per 1,000 live births

Early Neonatal Mortality

Deaths of infants under 1 week of age per 1,000 live births

Perinatal Mortality

Still births and deaths under 1 week per 1,000 live & still births

Internal Mortality

Internal deaths (including abortion)

Internal Mortality rate per 1,000 live & still births

Deaths

Total

Crude death rate per 1,000 population

Standardized death rate

BIRTHS

Live births numbered 518, of which 267 were males and 251 females. The birth rate was 15.0 per 1,000 of the population, compared with the rate of 14.9 for 1958, and reached its highest level since 1948. The total number of births was the highest yet recorded.

Details such as age and sex distribution affect local birth rates and invalidate comparison with the rates of other populations. To overcome this a comparability factor (0.99) has been supplied by the Registrar General which when applied to the crude birth rate, gives a figure which may be used for purposes of comparison. On application of this factor a standardised birth rate of 14.8 is obtained, compared with a rate of 16.5 for England and Wales.

Sixteen births, or 3.1% of the total births, were illegitimate. The corresponding rate for the County of Surrey was 4.1. Still births numbered 16, giving a rate of 30.0 per 1,000 live and still births compared with the rate of 20.7 for England and Wales. In 1958 the rate was 11.8.

DEATHS

The deaths assigned to the area numbered 304, giving a crude death rate of 8.8 per 1,000 of the estimated population. The total included 154 males and 150 females. In 1958 the death rate was 9.9. Approximately 53% of deaths took place in hospitals or nursing homes.

A comparability factor (1.03) has been provided by the Registrar General which may be applied to the crude death rate for use in comparing the local death rate with those of other areas. The factor makes allowance for the differing age and sex distribution of local populations. Application of the factor gives a standardised death rate of 9.0. The death rate for England and Wales was 11.6.

Causes of Death

The causes of death are classified in Table III.

Diseases of heart and vascular system (categories 17-21 in Table II) caused 155 deaths, and non-tubercular diseases of the respiratory system (categories 23-25) resulted in 22 deaths. Malignant disease (categories 10-14) was responsible for 62 deaths of which the primary site was in the lungs or bronchus in 8 males and 3 females.

Deaths from Road Accidents

Four residents died as the result of road accidents, all of which occurred locally. Three of the deceased were elderly pedestrians, two of whom were knocked down by motor cycles and one by a motor car. The fourth death resulted when the driver of a motor scooter was in collision with a motor lorry.

Other Accidental Deaths

Other types of accidents caused four deaths. Three elderly people died as a result of complications following injuries caused by falls. One death resulted from burns when petrol became ignited in a garage inspection pit.

Suicide

Five persons terminated their lives by suicide. Overdoses of sedative tablets were used in two cases, asphyxiation by hanging in one, coal gas poisoning in one and haemorrhage from a throat incision in one.

RESULTS

Live births numbered 212, of which 207 were males and 55 females. The birth rate was 12.0 per 1,000 of the population, compared with the rate of 14.9 for 1925, and reached its highest level since 1908. The total number of births was the highest yet recorded.

Details such as age and sex distribution affect local birth rates and immediate comparison with the rates of other populations. To overcome this a corrigibility factor (C.F.) has been suggested by the Registrar General which when applied to the crude birth rate, gives a figure which may be used for purposes of comparison. On application of this factor a standardized birth rate of 14.9 is obtained, compared with a rate of 16.3 for England and Wales.

Distances between, at 1.15 of the total births, were 11.8. The corresponding rate for the County of Surrey was 11.1. Births numbered 10, giving a rate of 10.0 per 1,000 live and still births compared with the rate of 10.7 for England and Wales. In 1925 the rate was 11.8.

DEATHS

The deaths registered in the area numbered 201, giving a crude death rate of 8.8 per 1,000 of the estimated population. The total included 141 males and 60 females. In 1925 the death rate was 9.8. Approximately 25% of deaths took place in hospitals or nursing homes.

A corrigibility factor (C.F.) has been provided by the Registrar General which may be applied to the crude death rate for use in comparing the local death rate with those of other areas. The factor when applied to the crude death rate and the distribution of local population gives a standardized death rate of 9.0. The death rate for England and Wales was 11.4.

Causes of Death

The causes of death are classified in Table III.

Deaths of heart and vascular system (categories 10-21 in Table II) caused 155 deaths, and non-vascular diseases of the respiratory system (categories 22-23) resulted in 22 deaths. Malignant diseases (categories 10-21) was responsible for 62 deaths of which the primary was in the lungs or bronchi in 5 males and 2 females.

Deaths from Infectious Diseases

Four residents died as the result of acute infections, all of which occurred locally. Three of the deceased were elderly patients, two of whom were knocked down by motor cycles and one by a motor car. The fourth death resulted when the driver of a motor scooter ran in collision with a motor car.

Other Accidental Deaths

Other types of accidents caused four deaths. Three elderly people died as a result of epileptic seizures. Following injuries caused by falls, one death resulted from burns when petrol became ignited in a garage inspection pit.

Fatalities

Five persons sustained their lives by suicide. Overdose of sedative tablets was used in two cases, suspension by hanging in one, and gas poisoning in one and two cases. A third fatality in one case was poisoning in one and two cases.

Infant Mortality

Deaths of children under 1 year of age numbered 8, giving an infant mortality rate of 15.4 per 1,000 live births compared with 22.0 for England and Wales. Seven of the deaths occurred within 4 weeks of birth, the neonatal mortality rate being 13.5 per 1,000 live births, compared with 15.8 for England and Wales.

Four of these deaths were the result of congenital malformations inconsistent with prolonged life, two were due to prematurity, one to broncho-pneumonia caused by the inhalation of liquid during birth and one to a cerebral haemorrhage connected with the process of delivery but for which there was no apparent cause. In fact, none of the infants died from a cause for which a known remedy existed.

Maternal Mortality

There was no death attributable to maternal causes. The maternal mortality rate in 1959 for England and Wales was 0.38 per 1,000 total live and still births.

POPULATION

The natural increase of population by the excess of births over deaths was 214. The Registrar General's estimate of population for mid-year 1959 was 23,630, giving an increase of 380 on the previous year. The difference between these figures confirms the extent of the immigration into the district which has taken place in the past twelve months.

The total estimated increase in population since the Census in 1951 is now 7,424.

Table I includes birth and death rates, with a comparison with the figures for 1958, and Table II gives a comparison of birth, death and infant mortality rates for the district since 1931, with the figures for England and Wales for the same period.

Deaths of children under 1 year of age numbered 8, 1949, as compared with 12, 1948. The infant mortality rate of 15.4 per 1,000 live births compared with 19.2 per 1,000 live births in 1948. Seven of the deaths occurred within a week of birth, the neonatal mortality rate being 15.2 per 1,000 live births, compared with 15.8 for England and Wales.

None of these deaths were the result of congenital malformations. Infantile convulsions with prolonged life, two were due to prematurity, one to pneumonia-pneumonia caused by the inhalation of liquid during birth and one to a cerebral haemorrhage connected with the process of delivery but for which there was no apparent cause. In fact, none of the infants died from a cause for which a reason readily existed.

Maternal Mortality

There was no death attributable to maternal causes. The maternal mortality rate in 1949 for England and Wales was 0.33 per 1,000 total live and still births.

POPULATION

The natural increase of population by the excess of births over deaths was 214. The Registrar General's estimate of population for the year 1949 was 23,630, giving an increase of 100 on the previous year. The difference between these figures confirms the extent of the reduction in the deaths which has taken place in the past twelve months.

The total estimated increase in population since the census in 1931 is now 7,454.

Table I includes birth and death rates, with a comparison with the figures for 1948, and Table II shows a comparison of birth, death and infant mortality rates for the districts since 1931, with the figures for England and Wales for the same period.

HOSPITAL FACILITIES

The Leatherhead Hospital is staffed by the general practitioners of the district, who have the benefit of a consultant staff, when required. It is a general hospital with a bed complement of 55, an out-patient department and physiotherapy and X-ray departments.

The Epsom District Hospital and the Dorking General Hospital also provide general hospital facilities, and accommodation for maternity cases.

Patients requiring hospital treatment for infectious diseases may be admitted to one of a number of hospitals, none of which is situated in the district.

LABORATORY FACILITIES

The Public Health Laboratory service is maintained by the Medical Research Council on behalf of the Ministry of Health. A local laboratory of the service is situated at West Hill House, West Hill, Epsom, and a comprehensive series of investigations is at the disposal of medical practitioners.

The staff of the laboratory also examine and report on the bacteriological conditions of samples of milk, food and water taken by the local authorities' Public Health Departments. In the course of the year 14 samples of water, 92 of milk and 19 of ice-cream taken in this district were examined. The results of the examinations on water are summarised in a later section of this report, and those relating to milk and ice-cream are dealt with in the Chief Public Health Inspector's report.

There is also a bacteriological and pathological department at the Epsom District Hospital, primarily intended to deal with the work of the hospitals in the group.

AMBULANCE FACILITIES

The public ambulance service is now under the control of the Surrey County Council, who have given the following information regarding the use of the service.

The main ambulance station for the area is the Smallfields section of the Redhill County Hospital (telephone No. Smallfields 271) with a sub-station at the Mansion, Church Street, Leatherhead.

In cases of accidents in the home or elsewhere or in sudden illness in the street or public places, any responsible person may call the ambulance to remove the patient (if by telephone, use the local Emergency Calling System). Normal maternity cases are removed if the applicant can give evidence that a maternity bed has been booked. Maternity cases with serious complications, or where birth is imminent, are not normally removed without the authority of a doctor or certified midwife.

The removal of other cases of illness or accident are arranged by the hospital concerned, or by the medical practitioners in charge of the patient. For private removals a written request, accompanied by

HOSPITAL FACILITIES

The District Hospital is located by the general practitioners of the district, who have the benefit of a consultant staff, when required. It is a general hospital with a bed complement of 12, an out-patient department and physiotherapy and X-ray departments.

The District Hospital and the District General Hospital also provide general hospital facilities, and accommodation for maternity cases.

Patients requiring hospital treatment for infectious diseases may be admitted to one of a number of hospitals, none of which is situated in the district.

LABORATORY FACILITIES

The Public Health Laboratory service is maintained by the Medical Research Council on behalf of the Ministry of Health. A local laboratory of the service is situated at West Hill House, West Hill, Essex, and a representative series of investigations is at the disposal of medical practitioners.

The staff of the laboratory also examine and report on the bacteriological condition of samples of milk, food and water taken by the local authorities' Public Health Departments. In the course of the year 14 samples of water, 22 of milk and 19 of ice-cream taken in this district were examined. The results of the examination are given and summarized in a later section of this report, and those relating to milk and ice-cream are dealt with in the Civil Public Health Inspector's report.

There is also a bacteriological and pathological department at the Essex District Hospital, primarily intended to deal with the work of the hospitals in the group.

HOUSEHOLD FACILITIES

The Public Health service is now under the control of the Essex County Council, who have given the following information regarding the use of the service.

The main refuse station for the area is the Refuse Station of the District Council (Refuse Station No. 201) with a sub-station at the station, Essex Street, Ipswich.

In cases of accidents in the house or elsewhere or in public places in the street or public places, any responsible person may call the attention to remove the person (if by telephone, use the local Emergency Calling System). Medical assistance is removed if the applicant can give evidence that a dangerous condition has been reached. In cases with serious consequences, or where death is imminent, the person is removed without the authority of a doctor or medical officer.

The removal of other cases of illness or accident are arranged by the hospital concerned, or by the medical practitioner in charge of the patient. For private removal a written request, accompanied by

Ambulance Facilities (cont.)

a doctor's certificate, should be made to the County Medical Officer for his consideration. Provided that these requirements are fulfilled no charge is made to users.

MORTUARY FACILITIES

A mortuary is owned and maintained by the Council in Emlyn Lane, Leatherhead. It is equipped with a refrigeration chamber which can accommodate three bodies. Facilities have been granted to the Dorking Urban District and the Dorking and Horley Rural District Councils to use the mortuary on a mutually satisfactory financial basis.

Ninety-five bodies were removed to the mortuary during the year, including forty from the Dorking Urban District, fifteen from the Dorking and Horley Rural District and eight from the Guildford Rural District. In addition, eight bodies which would normally have been admitted to the Leatherhead Mortuary were transferred to the mortuary maintained by the Epsom Borough Council. Twenty-two of the bodies from Dorking Urban District were from the Dorking Hospital.

Criticism was made during the year by H. M. Coroner of the facilities provided at the Leatherhead Mortuary. The Council recognised that by modern standards some improvements were desirable, and decided that the most satisfactory way for the problem to be approached was by the formulation of a scheme for the contribution of public mortuary and post-mortem services in conjunction with neighbouring authorities and the Hospital Service. The matter remains under consideration.

THE PERSONAL HEALTH SERVICES

Care of Mothers, Young Children, etc.

The provision of services relating to the care of mothers and young children, midwifery, health visiting, home nursing, immunisation and vaccination, ambulance and domestic help are the responsibility of the Surrey County Council, as local health authority. Day-to-day administration is carried on by the Central Divisional Health Sub-Committee with offices at Ashley House, Ashley Road, Epsom, under the direction of Dr. P. H. R. Anderson, the Divisional Medical Officer.

IMMUNISATION AGAINST INFECTIOUS DISEASES

Immunisation against diphtheria and tetanus, and vaccination against smallpox and whooping cough can be obtained from general practitioners under the terms of the National Health Service Act, or from the County Council Clinics, so also can vaccination against poliomyelitis for all persons aged 40 years or under. Expectant mothers, members of the health and hospital services and their families and travellers abroad are also eligible for treatment.

B. C. G. vaccination against tuberculosis is available for children aged between 13 and 14 years, and for all children who have been in close contact with cases of pulmonary tuberculosis.

Figures relating to the numbers treated in these various procedures will be found in Section 6 of this report.

A doctor's certificate, should be made by the County Medical Officer for his certificate. Provided that these requirements are fulfilled no charge is made for same.

WATER SUPPLY

A survey is made and maintained by the Council in every town. It is supplied with a water supply which is maintained. Facilities have been provided for the drinking water supply and the drinking and bathing water supply is maintained on a regular basis by the Council.

Many-five bodies were removed to the survey during the year. Facilities have been provided for the drinking water supply and the drinking and bathing water supply is maintained on a regular basis by the Council. In addition, eight bodies which would normally have been removed to the survey were removed to the survey maintained by the Council. Two of the bodies from the drinking water supply were removed to the survey maintained by the Council.

Drinking water was during the year by the Council of the facilities provided at the local health centre. The Council provided that by means of a water supply which is maintained, and which is maintained on a regular basis by the Council. The Council provided that by means of a water supply which is maintained, and which is maintained on a regular basis by the Council. The Council provided that by means of a water supply which is maintained, and which is maintained on a regular basis by the Council.

THE LOCAL HEALTH CENTRE

Facilities for the local health centre.

The provision of services relating to the care of women and young children, including, health visiting, home nursing, tuberculosis and vaccination, and other help and the responsibility of the County Council, as local health authority. The facilities are provided by the County Council Health Department. The facilities are provided by the County Council Health Department. The facilities are provided by the County Council Health Department.

IMMUNIZATION AGAINST INFECTIOUS DISEASES

Immunization against infectious diseases and tetanus, and vaccination against smallpox and whooping cough can be obtained from the Council. The Council provides the facilities for the immunization of children and young children. The Council provides the facilities for the immunization of children and young children. The Council provides the facilities for the immunization of children and young children.

The Council provides the facilities for the immunization of children and young children. The Council provides the facilities for the immunization of children and young children. The Council provides the facilities for the immunization of children and young children.

Provision will be made in future to provide for the immunization of children and young children. The Council provides the facilities for the immunization of children and young children.

VENEREAL DISEASES

The Regional Hospital Board is the authority responsible for the administration of matters dealing with the diagnosis and treatment of Venereal Diseases.

LOCATION AND TIME-TABLE OF CLINICS

Ante-natal Clinic	The Mansion, Church St., Leatherhead.	Tues. 1.30 p.m.
Child Welfare Clinics	Peace Memorial Hall, Ashted.	Tues. 10 a.m. - 12 noon " 2 p.m.
	Church House, Bookham.	Weds. from 2 p.m.
	" " "	Weds. 10 a.m. - 12 noon
	Village Hall, Fetcham.	Thurs. from 2 p.m.
	The Mansion, Church St., Leatherhead.	Fri. from 2 p.m.
General School Medical Minor Ailments Clinics	All Saints Hall, Kingston Road, Leatherhead.	1st & 3rd Weds. 2 p.m.
	Peace Memorial Hall, Ashted.	Tues. 9 - 10.45 a.m.
	Church House, Bookham.	Weds. from 1.30 p.m.
	Village Hall, Fetcham.	Thurs. from 1.30 p.m.
	The Mansion, Church St., Leatherhead.	Mons. 9.30 a.m.
Eye Clinic	The Mansion, Church St., Leatherhead.	By Appointment
Dental Clinic	The Mansion, Church St., Leatherhead.	" "
Chest Clinic	Epsom District Hospital, Dorking Road, Epsom.	Tues. & Thurs. 2 p.m. Every 3rd Thurs. 5.30 p.m.
Family Planning Association Clinic	Epsom District Hospital, Dorking Road, Epsom.	Fri. 7 p.m.
Scabies Treatment Clinic	The Cedars, Church St., Epsom.	By Appointment
Venereal Diseases Clinic	St. Helier Hospital, Carshalton.	Males: Mon. 5-7 p.m. Females: Weds. 5-7 p.m.
	(And at the Out-Patient Departments of many London hospitals)	

GENERAL INSTRUCTIONS

The National Hospital Board is the authority responsible for the administration of matters dealing with the Hospital and its financial resources.

LOCATION AND TIME TABLE OF CLINICS

Internal Clinic	The Hospital, Church St., Leeds	From 1.30 p.m.
Unit Welfare Clinic	Women's Hospital, Leeds	From 10 a.m. - 12 noon From 2 p.m.
	Church House, Leeds	From 10 a.m. - 12 noon From 2 p.m.
	Village Hall, Leeds	From 2 p.m.
	The Hospital, Church St., Leeds	From 2 p.m.
	All Saints Hall, Leeds	From 2 p.m.
General School Medical and Allotment Clinic	Women's Hospital, Leeds	From 9 - 10.15 a.m.
	Church House, Leeds	From 1.30 p.m.
	Village Hall, Leeds	From 1.30 p.m.
	The Hospital, Church St., Leeds	From 2.30 p.m.
The Clinic	The Hospital, Church St., Leeds	By Appointment
Dental Clinic	The Hospital, Church St., Leeds	"
Guest Clinic	Queen Elizabeth Hospital, Leeds	From 2 p.m. - 5 p.m.
Family Planning Association Clinic	Queen Elizabeth Hospital, Leeds	From 2 p.m. - 5 p.m.
Family Treatment Clinic	The Hospital, Church St., Leeds	By Appointment
General Treatment Clinic	Queen Elizabeth Hospital, Leeds	From 2 p.m. - 5 p.m.
	Queen Elizabeth Hospital, Leeds	From 2 p.m. - 5 p.m.
	Queen Elizabeth Hospital, Leeds	From 2 p.m. - 5 p.m.

FAMILY PLANNING ASSOCIATION

A branch of the Family Planning Association functions in the district. It provides a weekly clinic at the Epsom District Hospital with the consent of the Hospital Management Committee and the Medical Superintendent. The medical staff is appointed by the Association and is assisted by voluntary workers. The work of the Association is concerned with the teaching of contraception to married persons, and also with the investigation of sub-fertility and other sex problems.

Information has been received from the Hon. Secretary, (Mrs. E. M. Hawley, 44 Copse Edge Avenue, Epsom, telephone No. Epsom 2760), of the local branch of the Association, that 2,241 visits were made to the clinic in the past year, including 442 first visits, and that postal enquiries totalled 1,710.

NATIONAL ASSISTANCE ACTS 1948 and 1951

In these Acts powers are given to local authorities to seek a Court Order for the compulsory temporary removal to hospital or institution of a person in ill-health or in a senile state who is in a state of neglect. No action was necessary under this section during the year. Since these powers were conferred on the Council, it has been necessary to use them on one occasion only.

Another section of the 1948 Act empowers local authorities to arrange for the burial of the body of any person who dies in the district where such arrangements are not otherwise being made. No action under this section was required during the year.

FAMILY PLANNING ASSOCIATION

A branch of the Family Planning Association is the district. It provides a variety of services at the request of the Hospital Management Committee and the National Department of Health. The district is organized by the Association and is assisted by voluntary workers. The work of the Association is concerned with the teaching of contraceptive methods, and also with the investigation of sub-fertility and other problems.

Information has been received from the Hon. Secretary, Mrs. E. M. Bailey, 44 Grosvenor Avenue, Ipswich, Suffolk (IP1 1AB), of the local branch of the Association, that 2,411 visits were made to the clinic in the past year, including 1,111 visits, and that general operations totaled 1,710.

NATIONAL ASSOCIATION FOR THE PREVENTION OF CRUELTY TO CHILDREN

In these days of peace and order the local authorities to work a Grant Order for the compulsory temporary removal of children or young persons in the district or in a similar case to the district or region. No action was necessary under this section during the year. Since these powers were conferred on the Council, it has been necessary to use them on the occasion of the

Another section of the 1933 Act requires local authorities to arrange for the burial of the body of any person who dies in the district where such arrangements are not otherwise being made. No action was taken during the year.

WATER SUPPLIES

The district is fortunate in its water supply, which is abundant, of good quality and widely distributed. The East Surrey Water Company is the statutory undertaking for the area. It obtains its water from deep wells sunk into chalk, some of which are situated in this district. Supplies are softened and chlorinated before distribution. A careful control of the raw and treated water is maintained by the company, whose staff includes a full time chemist and bacteriologist. All examinations of the treated water made during the year have been found to be satisfactory.

Examinations are also made at regular intervals on behalf of various local authorities whose districts are served by the company. A typical result of an examination of the Company's water is as follows:-

Colour	Normal
Taste	Nil
Re-action pH	8.1
Electric Conductivity	300
Chloride as Chlorine	23
Hardness: Total	115
Temporary	68
Permanent	47
Nitrate Nitrogen	6.3
Nitrite Nitrogen	Nil
Ammoniacal Nitrogen	0.034
Albuminoid Nitrogen	Nil
Metals: Iron	0.01
Zinc	Nil
Others	Nil
Total Solid Residue	200
Oxygen absorbed	0.00

DRAINAGE AND SEWERAGE

There are two sewage disposal works in the district, one at Leatherhead and the other at Bookham. Both processes are by continuous flow settlement, comprising detritus tanks, primary and secondary settlement tanks, filters, humus tanks and storm water tanks.

Extensions to both these works are necessary due to increased flow and are now in course of construction. At Leatherhead the work includes modification of existing settlement tanks, new circular settlement tanks, new storm water tanks, sludge pumping station, sludge drying beds and main electricity and water supply, additional filter beds and humus tanks. Provision of a new Manager's House, offices, laboratory, canteen and workshops will also be made next year.

The Bookham works require new storm water tanks, outfall and pumping station together with electricity supply, new settlement tank, filter bed and humus tanks.

Sewage sludge is partially dealt with at Leatherhead by composting with processed house refuse, the matured product being sold to farmers, merchants and ratepayers.

A scheme is in course of preparation for main drainage of Manor House Lane, Water Lane and Lower Road, Little Bookham.

WATER SUPPLY

The district is fortunate in its water supply, which is abundant of good quality and widely distributed. The East River Water Company is the primary waterworks for the area. It obtains its water from the wells sunk into the rock, some of which are situated in this district. Supplies are obtained and distributed before distribution. A careful control of the raw and treated water is maintained by the company, whose staff includes a full time chemist and bacteriologist. All examinations of the treated water made during the year have been found to be satisfactory.

Examinations are also made at regular intervals on behalf of various local authorities whose districts are served by the company. A typical result of an examination of the company's water is as follows:-

0.00	Oxygen absorbed
2.00	Total Solids Residue
0.11	Chlorine
0.11	Alum
0.11	Iron
0.00	Aluminium Hydroxide
0.00	Ammoniacal Nitrogen
0.11	Nitrite Nitrogen
0.11	Nitrate Nitrogen
0.11	Permanganate
0.11	Temperature
11.5	Hardness: Total
1.5	Calcium as Calcium
1.0	Magnesium as Magnesium
0.11	Re-soluble in Boiling
0.11	Taste
0.00	Colour

WATER SUPPLY

There are two average diagonal wells in the district, one at Leatherhead and the other at Betchworth. Both processes are by a minimum flow treatment, consisting of settling, filtration and necessary disinfection. Tanks, filters, pump tanks and steam water tanks.

Examinations to both these works are necessary due to the fact that they are now in course of construction. At Leatherhead the water includes modification of existing settling tanks, new chemical tanks, new tanks, new steam water tanks, single pump tanks, single filter tanks and main electricity and water supply, additional filter tanks and pump tanks. Provision of a new pump house, filter, laboratory, concrete and workshops will also be made next year.

The Betchworth works require new steam water tanks, filter and pump tanks together with electricity supply, new settling tank, filter bed and pump tanks.

General sewage is partially dealt with at Leatherhead by a system with improved pump house, the treated effluent being sold to farmers, horticulturists and vegetable growers.

A report in its course of preparation for the drainage of the River Great Ouse, North River and lower Great Ouse.

PUBLIC CLEANSING

The weekly collection of house and trade refuse is made by 6 Shelvoke and Drowry freighters, comprising three 25 cubic yard fore and aft tippers, one 12 cubic yard and two 8 cubic yard side loaders. The fore and aft tippers are all fitted with power presses to produce the 25 cubic yard capacity.

Considerable difficulty is experienced in recruiting suitable labour for refuse collection and the increased capacity of the freighters is reducing the loss of time in journeys to the refuse disposal works.

The refuse is dealt with by separation and salvage at a plant situated at the Leatherhead Sewage Disposal Works, where ash and dust are screened off, bottles, tins, etc., removed on a picking belt, paper and tins baled for sale and the tailings processed and mixed with sewage sludge and sold as a compost for agriculture.

A new entirely mechanised separation, salvage and composing plant is in course of construction to replace the existing one which was constructed in 1936, and it is anticipated that it will come into operation in the Spring of 1960 with an estimated production of 4,000 tons of compost per annum.

CESSPOOLS AND PRIVIES

Cesspool emptying is carried out by a firm under contract to the Council to visit the district twice a month.

Of the 748 cesspools estimated to exist in the district, 176 were emptied during the year, the total number of emptyings being 431.

The charge made to each owner is 30/- per cesspool per emptying, which leaves approximately 39/- per emptying to be met from the rates.

Nine properties were connected to the sewer during the year and the cesspools formerly in use filled in.

SWIMMING POOLS

Three swimming pools were in use during the year. One is a natural pool while the other two are constructed. Water from the two latter pools is obtained from the East Surrey Water Company's mains. When the baths are in use continuous filtration, aeration and chlorination is the method of purification adopted. The time of complete turnover of water is 10 hours in the case of one pool and 8 hours in the other. Samples for bacteriological examination were taken throughout the season and satisfactory results obtained. Tests for residual chlorine were made from time to time by the Public Health Inspectors.

HOUSING STATISTICS

I.	Inspection of dwelling-houses during the year:-		
1.	(a)	Total number of dwelling-houses inspected for housing defects (under the Public Health and Housing Acts)	187
	(b)	Number of inspections made for the purpose	595
2.	(a)	Number of dwelling-houses (included under sub-head above) which were inspected and recorded under the Housing Consolidated Regulations, 1925	14
	(b)	Number of inspections made for the purpose	19
3.		Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	3
4.		Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	35
II.	Remedy of defects during the year without service of Formal Notices:-		
		Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers	37
III.	Action under Statutory Powers during the year:-		
A.	Proceedings under Sections 9, 10 and 12 of the Housing Act, 1937:-		
	(1)	Number of dwelling-houses in respect of which notices were served requiring repairs	Nil
	(2)	Number of dwelling-houses which were rendered fit after service of Formal Notices:-	
	(a)	by owners	Nil
	(b)	by Local Authority in default of owners	Nil
B.	Proceedings under the Public Health Acts:-		
	(1)	Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	1
	(2)	Number of dwelling-houses in which defects were remedied after service of Formal Notices:-	
	(a)	by owners	Nil
	(b)	by Local Authority in default of owners	Nil

HOUSING STATISTICS

1.	Inspection of dwelling-houses during the year-	1.
1917	(a) Total number of dwelling-houses inspected for housing defects (under the Public Health and Housing Acts)	1.
1918	(b) Number of inspections made for the purpose	2.
1919	(a) Number of dwelling-houses (estimated under sub-head above) which were inspected and reported under the Housing (General) Regulations, 1922	3.
1920	(b) Number of inspections made for the purpose	4.
1921	Number of dwelling-houses found to be in a state of dangerous or insanitary condition as to be unfit for human habitation	5.
1922	Number of dwelling-houses (estimated) of which repairs were made under the Housing (General) Regulations, 1922, in all respects found to be in all respects fit for human habitation	6.
1923	Number of defects during the year when service of formal notices-	7.
1924	Number of defective dwelling-houses reported in the course of the year by the local authority or local officers	8.
1925	Number of defective houses during the year-	9.
1926	Proceedings under Sections 9, 10 and 11 of the Housing Act, 1925-	10.
1927	(1) Number of dwelling-houses in respect of which notices were served requiring repairs	11.
1928	(2) Number of dwelling-houses which were reported to the local authority as being in a state of dangerous or insanitary condition	12.
1929	(a) by owner	13.
1930	(b) by local authority in default of owner	14.
1931	Proceedings under the Public Health Act-	15.
1932	(1) Number of dwelling-houses in respect of which notices were served requiring repairs to be remedied	16.
1933	(2) Number of dwelling-houses in which defects were reported after service of formal notices-	17.
1934	(a) by owner	18.
1935	(b) by local authority in default of owner	19.

Housing Statistics (cont.)

III. C.	Proceedings under Section 16 and 23 of the Housing Act, 1957:-	
(1)	Number of dwelling-houses in respect of which Demolition Orders were made	Nil
(2)	Number of dwelling-houses demolished	Nil
	Number of Closing Orders made under Section 17 of the Housing Act, 1957	Nil
	Number of Closing Orders determined	Nil

Rent Act, 1957

No. of applications made for Certificates of Disrepair	3
No. of undertakings accepted	1
No. of Certificates issued	2

IMPROVEMENT GRANTS

Twelve applications for Improvement Grants under the Housing (Financial Provisions) Act, 1958, were received and approved, involving a total monetary grant of £2,924 (one of the grants being declined after receiving approval), resulting in a total of 15 units of improved accommodation.

Nine applications for Standard Grants were received, resulting in the following amenities being provided:-

Baths	8
Wash-hand basins	8
Water Closets	5
Hot Water	9
Food Stores	8

REHOUSING

I am informed by the Council's Housing Manager that during the year the number of names on the application list for Council houses decreased from 419 to 391.

The number of applicants rehoused was 72 and in 8 of these serious ill-health was a factor in their selection.

ERECTION OF NEW HOUSES

I am indebted to the Council's Engineer and Surveyor for the following information:-

No. of houses erected by local authority in 1959	14
No. of houses erected by private enterprise in 1959	305

III. C. Proceedings under Section 15 and 17 of the Housing Act, 1937:-

171	(1) Number of dwelling-houses in respect of which Dwelling Orders were made
172	(2) Number of Dwelling Orders cancelled
173	Number of Dwelling Orders made under Section 15 of the Housing Act, 1937
174	Number of Dwelling Orders determined

Hous. Act, 1937

3	No. of applications made for Certificate of Disrepair
1	No. of undertakings accepted
2	No. of Certificates issued

RENEWAL GRANTS

Twelve applications for Renewal Grants under the Housing (Financial Provisions) Act, 1937, were received and approved, involving a total monetary grant of £2,901 (one of the grants being granted after receiving approval), resulting in a total of 15 units of improved accommodation.

Nine applications for Renewal Grants were received, resulting in the following amounts being provided:-

2	Baths
2	Ward-room heating
2	Water Closets
2	Hot Water
2	Boiler Rooms

REPAIRS

I am informed by the Council's Housing Manager that during the year the number of houses in the Council's stock for Council repairs decreased from 419 to 391.

The number of applications received from 15 and in 8 of these cases 111-months was a factor in their selection.

REPAIRS TO THE STOCK

I am indebted to the Council's Engineer and Surveyor for the following information:-

14	No. of houses erected by local authority in 1937
302	No. of houses erected by private enterprise in 1937

INSPECTION AND SUPERVISION OF FOOD

The report of the Chief Public Health Inspector gives details of the work done in connection with the supervision of food. It also contains details of the work done in connection with sampling under the Food and Drugs Act, 1955, of which the Council took over responsibility from the County Council in 1955.

REPORT

No case of cholera was notified during the year.

Notification of Cholera

During the year notifications were received from medical practitioners of 10 primary vaccinations, and 125 notifications which had been performed by them. Of the primary vaccinations, 77% related to children under the age of one year, and 23% of the total of 135 notifications in the district during the year. This compares with a record notified vaccination rate of 75% for England and Wales.

REPORT 1955

Fifty-five cases of cholera were notified during the year compared with 20 in the previous year. The incidence rate was 1.15 per 1,000 population. The patients were treated at hospital because of inadequate facilities for carrying them at home.

Fortunately the increase in incidence was not associated with any increase in incidence of the infection. The time to diagnosis was not confined to this locality, but occurred over a large part of the country.

REPORT 1956

For the fourth year in succession no case of cholera was notified in the district.

References to Table 2 reference the cholera which was taken place in the incidence of this disease since 1954.

Cholera Incubation

The aim in the early child is to develop a primary resistance in the first year of life with reinforcing treatment every 2 to 4 years up to the end of childhood. It is not clearly seen with such treatment, that cholera incubation will be attended by early onset, but there is clear evidence that the risk of an unimmunized child contracting cholera is four times as great as that of an immunized child, and that the risk of death is nearly thirty times as great.

Although no case of cholera has been notified in Leicestershire since 1956, the incidence of cholera in 1955, during the past two years, has increased to the incidence of cholera in several parts of the

The report of the United States Labor Inspector gives details of the work done in connection with the supervision of labor. It also contains details of the work done in connection with paying under the Ford and Gough Act, 1935, of which the Bureau took over responsibility from the County Council in 1935.

6. PREVALENCE OF, AND CONTROL OVER, INFECTIOUS DISEASE

Included in Table I are the incidence and death rates of infectious diseases. Incidence rates are estimated per 1,000 population with the exception of the rate for puerperal pyrexia, which is based on 1,000 live and still births. Figures for 1958 are reproduced for purposes of comparison.

Table IV shows the number of cases of infectious disease (except tuberculosis) notified during 1959, classified according to disease, age and sex. Table VI gives similar details for tuberculosis.

SMALLPOX

No case of smallpox was notified during the year.

Vaccination against Smallpox

During the year notifications were received from medical practitioners of 434 primary vaccinations, and 133 re-vaccinations which had been performed by them. Of the primary vaccinations, 374 related to children under the age of one year, equivalent to 70% of the number of births registered in the district during the year. This compares with a recent estimated vaccination rate of 45% for England and Wales.

SCARLET FEVER

Fifty-four cases of scarlet fever were notified during the year, compared with 20 in the previous year. The incidence rate was 1.56 per 1,000 population. Two patients were removed to hospital because of inadequate facilities for nursing them at home.

Fortunately the increase in numbers was not associated with any increase in virulence of the infection. The rise in incidence was not confined to this locality, but occurred over a large part of the country.

DIPHTHERIA

For the twelfth year in succession no case of diphtheria was notified in the district.

Reference to Table V indicates the decline which has taken place in the incidence of this disease since 1934.

Diphtheria Immunisation

The aim is for every child to receive a primary treatment in its first year of life with reinforcing treatment every 3 to 4 years up to the end of school life. It is not claimed, even with such treatment, that absolute immunisation will be attained by every child, but there is clear evidence that the risk of an untreated child contracting diphtheria is four times as great as that of an immunised child, and that the risk of death is nearly thirty times as great.

Although no case of diphtheria has been notified in Leatherhead Urban District for twelve years, there has been, during the past two years, an increase in the incidence of this disease in several parts of the

Included in Table I are the incidence and death rates of infectious diseases. Incidence rates are estimated per 1,000 population with the exception of the rate for gonorrhea, which is based on 1,000 live and still births. Figures for 1948 are represented for purposes of comparison.

Table IV shows the number of cases of infectious diseases (except tuberculosis) notified during 1958, classified according to disease, age, and sex. Table VI gives similar details for tuberculosis.

IMMUNIZATION

No case of measles was notified during the year.

Vaccination against Scabies

During the year notification was received from medical practitioners of 434 primary vaccinations, and 133 re-vaccinations which had been performed by them. Of the primary vaccinations, 336 related to children under the age of one year, equivalent to 70% of the number of births registered in the district during the year. This compares with a recent estimated vaccination rate of 42% for England and Wales.

SCABIES FEVER

Fifty-four cases of scabies fever were notified during the year, compared with 20 in the previous year. The incidence rate was 1.35 per 1,000 population. Two patients were removed to hospital because of inadequate facilities for nursing them at home.

Fortunately the incidence in infants was not associated with any increase in violence of the infection. The rise in incidence was not confined to this locality, but occurred over a large part of the country.

DIPHTHERIA

For the twelfth year in succession no case of diphtheria was notified in the district.

References to Table V indicate the decline which has taken place in the incidence of this disease since 1934.

Diphtheria Vaccination

The aim is for every child to receive a primary treatment in the first year of life with reinforcing treatment every 3 to 4 years up to the end of school life. In the past children, even with such treatment, had absolute immunity will be obtained by every child, but there is clear evidence that the risk of an untreated child contracting diphtheria is four times as great as that of an immunized child, and that the risk of death is nearly thirty times as great.

Although no case of diphtheria has been notified in Dorsetshire since 1934, for twelve years, there has been, during the past few years, an increase in the incidence of this disease in several parts of the

Diphtheria Immunisation (cont.)

country, including the London area. Immunisation against diphtheria, therefore, retains its importance in the immunisation programme, for diphtheria is only one of the diseases which can be controlled by immunisation. Others include smallpox, against which vaccination is desirable in the first four months of life, whooping cough, which is often most severe and dangerous in young infants and, therefore, treatment should be concluded as soon as possible after six months of age, poliomyelitis, which is at its most commonest, if not at its severest, in the early years, and therefore must be included in the immunisation programme at this stage. Tetanus, although a rare disease now, requires consideration before the end of the first year.

Fortunately it is sometimes possible to combine the treatment against diphtheria and tetanus in one series of injections, and sometimes to add whooping cough. If this can be arranged with the doctor giving the treatment it certainly eases the burden on the mother and is not so trying to the patience of the child.

Treatment can be obtained from general practitioners under the terms of the National Health Service Act, or from clinics arranged by the local health authority, these being held at regular intervals at all Infant Welfare Centres serving the district, of which details are set out on page 9. These arrangements are intended primarily for infants and others under school age. Clinics in schools are arranged as required by the Divisional Medical Officer for pupils requiring treatment.

Notifications were received from medical practitioners and clinics that 567 children received primary treatment and 621 received reinforcing doses. The following figures show how the facilities for treatment have been used.

	<u>Primary Treatment</u>	<u>Reinforcing Doses</u>
Treated at Clinics and Schools	358	538
Treated by General Practitioners	<u>209</u>	<u>83</u>
	567	621

At the end of the year it was estimated that 61% of children under the age of 15 years had been treated and were still in an effective state of immunity.

WHOOPING COUGH

Four cases of whooping cough were notified compared with 3 in the previous year. The incidence rate was 0.12 per 1,000 population. There were no deaths from the disease.

Whooping Cough Immunisation

Notifications were received from medical practitioners and clinics that 540 children had received treatment for immunisation. In 458 children the treatment was combined with immunisation against diphtheria, and in 450 of these immunisation against tetanus was also included.

Diagnosis (cont.)

country, including the London area. Immunisation against diphtheria, however, remains the important factor in the immunisation programme, for diphtheria is only one of the diseases which can be controlled by immunisation. Other factors, such as the control of streptococcal infection, are also important in the control of diphtheria, which is often a complication of streptococcal infection. It is not possible to control diphtheria by immunisation alone, but it is possible to control it by immunisation and by the control of streptococcal infection. It is not possible to control diphtheria by immunisation alone, but it is possible to control it by immunisation and by the control of streptococcal infection. It is not possible to control diphtheria by immunisation alone, but it is possible to control it by immunisation and by the control of streptococcal infection.

Fortunately it is sometimes possible to control the treatment against diphtheria and tetanus in the case of infants, and sometimes to add streptococcal control. It is not possible to control diphtheria by immunisation alone, but it is possible to control it by immunisation and by the control of streptococcal infection. It is not possible to control diphtheria by immunisation alone, but it is possible to control it by immunisation and by the control of streptococcal infection.

Treatment can be obtained from general practitioners under the terms of the National Health Service Act, or from clinics arranged by the local health authority, some being held at regular intervals at all infant health centres serving the district, or which details are set out on page 2. These arrangements are intended primarily for infants and other children aged 15 years and under who are not vaccinated by the National Health Service for specific vaccination.

Notifications were received from medical practitioners and clinics that 567 children received primary vaccination and 421 received revaccination during the year. The following figures show how the facilities for treatment have been used.

Primary Vaccination Facilities

Treated at Clinics and Schools		Treated by General Practitioners	
567	421	567	421
567	421	567	421

At the end of the year it was estimated that 615 of children under the age of 15 years had been treated and were still in an effective state of immunity.

Revaccination

Four groups of children were vaccinated against diphtheria and tetanus during the year. The first group was aged 15 years and over, the second group was aged 10 years and over, the third group was aged 5 years and over, and the fourth group was aged 2 years and over.

Revaccination

Notifications were received from medical practitioners and clinics that 567 children had received revaccination against diphtheria and tetanus during the year. The following figures show how the facilities for revaccination have been used.

MEASLES

Four hundred and ninety-eight cases of measles were notified during the year, compared with 104 in 1958. No death from the disease was recorded. The incidence rate was 14.4 per 1,000 population

ACUTE POLIOMYELITIS

No case of poliomyelitis was received.

Poliomyelitis Vaccination

Vaccination against poliomyelitis must now take first place in the means of prevention of this disease. It is too early yet to know how effective the vaccine at present in use will be, and it will be a few years before a complete picture can be obtained of the efficiency and duration of its protective powers. In spite of this, and taking into consideration the malignant nature of the disease and the ineffectiveness of other methods of controlling it, everyone eligible to apply for treatment should do so at the earliest opportunity. The age limit has now been extended from 25 to 40 years of age. Expectant mothers are given priority, as well as members of the health and hospital services and travellers abroad, irrespective of age.

It is estimated that 1,306 persons under the age of 18 years and 3,575 over 18 years of age were vaccinated during the year. Approximately 36% of the total was treated by general practitioners, the remainder at clinics arranged by the Divisional Medical Officer.

Since vaccination against poliomyelitis first became available approximately 6,855 persons under 18 years of age have been treated, that age limit representing 93% treated. Between the ages of 18 and 40 years approximately 4,000 persons have been treated, representing a percentage of 35% of the population in those age groups.

PUERPERAL PYREXIA

Two notifications of puerperal pyrexia were received, giving an incidence rate of 3.7 per 1,000 births (live and still). The comparable rate for England and Wales was 14.8. It should be noted that the majority of confinements of women resident in the Leatherhead Urban District takes place in either the Epsom or Dorking General Hospitals. When the notifications received in 1959 from these institutions were analysed, it was found that 7 patients had their permanent residence in the Leatherhead Urban District, and the notifications of puerperal pyrexia relating to them were received and accepted by the local authority of those areas.

FOOD POISONING

Of the 4 cases notified 2 were in one family, the infection being caused by *Salmonella typhi-murium*. A third case was also caused by this organism, and it was necessary to request the patient to abstain from work, which involved food preparation, for a precautionary period to ensure complete absence of infection before returning. Financial compensation for loss of wages was made by the Council. In the fourth case of food poisoning, the causative organism could not be determined.

RESULTS

Four hundred and ninety-eight cases of measles were notified during the year, compared with 101 in 1931. No death from the disease was recorded. The incidence rate was 1.4 per 1,000 population.

MEASLES

No case of poliomyelitis was recorded.

Poliovaccination

Vaccination against poliomyelitis was held in three places in the course of prevention of this disease. It is now early yet to know how effective the vaccine is, but it will be, and it will be a few years before a complete picture can be obtained of the efficiency and duration of the protective power. In spite of this, and taking into consideration the malignant nature of the disease and the ineffectiveness of other methods of controlling it, every child should be vaccinated as early as possible. The age limit has now been extended from 15 to 40 years of age. Vaccination should be given freely, as well as to adults of the health and hospital services and travellers abroad, irrespective of age.

It is estimated that 1,200 persons under the age of 15 years and 3,500 over 15 years of age were vaccinated during the year. Approximately 25% of the total was treated by parental practitioners, the remainder at clinics arranged by the Divisional Medical Officer.

Since vaccination against poliomyelitis first became available approximately 6,000 persons under 15 years of age have been vaccinated. About one-third representing 75% treated. Between the ages of 15 and 40 years approximately 4,000 persons have been vaccinated, representing a percentage of 5% of the population in these age groups.

MEASLES

The notification of proposed persons was received during an incidence rate of 1.7 per 1,000 births (1931 and 1932). The percentage rate for England and Wales was 1.4. It should be noted that the majority of notifications of women received in the last year were from the notification received in 1932 from these institutions were notified. It was found that 7 persons had their permanent residence in the last year, and the notification of proposed persons relating to them were received and accepted by the local authority of their area.

MEASLES

Of the 4 cases notified 2 were in children, the infection being caused by influenza type A virus. A third case was also caused by this organism, and it was necessary to suggest the patient to obtain from the local authority a certificate for a preliminary period of 14 days before admission to hospital. In the fourth case of food poisoning, the causative organism could not be identified.

TETANUS

No case of tetanus was reported

Immunisation against Tetanus

Five hundred and twenty-eight persons, the majority of whom were children, were given active immunisation against tetanus. In 450 cases the treatment was given in combination with other prophylactics.

TUBERCULOSIS

During the year the names of 33 persons were added to the tuberculosis register, and 36 were removed. Details of these alterations are as follows:-

<u>Additions to Register</u>		<u>Removals from Register</u>	
Primary notifications relating to persons already residing in this district	18	By removals to other districts	13
Transfer of persons previously notified in other areas, now residing in this district	13	By recovery	18
		By death	5 +
Restored to register	<u>2</u>		<u> </u>
	33		36
	<u> </u>		<u> </u>

+ In three out of five cases the cause of death was not attributed to tuberculosis.

Notification of Tuberculosis

Eighteen primary notifications of tuberculosis were received from medical practitioners of persons certified to be suffering from that disease. These concerned residents of the district in which the disease was recognised for the first time. In Table VI they are classified by sex and age, and in Table VII the number of new cases of tuberculosis notified and the resultant incidence rates since 1934 have been tabulated. The figures emphasise the improvement which has taken place in regard to this disease.

Deaths from Tuberculosis

Two deaths from pulmonary tuberculosis were registered, giving a death rate of 0.06 per 1,000 population, compared with a rate of 0.08 for England and Wales.

Table VII illustrates the trend which the mortality figures for tuberculosis have assumed since 1934. The figures reflect the improvement which has taken place in the methods of treatment of tuberculosis by streptomycin, para-amino-salicylic acid and isoniazid. Infectivity as well as mortality is reduced by these agents. If everyone with persistent respiratory symptoms took advantage of the existing facilities for chest radiography the number of infected persons at large in the community in a condition dangerous to other people would be rapidly reduced. The benefit of early diagnosis and treatment would be apparent at once to the patient by the improvement in his health, and to the community by the reduction of the number of new cases resulting from the curtailment of his period of infectivity.

RESULTS

No case of tetanus was reported

Immunization against Tetanus

Fifty hundred and twenty-eight persons, the majority of whom were children, were given active immunization against tetanus. In 430 cases the treatment was given in combination with other prophylactics.

TABLE VII

During the year the names of 33 persons were added to the tetanus toxoid register, and 36 were removed. Details of these additions are as follows:-

Additions to Register		Removals from Register	
Primary notification relating to persons already residing in this district	18	By recovery	18
Transfer of persons previously notified in other areas, now residing in this district	13	By death	2
Referred to register	31		
	31		30

In three out of five cases the cause of death was not attributed to tetanus.

Estimation of Tetanus

Eighteen primary notifications of tetanus were received from medical practitioners of persons certified as suffering from that disease. These concerned residents of the district in whom the disease was recognized for the first time. In Table VI they are classified by sex and age, and in Table VII the number of new cases of tetanus notified and the resultant incidence rates since 1934 have been tabulated. The figures emphasize the importance which has taken place in regard to this disease.

Deaths from Tetanus

Two deaths from primary tetanus were registered, giving a death rate of 0.05 per 1,000 population, compared with a rate of 0.03 in England and Wales.

Table VII illustrates the trend since the mortality figures for tetanus have fallen since 1934. The figures reflect the improvement which has taken place in the nature of treatment of tetanus by antitoxin, penicillin, and other measures, and the fact that as well as continuing to be reported by those agents. It compares with previous notifications of tetanus which were reported as being in the majority in a condition known as other forms of rapidly advancing. The benefits of early diagnosis and treatment were apparent at once to the patient by the improvement in the death rate, and the decrease in the number of new cases resulting from the improvement of his period of incubation.

B. C. G. Vaccination

This treatment is available at Chest Clinics to contacts in the family of tuberculous persons, if preliminary testing shows that they have not already been infected. It has also been offered to children approaching school leaving age. The treatment in schools is carried out by the staff of the Divisional Medical Officer, who has provided the following information relating to the work done in local schools in 1959.

Communications were sent to the parents of school children ascertained to be in the age group concerned, with the following results:-

Number offered treatment	540
Number consenting	361 (equivalent to 66.9%)
Number vaccinated	342 (equivalent to 63.1%)

Of the total of 361 children for whom consents were obtained, 4 failed to attend the clinic held for the purpose of testing and treating. Fourteen were found to be positive to the preliminary Mantoux test and were therefore excluded from subsequent treatment.

EPSOM, LEATHERHEAD AND DISTRICT CARE COMMITTEE

The Epsom, Leatherhead and District Tuberculosis Care Committee has continued its work with energy during the year under the Chairmanship of Alderman Mrs. A. Winter. The Secretary of the Committee is Miss M. Wright, who is also the Surrey County Council's Care Almoner in the area, and the Treasurer is Mr. T. L. Flanagan, of the Epsom Branch of the Westminster Bank. Members of the Committee include representatives of the Leatherhead Urban District Council, Epsom and Ewell Borough Council, Associations and Societies interested in social welfare and officers engaged in work connected with health, welfare and relief. Thus the Committee is in a good position to help solve the special problems of the tuberculous person and the household to which he belongs, and much valuable work has been done.

MASS RADIOGRAPHY

Information has been received from the Medical Director of the Mass Radiography Service that during the year a unit visited an industrial concern in the district and 633 persons were X-rayed. No significant abnormalities were detected among those examined.

Another unit visited Bookham at fortnightly intervals setting up in the Old Crown Car Park on the first and third Wednesdays of each month from 2.45 p.m. to 3.30 p.m. This was an experimental scheme to encourage the X-ray examination of patients attending their doctors for symptoms referable to diseases of the chest. Eighty-nine persons were referred to the unit.

This treatment is available at Great Britain to contacts in the family of tuberculous persons, it is particularly serious when they have not already been infected. It has also been offered to children attending school leaving age. The treatment in schools is carried out by the staff of the National Medical Officer, who has provided the following information relating to the work done in local schools in 1955.

Communications were sent to the parents of school children ascertained to be in the age group concerned, with the following results:

340	Number offered treatment
341 (equivalent to 64.9%)	Number consenting
342 (equivalent to 63.1%)	Number vaccinated

Of the total of 341 children for whom answers were obtained, 4 failed to attend the clinic held for the purpose of testing and treatment. Reasons were found to be positive for the following: Mental test and were therefore excluded from subsequent treatment.

FROM LEATHERHEAD AND DISTRICT CASE COMMITTEE

The Bases, Leatherhead and District Tuberculosis Case Committee has continued its work with energy during the year when the Chairman, Mr. A. Winter, The Secretary of the Committee is Mrs. M. Wright, who is also the Surrey County Council's Case Officer in the area; and the Treasurer is Mr. T. L. Linnam, of the Bases Branch of the Leatherhead Town. Members of the Committee include representatives of the Leatherhead Urban District Council, Epsom and Ewell Borough Council, Association and Districts interested in mental welfare and others engaged in work connected with mental welfare and welfare. The Committee is in a good position to help solve the special problems of the tuberculous person and the household in which he belongs, and much valuable work has been done.

MASS RADIOGRAPHY

Information has been received from the Medical Director of the Mass Radiography Service that during the year a total of 100 tuberculous persons in the district and 100 persons were X-rayed. No significant abnormalities were detected among these numbers.

Another unit visited Bognor at fortnightly intervals setting up in the Old Green Car Park on the first and third Wednesdays of each month from 2.45 p.m. to 5.30 p.m. There was an exceptional success for example the 1000 examination of patients attending their doctors for symptoms referable to disease of the chest. High-grade persons were referred to the unit.

TABLE I. COMPARATIVE BIRTH, DEATH AND
MATERNAL MORTALITY RATES AND INCIDENCE
RATES FOR INFECTIOUS DISEASES FOR THE
YEARS 1958 - 1959

	1958	1959
<u>Rates per 1,000 Population</u>		
<u>BIRTHS</u>		
Live Births (Crude)	14.9	15.0
<u>DEATHS</u>		
All Causes (Crude)	9.9	8.8
Typhoid and Paratyphoid	-	-
Whooping Cough	-	-
Diphtheria	-	-
Tuberculosis	0.03	0.06
Influenza	0.03	0.14
Smallpox	-	-
Polionyelitis	-	-
Pneumonia	0.29	0.35
<u>NOTIFICATIONS (Corrected)</u>		
Typhoid Fever	-	-
Paratyphoid Fever	0.03	-
Meningococcal Infection	-	-
Scarlet Fever	0.59	1.56
Whooping Cough	0.09	0.12
Diphtheria	-	-
Erysipelas	0.18	0.32
Smallpox	-	-
Measles	3.08	14.38
Pneumonia	0.80	0.46
Polionyelitis, Paralytic	-	-
Non-Paralytic	-	-
Food Poisoning	0.12	0.12
Dysentery	-	-
Tuberculosis, Respiratory	0.18	0.52
Non-Respiratory	0.03	-
<u>Rates per 1,000 Live Births</u>		
<u>INFANT MORTALITY</u>		
Under 1 year of age	10.0	15.4
Under 4 weeks of age (Neonatal)	8.0	13.5
Under 1 week of age (Early Neonatal)	-	11.6
<u>Rates per 1,000 Total (Live & Still) Births</u>		
Still Births	11.8	30.0
Perinatal Mortality	-	41.2
Puerperal Pyrexia	-	3.7
Maternal Mortality	-	-

TABLE I. COMPARATIVE DATA, 1932 AND
NATURAL MORTALITY RATES AND HATCHES
RATES FOR FISHES CAPTURED FOR THE
FISH COMMISSION - 1932

1932	1931	
		<u>Notes per 1,000 Fishes</u>
		<u>Notes per 1,000 Fishes</u>
12.0	14.0	Notes per 1,000 Fishes
6.8	6.8	Notes per 1,000 Fishes
-	-	Notes per 1,000 Fishes
-	-	Notes per 1,000 Fishes
0.08	0.08	Notes per 1,000 Fishes
0.14	0.14	Notes per 1,000 Fishes
-	-	Notes per 1,000 Fishes
-	-	Notes per 1,000 Fishes
0.25	0.25	Notes per 1,000 Fishes
		<u>Notes per 1,000 Fishes</u>
-	-	Notes per 1,000 Fishes
-	-	Notes per 1,000 Fishes
-	-	Notes per 1,000 Fishes
1.25	0.25	Notes per 1,000 Fishes
0.15	0.08	Notes per 1,000 Fishes
-	-	Notes per 1,000 Fishes
0.25	0.15	Notes per 1,000 Fishes
-	-	Notes per 1,000 Fishes
14.35	1.25	Notes per 1,000 Fishes
0.25	0.25	Notes per 1,000 Fishes
-	-	Notes per 1,000 Fishes
-	-	Notes per 1,000 Fishes
0.15	0.15	Notes per 1,000 Fishes
-	-	Notes per 1,000 Fishes
0.25	0.15	Notes per 1,000 Fishes
-	-	Notes per 1,000 Fishes
		<u>Notes per 1,000 Fishes</u>
		<u>Notes per 1,000 Fishes</u>
12.1	10.0	Notes per 1,000 Fishes
12.0	0.0	Notes per 1,000 Fishes
12.0	-	Notes per 1,000 Fishes
		<u>Notes per 1,000 Fishes</u>
12.0	11.0	Notes per 1,000 Fishes
12.0	-	Notes per 1,000 Fishes
12.0	-	Notes per 1,000 Fishes
-	-	Notes per 1,000 Fishes

TABLE II
COMPARATIVE BIRTH, DEATH AND INFANT MORTALITY RATES 1931-1959
(DECENNIAL AVERAGES 1931-1950)

Period	Birth Rate per 1,000 Population			Death Rate per 1,000 Population			Death Rate of children under 1 year of age per 1,000 Live Births		
	England and Wales	Leatherhead Urban District		England and Wales	Leatherhead Urban District		England and Wales	Leatherhead Urban District	No. of Infant Deaths
		Crude	Corrected		Crude	Corrected			
1931-1940	14.9	13.3		12.2	9.3		58	33	11
1941-1950	16.9	16.4		12.3	10.0		43	27	3
1951	15.5	13.6	13.6	12.5	10.9	9.9	29.6	7.9	11
1952	15.3	12.9	12.9	11.3	10.0	9.1	27.6	30.2	4
1953	15.5	13.6	14.6	11.4	9.5	8.1	26.8	10.2	10
1954	15.2	12.8	13.7	11.3	8.2	6.9	25.4	26.2	11
1955	15.0	14.4	15.4	11.7	10.3	8.8	24.9	24.9	6
1956	15.6	13.2	13.4	11.7	8.0	8.0	23.7	14.3	9
1957	16.1	14.8	14.9	11.5	9.3	9.3	23.1	18.6	5
1958	16.4	14.9	14.7	11.7	9.9	10.2	22.5	10.0	8
1959	16.5	15.0	14.8	11.6	8.8	9.0	22.0	15.4	

TABLE III

CAUSES OF DEATH IN THE LEATHERHEAD URBAN DISTRICT

	M	F	Total
1. Tuberculosis of the respiratory system	1	1	2
2. Other forms of Tuberculosis	-	-	-
3. Syphilitic Disease	-	-	-
4. Diphtheria	-	-	-
5. Whooping Cough	-	-	-
6. Meningococcal Infections	-	-	-
7. Acute Poliomyelitis	-	-	-
8. Measles	-	-	-
9. Other infective and parasitic diseases	-	-	-
10. Malignant neoplasm, stomach	8	2	10
11. Malignant neoplasm, lung, bronchus	8	3	11
12. Malignant neoplasm, breast	-	6	6
13. Malignant neoplasm, uterus	-	1	1
14. Other malignant and lymphatic neoplasms	19	15	34
15. Leukaemia, aleukaemia	1	1	2
16. Diabetes	-	-	-
17. Vascular lesions of nervous system	11	27	38
18. Coronary disease angina	31	27	58
19. Hypertension with heart disease	3	2	5
20. Other heart disease	15	23	38
21. Other circulatory disease	10	6	16
22. Influenza	1	4	5
23. Pneumonia	10	2	12
24. Bronchitis	5	3	8
25. Other diseases of respiratory system	1	1	2
26. Ulcer of stomach and duodenum	2	4	6
27. Gastritis, enteritis and diarrhoea	2	-	2
28. Nephritis and Nephrosis	-	1	1
29. Hyperplasia of prostate	2	-	2
30. Pregnancy, childbirth and abortion	-	-	-
31. Congenital malformations	2	2	4
32. Other defined and ill-defined diseases	14	10	24
33. Motor vehicle accidents	3	1	4
34. All other accidents	1	3	4
35. Suicide	4	1	5
36. Homicide and operations of war	-	-	-

TABLE III

CAUSES OF DEATH IN THE LEAST-DEVELOPED COUNTRIES

	N	%	Total
1. Infectious and parasitic diseases	1	1	2
2. Tuberculosis of the respiratory system	1	1	1
3. Other forms of tuberculosis	1	1	1
4. Syphilis	1	1	1
5. Diphtheria	1	1	1
6. Whooping cough	1	1	1
7. Measles	1	1	1
8. Acute poliomyelitis	1	1	1
9. Other infectious and parasitic diseases	1	1	1
10. Malignant neoplasms	1	1	10
11. Malignant neoplasms, lung, bronchus	1	1	11
12. Malignant neoplasms, breast	1	1	1
13. Malignant neoplasms, stomach	1	1	1
14. Other malignant and lymphatic neoplasms	1	1	34
15. Leukemia, lymphoma	1	1	1
16. Diabetes	1	1	1
17. Vascular lesions of nervous system	1	1	30
18. Coronary disease	1	1	30
19. Hypertension with heart disease	1	1	1
20. Other heart disease	1	1	30
21. Other circulatory diseases	1	1	10
22. Influenza	1	1	1
23. Pneumonia	1	1	10
24. Bronchitis	1	1	1
25. Other diseases of respiratory system	1	1	1
26. Ulcer of stomach and duodenum	1	1	1
27. Gastritis, enteritis and diarrhoea	1	1	1
28. Nephritis and nephrosis	1	1	1
29. Hypertension of kidneys	1	1	1
30. Pregnancy, childbirth and abortion	1	1	1
31. Congenital malformations	1	1	1
32. Other defects and ill-defined diseases	1	1	34
33. Motor vehicle accidents	1	1	1
34. All other accidents	1	1	1
35. Suicide	1	1	1
36. Unknown and unspecified causes	1	1	1

TABLE IV

NOTIFICATION OF INFECTIOUS DISEASES BY AGE AND SEX

(For Tuberculosis see Table VI)

	Under 1 year		1 - 2		3 - 4		5 - 9		10 - 14		15 - 24		25 - 44		45 - 64		65 years & over		All ages		Total all ages both sexes
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
Typhoid Fever	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Paratyphoid Fever	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Meningococcal Infections	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Scarlet Fever	-	-	1	3	3	4	21	18	2	1	1	-	-	-	-	-	-	-	28	26	54
Whooping Cough	-	-	-	1	-	-	2	-	-	-	-	-	-	-	-	-	-	-	2	2	4
Diphtheria	-	-	-	-	-	-	-	-	-	-	-	-	2	-	1	-	-	-	3	8	11
Erysipelas	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Smallpox	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Measles	4	7	49	38	65	60	114	128	7	14	1	4	-	-	-	-	-	240	258	498	16
Pneumonia	-	-	-	-	-	-	-	-	-	-	1	2	-	-	-	-	-	7	9	-	-
Poliomyelitis, Paralytic	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Non-Paralytic	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Food Poisoning	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Dysentery	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	3	-	4
Malaria	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Puerperal Pyrexia	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2

STATEMENT OF INVESTMENT EXPENDITURE IN THE YEAR 1960

Page 1

(See instructions on page 1)

Line Item	Amount	Percentage	Source
1. General Administration	100.00	100.00	State
2. Planning and Development	100.00	100.00	State
3. Economic Development	100.00	100.00	State
4. Social Services	100.00	100.00	State
5. Health Services	100.00	100.00	State
6. Education	100.00	100.00	State
7. Housing	100.00	100.00	State
8. Transportation	100.00	100.00	State
9. Public Works	100.00	100.00	State
10. Other	100.00	100.00	State
11. Total	100.00	100.00	State

TABLE V
INCIDENCE OF DIPHTHERIA IN THE LEATHERHEAD URBAN DISTRICT
(QUINQUENNIAL AVERAGES 1934-1948)

Year	Number of cases notified	Incidence Rate per 1,000 Population	Mortality Rate per 1,000 Population
1934 - 1938	10.8	0.55	0.04
1939 - 1943	4.4	0.18	0.01
1944 - 1948	0.8	0.03	0.01
1949 - 1953	-	-	-
1954 - 1958	-	-	-
1959	-	-	-

Year	Number of cases reported	Year	Number of cases reported	Year	Number of cases reported
1941	-	1942	-	1943	-
1944 - 1949	-	1945	-	1946	-
1950 - 1959	-	1951	-	1952	-
1960 - 1969	0.0	1961	0.0	1962	0.0
1970 - 1979	0.0	1971	0.0	1972	0.0
1980 - 1989	0.0	1981	0.0	1982	0.0
1990 - 1999	0.0	1991	0.0	1992	0.0
2000 - 2009	0.0	2001	0.0	2002	0.0
2010 - 2019	0.0	2011	0.0	2012	0.0
2020 - 2029	0.0	2021	0.0	2022	0.0
2023 - 2029	0.0	2024	0.0	2025	0.0
2026 - 2029	0.0	2027	0.0	2028	0.0
2029 - 2039	0.0	2030	0.0	2031	0.0
2032 - 2039	0.0	2033	0.0	2034	0.0
2035 - 2039	0.0	2036	0.0	2037	0.0
2038 - 2039	0.0	2039	0.0	2040	0.0
2041 - 2049	0.0	2042	0.0	2043	0.0
2044 - 2049	0.0	2045	0.0	2046	0.0
2047 - 2049	0.0	2048	0.0	2049	0.0
2050 - 2059	0.0	2051	0.0	2052	0.0
2053 - 2059	0.0	2054	0.0	2055	0.0
2056 - 2059	0.0	2057	0.0	2058	0.0
2059 - 2069	0.0	2060	0.0	2061	0.0
2062 - 2069	0.0	2063	0.0	2064	0.0
2065 - 2069	0.0	2066	0.0	2067	0.0
2068 - 2069	0.0	2069	0.0	2070	0.0
2071 - 2079	0.0	2072	0.0	2073	0.0
2074 - 2079	0.0	2075	0.0	2076	0.0
2077 - 2079	0.0	2078	0.0	2079	0.0
2080 - 2089	0.0	2081	0.0	2082	0.0
2083 - 2089	0.0	2084	0.0	2085	0.0
2086 - 2089	0.0	2087	0.0	2088	0.0
2089 - 2099	0.0	2090	0.0	2091	0.0
2092 - 2099	0.0	2093	0.0	2094	0.0
2095 - 2099	0.0	2096	0.0	2097	0.0
2098 - 2099	0.0	2099	0.0	2100	0.0

(Continued on page 134-135)

TABLE 1. SUMMARY OF THE DATA FOR THE PERIOD 1941-1999

TABLE 1

TABLE VI
NOTIFICATION OF TUBERCULOSIS BY AGE AND SEX
AND
DEATHS FROM TUBERCULOSIS BY AGE AND SEX

<u>Age</u>	<u>Notifications</u>				<u>Deaths</u>			
	<u>Pulmonary</u>		<u>Non-Pulmonary</u>		<u>Pulmonary</u>		<u>Non-Pulmonary</u>	
	M	F	M	F	M	F	M	F
Under 1 year	-	-	-	-	-	-	-	-
1 - 4	-	-	-	-	-	-	-	-
5 - 9	-	-	-	-	-	-	-	-
10 - 14	-	-	-	-	-	-	-	-
15 - 19	-	-	-	-	-	-	-	-
20 - 24	3	1	-	-	-	-	-	-
25 - 34	1	3	-	-	-	-	-	-
35 - 44	2	1	-	-	-	-	-	-
45 - 54	3	-	-	-	1	-	-	-
55 - 64	2	-	-	-	-	1	-	-
65 years & over	1	1	-	-	-	-	-	-
TOTAL	12	6	-	-	1	1	-	-

Date	No. of specimens				No. of specimens		Total
	1	2	3	4	5	6	
1	1	1	1	1	1	1	6
2	1	1	1	1	1	1	6
3	1	1	1	1	1	1	6
4	1	1	1	1	1	1	6
5	1	1	1	1	1	1	6
6	1	1	1	1	1	1	6
7	1	1	1	1	1	1	6
8	1	1	1	1	1	1	6
9	1	1	1	1	1	1	6
10	1	1	1	1	1	1	6
11	1	1	1	1	1	1	6
12	1	1	1	1	1	1	6
13	1	1	1	1	1	1	6
14	1	1	1	1	1	1	6
15	1	1	1	1	1	1	6
16	1	1	1	1	1	1	6
17	1	1	1	1	1	1	6
18	1	1	1	1	1	1	6
19	1	1	1	1	1	1	6
20	1	1	1	1	1	1	6
21	1	1	1	1	1	1	6
22	1	1	1	1	1	1	6
23	1	1	1	1	1	1	6
24	1	1	1	1	1	1	6
25	1	1	1	1	1	1	6
26	1	1	1	1	1	1	6
27	1	1	1	1	1	1	6
28	1	1	1	1	1	1	6
29	1	1	1	1	1	1	6
30	1	1	1	1	1	1	6
31	1	1	1	1	1	1	6
32	1	1	1	1	1	1	6
33	1	1	1	1	1	1	6
34	1	1	1	1	1	1	6
35	1	1	1	1	1	1	6
36	1	1	1	1	1	1	6
37	1	1	1	1	1	1	6
38	1	1	1	1	1	1	6
39	1	1	1	1	1	1	6
40	1	1	1	1	1	1	6
41	1	1	1	1	1	1	6
42	1	1	1	1	1	1	6
43	1	1	1	1	1	1	6
44	1	1	1	1	1	1	6
45	1	1	1	1	1	1	6
46	1	1	1	1	1	1	6
47	1	1	1	1	1	1	6
48	1	1	1	1	1	1	6
49	1	1	1	1	1	1	6
50	1	1	1	1	1	1	6
51	1	1	1	1	1	1	6
52	1	1	1	1	1	1	6
53	1	1	1	1	1	1	6
54	1	1	1	1	1	1	6
55	1	1	1	1	1	1	6
56	1	1	1	1	1	1	6
57	1	1	1	1	1	1	6
58	1	1	1	1	1	1	6
59	1	1	1	1	1	1	6
60	1	1	1	1	1	1	6
61	1	1	1	1	1	1	6
62	1	1	1	1	1	1	6
63	1	1	1	1	1	1	6
64	1	1	1	1	1	1	6
65	1	1	1	1	1	1	6
66	1	1	1	1	1	1	6
67	1	1	1	1	1	1	6
68	1	1	1	1	1	1	6
69	1	1	1	1	1	1	6
70	1	1	1	1	1	1	6
71	1	1	1	1	1	1	6
72	1	1	1	1	1	1	6
73	1	1	1	1	1	1	6
74	1	1	1	1	1	1	6
75	1	1	1	1	1	1	6
76	1	1	1	1	1	1	6
77	1	1	1	1	1	1	6
78	1	1	1	1	1	1	6
79	1	1	1	1	1	1	6
80	1	1	1	1	1	1	6
81	1	1	1	1	1	1	6
82	1	1	1	1	1	1	6
83	1	1	1	1	1	1	6
84	1	1	1	1	1	1	6
85	1	1	1	1	1	1	6
86	1	1	1	1	1	1	6
87	1	1	1	1	1	1	6
88	1	1	1	1	1	1	6
89	1	1	1	1	1	1	6
90	1	1	1	1	1	1	6
91	1	1	1	1	1	1	6
92	1	1	1	1	1	1	6
93	1	1	1	1	1	1	6
94	1	1	1	1	1	1	6
95	1	1	1	1	1	1	6
96	1	1	1	1	1	1	6
97	1	1	1	1	1	1	6
98	1	1	1	1	1	1	6
99	1	1	1	1	1	1	6
100	1	1	1	1	1	1	6

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ASTOR LENOX TILDEN FOUNDATION

1900

TABLE VII

TUBERCULOSIS INCIDENCE AND MORTALITY 1934-1959

(QUINQUENNIAL AVERAGES 1934-1958)

<u>Year</u>	Number of Primary Notifications	Notification Rate per 1,000 Population	<u>Deaths</u>	
			Total	Death Rate per 1,000 Population
1934 - 1938	15	0.73	7	0.39
1939 - 1943	23	0.94	7	0.29
1944 - 1948	28	1.16	7	0.32
1949 - 1953	22	0.80	3	0.13
1954 - 1958	15	0.47	3	0.09
1959	18	0.52	2	0.06

Year	Percentage of total population	Percentage of total population	Percentage of total population	Percentage of total population
1920	72	67.25	3	67.0
1921 - 1925	72	67.0	2	67.0
1926 - 1929	55	67.0	2	67.0
1930 - 1933	52	67.0	4	67.0
1934 - 1937	53	67.0	4	67.0
1938 - 1939	72	67.0	4	67.0

(Source: U.S. Census Bureau, 1940-1950)

PERCENTAGE OF TOTAL POPULATION

TABLE IV

LEATHERHEAD URBAN DISTRICT COUNCIL
REPORT OF THE CHIEF PUBLIC HEALTH INSPECTOR
FOR THE YEAR 1959.

The Red House,
Bull Hill,
Leatherhead.

August, 1960.

To the Chairman and Members of the
Leatherhead Urban District Council

Mr. Chairman, Ladies and Gentlemen,

I beg to present the following report for the year 1959.

The House Purchase and Housing Act, 1959, came into operation on the 14th June, and introduced a simplified form of improvement grant known as the "Standard Grant". Its simplicity lies in the fact that, once it has been established that the house is not unfit for habitation and that the title of the applicant is satisfactory, attention is directed only to the provision of those amenities which are lacking among a bath, a wash-hand basin, a hot water supply, a contiguous water-closet and a satisfactory food store; approval by the Council is not subject to prior submission of details and estimates, a maximum figure is prescribed by the Act, and payment of the grant is obligatory on the Council if the conditions are satisfied. The conditions to be observed after payment of grant and the period of their observance have been reduced for Standard Grants and also for the existing Discretionary Grants, so that either grant is a more attractive proposition for the owner-occupier and the owner of rented houses. Owner-occupiers still form the large majority of applicants, and an experience in this district has provoked the thought that tenants of rented houses will require time to get more accustomed to the rent increase sanctioned by the Rent Act, 1957, before committing themselves to the further increase permitted if their houses are improved by the landlord.

Only three applications were received for Certificates of Disrepair under the Rent Act, 1957, and these were in each case from tenants who had not taken the prescribed action when the Act came into force but unsuccessfully relied on verbal negotiations.

The high bacteriological standard of milk and ice-cream sold in the district was maintained, and for the second year in succession all samples taken of these commodities were satisfactory.

It was also possible to maintain a fair degree of vigilance at food premises and the section of the report on this item shows the improvements which resulted.

It gives me much pleasure to record my appreciation of the loyal assistance given me by all members of my staff, and of the valuable help and advice of the Medical Officer of Health, the Officers of other departments; to the Chairman and Members of the Public Health Committee and of the Council I am grateful for their interest and support.

I am, Mr. Chairman, Ladies and Gentlemen,

Your obedient Servant,

WILLIAM J. WHITING,
Chief Public Health Inspector.

INSPECTIONS AND RE-INSPECTIONS
UNDER THE
HOUSING AND PUBLIC HEALTH ACTS, ETC.

Dwelling-houses	714
Nuisances (other than dwelling-houses)	198
Disinfestation	573
Smoke	164
Water	17
Watercourses	141
Notifiable Infectious Disease	84
Dairies	17
Pasteurising Establishments	38
Food Premises	587
Slaughterhouses	207
Sampling	194
Food Examinations	41
Factories (Mechanical)	153
Factories (Non-Mechanical)	3
Other Premises under Factories Act	31
Moveable Dwellings	53
Shops	280
Schools	3
Swimming Pools	57
Petroleum Regulations	65
Animal Keeping	14
Rag Flock Act	1
Miscellaneous	35

DEFECTIVE CONDITIONS FOUND REQUIRING THE SERVICE OF A NOTICE

	<u>Requests</u> <u>made</u>	<u>Requests</u> <u>Complied with</u>
Roofs	15	11
Chimneys	3	3
Walls	16	40
Ceilings	7	14
Rainwater Pipes & Gutters	6	9
Drains and Drainage	17	17
Closets and Fittings	4	4
Floors	3	10
Plasterwork	12	16
Windows	8	41
Insufficient Ventilation	-	-
Doors	2	3
Sinks & Wash-Basins	-	1
Waste Pipes	-	1
Kitcheners, Fireplaces	4	7
Washing Facilities	-	-
Repair Cesspool	2	2
Miscellaneous	4	10

INFECTIOUS DISEASE AND DISINFECTION

Eighty-four visits of enquiry were made during the year in respect of notifiable infectious disease.

Three properties were disinfected following tuberculosis.

MOVEABLE DWELLINGS

Ten orders made under the Surrey County Council Acts, 1931 and 1936 remained in force, together with Section 269 of the Public Health Act, 1936.

Under Section 269 ten licences were renewed in respect of individual occupiers and one new licence was granted.

At the end of the year nine licensed individual caravans were occupied, of which two were on sites temporarily, during the erection of houses for eventual use of the occupiers.

The thirty-six inhabited caravans on the two sites acquired by the Council for housing purposes had been reduced to five by the end of the year, so that development could commence.

INSPECTION AND SUPERVISION OF FOOD

MILK SUPPLY

The Council's duties with regard to milk are now limited to the registration of distributors and dairies, with the enforcement of the relevant parts of the Milk and Dairies Regulations, the licensing of those who sell designated milk, either raw or heat treated, in the district under the appropriate Special Designation Regulations, and the important function of sampling of various milk supplies, as a routine part of their work for safeguarding of public health.

The Milk (Special Designations) (Specified Areas) (No. 2) Order, 1954, was made on the 10th September, 1954, and came into operation on the 1st October, 1954, since which date the use of a special designation has been obligatory for the purpose of all sales of milk by retail.

Bacteriological Examination of Milk Supplies

Sixty-nine samples of pasteurised milk and twenty-three of tuberculin tested milk were taken and submitted to the Public Health Laboratory at Epsom for examination.

The sixty-nine samples of pasteurised milk all passed the Methylene Blue Test and the Phosphatase Test.

The twenty-three samples of Tuberculin Tested Milk all passed the Methylene Blue Test.

Designated Milk Supply

The following licences were issued to retailers desiring to retail Designated Milk:-

<u>Designation</u>	<u>Dealer's Licences</u>	<u>Supplementary Licences</u>
Tuberculin Tested	6	4
Pasteurised	6	4
Sterilised	9	4

A Pasteuriser's Licence was issued to one dairyman in respect of his pasteurising plant within the district.

WYOMING STATUTES

The entire title under the former Wyoming Statute, 1907, and 1908 remained in force, together with Section 209 of the Public Health Act, 1907.

Under Section 209 the license was renewed in regard to individual companies and one new license was granted.

At the end of the year nine licensed individual companies were accepted, of which two were in some measure, during the exercise of license for eventual use of the company.

The thirty-six individual companies on the two sides accepted by the Council for housing purposes had been reduced to five by the end of the year, so that development could commence.

THE STATE AND SUBDIVISION OF 1908

MILK SUPPLY

The Council's duties with regard to milk are now limited to the regulation of distribution and delivery, with the enforcement of the various parts of the Milk and Public Health Act, the licensing of those who sell bottled milk, either raw or pasteurized, in the district under the appropriate Special Distribution Regulations, and the provision of supply of various milk supplies, as a provision part of their work for safeguarding of public health.

The Milk (Special Distribution) (Regulated Areas) (No. 2) Order, 1907, was made on the 10th September, 1907, and was in operation on the 1st October, 1907, since which date the use of a special regulation has been obligatory for the purpose of all milk of milk by retail.

Regulation of Distribution of Milk Supplies

Sixty-three samples of pasteurized milk and twenty-three of unpasteurized milk were taken and submitted to the Public Health Laboratory at Ipswich for examination.

The sixty-three samples of pasteurized milk all passed the Bacteriological Test and the Bacteriological Test.

The twenty-three samples of unpasteurized milk all passed the Bacteriological Test.

Regulation of Milk Supply

The following licenses were issued to retailers dealing in milk:

Retail Licenses	
1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9
10	10

A Bacteriological license was issued to the district in regard to the pasteurizing plant within the district.

MEAT INSPECTION

Two licensed slaughterhouses continued in operation and following are details of the animals slaughtered and inspected therein during the year:-

	Cattle excluding Cows	Cows	Calves	Sheep and Lambs	Pigs	Horses	Total
Number killed	92	-	32	707	95	-	926
Number inspected	92	-	32	707	95	-	926
All diseases except Tuberculosis and Cysticerci:-							
Whole carcasses condemned	-	-	-	2	-	-	2
Carcasses of which some part or organ was condemned	24	-	-	9	9	-	42
Percentage of the number inspected affected with disease other than tuberculosis and cysticerci	26.09	-	-	1.55	9.47	-	4.54
Tuberculosis only:							
Whole carcasses condemned	-	-	-	-	-	-	-
Carcasses of which some part or organ was condemned	1	-	-	-	2	-	3
Percentage of the number inspected affected with tuberculosis	1.09	-	-	-	2.11	-	0.32
Cysticercosis:							
Carcasses of which some part or organ was condemned	-	-	-	-	-	-	-
Carcasses submitted to treatment by refrigeration	-	-	-	-	-	-	-
Generalised and totally condemned	-	-	-	-	-	-	-

The following table shows the results of the examination of the animals slaughtered and inspected during the year.

Category	Examined	Passed	Failed	Quarantined	Refused	Not Examined	Total
Meat	92	92	0	0	0	0	92
Butter	92	92	0	0	0	0	92
Eggs	92	92	0	0	0	0	92
Poultry	92	92	0	0	0	0	92
Swine	92	92	0	0	0	0	92
Cattle	92	92	0	0	0	0	92
Sheep	92	92	0	0	0	0	92
Goats	92	92	0	0	0	0	92
Other	92	92	0	0	0	0	92
Total	92	92	0	0	0	0	92

Meat Inspection (cont.)

Summary of Meat Condemned

	<u>Tuberculosis</u>	<u>Other Diseases</u>	<u>Total</u>
<u>Cattle</u>			
Livers	-	22 $\frac{1}{2}$	22
Lungs	1	-	1
Hearts	-	2	2
<u>Sheep</u>			
Carcases	-	2	2
Livers	-	8	8
Kidneys	-	1	1
<u>Pigs</u>			
Hearts	-	5	5
Heads	2	-	2
Livers	-	5	5
Lungs	-	4	4

($\frac{1}{2}$ includes 21 which were affected with Distomatosis)

OTHER FOODS

The following foods were found on examination to be unfit for human consumption, and certificates issued to that effect:-

Carcase Meat	135 lbs.
Offal	53 "
Poultry	215 "
Canned Meat	104 "
Ham	25 "
Fish	62 "
Canned Fruit	156 "
Cereals	24 "
Frozen Foods	1,100 packets

Unsound food was disposed of as appropriate by burial at the Council's Refuse tip in Randalls Road, or by incineration at the Destructor Works of the Epsom and Ewell Borough Council for which a nominal fee is paid annually.

FOOD AND DRUGS ACT - SAMPLING

During the year 115 samples were taken as under, and submitted to the Public Analyst, Mr. D. D. Moir, M.Sc., F.R.I.C., of 16 Southwark Street, London, S.E.1.

<u>Article Sampled</u>	<u>Number of Samples Taken</u>	<u>Number Adulterated or otherwise irregular</u>
Almonds	2	-
Beverages	5	-
Cereals	2	-
Condiments	3	-
Confectionery - sugar	4	-
Cordials and Fruit Juices	8	1
Cream	1	-

Food & Drugs Act - Sampling (cont.)

<u>Article Sampled</u>	<u>Number of Samples Taken</u>	<u>Number Adulterated or otherwise irregular</u>
Fruit - dried	1	-
Fruit - tinned	3	-
Margarine	2	-
Meat Pies	3	2
Meat - tinned	13	1
Milk	25	-
Milk - Channel Islands	20	1
Pancake Mixture	1	-
Pastes	2	-
Pickles	1	-
Preserves	12	-
Rice	2	-
Salad Cream	1	-
Sauces	2	-
Soup	1	-
Spread - Cheese	1	-

Nature of Irregularity and Action Taken

Cordial	Described as "Double Orange". Contained only 35% orange juice. Manufacturers agreed to discontinue description.
Meat Pies	Described as "Steak and Kidney" but flavoured with comminated kidney and contained no recognisable pieces of kidney. Analyst's observations referred to the Ministry.
Meat - tinned	Misleading label. Manufacturers had already changed constituents and labels on new stocks when sampled.
Milk - Channel Islands	Contained only 3.83% fat. Follow-up samples proved satisfactory.

In addition to the above routine samples, another three samples were submitted to the Public Analyst following complaint to the Department one of which resulted in a bakery being prosecuted for retailing a loaf containing a piece of string. A fine of £10.0s.0d. with ten guineas costs was imposed by the Magistrates.

FOOD PREMISES

There are 197 premises within the urban district in which food is prepared or stored for sale, classified as under:-

Bakers	12
Butchers	21
Canning Factory	1
Confectioners	35
Dairies & Milk Stores	2
Fishmongers & Fryers	9
Greengrocers & Fruiterers	23
Grocers & Provision Merchants	52
Grocers & Butchers	2
Hotels, Public Houses and Off Licences	23
Restaurants & Cafes	17

Article Examined	Number of Samples Taken	Number Analyzed or Retained for Further Examination
Butter - dried	1	-
Butter - skimmed	3	-
Condensed milk	2	-
Hot Pies	3	2
Hot - cream	13	1
Milk	25	-
Milk - Sterilized	20	1
Phosphate Mixture	1	-
Peanut	2	-
Pickles	1	-
Preserves	12	-
Rice	2	-
Salt Water	1	-
Sausage	2	-
Soap	1	-
Syrup - Orange	1	-

Labels of Investigated and Action Taken

Label	Described as "Dietetic Cream", contained only 10% cream. Labels, manufacturers agreed to eliminate description.
Hot Pies	Described as "Black and White" but flavored with condensed milk and contained no recognizable pieces of filling. Analytical examination referred to the Ministry.
Hot - cream	Misleading label. Manufacturers had already changed contents and labels on new stock when sampled.
Milk - Sterilized	Contained only 1.5% fat. Follow-up samples proved satisfactory.

In addition to the above routine samples, another three samples were submitted to the Public Analyst following complaint to the Department one of which resulted in a factory being prosecuted for retaining a food containing a trace of arsenic. A fine of £1,000, with two years' imprisonment was imposed by the Magistrate.

Food Samples

There are 107 products within the scope of the Food & Drug Act which are prepared or stored for sale, classified as follows:-

12	Bacon
21	Butter
1	Corned Beef
22	Condensed Milk
2	Butter & Milk
2	Phosphate & Sugar
23	Preserves & Pickles
22	Groceries & Foodstuffs
2	Groceries & Foodstuffs
23	Hotels, Public Houses and (ET) Licenses
17	Restaurants & Cafes

Food Premises (cont.)

Of these premises the following are registered under Section 16 of the Food and Drugs Act, 1955:-

Manufacture of Sausages	17
Pickling of Meat	18
Cooking of Ham	2
Frying of Fish	4
Preserving of Fruit	1

FOOD HYGIENE REGULATIONS, 1955

Five hundred and eighty-seven visits were made to food premises, and as a result of informal action, the following work has been carried out:-

<u>Regulation</u>	<u>Nature of Work</u>	<u>No. of Premises</u>
	Structural repairs and renovations	14
6	Equipment replaced	5
8	Display stands provided	2
8	New dustbins provided	2
14 (1)	W.C's repaired or renewed	5
14 (5)	Notices provided	1
16 (1)	Wash-hand basins provided or renewed	4
16 (2)	Hot water provided or appliance renewed	7
16 (3)	Handtowels provided	3
16 (3)	Nail brushes provided	2
17	First aid materials provided	1
18	External clothes lockers provided	4
19	Sinks provided	4
20	Lighting improved	6
21	Ventilation improved	6
23	Internal surfaces cleansed	20
23	Floor surfaces improved	3
24	Accumulations removed	4
25	Refrigeration repaired or provided	2

ICE-CREAM

Seventy-eight premises in the district are registered by the Council for the storage and sale of ice-cream. No premises are registered for manufacture, the whole of the supplies in the area being manufactured at premises outside.

Nineteen samples of ice-cream were taken during the year and submitted for bacteriological examination. The Bacteriologist's reports were as under:-

<u>Producer</u>	<u>No. of Samples Taken</u>	<u>Grade</u>			
		<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>
A	3	3	-	-	-
B	7	7	-	-	-
C	2	2	-	-	-
D	7	7	-	-	-

On these premises the following are registered under Section 16 of the Food and Drugs Act, 1925:-

17	Manufacture of Biscuits
18	Finishing of Meat
19	Cooking of Meat
20	Finishing of Meat
21	Preserving of Fruit

FOOD INSPECTION REGISTRATION, 1927

Five hundred and eighty-seven visits were made to food premises, and as a result of informal action, the following work has been carried out:-

Registration	Number of Premises	Number of Visits
1	1	1
2	1	1
3	1	1
4	1	1
5	1	1
6	1	1
7	1	1
8	1	1
9	1	1
10	1	1
11	1	1
12	1	1
13	1	1
14	1	1
15	1	1
16	1	1
17	1	1
18	1	1
19	1	1
20	1	1
21	1	1
22	1	1
23	1	1
24	1	1
25	1	1
26	1	1
27	1	1
28	1	1
29	1	1
30	1	1
31	1	1
32	1	1
33	1	1
34	1	1
35	1	1
36	1	1
37	1	1
38	1	1
39	1	1
40	1	1
41	1	1
42	1	1
43	1	1
44	1	1
45	1	1
46	1	1
47	1	1
48	1	1
49	1	1
50	1	1
51	1	1
52	1	1
53	1	1
54	1	1
55	1	1
56	1	1
57	1	1
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85	1	1
86	1	1
87	1	1
88	1	1
89	1	1
90	1	1
91	1	1
92	1	1
93	1	1
94	1	1
95	1	1
96	1	1
97	1	1
98	1	1
99	1	1
100	1	1

ICE-cream

Twenty-eight premises in the district are registered by the Council for the storage and sale of ice-cream. No premises are registered for manufacture, the sale of the supplies in the area being unlicensed at present outside.

Eleven samples of ice-cream were taken during the year and submitted for bacteriological examination. The bacteriological reports were as follows:-

Sample	No. of Bacteria Taken	Grade
1	1	A
2	1	A
3	1	A
4	1	A
5	1	A
6	1	A
7	1	A
8	1	A
9	1	A
10	1	A
11	1	A
12	1	A
13	1	A
14	1	A
15	1	A
16	1	A
17	1	A
18	1	A
19	1	A
20	1	A
21	1	A
22	1	A
23	1	A
24	1	A
25	1	A
26	1	A
27	1	A
28	1	A
29	1	A
30	1	A
31	1	A
32	1	A
33	1	A
34	1	A
35	1	A
36	1	A
37	1	A
38	1	A
39	1	A
40	1	A
41	1	A
42	1	A
43	1	A
44	1	A
45	1	A
46	1	A
47	1	A
48	1	A
49	1	A
50	1	A
51	1	A
52	1	A
53	1	A
54	1	A
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69	1	A
70	1	A
71	1	A
72	1	A
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74	1	A
75	1	A
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81	1	A
82	1	A
83	1	A
84	1	A
85	1	A
86	1	A
87	1	A
88	1	A
89	1	A
90	1	A
91	1	A
92	1	A
93	1	A
94	1	A
95	1	A
96	1	A
97	1	A
98	1	A
99	1	A
100	1	A

SHOPS ACT. 1950

Two hundred and eighty visits to shops were made during the year; in addition nine surveys were made to ensure that the regulations applying to early closing were being observed.

The register contains 403 shops, distributed as to 96 in Ashted, 75 in Bookhan, 45 in Fetcham and 187 in Leatherhead, classified as follows:-

Antiques	2
Bookshops	5
Builders Merchants	9
Butchers	21
Cafes and Restaurants	18
Cakes, Pastries and Bread	12
Chemists	13
Coal Order Offices	7
Corn and Seed Merchants	6
Dyers and Cleaners	9
Drapers, Outfitters and Woolshops	33
Fishmongers	9
Florists	4
Footwear - repairs	10
Footwear - retailers	7
Furniture and Furnishings	5
Garages and Petrol Stations	20
General Stores	6
Greengrocers and Fruiterers	23
Grocers and Provision Merchants	46
Hairdressers	22
Handbags	1
Handicrafts and Gift Shops	2
Ironmongers	17
Launderette	1
Opticians	4
Photographic Materials	2
Public Houses and Off Licences	23
Radio, Television and Electrical	12
Sadler	1
Sports Goods	5
Stationers and Printers	5
Tyres	1
Utility Showrooms	2
Watchmakers and Jewellers	4
Newsagents, Tobacconists and Confectioners	36

RODENT AND INSECT PESTS

Rodent Control

A service for treating infestation at private dwelling-houses is provided free of charge to the occupiers, and at business premises as inclusive charge of 10/- per hour is made.

Statistics in connection with the activities of this service are appended - the figures being for the period 1st March to 31st December. This is at the request of the Ministry of Agriculture, Fisheries and Food. In future years the figures will relate to the calendar year.

Rodent Control (cont.)

1. Properties Inspected

(a) As a result of notifications	290
(b) By independent investigations	391

2. Conditions found as a result of inspection

(a) Rat infestation - Major	3
- Minor	394
(b) Mouse infestations	64
(c) Not infested	231

3. Number of treatments and re-treatments 473

4. Number of properties (not included above)
under routine inspections and treatment,
where necessary 14

5. Number of "block control" operations carried out 90

Insect Pests

A Pest Service is supplied, on request, to a hospital, a training college, and eight County Council School Canteens in the district, charges being recovered for time and materials; no charge is made in respect of private houses.

Disinfestation was carried out at 411 premises as follows:-

<u>Pest</u>	<u>Number of Infestations Treated</u>	<u>Insecticide</u>
Ants	12	Dieldrin powders and liquids or proprietary ant destroyer.
Bugs	2	Dieldrin powders and liquids.
Cockroaches	22	Dieldrin powders, liquids and smoke.
Fleas	4	D.D.T. or B.H.C. liquids and powders.
Flies	29	Dieldrin liquid and Dieldrin smoke, generators.
Wasps	396 nests	Dieldrin Powder or Cynag.

RAG FLOCK AND OTHER FILLING MATERIALS

One establishment is registered under the 1951 Act; a sample taken from the premises for chemical analysis reached the required standard.

PET ANIMALS

Six premises are licensed under the Pet Animals Act, 1951.

1. Properties Investigated	Number of Investigations	
	(a) As a result of notification	(b) By independent investigation
2. Conditions found as a result of investigation		
3. Number of treatments and re-treatments	(a) Not investigated - 100%	3
	(b) Some investigation - 100%	30
	(c) Not investigated - 100%	28
4. Number of properties (not included above) under active investigation and treatment, where necessary		1
5. Number of black control operations carried out		90

Notes:

A first survey is required, as required, for a complete, a training college, and night County Council School Children in the district, children being recovered for time and convenience; no change is made in regard to future progress.

Investigation was carried out of all properties on following:-

Property	Number of Investigations	Investigation
Ants	12	12
Bees	2	2
Goodman's	12	12
Flies	4	4
Worms	20	20
Wasp	200 nests	200 nests

THE HOUSE AND OTHER BUILDINGS

The establishment is registered under the 1937 Act. A regular survey from the premises for chemical control is required under the 1937 Act.

THE HOUSE

Six properties are licensed under the 1937 Act.

INSPECTION OF FACTORIES

Inspections for purposes of provisions as to health including inspections made by Public Health Inspectors.

Premises 1	Number on Register 3	Inspections 4	Written Notices 5	Occupiers Prosecuted 6
(i) Factories in which Section 1,2,3,4 and 6 are to be enforced by local authorities	3	3	-	-
(ii) Factories not included in (i) in which Section 7 is enforced by the local authority	99	153	-	-
(iii) Other premises in which Section 7 is enforced by the local authority (excluding outworkers premises)	12	31	-	-
TOTAL	114	187	-	-

Cases in which defects were found

<u>Particulars</u> (1)	Number of cases in which defects were found				No. of cases in which prosecutions were instituted (7)
	Found (3)	Remo- died (4)	Referred to H.M. Inspec- tor (5)	by H.M. Inspec- tor (6)	
Want of cleanliness (S.1)	-	-	-	-	-
Overcrowding (S.2)	-	-	-	-	-
Unreasonable temperature (S.3)	-	-	-	-	-
Inadequate ventilation (S.4)	-	-	-	-	-
Ineffective drainage of floor (S.6)	-	-	-	-	-
Sanitary Conveniences (S.7)	-	-	-	-	-
(a) Insufficient	4	4	-	-	-
(b) Unsuitable or defective	1	1	-	-	-
(c) Not separate for sexes	-	-	-	-	-
Other offences against the Act (not including offences relating to outwork)	-	-	-	-	-
TOTAL	5	5	-	-	-

INVESTIGATION OF DEFECTS

Inspection for purpose of providing as to health including inspection made by Public Health Inspector.

1	2	3	4	5	6
(1) Defects in which Section 1, 2, 3, 4 and 5 are to be enforced by local authorities	3		3	-	-
(2) Defects not included in (1) in which Section 7 is enforced by the local authority	95		123	-	-
(3) Other defects in which Section 7 is enforced by the local authority (excluding dangerous premises)	15		21	-	-
TOTAL	113		147	-	-

Open in which defects were found

(1)	(2)	(3)	(4)	(5)	(6)
Defects of cleanliness (8.1)	-	-	-	-	-
Overcrowding (8.2)	-	-	-	-	-
Unsanitary (8.3)	-	-	-	-	-
Defective drainage (8.4)	-	-	-	-	-
Defective lighting (8.5)	-	-	-	-	-
Defective ventilation (8.6)	-	-	-	-	-
Defective gas supply (8.7)	-	-	-	-	-
(a) Defective	1	1	1	-	-
(b) Not reported for some	-	-	-	-	-
Other offences against the Act (not including offences relating to animals)	-	-	-	-	-
TOTAL	2	2	2	-	-

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