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THE FEALTH OF MIDDIESBROUGH DURING 1960

ERIC C. DOWNER







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ERIC C. DOWNER
M.A., D.P.H.



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THE HEALTH COMMITTEE.

Appointed May, 1960.

Chairman: Alderman J. W. Welch, J.P.

His Worship the Mayor (Alderman W. Flynn, J.P.)

Alderman J. G. Boothby Alderman Mrs. L. Burton (Vice-Chairman)

Alderman E. A. Dickinson

Alderman N. Peters

Alderman B. Ramsey, C.B.E.

Alderman W. Randall

Alderman L. Taylor

Alderman Mrs. A. Wain

Councillor W. C. Bastiman, J.P.

Councillor J. A. Brown C.B.E., J.P.

Councillor G. A. Burns

Councillor Mrs. G. R. Cox

Councillor A. T. Crosby

Councillor Mrs. M. A. Daniel

Councillor C. W. Davies

Councillor W. Eckert

Councillor C. W. Fretter

Councillor Mrs. E. A. Gaunt

Councillor A. Gibson

Councillor N. S. Goldie

Councillor Mrs. M. B. Goodman

Councillor T. J. T. Homer

Councillor R. H. Huggins

Councillor Mrs. M. McMillan

Councillor P. J. McGlone

Councillor F. S. Moore

Councillor F. Morton

Councillor H. Pinder

Councillor W. J. Story

Councillor Mrs. A. Thompson, J.P.

Councillor F. Ware-Grosvenor

Councillor T. Wilkinson

Councillor J. Wilson.

with the following CO-OPTED MEMBERS :-

Dr. R. C. B. Arthur Dr. J. W. R. Moffit

Mrs. E. Bell

Mr. R. H. Evans

Mr. H. French

Mr. C. W. L. Heaton

Mr. A. Potter

Mr. T. Rhoden

Mr. Marshall Robinson

Mrs. R. Valentine

STAFF OF THE HEALTH DEPARTMENT, 1960.

Medical Officer of Health and Chief Medical Adviser:

Eric C. Downer, M.A., D.P.H.

Deputy Medical Officer of Health:— Robert Taylor, M.B., Ch.B., D.P.H.

Senior Assistant Medical Officer of Health for Maternity and Child Welfare:—

Mark Sackwood, M.B., B.S., M.R.C.S., L.R.C.P., D.R.C.O.G., D.P.H.

Senior Assistant Medical Officer of Health (General) :— Walter J. Wigfield, M.B., Ch.B., D.P.H.

*T.B. After-Care Medical Officer:—
B. Couts, M.D., Ch.B., D.P.H.

Assistant Medical Officers of Health :-

- *Elizabeth Webster, M.B., B.S.
- *Margaret Fisher, M.B.
- *H. K. Geiser, M.R.C.O.G.
- *E. M. MacGill, M.B., Ch.B.
- *J. Whewell, M.B., Ch.B., D.R.C.O.G.
- *G. M. J. White (from 22.6.60)

Superintendent Health Visitor :-

R. Sutcliffe, S.R.N., S.C.M., H.V.CERT.

Deputy Superintendent Health Visitor:

D. E. Chappel, S.R.N., S.C.M., B.T.A., H.V.CERT.

Health Visitors :-

- E. M. Alford, S.R.N., S.C.M., H.V.CERT.
- J. Bloom, S.R.N., S.C.M., H.V.CERT., Q.N. (from 1.7.60)
- *E. A. Clarke, s.r.n., R.F.N., C.M.B. (Part 1) H.V.CERT.
- J. S. Dunn, s.R.N., s.C.M. (Part 1) H.V.CERT. (to 6.3.60).
- E. Glasper, s.R.N., s.C.M., H.V.CERT.
- S. P. Haggerty, S.R.N., S.C.M., H.V.CERT.
- *K. A. Hodgson, s.r.n., c.m.b. (Part 1) H.V.CERT. (from 20.6.60)
- A. M. Husband, s.r.n., c.m.B. (Part 1) H.V.CERT.
- M. Lysaght, s.R.N., s.C.M., H.V.CERT.
- I. I. Mathison, s.R.N., s.C.M., H.V.CERT.
- E. McMahon, s.R.N., s.C.M., H.V.CERT.
- F. M. Nixon, S.R.N., S.C.M., H.V.CERT.
- M. N. Nkuma, s.r.n., s.c.m., h.v.cert., q.n.
- W. Page, s.r.n., s.c.m. (Part 1), H.V.CERT (from 29.2.60)
- A. Porcher, s.R.N., s.C.M., H.V.CERT (from 12.9.60)
- S. M. Rochester, s.R.N., s.C.M. (Part 1), H.V.CERT.
- J. Strickland, s.R.N., s.C.M., H.V.CERT.
- D. Spencer, s.R.N., s.C.M., H.V.CERT.

Student Health Visitors :-

- D. Carter, S.R.N., S.C.M., Q.N. (from 12.9.60)
- M. Colledge, s.r.n., s.c.m. (from 1.4.60)
- W. R. Lofthouse, s.r.n., c.m.b. (Part 1) (from 12.9.60)

Non-Medical Supervisor of Midwives :-

E. Dempsey, s.r.n., s.c.m., Q.N., H.V.CERT.

Municipal Midwives :-

- J. Atkinson, s.R.N., C.M.B.
- I. Banes, s.c.m., s.E.A.N.
- K. P. Brady, s.R.N., s.C.M. (To 10.6.60)
- M. Brown, s.c.m.
- I. M. Bryan, s.R.N., s.C.M. (from 4.4.60)
- H. T. F. Clark, s.R.N., s.C.M.
- M. Fairbairn, s.с.м.
- V. Harbron, s.c.m. (from 1.1.60)
- M. Harris, s.R.N., s.C.M.
- N. Hill, s.r.n., s.c.m. (To 5.2.60)
- E. McIntosh, s.c.m., s.E.A.N.
- C. McKinlay, s.c.m.
- E. Mills, (nee Jones) s.E.A.N., s.C.M.
- B. A. O'Connell, s.R.N., s.C.M.
- K. M. O'Neill, s.R.N., s.C.M.
- A. Oldham, s.c.m., s.E.A.N.
- M. R. Ormesby, s.R.N., s.C.M.
- T. Poole, s.r.n., s.c.m. (To 18.7.60)
- F. M. Scott, s.c.m., s.e.a.n.
- V. Smithson, s.C.M., s.E.A.N.
- C. Stephenson, s.R.N., s.C.M.
- *M. Tantum, s.R.N., s.C.M.
- K. M. Tiernan, s.R.N., s.C.M.
- A. A. Townsend, s.c.m.
- M. Wilkinson, S.R.N., R.F.N., S.C.M. (from 1.1.60)
- *M. Abbott, s.c.m.
- J. M. Thorley, s.r.n., s.c.m., R.F.N. (To 31.6.60)
- *P. Sheppard, s.R.N., s.C.M.

Public Health Nurses :-

- *A. F. Backhouse, s.R.N., s.C.M.
- G. Bennison, s.R.N., C.M.B. (Part 1)
- *C. M. Benson, s.R.N., s.C.M., H.V.CERT. (from 4.1.60)
- C. A. Bregazzi, s.R.N., s.C.M.
- M. T. Brown, s.R.N.
- P. Cashman, s.R.N.C. (To 30.10.60)
- M. M. Cunningham, s.R.N.
- T. Easterby, s.R.N.
- V. Hodge, s.r.n., c.m.b. (Part 1)
- J. Kraus, s.R.N., s.C.M.

Welfare Centre Attendants :-

*B. Cousins (from 20.4.60)

*I. M. Craggs

N. Highe

E. F. Irwin (To 17.12.60)

E. Lenihan (To 16.1.60)

*D. Wildon

Tuberculosis Visitors :-

D. Talbot, s.R.N., s.C.M.

M. J. Longwill, s.R.N., s.C.M., R.F.N., Q.N.

E. Clarke, s.r.n., R.F.N.

Tuberculosis Social Worker :-

Freda L. McCarthy

Handicrafts Instructress :-

A. M. Tamsett

Matrons, Day Nurseries :-

West Lane Nursery .. I. Howe, s.r.n.

Parkside Nursery M. Henderson, s.R.N.

Mosman Terrace Nursery .. V. C. Martin, N.S.D.N.

Matron, Davison Home, Danby :-

A. L. Surtees, N.N.E.B.

Mental Welfare Officers :-

- L. W. Sawdon
- S. P. Smith
- S. Garland
- A. Barbour (from 1.10.60)
- F. Gray (Supervisor, Occupation Centre)
- G. Batterbee (Teacher of the Mentally Handicapped)
- E. L. Croot (Teacher of the Mentally Handicapped)
- I. Dent (Teacher of the Mentally Handicapped)
- *L. M. Downs (Teacher of the Mentally Handicapped)
- M. E. Stewart (Teacher of the Mentally Handicapped) (from 17.10.60)
- M. Quayle (Teacher of the Mentally Handicapped)
- R. A. Rossborough (Woodwork Instructor)

Social Worker :-

A. M. Higgins

Home Visitor/Teachers-Blind :-

- D. Brown
- J. McQuade
- G. Reavley (To 13.5.60)
- J. Smalls

Ambulance Officer :-

Edward Sykes, F.I.C.A.P.

Deputy Ambulance Officer :-

H. Rowney

Domestic Help Organiser :-

A. M. Hutchinson

Chief Clerk :-

W. H. Dickinson

Administrative and Senior Clerks :-

H. E. Crosby

F. M. Smith

L. Hall, D.M.A.

A. Barbour (To 30.9.60)

G. A. Bulmer, D.M.A.

Clerks :-

R. Allison (To 9.2.60)

T. Atkinson

E. Brumpton

R. T. Carling

K. P. Eastlake (from 2.5.60)

O. Grosvenor

R. S. Harris

D. Hartas (from 18.2.60)

E. A. Hunter

B. Johnson

C. R. Kennedy (to 13.2.60)

M. Lofthouse

M. McNulty

E. C. Morphet

E. Nelson

*P. J. Pearson

M. D. Westgarth

Shorthand-Typists :-

M. Robson (Senior)

F. Brumpton

D. Robinson

M. Simpson

N. Stonehouse.

*Part-time.

HEALTH DEPARTMENT, 26 SOUTHFIELD ROAD,

MIDDLESBROUGH.

Tel. No. 3201-5.

To the Mayor, Aldermen and Councillors of the County Borough of Middlesbrough.

Mr. Mayor, Ladies and Gentlemen,

I beg to present my Annual Report as Medical Officer of Health, for the year 1960.

This report is being produced under circumstances of considerable difficulty. Both Senior Assistant Medical Officers—Dr. Mark Sackwood for Maternity and Child Welfare, and Dr. W. J. Wigfield for Aftercare and General work—have notified me that they have obtained appointments—one with the Newcastle Regional Hospital Board and the other with the County Borough of Eastbourne. That means that the entire work of the department, from the pont of view of Medical Staff, devolves on the Deputy, M.O.H.—who already has a very full share of work—and the Medical Officer of Health himself.

In a situation like this, one must concentrate on essentials, and getting on with the winter work of the department goes a long way before writing words in an Annual Report, so comment will be brief. But the statistics and information about the department's work will be there in full.

During the year the devolution of the department has proceeded and may be summarised as follows:—

Senior Assistant M.O. (General) deals with most problems of aftercare, particularly the health and welfare of old people and handicapped persons, where he has established most pleasant relationships with the Senior Consultant Geriatrician and the Director of Physical Medicine and in which he has been greatly assisted by a number of the practitioners and by the Superintendent and Matron of Residential Accommodation. He has also opened regular touch with the Deputy Physician-Superintendent of St. Luke's Hospital—Dr. Russell. In short, new aftercare links have been forged and that side of the department's work is developing and booming. That post must be filled fairly soon, and with a suitable man, if these new schemes are to be maintained.

Senior Assistant M.O. (Maternity and Child Welfare) has continued to develop close relationships with the Maternity Hospital, the Carter Bequest Hospital and any other hospital which has maternity beds. He supervises the midwives, the health visitors and the Day Nurseries, and he has got this part of the department into excellent order. The only thing we so much deplore here is the steady drop in attendance at our Ante-Natal Clinics and the still disappointing statistics of child vaccination and diphtheria immunisation.

The Deputy M.O.H. acts as the department's epidemiologist and investigates all outbreaks of food poisoning or other epidemics. He deals with the department's Civil Defence side and attends the Civil Defence Committee. He also attends the Children's Committee. He assigns the various doctors to the various Clinics and sees that all

Clinics, etc., are staffed. He deputises for the Medical Officer of Health when that officer is ill, absent on duty, or on holiday.

The Medical Officer of Health attends all the necessary Committees, except the Children's Committee and Civil Defence; goes to several of the Conferences; does the Housing work of the department and carries out the functions of Medical Officer of Health of the Port of the River Tees.

It is clear that until a complete Medical Staff can be reestablished it will be difficult to maintain, let alone to expand, all our services.

More than ever before do I wish to call the Council's attention to the loyal and enthusiastic support given to it by my colleagues and the staff of the Health Department. They have had a year of very hard work and they have given of their best ungrudgingly. If we have succeeded in accomplishing much this year they have a right to claim a very great amount of the credit.

We have had a happy year, as regards our relations with our colleagues in practice, and a great deal of the development of our aftercare work is due to the fact that the medical practitioners of the town are appreciating how much a well-staffed Health Department can do to help their patients and them.

The Medical Officer of Health is an ex-officio member of the Local Medical Committee and the Deputy M.O.H. is a co-opted member, and we both regard it as very important to attend that Body as regularly as possible. We feel that in future the links should become even closer and that the Local Medical Committee should have as early notice as possible of any developments in the Council's Health Service which might affect the practitioners.

As regards the Consultant Services, we have had great help and co-operation from the Geriatric Consultant, Dr. Prinsley, and the new Director of Physical Medicine, Dr. Newton, and in return we hope to give them help through the Ambulance Service in the conveying of their patients to the projected Day Hospitals. We have had, from other Consultants, very great help and advice any time that we turned to them, or that we have sent patients to them, and we look forward to working more closely with them as the shape of the National Health Service develops.

No Local Authority Health Department today can stand on its own legs; it must have the co-operation and hold the esteem of other branches of the National Health Service.

I feel that I can confidently report that last year was one during which very great progress was made and we assure the Council of our determination in the years to come to see that the department progresses on those lines.

I have the honour to be,

Mr. Mayor, Ladies and Gentlemen,

Your obedient Servant,

ERIC C. DOWNER,

Medical Officer of Health.

ALDERMAN J. W. WELCH

I have to record the passing—at the ripe age of 85—of the Chairman of the Health Committee, Mr. Alderman J. W. Welch, J.P. a Freeman of the Borough of Middlesbrough.

Mr. Alderman Welch had for many long years shown his intense interest in the sick and the suffering. In the days when the Authority maintained and administered hospitals, no-one was more interested and more devoted to that branch of the work, while his accession to the Chairmanship of the Health Committee in 1945 put him in the position of presiding over the department charged with preventive medicine and the promotion of health. He rapidly found as great an interest in that side of the work.

Alderman Welch was one of those men who was utterly dedicated to the service of his native town. When, some years ago, the Freedom of Middlesbrough was conferred on him, he derived more pleasure from that honour than he could have from any other distinction.

He represented Middlesbrough on many Bodies and went with his officers to many Conferences and he always represented his native town with great dignity.

He was gravely disappointed when—due to his advancing age
—he ceased to be nominated as a member of the Local Hospital
Management Committee, but he bore that blow with quiet dignity
and carried on with the other forms of service that were left to him.

Towards the end of his life he had a severe operation, followed by a long and painful convalescence, which he sustained with great courage and fortitude, hoping that even at his advanced age he might recover sufficiently to prolong his services to the town. That, however, was not vouchsafed to him. But those interested in successful Local Government and who admire strong human courage and endurance will always remember this great servant of Middlesbrough with respect.

ALDERMAN F. C. PETTE

The Health Committee lost also during the year one of its wisest and most experienced members, in the person of Mr. Alderman F. C. Pette. His essentially friendly and kind disposition made it always a pleasure to work with him.

His contributions and suggestions were many and wise and his great experience of business and of life in general made him a most valuable counsellor.

Particularly did he show his interest in the welfare of old people.

We retain the memory of a kindly, friendly and able man, whom the Health Department held in great esteem.

EX-COUNCILLOR W. H. ADAMS

During the year, also, a former member of the Health Committee —Councillor W. H. Adams—passed away after a very short illness.

Councillor Adams was an enthusiast. Once he conceived an idea that he could do something and do it well, he put his whole heart into it. To him, more than to any other one man, belongs the credit for the fine Unit for the treatment of Spastics which has just been completed at the General Hospital. He wore himself out going from meeting to meeting. stimulating enthusiasm and creating public interest in the needs of Spastics.

He was a shining example of the enthusiastic layman who shows that in spite of a National Health Service there is something that an inspired volunteer can contribute.

Many children will be the happier and the healthier because o the enthusiastic activities of this eager man.

MINISTRY OF HEALTH CIRCULAR 1/61

The Minister in this circular directs that the special subjects which now follow should have special mention in this year's Annual Report.

MENTAL HEALTH SERVICES

During the year, 1960, the Local Health Authority's Scheme for the implementation of the Mental Health Act, 1959, was submitted, and, after comments and slight modifications, received the approval of the Minister of Health. The Scheme is printed in full as Appendix 'A' to this report.

Pursuant to this Scheme, consideration has been given to, and work is actually proceeding on, the conversion of a house into a hostel for sub-normal boys and young men, some of whom will be able to work and some to attend training centres.

Consideration is also being given to the expansion and enlargement of the Council's adult training centres and classes, and of the junior training centres.

Negotiations are proceeding with St. Luke's Mental Hospital and the two hospitals for severely sub-normal persons. One of the Council's officers has already had a most helpful course at Aycliffe Hospital and another officer will proceed there very shortly.

The staff of Mental Welfare Officers has been brought up from three to five and a sixth appointment and that of a senior administrative clerk for Mental Health are envisaged. There is a vacancy on the establishment for a psychiatric social worker, but obtaining a suitable person to fill that vacancy seems to be as difficult as ever. Only the training of a considerable number of psychiatric social workers will solve that problem.

HEALTH EDUCATION

At the present moment, if one reads the daily papers, they not infrequently contain such things as "A Talk on Health by a Doctor", or "A Loamshire Doctor speaks to you". In the Sunday papers you have a repetition of this and through the B.B.C. television, I.T.V. and the radio, an amazing amount of information of varying quality descends on the public like manna from the skies. There are, in addition, such magazines as the British Medical Association's "Family Doctor", in which advice is given to the public on health problems, probable or improbable.

There is a very great danger of giving the public, first of all too much health education with the result that they become entirely confused, and secondly the health education given is apt to vary like the synoptic Gospels and the public must occasionally wonder who is the true evangelist, there being many prophets.

Ever since the inception of the National Health Service there has seemed to be a wave of increase among the public of health consciousness which usually means disease or operation consciousness, and to listen to members of the public talking in 'buses, multiple shops, cafes and other resorts where two or three are gathered together, gives one the impression that a large number of the public have either been ill recently, know somebody who is ill at present or expect to be ill very shortly.

Thanks to these agencies of publicity the public have learnt a lot more words and they are sometimes amazingly up-to-date in the nomenclature of their alleged complaints. But they still suffer from "double pneumonia on the right side", from "gastric stomach" and "cardiac hearts". Some of the old hardy complaints, however, have not died. They have varicose veins—usually spelt "various"; phlebitis being upopular as it gets mixed up with flea bites; while recently a lady was heard proclaiming in a public conveyance in a loud voice that several members of her family were suffering from syphilis, when the trouble was that one child and one adult had contracted erysipelas. One felt she had a lot of explaining to do.

Health Education has got to cease to be a recital of the possible diseases that you may acquire if you are careless or do not lead an approved way of life, but which many people manage to get even after taking all the precautions advocated.

Health Education, if it is to comfort, cheer and educate the public, must emphasise the natural right of a human being, born into the world after reasonable ante-natal care and subsequently brought up in an intelligent way, to enjoy health, rather than to believe that its heritage on earth—which is no longer believed to be one of sin—is one of constantly occurring disease. There is too much emphasis on hospitals, important as they are and valuable as is the work they do. To the average reasonably healthy person a stay in hospital or an operation should be merely an incident and an interlude—one hopes a brief one, too,—in his life. People live at home and go into hospital when they have to, and healthy people go into hospital with natural reluctance, not because there is anything particularly wrong with the hospitals, but because it is disturbing to have one's life upset and have to go into such an institution to be wakened at 6 a.m. instead of one's normal 7-30 a.m. and be disciplined in a way that the average Briton in the 20th century does not really like. Both in the interests of economy and for psychological reasons every endeavour should be made to keep down hospitalisation to those cases where the necessary operative or remedial treatment cannot possibly be given as an out-patient or in the home. The revolution in thought that has taken place in the sphere of mental health must extend itself to physical health and skilled nursing and attendance brought to the home or provided in the home should be the thing to aim at, rather than concentration of large numbers of people in hospitals.

The move towards more generous and more reasonable visiting hours and the relaxation of a code of discipline formerly thought necessary but now agreed to be often repugnant, should make the members of the family of a patient in hospital realise that they have a very great part to play in the treatment and recovery of their dear one, and that, equally, they should at the earliest possible moment that it is reasonably feasible, be prepared to have the patient back in the home and look after him, assisted by all those services which the hospital and Local Health Authorities can provide.

The days of slums, of overcrowding and of houses which were not fit for people to be ill in, let alone for them be healthy in, are past or rapidly passing and with the development of a well-housed British community the hospital should cease to be the centre of thought and the home the normal place for a person to be ill or well.

Health Education must adjust itself to this state of affairs. While discussing in simple terms the outstanding causes of ill-health, especially those which can be alleviated or rendered more improbable by the effort of the citizen, they should at the same time teach the citizen to expect to be well, to regard it as his right to be well and his duty to keep himself well and to follow those precautions which will avoid the spreading of illness to his neighbour.

Now, who is to give this Health Education? Specialists in Health Education, family practitioners, or who? There is room for the specialist in Health Education and one has only to see some of the demonstrations and lectures put on by the Central Council for Health Education to realise how extremely helpful they are to an intelligent audience and how much can be learnt by those whose duty it is to give Health Education, by listening to the specialists in that art.

Health Education must never be dull. It must arrest and interest the audience. It should concentrate on one clearly explained topic, rather than a whole lot of things. It should make use of attractive media—films, cartoons, television, etc. In short, people should like to receive Health Education and not regard it as some kind of thing which they go through because they feel they ought to.

How many dull health lectures have we listened to—apart from those we may have given—but an understandable blindness prevents the lecturer from realising often how dull he is.

Life, health and sex are vital and interesting subjects and they should be dealt with in an interesting and modern manner. But one can learn a lot from the specialist about the art of putting it across.

The Family Doctor

Unless the family doctor is the possessor of an extremely small list—in which case he will hardly make a respectable living—he will have no time to give Health Education as he passes through the homes of the people. In the first place he is never called in unless there is somebody ill and when he does go in he usually bustles in, sees the patient indicated and if he has time for a cup of tea and a chat with the householder before he comes out that will be all the time a busy practitioner has. He is thus debarred from doing any preventive health education by the fact that he does not see the persons who are not ill and any health education he might give to the others is rendered futile by lack of time. The family doctor needs an ally.

We believe that the intention of the National Health Service Act was that the Health Departments of Local Health Authorities should afford that education and all the better if they can give that education possibly to mothers pointed out by the family doctor. So we appeal to the family doctor when he sees it "sticking out a mile" that a family could do with instruction and education, that he appeals to the Local Health Authority for help.

There is no better health educator than your Health Visitor. Nine times out of ten she is known to the householder and to several members of the family already. She, therefore, enters the house in the privileged position of a familiar friend and counsellor and we feel convinced that the best health education of all is that given quietly in the privacy of the home by a Health Visitor talking to mother, if possible father, and if you can lay hands on them the youngsters as well.

There is another Health Officer who should be a great agent for Health Education and that is the Public Health Inspector. Public Health Inspectors no longer exist for the purpose of totting up a number of nuisances, deducting those quickly and voluntarily abated, and equating the rest with a number of prosecutions. The day of education or edification by threat in this country is dead. The day of education by example and by persuasion and courtesy will, one hopes, never die.

The Public Health Inspector should regard himself as a friend of the families living in his district. When he finds anything wrong, for which a "notice" has to be sent, that notice should be couched in a kindly, friendly and courteous tone. He should at the same time observe when he is in the house other things that are wrong, which may not be statutory nuisances at all. For instance, causes of home accidents—the loose carpet, the absent stair-rod, the worn mat, the absence of fire screen. The Public Health Inspector should constitute himself the adviser of the family of the house in which he is visiting, to ensure the greater safety, comfort and health of that house. Action can be taken about a broken sash-cord, but no action can be taken about a window that is never opened and if a window is never opened, or—as one has seen sometimes, nailed up—it does not really matter in what condition the sash-cord is.

The Public Health Inspector, while doing his job, should also have the larger view that he is there to promote the health and healthy living of the people in his district. Not to educate by awful menaces of what will happen "if it isn't done the next time I come round".

There is still room for Health Education by Exhibition, but exhibitions have—to be effective—got to be, in the first place, fairly large and in the second place very conveniently situated for the public. A pokey little Exhibition in some suburban Parish Hall does next to no good. But a well organised Exhibition not occuring too often and with plenty of side-shows and jollity, as well as carefully thought out exhibits and lectures, can still be a good and successful thing.

More formal education during 1960 was, to a certain extent, superseded by the overwhelming demands of poliomyelitis propaganda and the statistics of poliomyelitis vaccination included in this report have proved that this was very successful. But one is still left wondering how successful it would have been if a famous footballer had not died of polio, so that perhaps our propaganda cannot claim all the credit.

Health Education will always be one of the proudest functions of a Local Health Authority and a Health Department should be always prepared to help voluntary societies anxious to disseminate it.

Talks have continued to be given throughout the year 1960, by members of the Health Department staff, to such institutions as Townswomen's Guilds, Co-op. Women's Guilds, Men's Societies, and others. This is a very useful activity, but it possesses two disadvantages:—

- It involves generally the staff working after normal office hours and very often after a very full day's work.
- (2) You are preaching in these talks to an interested audience of particularly intelligent and civic-minded people, and while it does them good, it does nothing whatsoever to get to those who need Health Education and health information most.

My own view is that the days when you congregated a number of people into a hall and lectured to them on a subject or series of subjects of your choosing rather than theirs, are past and that Health Departments, in organising the Health Education Services will have to re-orientate themselves to more modern methods, such as lectures illustrated by films or flannelgraphs, and above all, broadcasting.

Medical and other officers of the Health Department take part n the training of (a) Queen's Nurses

(b) hospital nurses(c) pupil midwives.

and they are given a thorough grounding in Public Health law and the services available to the public under the National Health Service Act. 19

HEALTH EDUCATION REGARDING SMOKING

When the pronouncement was made by the Medical Research Council that there was a definite relationship between heavy smoking and the prevalence of lung cancer, the Health and Education Committees considered the position very seriously. The conclusion was come to that the matter had obtained very considerable ventilation in the Press and through such media as the radio and television and that as far as the adult members of the public were concerned they had had ample opportunity of hearing the arguments pro et con. It was, therefore, felt that the best field for propaganda was in connection with the young.

The matter was referred to the Education Committee who drew the attention of Head Teachers—particularly Head Teachers of schools where smoking might be expected to occur—and they were asked to use their discretion in the matter of instructing pupils.

It was made clear that Medical Officers of the Health Department and others would be willing to go into schools and elaborate the point if necessary.

On looking round the community one does not notice any diminution in the amount of smoking. As far as the adult population is concerned the seed has fallen on very stony ground. The tobacconist shops are certainly not having to shut down for lack of trade.

In the Juvenile Court cigarettes seem to be stolen with considerable regularity and from our own observation and enquiry smoking among juveniles is as prevalent as ever and seems, in many cases, to receive little or no discouragement from parents. The days when policemen confiscated cigarettes and matches from persons apparently under 16, are dead. But the facts are there.

Lung cancer is becoming more prevalent with resultant mortality, preceded by invalidism. But the public smokes on, blissfully ignorant or blissfully indifferent. One feels that the only education that will have any effect is that of example. So long as "daddy" and "mummy" puff away happily and the house is littered with cigarette butts it is perfectly useless to tell the children that smoking is wrong or harmful. They won't believe it. They will insist on looking forward to the days when they can smoke just like dad and mum and regard the indulgence as one more proof that they are growing up.

It is true that in schools with a strong athletic tradition that a lot of boys do not smoke because they have the sense to realise that it may interfere with their training and their breath control and militate against their efficiency in their much cherished games and athletics. The other deterrent, of course, is the high price of cigarettes. But the Juvenile Court statistics reveal the fact that quite a number of youngsters do not pay for them.

There are certain things that would help. One would be that if parents wished their children not to smoke they could make a sacrifice and give up smoking themselves. They would then be in a much stronger position to give instructions to the young. The second would be if teachers voluntarily agreed not to smoke on school premises. That would have to be voluntary, but would, we feel, set a very fine example.

Another helpful measure would be the prohibition of smoking in short distance 'buses. In Middlesbrough it only takes some 15 minutes to get from the centre of the town well into the outskirts, and surely it is not too much to ask people not to smoke during that short period of time. It is a very different story if you are doing a long-distance 'bus journey say to Northallerton or West Hartlepool, when, to deprive a smoker of his addiction might be felt to be a hardship.

It is certainly not worth spending a lot of the rate-payer's and tax-payer's money on utterly useless propaganda against smoking which the public quite obviously does not heed.

Lastly, while the country continues to derive a very considerable chunk of its revenue from tobacco duty, are we really sincere about stopping smoking at all?

CHIROPODY

The position in Middlesbrough is that the Local Authority very shortly after the arrival of news from the Ministry of Health that Local Authorities were permitted themselves to organise a Chiropody Service with priority for aged persons, handicapped persons and pregnant women, entered into negotiation with the local Chiropodists and a scheme has been formed and stands ready to be put into operation. The only thing that is preventing it from operating is that there appears to be no negotiated rate of pay by session or otherwise for Chiropodists, which has been agreed between representatives of the Chiropodists' professional associations and representatives of Local Authorities. To that end representation has been made to the Association of Municipal Corporations and it is hoped that a nationally agreed scale of remuneration will soon be produced and the Authority enabled to get on with the service, which it is eager to give. In the meantime a certain amount of chiropody is given within the County Borough of Middlesbrough in various ways and these are apparent in the report dealing with the services rendered to old people.

LIAISON ARRANGEMENTS

It is not clear what is meant by paragraph 6 of Circular 1/61, of 31st January, 1961, where a report is requested on liaison arrangements with hospitals and general practitioners designed to avoid unnecessary hospital admissions and out-patient attendances and to facilitate early discharge. The Local Authority has no control whatsoever over whom the hospitals choose to admit and when they choose to discharge them, unless the suitability of the home arises, in which case the hospitals can—but do not invariably—ask the Local Authority for a report.

As for who attends or does not attend at out-patients, the Local Health Authority has no knowledge, except when the question arises of transporting these patients by ambulance or ambulance car.

As regards the special care and welfare of children in hospital and whether they are best nursed in hospital or at home, that is a matter in which the Local Authority has much concern but little power. The Local Authority agree, and have instructed their Health Visitors to give all help to homes where sick children are being nursed at home, and of course both the Domestic Help Service and the Home Nursing Service are at the service of such families for the asking. We have watched with interest and admiration the scheme as it is worked at Rotherham. One of our difficulties here, of course, is the positioning and the insufficiency of the children's beds in Tees-side. A certain number of our children go to the General Hospital, Middlesbrough, and a Senior Health Visitor visits that Department once a week and walks round with either the Consultant Paediatrician or the Ward Sister, taking a particular interest in all children likely to be discharged. But a very large number of Middlesbrough children have to be hospitalised at the Stockton Children's Hospital which is four miles away from Middlesbrough on the far side of Stockton and in another County, and we have never been invited, nor would it be entirely reasonable for us to send our emissaries there. A really good liaison will probably have to be postponed until such time as the children's accommodation is properly concentrated or until the new capital General Hospital in Middlesbrough has come to birth and has a substantial children's section.

Very close liaison is maintained between the Health Department and the Consultant Paediatricians who turn more and more to us for reports on homes and asking us to provide aftercare for children discharged. This, the Local Health Authority does and will continue to do. But on the broad question of whether a lot of children at present having to be hospitalised could be nursed at home we think there is room for further research. Slums are going, decently housed and decently spaced families are the rule. With children, even more than adults it is important that the separation period from home and parents should be as short as possible. The Local Health Authority will do everything in its power to develop this valuable liaison and will hope to see, in the course of the next few years a considerable reduction in the number of days spent in hospital by children.

We would view with very great enthusiasm the setting up of classes for mothers in the care of young children at home, but we feel that at the present moment this should either be instruction given by the family doctor to the mother of the family, or by the Paediatric Department of the hospitals on the aftercare of the children they treat. However, the Middlesbrough Local Health Authority will not miss any chance of co-operation to develop this service.

CHILD GUIDANCE

Circular 3/59, Ministry of Health and Circular 347/59, Minister of Education

The Child Guidance arrangements of the Local Health Authority are, in the very near future, to be the subject of discussion with the Consultants retained at St. Luke's Hospital in this town. For many years the Education Committee has been operating a Child Guidance Clinic which has been incomplete. It has had the services of an Educational Psychologist—of whom there have been four in the last 12 years—a Social Worker, non-Diploma holder, who has become very experienced by the practise of her work, but the full team of a Child Psychiatrist, Child Psychologist and Social Worker have never all been present at the same time.

Tentative approaches have been made to the Regional Hospital Board and to various Consultants to obtain at least the part-time services of a Consultant Psychiatrist. What happens at the present moment is that cases requiring a psychiatric opinion are referred by the Educational Psychologist and the Senior School M.O. to one of the Consultant Psychiatrists at St. Luke's Hospital. There, painstaking and helpful opinions and advice have been given, but that does not replace the opportunity of close discussion of a case and of case conferences.

Some time ago an informal approach was made to St. Luke's Hospital and we conceived the hope that when a new Child Psychiatrist was appointed to the staff of that institution he might not only be able to give sessions to the Child Guidance Clinic, but might also from time to time visit the ordinary Infant Welfare Centres of the Authority and give helpful advice to mothers about their children and sometimes about themselves. Unfortunately it has not been possible to obtain this service, it is believed chiefly owing to the heavy burden of work already descending on the entire staff of St. Luke's. Further discussions are shortly to take place in this matter, but in the meantime I wish to note that the attempt has already been made.

SEWERAGE

During the year discussion has been taking place between the Wear and Tees River Board and the Middlesbrough County Borough Council and other Authorities bordering on the River Tees, regarding the control of any future effluent or sewage to be discharged in the higher portion of the River Tees.

SECTION A

STATISTICS AND SOCIAL CONDITIONS OF THE AREA

Area (in acres) inclu	ding 17	3 acres of	tidal w	ater		7,304
Estimated Populatio	n (Mid	-1960)				154,560
Number of Inhabite	d Hous	es (end of	1960)			44,880
Rateable value (31.1	2.60)					£1,756,681
Product of a penny	rate					£6,968
Live Births:				_		
Y		M.		F.		Total
Legitimate		1,659		1,612 109		3,271 239
Illegitimate				109		239
		1,789		1,721		3,510
Rate per 1,000 p	populat	ion				22.71
Illegitimate Live	Births	per cent.	of tota	l live bis	ths	6.81
Stillbirths:						
		M.		F.		Total
Legitimate		35		37		72
Illegitimate		5		4		9
		40		41		81
Rate per 1,000 t	total liv	e and still	births			22.55
Total Live and	Stillbirt	hs:				
		M.		F.		Total
		1,829		1,762		3,591
Infant Deaths (deaths	s under	1 year):				
		M.		F.		Total
Legitimate		45		33		78
Illegitimate		5		1		6
		50		34		84
Infant Mortality Rat	es:					
Total infant dea	ths per	1,000 tota	al live b	irths		23.93
Legitimate infar births	nt deat	hs per 1,0	000 legi	itimate	live	23.85
	ont do	the per	1 000	illogities	ata	20.00
Illegitimate infa live birth			1,000			25.10

Neo-natal Mortality 1,000 total live b		(deaths un	nder 4 we	eeks per	16.24
Early Neo-natal Mort 1,000 total live b		Rate (death	s under 1	week per	12.82
Perinatal Mortality I 1 week combined					35.08
Maternal Mortality (i	ncludi	ng abortio	n):		
Deaths Rate per 1,000 to	tal liv	e and still	births .	: ::	Nil Nil
Deaths Registered :-				Death Rate	
Dentilis Ategisteres .	M.	F.	Total		puln.
Nett	976	852	1,828		
Deaths from :-					
Smallpox	-		_	_	
Acute Poliomyelitis	and				
Polioencephalitis		_	_	-	
Typhoid and					
Paratyphoid					
Fevers	_	_		_	
Measles	1		1	0.01	
Scarlet Fever	_			-	
Whooping Cough	_	1	1	0.01	
Diphtheria	_				
Influenza	59	27	86	0.56	
Violence Diarrhoea (under	39	21	00	0.50	
0 1		1	1	0.01	
Cancer	172	144	316	2.04	
Heart Disease	277	282	559	3.62	
Tuberculosis	11	5	16	0.10	
Pneumonia	55	39	94	0.61	
Pregnancy	_	_	_		
Comparative Rates :-	-				
			llesbrou3h	England and	
Birth rate (live birt)	hs)	22.		17.1	
Death Rate	· ·	11.8		11.5	
Infant Mortality Maternal Mortal		te 24.0	-	22.0	†
	* Prov	visional			
		1,000 relate	ed births		
Area Comparability F	actors				
Births		. 0.95			
Deaths		. 1.22			

Notifications—Ra	ates pe	er 1,000	popu	lation	:		
Typhoid Fev	er						-
Paratyphoid	Fever						_
Meningococ							.038
Scarlet Feve	r						1.02
Whooping C	ough						2.61
Diphtheria							_
Erysipelas							.013
Measles							10.72
Pneumonia							.40
Encephalitis							.032
Acute Poliomyeli	tis						
(including Poli		nhalitis)				
D 1 1	···	, ,					
Non-Paralyt	IC		• •			* *	
Food Poisoning							.103
Puerperal Pyrexi	ia :—						
Rate per 1,000 (Live and St		Births					8.08

WARD STATISTICS.

Ward		No. of Cases of Infectious Disease per 1,000 population	Death Rate	Birth Rate	Infant Mortality Rate
Acklam Ayresome Cannon Clairville Berwick Hills Crescent Exchange Gresham Grove Hill Linthorpe Newport North Ormesby Park Thorntree Tollesby St. Hilda's Whinney Banks		14 18 20 87 38 21 26 12 40 18 43 31 25 25 25 32 44 24	7 8 9 7 23 10 9 22 12 11 10 10 3 4 8	16 21 34 16 54 18 23 16 27 14 40 29 17 16 17 31 20	6 24 16 15 8 15 17 33 33 31 20 18 10 15 26 35

SECTION B

CARE OF MOTHERS AND YOUNG CHILDREN

I am indebted to the S.A.M.O.H. for M. and C.W., Dr. Mark Sackwood, for the following comments.

Midwifery Service

This year has seen some easing in the burden of the Domiciliary Midwifery Service. The Midwifery Staff remains sadly depleted in personnel, and the birth rate of the town is still high; but there is a slowly increasing proportion of mothers being confined in hospital beds.

Considerable help in this matter is provided by the General Practitioner Obstetric Unit of twenty beds, established at the Carter Bequest Hospital. Requests for admission to this Unit are routed through the Health department, an investigation into the social circumstances of the applicant being conducted by a responsible officer of the Department before a final recommendation is made by the Medical Officer of Health.

During the year, use of these beds was steadily maintained, thereby offering very necessary obstetric facilities to a considerable number of women, who would otherwise have had to be confined in difficult home surroundings.

The year has also seen a great increase in the amount of mothercraft teaching conducted by the Midwifery and Health Visiting staff. Apart from the valuable instruction always offered at routine antenatal clinics, specific mothercraft sessions are being maintained in different parts of the town, where a carefully planned programme of tuition is carried out. There can be no doubt as to the value of this work, in allaying the fears and satisfying the natural curiosity of the pregnant woman, and it must always form an essential part of a full Health Education programme.

Period II Midwifery Training commenced on the district, on 1st March, 1960. During the following nine months of the year 14 pupils completed their training and were successful in the examination of the Central Midwives Board, and a further 6 pupils were beginning their training on 1st December.

Child Welfare Service

It is very pleasing to see the continued and extended use of the various Child Welfare Centres throughout the town. In this matter a great part in their popularity must be played by the accommodation provided, and we are fortunate in now possessing two purpose-built Health Clinics, a third almost completed, and plans for several more in the not-too-distant future.

This year saw the completion of the centre at Park End, and its inauguration was carried out at a gracious ceremony before a distinguished audience, by the late Alderman J. W. Welch, Chairman for many years of the Health Committee.

As a further step in Family Care, in the latter half of the year the Baby Creche was introduced to various parts of the town. Taking place in Centres or Clinic, with a trained nursery nurse in charge, children of the toddler group are cared for during several hours of the day, at a nominal fee, allowing an interval of time for the mother to conduct her affairs without fear for her child. The attendance figures at most of these creches have been encouraging, and suggest they have a useful part to play.

MIDWIFERY SERVICE 1960

The year commenced with 22 midwives in full-time employment with the Authority, together with the Non-Medical Supervisor and a senior midwife to assist her.

During the year, a further three midwives were appointed, but with 4 resigning, the year ended with only 21 midwives in service.

Notifications of intention to practise were also received from:

Maternity Hospital		33 midwives	
General Hospital		7 midwives 6 midwives	
Ardencaple Nursing Home		4 midwives	
Total number of women confined County Borough :	in the		4,827
including Residents		3,517	4,027
Non-residents		1,310	
Residents confined outside the Co	unty B	orough	43
No. of deliveries attended by don	niciliar	y midwives	2,045
Doctors' booked cases—			
Nurse acting as midwife Nurse acting as maternity nu			1,898 92
Unbooked cases—			
Neither midwife nor doctor has No. of patients who were attend midwives during labour, were	ed by	domiciliary	55
gencies in the Maternity Hosp		ut returned	208
No. of cases in which medical aid	was so	ought—	
Doctors' booked cases			363
Unbooked cases			51

No. of Gas and Air adm	inistratio	ns			
Doctor not present					1,682
Doctor present (as n	naternity	nurses)		80
Administrations of Pethi	dine—				
Doctor not present (999			
Doctor present (as n	Doctor present (as maternity nurses)				
No. of nursings (attentio	n to mot	her and	baby)		29,886
No. of ante-natal visits to	o patient	s' home	es		4,298
No. of special visits					183
Midwives ante-natal clin	ic attend	ances—			
New patients					2,275
Re-attendances					7,092

It is pleasing to find that towards the end of the year the artificial differentiation between "midwife" and "maternity nurse" was discarded by the Central Midwives Board, and when a midwife was looking after a mother, irrespective of the presence of a doctor, she was there in her full role and title.

MIDWIVES' DELIVERIES, 1960.

					D	eliveries
Miss E. Dempsey of Midwive		edical :	Supervi	isor	 	3
Nurse Atkinson					 	90
Nurse Banes					 	94
Nurse Brady (term	inated s	ervice	10.6.60)	 	36
Nurse Brown					 	112
Nurse Bryan (com	menced	4.4.60)			 	27
Nurse Clark					 	71
Nurse Fairbairn					 	114
Nurse Harris					 	104
Nurse Harbron (co	mmence	ed 1.1.6	60)		 	68
Nurse Hill (termin	ated serv	vice 5.2	2.60)		 	8
Nurse Jones					 	99
Nurse McIntosh					 	102
Nurse McKinlay					 	152
Nurse Oldham					 	91
Nurse Ormesby					 	35
Nurse O'Connell					 	60

				$D\epsilon$	eliveries
Nurse O'Neill				 	97
Nurse Poole (terminated	d service	19.7.60)		 	36
Nurse Scott				 	122
Nurse Smithson				 	130
Nurse Stephenson				 	79
Nurse Tiernan				 	101
Nurse Townsend				 	101
Nurse Thorley (termina			0)	 	41
Nurse Wilkinson (comn	nenced 1	.1.60)		 	63

District Ante-Natal and Post-Natal Clinics.

During the year the decline in attendances at these clinics has continued. Because of this several of the sessions have been modified in their form, amalgamation occurring in several areas. In this way the service has been maintained where necessary, but wastage of doctor's time has been avoided.

Statistics:

					1960	1959	1958
Lord Stree	t (Cannor	n):					
1st atten	dances				22	19	26
Re-	,,				34	71	115
					56	90	141
American 1	Red Cros	s : (Cea	ased M	arch)			
1st atten	dances				4	21	39
Re-	,,				3	46	127
					7	67	166
Thorntree	: (Ceased	June)					
1st atten					5	19	35
Re-	,,				14	38	127
					19	57	162
Newlands	:						
1st atten					15	27	37
Re-	,,				83	112	204
				98	139	241	
Grove Hill							
1st atten					17	20	40
Re-	,,				35	98	203
					52	118	243

North Ormesby:					
1st attendances			 31	50	80
Re- ,,			 93	181	294
			124	231	374
Whinney Banks:	(Ceased	April)			
1st attendances			 10	14	51
Re- ,,			 21	82	183
			31	96	234
Total 1st attend	ances		 104	170	308
Total Re-	,		 283	618	1,253
			387	798	1,561
				-	

Post-natal examinations at all Clinics: 11.

At these Clinics, apart from the routine ante-natal procedure, including the obtaining of blood samples for investigation, poliomyelitis vaccination is offered to all pregnant women.

During the year 107 specimens of blood were sent to the laboratory for examination.

Grouping and	Rhes	sus dete	rminat	ion	94
Kahn testing					85
Haemoglobin	estim	ation			98

No ancillary tests were required during the year.

Premature Live Births: (Weight at birth 5? lbs., or less):

Residents: 267. Non-residents: 208.

Further details of these infants will be found in Table VI of the statistical tables at the end of the report.

Stillbirths: 172; Residents: 82: Domiciliary, 18; Institutional, 64.

Non-residents: 90.

A broad classification of these stillbirths is as follows:—

	Domiciliary	Institutional			
A.	Maternal Health Factors	-	12 (including 11 associated with Rhesus incompatability).		
B.	Obstetric Complications	5	82		
C.	Foetal abnormalities	3 (including 2 anencephalic)	23 (including 15 anen- cephalic and 6 hydro- cephalic)		
D.	Undetermined factors	10	37		
	Total	18	154		

Neo-Natal Deaths.

103 infants died under one month of age during the year.

A broad classification of the registered causes of death is as follows:—

Prematurity (including a		d infe	ction	
and congenital abnorm	alities)			51
Respiratory insufficiency (hyaline pulmonary dise		g atele	ctasis	14
Congenital abnormalities associated infection)	(includi	ng 		13
Cerebral haemorrhage				10
Infection				6
Haemorrhagic disease of	newborn			6
Other causes				3

Infant Deaths

39 infants between the age of one month and one year died during the year.

A broad classification of the registered causes of death is as follows:-

Infection			 	20
Congenital malforn	natio	ns	 	8
Mechanical asphyxi	ia		 	6
Leukaemia			 	1
Other causes			 	4

Child Deaths

24 children between the ages of one and five years died during the year.

A broad classification of the registered causes of death is as follows:—

Infection	 	13
Malignant conditions	 	4 (including three leukaemia)
Congenital malformation	 	2
Other causes	 	5

PUERPERAL PYREXIA

Twenty-nine cases were notified during the year, 23 occurring in institutions and 6 at home (although not necessarily after a domiciliary confinement). There were no fatalities during the year from this cause.

MATERNAL MORTALITY

There were no maternal deaths recorded during the year.

HEALTH VISITING

The Health Visiting staff was augmented during the year by the addition of four trained personnel, one having been a student health visitor with this Authority and having successfuly completed her course at Newcastle during the year.

At the end of the year, together with the Superintendent and her deputy, there were 15 trained health visitors employed full-time, 2 on part-time employment, together with one Public Health Nurse assisting the health visitors in their work, but in a part-time capacity.

The Authority also continues to employ six Public Health nurses, ministering to the needs of aged folk, and a full-time male nursing orderly for domiciliary duties.

Finally, a trained nurse is also employed on a part-time basis to assist in the many inoculation programmes maintained at the Health Department and elsewhere.

Three student health visitors commenced their course of study at Newcastle in September, 1960. Prior to attending the course, one of these nurses had worked for several months as a Public Health Nurse in the department.

Although during the year a steady increase in staff numbers has occurred, there is still a long way to go before the full establishment of trained health visiting staff is completed. Nevertheless, a considerable volume of work has been accomplished as evidenced by the data appended to this report.

During the year, routine testing of all new-born infants for the presence of phenylketonuria was commenced by the health visiting staff at the initial home visit—no positive cases were found during the year.

A staphylococcal survey was commenced in the town in March, under the auspices of the Medical Research Council, General Practice Research Committee, and when requested by the general practitioners concerned valuable assistance has been offered by several health visitors, covering different parts of the town.

Refresher Courses were attended by the deputy Superintendent H.V. and another member of the Health Visiting Staff.

Representatives from the staff were also present at several conferences, including the Annual General Meeting of Women Public Health Officers' Association held at Brighton and the Annual General Meeting of the National Council of Women held at Scarborough.

Hospital Student Nurses' Training

As with previous years, student nurses from the local hospitals attended lectures and practical work, supervised by members of the Health Department staff. About twenty such students were accommodated this year.

Home Visiting by the Health Visitors:

A total of 61,955 visits were made during the year, this including those paid to aged folk, discussed elsewhere in this report.

Details are as follows :-

Birth enquiry or first visits .			3,468
Visits to infants (0-1 year)	(including	the	
initial visit)			14,267
Visits to children (1-5 years)			23,922
Special visits			1,460
Neo-natal and infant death vi	sits		46
Ante-natal first visits .			731
Ante-natal re-visits			198
Visits to aged men and others			4,516
Visits to aged women and oth	ers		7,498
Infectious disease visits .			2,505
Ineffectual visits			6,812
	Total		61,955

The regular hygiene inspections at the Occupation Centre were continued during the year, being carried out by one of the Public Health Nurses.

58 children attend at the Centre, and during the twelve months, treatment for pediculosis was required on 97 occasions, 9 children being concerned, and 46 children treated for dirty scalps.

Twelve cases of scabies were attended to in the Department, involving 20 items of treatment. Ten of these patients were preschool children and two adults.

Child Welfare Centres:

Eleven centres are in use throughout the town, where clinics are held as one facet of the Child Welfare Service.

At these centres one or two sessions each week are devoted to this work, with a doctor and Health Visitors in attendance.

The centre buildings range in type from modern Health Clinics to Church Halls. In one area, as a temporary measure the clinic is maintained in the same building as the Public Baths—slum clearance has also removed the former clinic premises here, and whilst awaiting the construction of a new centre the present accommodation is proving a very adequate substitute.

From the following details can be seen aspects of the work carried on at these centres.

Number of children 0-1 year (attending for the first time)		2,178
Number of children 1-5 years (attending for the first time)		186
Total number of attendances of children 0-1	l year	16,334
Total number of attendances of children 1-5	5 years	8,916
Number of children examined by doctor		5,273
Number of children-advice given by Hea	lth	
Visitors		22,411
Total number of Clinic sessions		647

The following table shows the actual attendances during the year at the individual Clinics:—

				0-1 yr.	1-5 yrs.
Elizabeth Purvi (2 Sessions				1,828	776
Lord Street (Ca	nnoi	n)		1,702	901
Ayresome				1,753	541
Grove Hill (2 s	essio	ns wee	kly)	2,707	1,595
St. Hilda's				538	505
Acklam				1,754	632
North Ormesby	7			1,507	323
Thorntree (2 se	ssion	s week	cly)	1,522	1,006
Whinney Banks	3			1,457	598
St. Barnabas				1,302	555
Park End				1,292	456

Unless otherwise mentioned there is one session weekly at each of the Centres.

From the Child Welfare Centres 27 infants and children were subsequently referred for further treatment or opinions, the details being as follows:—

For hospital advice			1
Orthopædic School Clinic			18
Pædiatrician			1
Speech Therapy Clinic			4
North Riding Infirmary (fo	or strabisn	nus)	3
			27

Many other children were referred to the family doctor.

Patch tests for tuberculosis are performed at the Centres, when thought necessary.

Ascertainment of Hearing in Young Children.

The more senior Health Visitors continue to carry out simple tests in screening for possible deafness, when this is indicated, in the young child. Forty-five children were examined and four were referred for the opinion of an E.N.T. specialist—the remainder showed normal hearing on initial or re-testing.

Orthopaedic Clinic.

This Clinic, run in association with the School Health Service for schoolchildren, also gives advice for orthopaedic problems in the pre-school child when referred from a Child Welfare Clinic.

During the year 15 sessions were held (usually once monthly, with additional sessions when required, to cope with a heavy waiting list), and at these sessions pre-school children paid 168 visits, this including 16 initial visits and 152 re-attendances.

Dental Care for Expectant and Nursing Mothers and Pre-schoolchildren.

This essential service is sadly handicapped by the continued shortage of dental staff. One morning session takes place each week in the Dental Clinic at the Grove Hill Centre.

During the year 183 expectant and nursing mothers, together with 13 children of pre-school age were seen in consultation. Examination and treatment were given as required.

The details of the work carried out are as under :-

A. Numbers provided with Dental Care.

	Examined	Needing treatment	Treated	Made dentally fit.
Expectant and Nursing Mothers	183	183	165	173
Children under five	13	13	13	13

B. Forms of Dental Treatment Provided.

	Caslinas	12311	Cilver	Croums	Eutros	Canaral	Dentures	provided	Radio- graphs
	Scalings and Gum Treat- ment	Fill- ings	Silver Nitrate Treat- ment	Crowns or Inlays	Extrac- tions	General Anæs- thetic	Full Upper or Lower	Partial Upper or Lower	
Expectant & Nursing Mothers	_	3	_	_	1,949	20	223	8	_
Children under five	_		_	_	42	12	_	_	_

SALE OF WELFARE FOODS.

Ministry of Food products and proprietary welfare foods are sold at all the Child Welfare Clinics and also at the Central Depot in Albert Terrace.

The following issues took place during the year, with the figures of the previous two years for comparison:—

	1960	1959	1958
	-	_	_
National Dried Milk	23,741	28,958	33,813
Bottles of Orange Juice	62,402	78,109	70,296
Bottles of Cod Liver Oil	7,101	6,931	6,186
Vitamin Tablets	7,621	7,548	6,546
Proprietary Food Sales	£7,118	£7,184	£7,020
Packets of Food issued free of charge	186	379	732

DAY NURSERIES.

Three Day Nurseries, each with places for 60 children, are maintained by the Authority.

Training for the Diploma of the National Nursery Examination Board is carried out at all the Nurseries, the students also attending at a Technical College for the theoretical aspects of the work, together with a widening of their educational horizons.

During the year 1960, only one student failed to obtain the Diploma and of the remaining four who were successful, all were absorbed into the working staff of the Nurseries.

Statistics:

		o of	Regis	on ster at 2.1960	Average Daily Attendance	
	0-2	2-5	0-2	2-5	0-2	2-5
Mosman Terrace Parkside	 25 25	35 35	25 25 25	35 35	19 16	25 27
West Lane	 25	35	25	35	11	28

NURSERIES AND CHILD-MINDERS REGULATION ACT, 1948

Three nursery classes are registered, but only two are now operating in the County Borough accommodating 68 children:—

The classes are held at :-

"Grey Tiles" Nursery School, Green Lane (40 places). Settlement Hall, Newport Road (28 places).

We have had no application during the year, nor have we at the moment registered any individual child minder.

FAMILY PLANNING CLINIC

The Family Planning Association maintain two sessions each week, using one of the Authority's clinic buildings for this purpose.

During the year sanction for free consultation in accordance with the Council's scheme was granted by the Medical Officer of Health to 40 patients.

The sources of these patients were :-

General practitioners		17
St. Luke's Hospital		17
Ante-natal and Welfare Clinics	s	6

SECTION C

PREVALENCE OF AND CONTROL OVER INFECTIOUS AND OTHER DISEASES.

The total number of notifications received during the year was 4,878 compared with 3,997 in the previous year.

Diphtheria.

There were no notifications of Diphtheria during 1960.

Six cases were admitted to West Lane Hospital as possible Diphtheria cases, but the diagnoses were not confirmed.

Scarlet Fever.

158 notifications were received as against 129 for the year 1959. Individual cases continued to be of a mild type and there were no deaths.

Paratyphoid Fever.

No case was notified.

Meningococcal Infections.

There were 6 notifications in 1960; and no deaths.

Erysipelas.

There were 2 notified cases.

Puerperal Pyrexia.

29 cases were notified.

Dysentery.

Notifications of Dysentery numbered 421 as against 148 for the year 1959; 199 were proved to be due to Shigella Sonnei, and 222 were not defined.

Measles.

During the year 1,657 notifications were received as compared with 1,841 for the year 1959. All cases were visited and kept under observation by Health Department Nurses and School Nurses. One death was registered.

Chickenpox.

2,009 notifications were received, of which 1,155 occurred in schoolchildren. All cases were visited by Health Department and School Nurses.

Whooping Cough.

There were 404 cases notified during the year with one deathas compared with 201 cases and no deaths in 1959. All cases were visited by Health Department and School Nurses.

Ophthalmia Neonatorum.

6 cases were notified.

Influenza.

There were no deaths from this disease, as compared with 8 in the previous year.

Influenzal Pneumonia.

1 case was notified.

Acute Primary Pneumonia.

There were 61 cases notified, and there were 94 deaths registered.

Smallpox.

No case occurred during the year.

Poliomyelitis.

It is pleasing to note that no case of poliomyelitis occurred during the year. In 1959 there were 19 cases, and one has to go back to 1946 before another year free from poliomyelitis can be recorded.

Encephalitis.

5 cases occurred during the year.

Gastro-Enteritis.

There were 6 deaths from Gastro-Enteritis during the year, compared with 5 in 1959.

Food Poisoning.

16 cases of Food Poisoning were notified during the year. Organisms as shown in Table IIa.

Vaccination	Against Sma	No. Vaccinated.						
				Primar		Re-Vaccin		
Under	1 year			1959 310	1960 340	1959	1960	
Onder	•			298	280			
	1 year			290	200		_	
	2—4 years			40	81	3	5	
	5—14 years			31	45	19	11	
	15 and over			132	96	258	288	
				811	842	280	304	
					1959	196	50	
Registe	red Live Birth	ıs			3,473	3,51		
	age of childre nated in relation				8.93	9.6	59	

Vaccinations were undertaken by members of the Health Department staff at a Central Clinic, whilst members of the Public were also vaccinated free of charge by their family doctors.

Vaccination Against Yellow Fever.

Since this service was transferred from the Central Clinical Laboratory to the Health Department at the beginning of July 1960, 1,048 inoculations have been given. Of these 821 were members of ships' crews (necessitating visits to 22 ships) and 227 were members of the general public.

Vaccination Against Poliomyelitis.

During 1960, 9,155 people received two injections. These were given in the following age groups:—

Born 1943-1960					6,136
Born 1933—1942					1,195
Born pre 1933, but	not over	40 vea	ars of a	ge	1.824

In addition 22,188 third injections were given.

Since the inception of the scheme 29,959 people have received three injections and a further 9,911 have completed two injections.

DIPHTHERIA IMMUNISATION.

The work of Diphtheria Immunisation carried out by the Public Health Department in the year 1960 is shown by the following figures:—

No. of children under 5 years of a	ge im	munise	d	2,303
No. of schoolchildren immunised				734
No. of reinforcing injections				835

The following are the percentages of the total number of children in the town who have been immunised in the two groups :—

Percentage	of	chile	iren	under	five	years	of	age	
immunise	d								45.6
Percentage of	of s	choo	lchild	dren im	muni	sed .			84.87

Immunisation in Relation to Child Population.

Number of children at 31st December, 1960, who had completed a course of Immunisation at any time between 1st January, 1946, and 31st December, 1960.

Age at 31.12.60 i.e. Born in Year	Under 1 1960	1 to 4 1956-59	5 to 9 1951-55	10 to 14 1946-50	Under 15 Total
Last complete course of injections (whether primary or booster) A. 1956-1960	527	7,051	9,000	1,346	17,824
B. No. of children whose last course was completed 1954 or earlier	_	_	1,641	11,850	13,491
C. Estimated mid-year child population	3,360	13,240	28,	100	44,700
Immunity Index	15.7%	53.3%	36.	9%	39.9%

TUBERCULOSIS

I am indebted to the Consultant Chest Physician, Dr. B. Couts, for the following comments.

It is pleasing to be able to report again that in 1960 a further improvement has taken place in the tuberculosis position in Middlesbrough. The number of newly notified patients continued to decline and reached the record low figure of 105 for the year. This is 20 less than in 1959 and 35 less than 1958.

New Cases.

As in previous years there was a preponderance of men over women in the newly notified group. In 1960 there were 70 males notified as against 35 females. Patients notified belonged to almost all age groups but the only group in which double figures were recorded was of men aged between 45-64 years.

Deaths.

Deaths have again become slightly fewer, the number in 1960 being fifteen compared with 17 in the previous year and 19 in 1958. There were no deaths in the population aged less than 24 years.

Hospital Admissions.

Hospital admissions for tuberculosis totalled 103 which was a considerable reduction on the previous year. Again, as I mentioned in 1959, a large number of the patients admitted were extremely ill and had extensive tuberculous disease present. Of the new patients 39 were found to be infectious and, of course, required hospital admission urgently.

Preventive Work.

The results of preventive work were very similar to previous years. This year rather more contacts have been X-rayed but the number of new cases found among the contacts, 30, was exactly the same as in 1959.

Action was initiated under Section 172 of the Public Health Act, 1936, in three cases. Each of the three was suffering from pulmonary tuberculosis, in an infectious state, and proper precautions were not being taken to prevent the spread of infection.

The importance of adequate treatment in hospital, both for their own sakes and for that of the community, was stressed, but they would not enter hospital at this stage. However, before the application for compulsory removal came before the Court, all three were voluntarily admitted to hospital.

Chest Clinic Attendances.

The Chest Clinic attendances were a little reduced this year being 8,049 compared with 9,081 in 1959. The number of new patients also declined from 1,260 to 1,044. The vast majority of these new patients are not tuberculous. Many of them, however, do suffer from various diseases of the respiratory tract and require a good deal of medical and nursing attention.

AGE AND SEX DISTRIBUTION OF DEATHS.

Age Groups	3	0-9	10-	15-	20-	25-	35-	45-	55-	65-	All
Respiratory— Males		-	_	_	_	_	1	3	1	4	9
Females		-	_	-	-	1	1	1	1	1	5
Non-Respiratory— Males		-	_	_	_	1	-	_	-	_	1
Females		-	-	-	-	-	-	-	-	-	-
Totals		_	_	_	_	2	2	4	2	5	15

AGE AND SEX DISTRIBUTION OF NOTIFICATIONS.

Age Groups	0-	1-	2-	5-	10-	15-	20-	25-	35-	45-	55-	65-	75-	All Ages
Respiratory— Males	 _	1	9	2	3	2	4	10	7	12	12	5	1	68
Females	 1	-	2	-	3	4	4	8	4	1	4	-	-	31
Non-Respiratory- Males	 -	-	-	-	-	-	-	1	1	-	-	-	-	2
Females	 -	-	-	1	-	-	-	2	1	-	-	-	-	4
Totals	 1	1	11	3	6	6	8	21	13	13	16	5	1	105

The above does not include 14 transfers in.

Source of Notif	fications	:		1960	1959
Chest Clini	c		 	 39	53
Contacts			 	 30	30
Mass Radi	ography		 	 8	7
Ante Natal			 	 -	
Registrar's	Return		 	 2	1
Transfers I			 	 14	21
Other Hosp	oitals		 	 25	24
H.M. Forc			 	 _	1
Industry			 	 	2
School			 	 1	_
				119	139

Middlesbrough Patients Admitted to Hospital during 1960 :-

Poole Hospital—Tuberculous Non-tuberculous	Males 68 208	Females 25 52	Children 10 9
	276	77	19
Contacts.		1960	1959
Babies under 6/52 given B.C.G		98	89
Tuberculin Negative (over 6/52 old)		258	271
Tuberculin Positive (over 6/52 old)		52	53
Total B.C.G. Vaccination (including	babies		
under 6/52 old)		308	360
Contacts X-rayed		796	673
Contacts diagnosed as cases		30	30
Contacts under observation		2	3

Types of Cases Found.				
	Males and Females	Males	Females	Children
Sputum A.1 (Minimal)	14	9	5	19
Negative A.2 (Moderate) A.3 (Advanced)	_	14	11	1
Sputum B.1 (Minimal)	—39 5	—23 3	—16 2	—21 —
Positive B.2 (Moderate) B.3 (Advanced)		24	7	_
Non-Respirator	—39 ry 5 — 5	30 2 2	_ 9 _ 3 _ 3	1 1
	83	55	28	
Clinic Attendances.			1060	1050
Total Clinic Attendances	s		1960 8,049	1959 9,081
New Patients			1,044	1,260
G.P. X-rays (New Pa	tients X-	rayed bu	t 2	6

VENEREAL DISEASES.

We are indebted to the Consultant Venereologist, Middlesbrough General Hospital, for the following.

INCIDENCE OF VENEREAL DISEASE IN THE TEES-SIDE AREA DURING THE YEAR 1960

Venereal disease in the Tees-side Area, i.e. Middlesbrough, Stockton, West Hartlepool and Darlington follow the same pattern observed in the whole of the country.

- 1. The total number of patients attending has increased.
- 2. The incidence of Syphilis is almost identical with 1959.
- 3. Gonorrhoea is still increasing.
- 4. 'Other' venereal disease mainly non-gonococcal urethritis has also increased.
- Of all new cases attending it is noteworthy that a third require no treatment—they are mainly individuals who have with an increasing awareness of venereal disease, come for examination and in most cases reassurance.

The break down of Gonorrhoea into age groups follows a similar pattern since 1957 and there is a slight increase in the under 19 years group but because of the relatively small numbers this is not statistically significant as will be seen from the attached graph 1. The United Kingdom figures are shown on graph 2 for comparison. The total number of gonorrhoea cases is shown by areas of residence.

It is obvious that Middlesbrough shows a marked increase since 1959; in fact the number has more than doubled in the preceding three years in respect of the indigenous population. Non-European residents i.e. Pakistanis, Arabs, and other Asiatics show no great increase, but remain a constant problem as noted before in their tendencies to default and to have second and third infections.

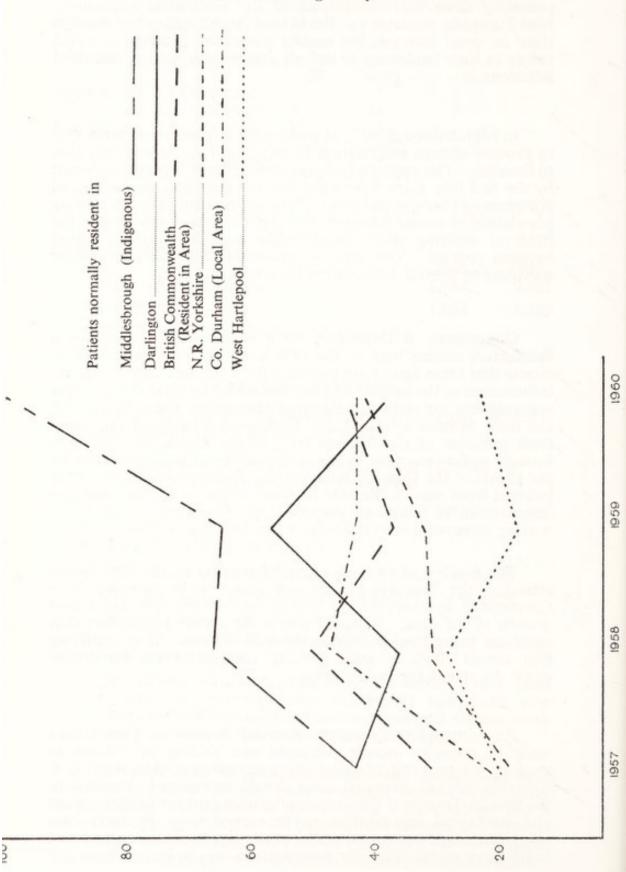
In Middlesbrough 40% of male cases of gonorrhoea were able to provide enough information to bring their sources of infection to the clinic. This apparently disappointing figure is partly explained by the fact that many have been infected elsewhere in the United Kingdom or overseas and many of the patients are part of a moving population of casual labourers and Asiatic seamen who are in the habit of aquiring shore based employment for a short period between voyages. This type of patient is notoriously unable or unwilling to provide information for contact tracing.

Gonorrhoea in Darlington on a similar basis has shown a satisfactory decline back to the 1958 level. It must be realised of course that these figures are obtained from the area clinics, and no information of the number of cases treated by General Practitioners are available for statistical purposes throughout the country. Of the male patients attending the Darlington Clinic suffering from fresh infection of Gonorrhoea 60% of the female contacts were brought under treatment by the agency of the original patient or by the efforts of the Departmental Sister. The remainder were either infected from outside the area or were unable to furnish sufficient information for follow up purposes.

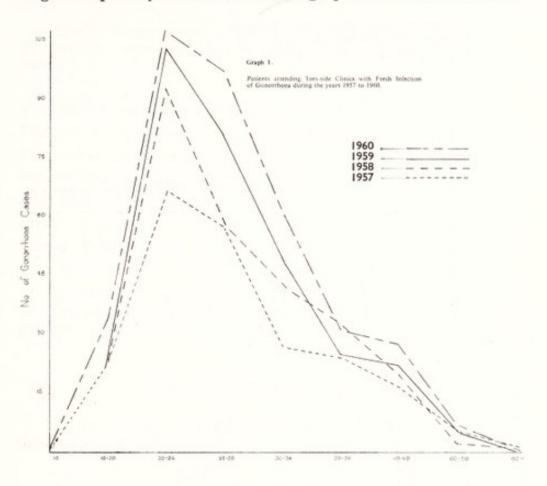
The number of patients normally resident in the Hartlepools attending the Tees-side Clinics and found to be suffering from Gonorrhoea was surprisingly low in view of the size and recent growth of the area. It would not be an unfair assumption that cases are being treated outside the V.D. Clinics. It is gratifying that almost 100% of male patients' contacts at the Hartlepool clinic do attend for investigation.

Any attempt to lower the national increase in Gonorrhoea must of necessity include adequate case finding procedures to uncover the reservoir of infection in any given community. It is desirable that all suspected cases should be referred untreated to the Special Treatment Clinic where facilities exist for bacteriological and serological investigation to be carried out. In every case efforts are made by trained staff in the clinic to trace contacts and bring them to the clinic for investigation.

Incidence of Fresh Cases of Gonorrhoea in the Tees-side Area during the years 1957-1960.



Age Group Study of Patients Attending Special Treatment Clinics.



Patients dealt with for the first time :-

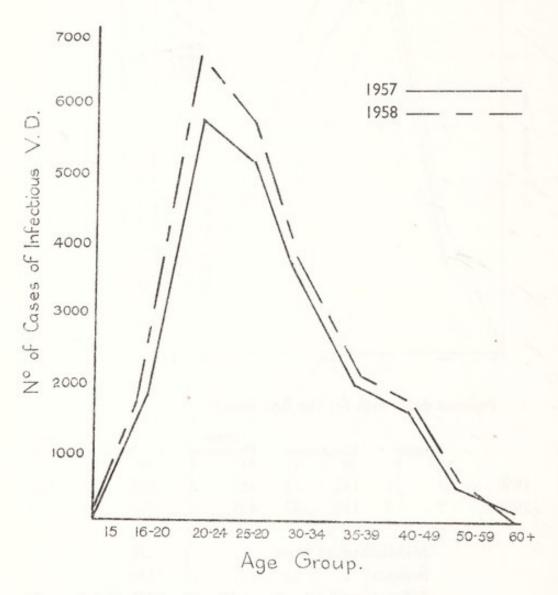
	Syn	hilis	Gono	rrhæa	Oth Condi		То	tal	Grand Total
	M.	F.	M.	F.	M.	F.	M.	F.	10141
1959	11	5	142	31	355	85	508	121	629
1960	7	7	180	47	405	67	592	121	713
	ı	Middles	brough	cases			237		
	5	Seamen					170		
	(Other c	ases				306		
							713		

Total Attendances in 1960 of all persons suffering from:-

Syp	hilis	Gonorrhœa		Oth Condi	al	Grand Total		
M·	F.	M.	F.	M.	F.	M.	F.	
463	335	1,169	246	1,729	226	3,361	807	4,168

Graph 2.

Patients attending the United Kingdom Clinics with infectious V.D. during the years 1957 and 1958.



Congenital Syphilis-New Cases Classified in Age Groups.

Under 15 years ... Nil 15 years and over ... 2 F.

Cases under Observation or Treatment on 31st December, 1960.

Syp	hilis	Gono	rrhœa	Otl Condi		То	tal	Grand Total
M.	F.	M.	F.	M.	F.	M.	F.	
37	18	50	13	34	2	121	33	154

CONVALESCENT HOMES.

Under the provisions of the National Health Service Act, 1946, 72 patients were admitted to Convalescent Homes, as shown below:—

Yorkshire Foresters'	Conval	escent	Home,	Bridlin	gton	 13
Metcalfe Smith Conv	alescen	t Home	e, Harr	ogate		 16
Convent of Our Lady	of Lo	ardes, (Grange-	over-S	ands	 5
Procter Memorial Ho	me, Sh	otley B	ridge			 3
Alne Hall, York						 1
Private, Redcar						 30
Private, Whitby						 4

In addition convalescence at the Ropner Home, Middleton St. George, was arranged by the Department in respect of nine patients.

DAVISON HOME, DANBY.

On the 1st January 1960, there were 17 children resident at the Davison Home.

During the year a further 59 children were admitted, (36 of them recommended by the Consultant Chest Physician: 32 school children and 8 pre-school convalescent cases.)

LABORATORY FACILITIES.

I am indebted to Dr. Stanley Wray and Dr. R. Blowers for the following information on the laboratory facilities available in the Tees-side area.

Laboratory investigation plays an increasing part in medical diagnosis and public health control. Methods that are evolved during advanced research rapidly become everyday procedures of great value. These methods are made available to local practitioners and consultants by the Group Clinical Pathology and Public Health Laboratories which are, however, working under great difficulties in overcrowded and unsuitable buildings. Under these conditions, the inevitable increase in the value and scope of work can only increase the difficulties, and may delay or prevent the introduction of important new methods in the Tees-side area.

SECTION D

OTHER SERVICES UNDER THE NATIONAL HEALTH SERVICE AND NATIONAL ASSISTANCE ACTS.

MENTAL HEALTH SERVICE.

This important branch of the work has been referred to in my preamble—the following information and statistics are appended:—

Mental Deficiency Acts.

Petitions by Medical Practitioners.

The following medical officers are approved for the purpose of giving certificates of mental defect to accompany petitions for orders, under the Mental Deficiency Acts.

- Dr. Eric C. Downer, Medical Officer of Health.
- Dr. R. Taylor, Deputy Medical Officer of Health.
- Dr. J. Cahill, Senior School Medical Officer.
- Dr. T. W. Hill, School Medical Officer.
- Dr. T. M. Cuthbert, Physician-Superintendent of St. Luke's Hospital.
- Dr. J. Russell, Deputy Physician-Superintendent of St. Luke's Hospital.
- Dr. W. Webster, Senior Hospital Medical Officer of St. Luke's Hospital.
- Dr. Reginald J. Belas.

The following table shows the disposal of Middlesbrough mental defective cases in Institutions:—

Prudhoe and Monkton Hospital Aycliffe Hospital Rampton State Institution Lisieux Hall Etloe House Whittington Hall Bishop Auckland Institution Calderstone Hospital	ıl		Ce	10 15 6 2 1	Informal 85 95 — — 1 4
Field-Heath House				1	
Howbeck House, Hartlepool				1	
				_	1
Royal Earlswood Hospital, Sur	rey			1	-
St. Joseph's Home				1	
				1	-
				1	_
Fountain Hospital				_	1
General Hospital, West Hartlep	oool				6
Manor Hospital, Epsom				1	
				1	
Royal Albert Hospital, Lancast	er				1
	7	Γotal		43	194

Grand Total: 237

The following cases were admitted during the period 1st January to 31st October, 1960:—

Aycliffe Hospital: 17. Prudhoe Hospital: 3

Ascertainment, including number of defectives awaiting vacancies in Institutions at the end of the year :—

Fifteen cases (9 male and 6 female) were notified by the Local Education Authority under Section 57/3 of the Education Act, 1944.

Six cases (1 male and 5 female) were notified under Section 57/5. Three males and two females were notified by other sources.

Of this number, seven males and thirteen females were placed under Statutory supervision, four males were admitted to institutions and two males and nine females were placed under voluntary supervision.

At 31st December 1960, 42 males and 26 females were on the waiting lists for admission to institutions.

Supervision:

At the end of the year 178 males and 169 females were under supervision.

Temporary Accommodation, Ministry of Health Circular 5/52:

Nineteen cases received temporary care.

Cases brought before the court:

The Duly Authorised Officers attended Magistrate and Juvenile Courts on fifteen occasions.

Work undertaken in the Community:

Section 28-National Health Service Act, 1946.

The after-care of mental health cases discharged from St. Luke's Hospital and notified to the Medical Officer of Health, continued to be undertaken by the Mental Health Workers on the Department's staff.

Number of cases receiving after-care at 31st December 1960 :

Males . . . 12 Females . . 4 16

Total number of visits paid was 54 Cases receiving pre-care ... 3

OCCUPATION CENTRES

The Occupation Centre for children has 60 places and continues to be well attended. During the year the majority of the children attending were medically examined. A medical officer is always readily available in any emergency.

A class catering for 12 adult females is held on five afternoons a week at this Centre. Here they are taught simple sewing, embroidery, knitting and plain dress-making. This is a particularly happy little group.

Within the curtilage is the Woodwork Centre for adult males, where there is accommodation for up to eighteen. Simple woodwork and basket-making are the main occupations carried out.

Lunacy and Mental Treatment Acts, 1890-1930:

The following cases have been admitted to St. Luke's Hospital by the Duly Authorised Officers during the period 1st January, 1960 to 31st October, 1960.

	Male	Female
Voluntary	 4	
Temporary	 1	1
Certified	 10	11
Urgency Order Section 20	 45	46
Section 21	 	_

Total, male and female 120

In addition, 7 cases were examined under the provisions of section 16, Lunacy Act, but not certified.

There were no cases examined under the provisions of section 5, Mental Treatment Act.

One female was admitted to Middleton Hall as a private Informal patient.

Grand total .. 128

There were no patients admitted to St. Luke's Hospital voluntarily after being initially admitted by our Duly Authorised Officers under the Lunacy and Mental Treatment Act. Cases are now being admitted on an Informal basis which are not notified to this Authority. Seven cases were admitted by sources other than by Duly Authorised Officers.

Ambulance services were required on 89 occasions, private taxis on 17 occasions, police cars on 7 occasions and Duly Authorised Officer's private cars on 42 occasions. Private cars are now used for visiting on district, escorting of patients to out-patient clinics, etc., which are not included in these figures.

The Mental Health Act, 1959:

Approval of Medical Practitioners' Regulations 1960:

The following medical officers are approved for the purpose of giving certificates under the above Regulations.

From the staff of St. Luke's Hospital:

Dr. T. M. Cuthbert	Dr. J. Russell
Dr. D. D. Webster	Dr. G. Leighton Davies
Dr. W. J. Browarski	Dr. J. Blackburn
Dr M I Renwick	Dr Valerie Matthews

From the staff of the Middlesbrough Health Department:

Dr. Eric C. Downer
Dr. Mark Sackwood
Dr. John Cahill
Dr. K. Macfarlane

Dr. J. B. Patterson

From the General Practitioners:

Dr. Reginald Belas

The following cases have been admitted by the Mental Welfare Officers during the period 1st November to 31st December 1960:

To St. Luke's Hospital:

Section 25: 4 Females 2 Males

Section 26: — Females

Section 29: — Males 3 Females

Section 60: 3 Males
— Females

— Males

Informal: 5 Females 2 Males

To Aycliffe Hospital: 15

CARE AND AFTERCARE

I am indebted to the S.A.M.O.H., Dr. W. J. Wigfield, for the following comments.

Six geriatric nurses, handicrafts instructress and a social worker, together with the health visitors, undertake this work. A register of elderly persons known to the department is maintained. At present the number stands at 1,330 of whom 647 are living alone. These old folk are all visited at intervals to ensure that they are well, happy, and receiving all the help they require. A number are visited weekly to give help with bathing, pedicure, etc. Bed-ridden patients and those who require more nursing care are passed to the care of the Home Nursing Service. Every effort is made to help the old folk to regain or maintain their independence.

In addition, many requests for help are received from relatives, family doctors, the National Assistance Board, and other public officers. Difficult problems are discussed at a weekly case conference to which the experience of the different sections of the department can be brought. Close liaison is maintained with the W.V.S. who provide a "Meals on Wheels" service (unfortunately only once a week at present) and a clothing depot, with the Welfare homes, and with the hospital service.

The excellent liaison with the South Tees-side Geriatric Hospital Unit has continued. During the year 37 reports on socio-medical circumstances of patients awaiting admission have been submitted, mostly at the request of the Consultant in Geriatrics. The Senior Assistant Medical Officer (General) continues to attend the weekly Geriatric Out-Patient's Clinic and this liaison benefits both hospital and local authority services.

Work done by Geriatric Nurses during year :

Total number on Geriatric Register		 	1,330
New cases added during the year		 	310
Cases referred to Part III accommod	ation	 	79
Cases referred for Meals on Wheels		 	116
Cases referred to W.V.S. for clothing	;	 	92
Cases referred for chiropody		 	80
Total visits paid to elderly persons		 	12,014
Number of baths given		 	1,179
Number of shaves given		 	1,718
Number of hair cuts (men)		 	114
Number of hair washes (women)		 	24

Two of the cases were persuaded to enter hospital voluntarily. They died there shortly after admission. In one case this was a foregone conclusion as she had malignant disease. The remaining two were cared for at home but within a few months they likewise had both died, one from natural causes, the other one being burned to death. She would not use the fireguard that had been lent to her by the Department.

It is sometimes asserted that it is wrong to force people to enter hospital for treatment or care when it is impossible to care for them adequately at home, and that if they are thus forced into hospital they shortly die. In fact, it is our experience that the fault lies in not taking action early enough and by the time such people can be certified as being in need of care and living in insanitary circumstances, matters have been left too long and they are likely to die whatever is done.

The great emphasis of the work with old people is to prevent them getting into a state where removal from their home is necessary. This involves many services of the Corporation and as mentioned in a previous section a weekly conference takes place at the Health Department where medical and welfare problems concerning elderly persons are discussed under the direction of a senior assistant medical officer. A summary of the services available to old persons in Middlesbrough as outlined to the Minister of Health on his visit on the 5th April 1961, appears later in the Report as Appendix B.

Medical Equipment on Loan.

A loan cupboard of nursing equipment is maintained. The major items issued on loan during the year were beds, bed-pans, commodes, mattresses, patient-lifting tackle, urinals, waterproof sheeting, wheelchairs, prem. cots, air-rings and crutches.

Occupational Therapy.

The new office and workroom for the Handicraft Instructress in Albert Terrace has proved very satisfactory and has now been decorated throughout. During the year our association with the North Ormesby Cripples Club ceased, at the Club's request. It was decided to set up our own handicraft classes since this allowed the Handicraft Instructress to instruct several people at one time and also allowed the handicapped people to meet and chat with one another. The competition and team spirit shown in these classes has justified the venture. There are at present three classes held each week, one at Albert Terrace for elderly persons, one at the Gables Health Centre and one at the new Park End Health Clinic. Ambulance transport is used to bring those who are unable to use public transport.

The difficulty in selling completed articles has been partially overcome by the placing of two showcases in the windows of the Food Office in Albert Terrace. The Public can there see and buy them.

The total number of patients given instruction		118
No. attending Albert Terrace Handicraft Classes		11
No. attending the Gables Handicraft Classes		18
No. attending Park End Handicraft Classes		9
No. attending Woodwork Centre Classes		18
No. of hospital cases given instruction		11
No. of patients given domiciliary instruction		51
No. of financial grants made to purchase mater	rials	
and tools		12

NATIONAL ASSISTANCE ACT 1948.

Five cases were referred during the year to the Department as being in need of compulsory removal from their homes. In one case, action under Section 47 of the Act was taken. This person improved considerably in hospital and it was hoped to transfer him to a welfare home. However, he died suddenly while still in hospital.

Two cases were referred by their family doctor and three by the nursing staff of the Department.

Handicapped Persons (General Classes).

A register of handicapped persons is maintained for the Welfare Authority and these persons are visited from time to time by the health visiting staff. This ensures that they are kept in touch with the various Bodies from whom they can receive help.

An extension of the rehabilitation services has been made during the year. Several assistance grants have been made to allow adaptations of houses to enable handicapped persons to be more independent. In addition, several smaller pieces of equipment, such as bath seats and gadgets to help the one-handed have been lent, and training given in their use. These facilities are available for all ages of patients on their family doctor's request.

The employment situation for handicapped persons in Middlesbrough is still difficult with little scope for them in the heavy industries of the area. There does appear to be a need for a sheltered workshop for such persons to give them employment and thus a sense of purpose and achievement.

Care of the Blind and Partially Sighted.

The registration and visitation of blind and partially sighted persons is carried out by the Cleveland and South Durham Institute for the Blind, acting as the voluntary agency for the Local Authority, and the three home visitor/teachers are seconded full-time to the agency.

In view of the protracted illness of Miss Reavley and her consequent retirement in May, Miss D. Brown's services were further extended and were continuing at the end of the year. It was regretful that ill health over-shadowed Miss Reaveley's retirement and her loyal and unstinting service to the Authority is greatly appreciated.

Liaison between the M.O.H. and the home visitor/ teachers was retained by the continuance of a weekly conference held at the Health Department every Tuesday morning when a full discussion of blind and partially sighted cases took place. All cases referred for examination with a view to registration were visited by the home visitor/teachers and their reports submitted to the Medical Officer of Health before ophthalmological examination is arranged. On receipt of the completed Form B.D.8., information is forwarded to the family practitioner who is advised to consult the ophthalmologist regarding any treatment recommended.

With the opening of the Cleveland and South Durham Institute Social Centre, the Blind Persons Handicrafts Class, previously held weekly at the Elizabeth Purvis I.W.C., Newlands Road, was transferred to the new premises in November. Consideration was given to the starting of a handicrafts class for registered partially sighted persons, and enquiries were made by the Home Visitor/Teachers to ascertain the number of such people willing and able to participate. The result of the enquiries showed that a separate class was not justified.

Blind Cases.

On Register 31	1.12.59			287
New cases				34
Transfers in				10
Deaths				31
Transfers out				5
Decertified				2
Remaining on	Register	31.12	2.60	293

Of the new cases registered 12 were due to cataract, 1 to glaucoma and 21 to other causes. In 19 cases where treatment was recommended 10 patients had had the necessary treatment.

Partially Sighted Cases.

	0.00			
On Register 31	.12.59			94
New cases				5
Deaths				5
Transfers out				2
De-certified				3
Transferred to	Blind 1	Registe	r	11
Remaining on	Registe	r 31.12	2.60	78

In the 5 cases where treatment was recommended on follow-up it was found that 4 patients had had treatment.

Follow-up of Registered Blind Persons.

Number of Cases registered during 1960 — 34 plus 10 Transfers In. Total number on Register at 31st December, 1960 — 293.

something of the same	Access to the second	Cause of Di	sability	
noembers of the Marciae Assesse	Cataract	Glaucoma	Retrolental Fibroplasia	Others
I. Number of cases registered during the year in respect of which Section F of Form B.D.8 recommends: (a) No treatment	M aged 90 yrs. M aged 85 yrs. M aged 84 yrs. F aged 82 yrs. M aged 77 yrs. M aged 87 yrs.	e de company de la company de		M aged 73 yrs M aged 75 yrs F aged 90 yrs. F aged 86 yrs. M aged 53 yrs M aged 79 yrs F aged 4 yrs. F aged 91 yrs. F aged 73 yrs.
(b) Treatment (medical, surgical, optical or hospital Supervision)	F aged 78 yrs. (surgical) (Unwilling to have surgery) F aged 83 yrs. (surgical) (Not well enough to have surgery) M aged 76 yrs. (surgical) (On waiting list for surgery) F aged 88 yrs. (hosp. supv.) (Unco-oper- ative) F aged 88 yrs. (surgical) F aged 70 yrs. (surgical) (Not well enough to have surgery)	F aged 79 yrs. (Hosp. supv.)		F aged 56 yrs. (medical) (Since died) F aged 79 yrs. (surgical) (Since died) F aged 51 yrs. (Hosp. supv.) M aged 29 yrs (Hosp. supv.) F aged 70 yrs. (medical) (Since died) M aged 69 yrs. (medical) (Since died) M aged 47 yrs. (medical) F aged 72 yrs. (Hosp. supv.) F aged 60 yrs. (Hosp. supv.) F aged 60 yrs. (Hosp. supv.) M aged 10 yrs (Hosp. supv.) F aged 50 yrs. (surgical) F aged 55 yrs. (Hosp. supv.)
II. Number of cases at I(b) above which on follow-up action have received treatment.	F aged 70 yrs. (Surgical) F aged 88 yrs. (surgical)	F aged 79 yrs. (Hosp. supv.)		F aged 51 yrs (Hosp. supv.) M aged 29 yrs (Hosp. supv.) M aged 47 yrs (medical) F aged 72 yrs (Hosp. supv.) F aged 60 yrs (Hosp. supv.) M aged 10 yrs (Hosp. supv.) F aged 50 yrs (surgical) F aged 55 yrs (Hosp. supv.)

Follow-up of Registered Partially Sighted Persons.

Number of cases registered during 1960 — 5.

Total number on Register at 31st December, 1960 — 78.

		Cause of	Disability	
	Cataract	Glaucoma	Retrolental Fibroplasia	Others
I. Number of cases registered during the year in respect of which Section F of Form B.D.8. recommends: (a) No treatment.	NIL	NIL	NIL	NIL
(b) Treatment, (medical, surgical, optical or hospital supervision)				1 aged 3 yrs. (Hosp. supv.) 1 aged 3 yrs. (Hosp. supv.) 1 aged 75 yrs. (Medical) 1 aged 79 yrs. (Hosp. supv.) 1 aged 83 yrs. (Surgical)
II. Number of cases at I(b) above which on follow-up action have received treatment.				1 aged 3 yrs. (Hosp. supv.) 1 aged 3 yrs. (Hosp. supv.) 1 aged 75 yrs. (Medical) 1 aged 79 yrs. (Hosp. supv.)

HOME NURSING SERVICE.

The Middlesbrough District Nursing Association continue to provide a Home Nursing Service on behalf of the Council. Four members of the Council sit on the Executive Committee of the Nursing Association, and the Medical Officer of Health attends its meetings.

The medical and other staff of the Health Department take part in the training of the district nurses, giving lectures and demonstrations.

On the 31st December, 1960, there were 14 nurses employed whole-time and 10 nurses employed part-time working under the direction of the Superintendent, Miss I. G. Bulloch. The Home is approved for training purposes.

Shown overleaf is a summary of the work of the Association based on the monthly reports submitted by it.

MIDDLESBROUGH DISTRICT NURSING ASSOCIATION. NATIONAL HEALTH SERVICE ACT, 1946.

HOME NURSING SERVICE — FOR THE YEAR 1960.

		Patients Receiving Attention at beginning of month	New Cases	Total	Discharged	Cases Remaining on books at end of month	Total Visits Paid	Ex-hospital Cases
anuary		335	140	475	136	339	6376	15
ebruary		339	155	494	144	350	6455	16
farch		350	158	508	169	339	6815	12
pril	:	339	128	467	128	339	6352	18
av	:	339	144	483	158	325	6439	14
ine		325	111	436	94	342	6102	11
vii		342	97	439	82	357	6145	10
ugust	:	357	86	455	114	341	5894	14
eptember		341	97	438	100	338	5773	19
ctober		338	108	446	110	336	6357	15
November	:	336	126	462	128	334	6268	25
ecember	:	334	119	453	148	305	5915	16

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:	:	3	Excision of Fibr	pio.	:	:	_	Ovarectomy	:	:	
:	:	7	Fractures	:	:	:	4	Paget's Disease	:	:	
my	:	2	Heart Disease	:	:		11	Perineal Infection	n	:	
:	:	4	Hemiplegia	:	:	:	9	Phlebitis	:	:	1
:	:	2	Hernia		:	:	-	Pneumonia	:	:	1
:	:	18	Hysterectomy	:	:	:	3	Puerperal Pyrexi	to.	:	
tion	:	1	Intestinal Obstra	action		:	-	Removal of Toe	Nail	:	
morrhage	:	3	Laparotomy	:	:	:	-	Senility		:	
sisoqui	:	1	Leukaemia	:	:	:	-	Sinus	:	:	
no		-	Mastectomy	:	:	:	-	Sepsis	:	:	
:	:	00	Mastoidectomy		:		-	Tuberculosis, Ot	her		
upra pubic)	:	7	Maternity	:	:	:	7	Tuberculosis, Pu	Ilmona	5	
:	:	2	Nephrectomy	:	:	:	-				
		10	New Babies				3				

ANALYSIS OF CASES AND VISITS PAID.

	January	ary	Febr	February	Ma	March	April	ri	May	y	June	je je	July	ly .	August		September	nper	October		November		December	ber	Total	_
	Cases	siisiV	Cases	siisiV	Cases	stisiV	Cases	stisiV	Cases	siisiV	Cases	stisiV	Cases	siisiV	Cases	siisiV	Cases	stisiV	Cases	stisiV	Cases	stisiV	Cases	siisiV	Cases	siisiV
Medical	50	50 1546	14	1525	19	61 1772	14	41 1650	48 1811	118	45 1	1786	26	1684	45	1654	47 1	6771	38 1	1988	55 18	668	53 1721		550 20	20815
Surgical	6	634	12	575	6	632	Ξ	639	6	494	=	5111	00	585	9	292	10	501	7	109	12	577	S	196	601	6812
Infectious Diseases	5	36	16	136	Ξ	100	00	103	4	150	10	29	2	15	4	17	5	45	m	33	9	59	4	27	82	750
*Tuberculosis	4	1956	14	2027	15	2024	10 1	1881	12 1	1952	12 1	1914	6	9261	00	1881	6 1	1729	13 1	1739	12 1	1756	11	1 6991	126 22	22514
Maternal Complications	-	15	-	13	60	38	-	10	3	34	2	12	-	12	-1	1	-	12	1	1	1	3	-	17	14	166
+Others	17	2189	71	2179	59	59 2249	57 2	2069	58 19	8661	36 1	1850	51	1873	35 1	1765	28 1	1707	47 1	1996	42 19	1974	45 19	1985	600 2.	23834
Totals	140 6376	5376	155 6455	6455	158	158 6815	128 6352	5352	144 6439		111	6102	97 (6145	98 5	5894	97 5	5773	108 6	6357	126 6	6268	119 5	5915 14	1481 7	74891

PATIENTS AGED 70 YEARS AND OVER.

	Men	Women	Total
On Books, 1/1/60	38	84	122
New Patients During Year	174	356	530
Remaining on Books, 31/12/60	39	. 95	134

*Mainly injections

†Includes special injections: Cases 451: Visits 10658.

DOMESTIC HELP SERVICE.

Each year the responsibilities and duties of the Home Help Service continue to increase enormously, and throughout the year assistance to general cases of illness, maternity, T.B., and the aged and chronic sick has been given. During the past few years the number of aged people who have asked for help has gradually increased. 59% of the total cases helped were aged people. Help of this kind does at least enable old people to go on living in their own homes in safety and some degree of comfort, for many still prefer the complete freedom of their own home, whatever the circumstances, to an institution. There was also a slight increase in the number of maternity cases attended.

Enquiries for home help numbered 547, out of which 490 cases were actually commenced, as compared with 1959, when 502 enquiries were made and 445 cases commenced.

The majority of enquiries received are from patients and relatives. The table below shows the various sources from which enquiries were received.

	1960	1959	1958	1957
Patients and relatives	50%	60%	50%	44%
Doctors	10%	12%	9%	10%
National Assistance Board	15%	8%	14%	10%
District Nursing Assoc.	1%	1%	3%	2%
Health Department	15%	14%	18%	22%
Hospitals	7%	3%	5%	7%
Others	2%	2%	1%	5%

The number of maternity bookings for 1960 was 138, exactly the same as in 1959. The number of cases attended was 113, compared with 103 in 1959.

Of the 25 cases cancelled, 18 notified the following reasons for cancellation.

10 cases made other arrangements.

7 cases were admitted to hospital.

1 on account of charge.

No reasons were given by the other seven cases.

The table below shows the period of attendance on the 113 cases covered.

3 had full-time help for 3 weeks.

77 ,, ,, ,, 2 weeks.

21 ,, ,, ,, 1 week.

8 ,, half-time ,, ,, 2 weeks.

4 ,, ,, ,, 1 week.

The following Table shows the cases attended during 1960 :-

	T.B. Cases	General Cases	Mater- nity Cases	Aged & Chronic Sick	Total	Total 1959	Total 1958	Total 1957
On books 1.1.60.	 7	27	3	301	338	328	323	331
Cases commenced	 3	88	110	289	490	445	423	374
Cases completed	 3	87	111	285	486	435	418	382
On books 31.12.60.	 7	38	2	305	342	338	328	323

The number of home helps employed during the year varied from 69 to 64 at the end of the year. Of the 64 employed, 8 were full-time, 12 available full-time casual, and 44 part-time.

1,657 visits were made by the Organiser during the year.

AMBULANCE SERVICE.

The establishment of the Ambulance Service remained at the same strength as the previous year, namely, Ambulance Officer, Deputy Ambulance Officer, 24 driver/attendants, 1 male attendant, 1 female attendant, 4 male telephonists, 1 female telephonist and 1 cleaner. Four drivers for the conveyance of midwives also operate from the Ambulance Station.

The vehicle strength was the same as the previous year. Three ambulances were replaced by two new ambulances and one new dual-purpose vehicle. A second dual-purpose vehicle was also ordered.

The number of patients carried exceeded the previous year by 4911: mainly due to the increase in the number of patients taken for follow-up treatment at the out-patients departments, accounting to 3557 of the above total. As more out-patient departments are being opened, mainly for the treatment of geriatric patients, we can expect a considerable increase in patients carried in the future.

No remons were siven by the other areen cares.

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The aumor of home telps employed during the year served from 69 to 64 at the end of the year. Of the 64 employed, 8 were full-time, 12 available tull-time carnel, and 44 partime.

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AMBULANCE, SERVICE

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being opened, mainly for the treatment of accounting patients, we can

expect a considerable more see in patients carried to the forms.

		TYP	E OF	PATIE	NTS							C	ATEC	ORIE	S									MILE	AGE		PETE	OL (C	ials.)		OIL	L (Pints	()
1960	Journeys	Recumbent	Sitting	Carried in Ambulances	Carried in S/case Vehicles	Street Accidents	Street Illnesses	Works Accidents	Works Illnesses	Home Accidents	Maternity	Obstetrical	Mental	House Transfers	Hospital Transfers	Out Patients	Admissions	Discharges	West Lane Hospital Cases	School Clinics, Occupation Centres, etc.	Conveyance of Midwives	Total	Ambulances	S/case Vehicles	West Lane Hospital Ambulance	Total	Ambulances	S/case Vehicles	Total	Diesel Oil	Ambulances	S/case Vehicles	Total
	1200	1052	3012	2760	1304	63	11	38	10	13	85	21	11	8	231	2191	509	713	93	50	17	4064	9063	5977	407	15447	724	279	1003	51	28	34	62
January	1298					63	11	39	13	3	69	5	8	6	225	2443	453	692	130	35	89	4284	8932	6482	482	15896	686	314	1000	56	28	35	63
February	1310	948	3336	2726	1558					17	77	2	10	4	219	2755	500	712	133	46	18	4628	9350	6339	567	16256	734	297	1031	53	16	28	44
March	1370	1107	3521	2939	1689	70	12	43	9			,	10		227	2464	512	674	156	65	17	4419	9486	5606	647	15739	711	289	1000	54	45	26	71
April	1331	1056	3363	2723	1696	112	18	33	12	17	86	14	8	4					148	92	4	4779	10403	6494	573	17470	727	306	1033	70	46	29	75
May	1410	1068	3711	3190	1589	100	20	40	8	15	103	13	8	5	237	2769	495	722					8686	6962	558	16206	649	305	954	46	48	25	73
June	1346	995	3487	2774	1708	73	15	25	9	16	78	13	9	7	257	2598	458	685	142	82	15	4482	3333				600	344	944	52	22	43	65
July	1383	995	3269	2543	1721	133	27	33	11	14	79	10	9	5	190	2293	475	753	97	80	55	4264	8577	7231	343	16151							
	1371	985	3014	2351	1648	90	15	38	3	7	88	4	8	5	162	2289	439	626	106	81	38	3999	8018	6728	373	15119	527	321	848	68	23	36	59
August	1304	1036	3267	2530	1773	104	17	39	17	6	91	10	4	6	153	2454	461	711	98	118	14	4303	8415	6786	387	15588	545	328	873	86	22	22	44
September				2821	1487	88	28	41	13	12	78	14	2	5	192	2366	588	693	127	46	15	4308	9754	5987	544	16285	692	293	985	89	32	24	56
October	1440	1136	3172			88	22	39	11	17	80	11	9	1	216	2459	576	816	104	74	15	4538	9051	7478	469	16998	671	382	1053	110	13	28	41
November	1339	1160	3378	2641	1897				7	16	103	9	3	2	176	2337	559	803	89	57	11	4344	9150	6169	443	15762	642	333	975	114	14	29	43
December	1304	1096	3248	2837	1507	121	17	34	1	10	103	3	-		113															-	-		-
Total	16206	12634	39778	32835	19577	1105	213	442	123	153	1017	127	89	58	2485	29418	6025	8600	1423	826	308	52412	108885	78239	5793	192917	7908	3791 Gallo	1	849	337	359 Pints	10000

Conveyance of Midwives 1960.

Month	Journeys	Calls	Mileage	Galls. Petrol	Oil (Pts.)
January	323	516	2,428	99	8
February	242	381	1,748	71	7
March	342	638	2,746	107	8
April	278	448	1,976	88	6
May	312	476	2,216	84	4
June	272	439	2,103	87	8
July	267	400	2,104	84	4
August	289	434	2,279	90	1
September	289	450	2,301	101	5
October	266	397	1,808	75	-
November	254	320	1,677	80	1
December	297	389	2,038	90	4
Total	3,431	5,288	25,424	1,056	56

DEATHS IN REGISTERED NURSING HOMES IN MIDDLESBROUGH DURING 1960.

0 -	65	65	- 75	7	5 - 85	85 &	over
M.	F.	M.	F.	M.	F.	. M.	F.
	1	1	5	6	19	2	9
	Male	es				9	
	Fem	ales				34	
			Tota	ıl		43	

NURSING HOMES.

				No. of	No. beds prov	of ided for	
Homes first .	agistarad	dunin	a tha	Homes	Maternity	Others	Total
Homes first	egistered	during					
year						-	
Homes on the	e Register	r at the	end				
of the ye	ar			4	8	53	61

PUBLIC MORTUARY.

Two bodies were removed during the year to the mortuary in the Borough Engineer's yard, Commercial Street.

THE SOCIAL WORKER.

The work of the Social Worker has continued steadily throughout the year although most of the cases have been referred from inside the Health Department.

Accommodation problems of young persons with children are still very pressing.

Sixty eight new cases have been referred during the year as follows:—

Medical Officer of Health			15
General Practitioners			4
Superintendent Health Visito	r		17
Duly Authorised Officers			1
Domestic Help Organiser			7
National Assistance Board			1
Housing Department			3
Middlesbrough Diocesan Re	scue S	ociety	1
Probation Officer			3
Moral Welfare Association			1
Blind Visitors			5
Social Worker			2
Miscellaneous			8

Categories into which these cases have fallen, and the nature of help required can be divided as follows:—

Geriatric care and	atte	ention			15
Maternity and Chi	ild	Welfare			2
Employment .					2
Social Investigatio	n				4
General Help .					11
Accommodation .					30
Financial					4
Number of visits (ho	me, hosp	ital, e	tc.)	268
Number of office i					85

SECTION E

SANITARY CIRCUMSTANCES OF THE AREA

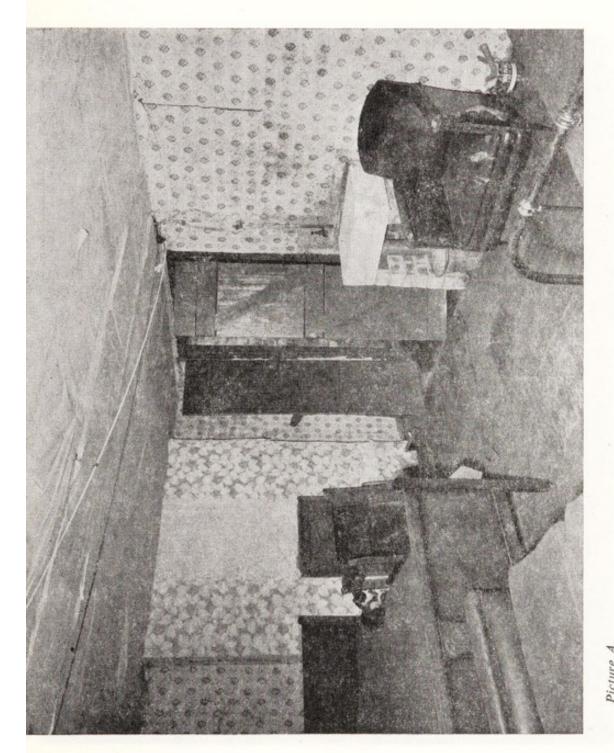
HOUSING—SLUM CLEARANCE

HOUSING AREAS

1 Area	2 Houses	No. of houses	Date of representation	5 Action
Argyle Street	7—67 Argyle Street, 6—70 Argyle Street, 93—113 Marsh Road, 43—69 Hatherley Street.	88	7. 1.60	Compulsory Purchase Order, 9.2.60.
Robinson Street	1—31 Robinson Street.	31	27. 1.60	Compulsory Purchase Order, 8.3.60.
Dock Street No. 1	58—86 Lower East Street, 23—30 Dock Street	, 23	7. 6.60	Compulsory Purchase Order, 28.6.60.
Granville Street	1—13 Cardwell Street, 2—18 Childers Street, 1—21 Childers Street, 17—35 Lowe Street, 2—38 Lowe Street, 36 & 52 Hutchinson St. 23—45 Granville Street, 21—31 Sidney Street, 5—23 Eve Street, 16 Eve Street, 32—44 Dean Street, 41—55 & 57/59 Dean St. 81—97 Denmark Street.	130	7. 7.60	Compulsory Purchase Order, 26.7.60.
Marton Road No. 1	116, 118, 120, 122 Marton Road	4	10. 8.60	Clearance Order, 11.10.60.
Marsh Road No. 4	4—28 Northumberland St 4—30 Nixon Street 12—26 Hardman Street, 13—27 Hardman Street, 3—23 Hartington Street, 2—24 Monsell Street, 3—21 Monsell Street, 2—20/22 Stansfield Street, 3, 7, 13—21 Stansfield St. 4—20 Goschen Street, 3—17 Goschen Street, 2—14 Coleridge Street, 98—108 Marsh Road, 122—126 Marsh Road	instra law bli	8,11,60	Compulsory Purchase Order, 6.12.60.
Derby Street	24—34 Derby Street	6	8.11.60	Compulsory Purchase Order recommended, 20.12.60.

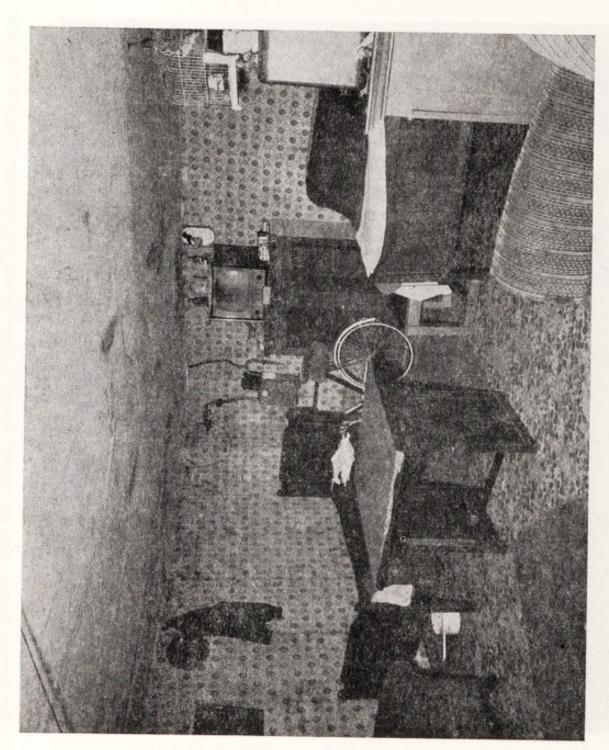
Individually Unfit	No. of houses	Date of representation	5 Action
2 Marsh Road, North Ormesby	1	7. 1.60	Demolition Order, 12.4.60.
34 Durham Street	1	16. 1.60	Closing Order, 28.6.60.
4 Davison Street	1	20. 1.60	Demolition Order, 28.6.60.
81 Lawson Street	1	15. 2.60	Undertaking to remedy defects accepted, 28.6.60. Recommended condition be reviewed in 12 months.
82 Gauntlett Street	1	15. 2.60	Undertaking to remedy defects accepted, 28.6.60. Recommended condition be reviewed in 12 months.
122 Marton Road (basement)	1	17. 2.60.	Closing Order recom- mended. Subsequently in- cluded in Marton Road No. 1 Clearance Order.
4 Suffield Street	1	25. 2.60	Closing Order, 28.6.60.
58 West Street (upper storey)	1	30. 3.60	Closing Order, 8.11.60.
6 Marsh Street	1	14. 5.60	Demolition Order, 11.10.60.
4 Marsh Street	1	14. 5.60	Demolition Order, 11.10.60.
54 Milton Street	1	11. 7.60	Closing Order recom- mended for attic. Undertaking to remedy defects accepted, 20.12.60.
30 Sussex Street	1	20. 7.60	Closing Order, 6.12.60
26 Albert Street	1	22. 7.60	Demolition Order, 6.12.60.
28 Albert Street	1	22. 7.60	Demolition Order, 6.12.60.
9 Harrison Street	1	23. 7.60	Closing Order recommended.
Basement Dwellings	-	11.000	
36 West Terrace, North Ormesby (front basement)	7	14. 9.60	Closing Order recommended.
38 West Terrace, North Ormesby (front and back basements)		14. 9.60	Closing Order recommended.
27 Grange Road (2 basements)		14. 9.60	Required to submit list o works.
25 Grange Road (front and back basements)		14. 9.60	Closing Order recommended.
17 Grange Road (front and back basements)		14. 9.60	Closing Order recommended.
2 Willow Street (2 basements)		14. 9.60	Closing Order recommended.
7 Albert Terrace (2 basements)		14. 9.60	Closing Order recommended.

1. Certificates of unfitness	2. Houses	3. No. of houses	4. Date of certifi- cate	5. Action
Suffield Street/Stockton Street area	67, 69, 71 Stockton Street	3	2. 2.60	Demolition Order.
23 Commercial Street	Street	1	19. 2.60	Demolition Order.

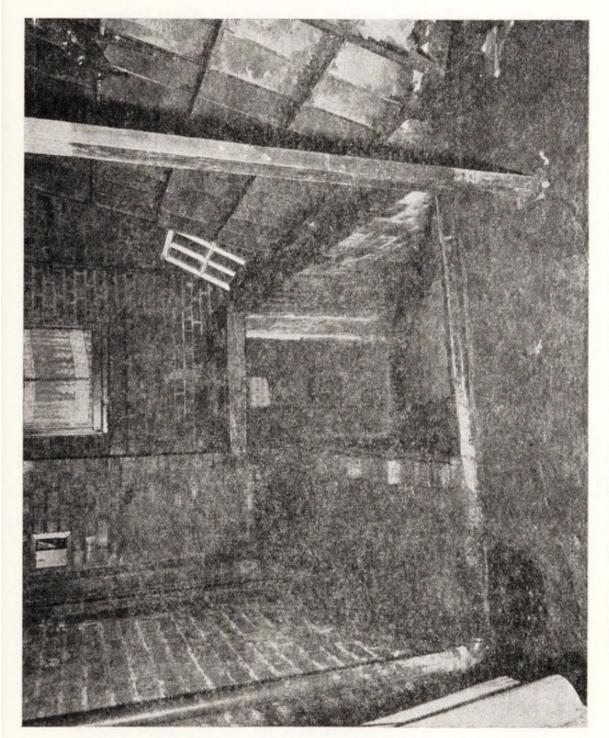


Note the complete absence of natural lighting and ventilation, Pictures A & B. Also gulley running across threshold of doorway. No windows. Picture A.

Two Basement Rooms.



Picture B.



Entrance to a Basement Dwelling made the subject of a Closing Order during the year.

WATER SUPPLY.

We are indebted to Mr. G. M. Thompson, Engineer to the Tees Valley and Cleveland Water Board, for the following report.

The water supply to the area has been satisfactory in quality. Bacteriological samples of the raw waters are examined approximately weekly and the water supply is examined as it leaves the works and at various points in the distribution system. Over 80 samples per month of the treated waters were taken for bacteriological examination and the results showed the supply to be of satisfactory purity throughout the year. Summaries of the bacteriological and chemical analyses carried out during the year are enclosed for the treated water from the two works which supply water to Middlesbrough. Part of the town is supplied by River Tees derived water, the remainder being supplied from Long Newton Reservoir in which water from the Lartington Gravitation supply is mixed with one third of its own volume of water from the River Tees derived supply. A summary sheet showing the chemical characteristics of this blended water is also enclosed.

The treatment of the Lartington Gravitation Supply consists of slow sand filtration followed by treatment with ammonia and chlorine. The River Tees supply is purified at Broken Scar Treatment Plant where the water is clarified by coagulation methods. This is followed by rapid gravity filtration and following pH adjustment final sterilisation with chlorine completes the treatment. The blended water leaving Long Newton distribution reservoir is filtered through microstrainers, which consist of revolving drums of stainless steel wire mesh which has 160,000 apertures per square inch. It is then re-chlorinated before passing into supply.

The water has no plumbo-solvent action.

The number of supplies to houses and lock-up shops for the year ending 31st December, 1960, was 48,090.

THE TEES VALLEY AND CLEVELAND WATER BOARD LARTINGTON GRAVITATION SUPPLY.

Summary of analysis results 1st January-31st December, 1960.

Chemical results are expressed as parts per million except where otherwise stated.

		Average	Maximum	Minimum
Ammoniacal Nitrogen		.044	.290	Nil
Albuminoid Nitrogen		.078	.180	0.015
Nitrite Nitrogen		< .01	.5	Nil
Nitrate Nitrogen		.18	1.0	Nil
Oxygen absorbed in 3 hours from	n			
permanganate at 37°C.		6.35	12.4	3.3
Colour (Hazen Units)		68	160	15
Turbidity		< 4	11	< 3
pH		6.9	7.3	6.7
Free Carbon Dioxide		5.2	11	2.0
Alkalinity as CaCo ₃		26	43	12
Carbonate Hardness as CaCo3		26	43	12
Non-carbonate Hardness as CaC	Co ₃	20	29	10
Total Hardness as CaCo3		46	66	33
Calcium Hardness as CaCo ₃		39	52	28
Magnesium Hardness as CaCo3		11	20	5
Chlorides as Cl		7	9	4
Phosphate as P ₂ O ₅		.02	.03	.01
Silicate as SiO ₂		3	5	2
Iron as Fe		0.2	0.5	0.02
Conductivity		111	130	78
Dissolved solids dried at 180°C.		85	103	64
<=	less	than.		

The above estimations were not all carried out on the same number of samples.

Bacteriological Results.

	Average	Maximum	Minimum
Colony count per ml. on yeast extract agar after 1 day at 37°C	11	38	1
Colony count per ml. on yeast extract agar after 2 days at 37°C	13	40	2
Colony count per ml. on yeast extract agar after 3 days at 20°C	14	80	2
Percentage of samples giving no Presumpt reaction per 100 ml.		orm	97%
Percentage of samples showing no reaction (Type 1) per 100 ml.		.Coli	98%

THE TEES VALLEY AND CLEVELAND WATER BOARD

RIVER TEES DERIVED SUPPLY FROM BROKEN SCAR WORKS, DARLINGTON.

Summary of analysis results 1st January-31st December, 1960.

Chemical results are expressed as parts per million except where otherwise stated.

		Average	Maximum	Minimum	
Ammoniacal Nitrogen		.013	.06	Nil	
Albuminoid Nitrogen		.04	.091	Nil	
Nitrite Nitrogen		< .001	< .01	Nil	
Nitrate Nitrogen		1.04	3.4	Nil	
Oxygen absorbed from permang	ganate				
in 3 hours at 37°C		1.15	3.0	0.2	
Colour (Hazen Units)		9	22	Nil	
Turbidity as Silica		< 3	10	Nil	
рН		7.5	8.1	6.9	
Free Carbon Dioxide		4	15	Nil	
Alkalinity as CaCo ₃		73	112	25	
Carbonate Hardness as CaCo ₃		73	112	25	
Non-carbonate Hardness as Ca	Co ₃	62	100	40	
Total Hardness as CaCo ₃		135	190	70	
Calcium Hardness as CaCo ₃		112	142	74	
Magnesium Hardness as CaCo ₃		32	66	18	
Chlorides as C1		9.6	20	6.5	
Phosphates as P ₂ O ₅		.02	.03	< .01	
Silicate as SiO ₂		4	6	< 1	
Iron as Fe		.08	. 54	Nil	
Conductivity		270	360	150	
Dissolved solids dried at 180°C		182	245	100	
< = less than					

The above estimations were not all carried out on the same number of samples.

Bacteriological Results.

9			
	Average	Maximum	Minimum
Colony count per ml. on yeast extract agar after 1 day at 37°C	4	14	Nil
Colony count per ml. on yeast extract agar after 2 days at 37°C	5	19	Nil
Colony count per ml. on yeast extract agar after 3 days at 20°C	4	27	Nil
Percentage of samples giving no Presum reaction per 100 ml.			98%
Percentage of samples showing no reaction (Type 1) in 100 ml			98%

THE TEES VALLEY AND CLEVELAND WATER BOARD

Sources of Supply

Long Newton Reservoir Distribution Zone

Summary of analysis results on the water leaving Long Newton Reservoir—1st January to 31st December, 1960

Chemical Results are expressed as parts per million except where otherwise stated.

			Average	Maximum	Minimum
Ammoniacal Nitrogen			.013	.025	.007
Albuminoid Nitrogen			.078	.105	.045
Nitrite Nitrogen			< .001	.003	Nil
Nitrate Nitrogen			.5	.8	.1
Oxygen absorbed from permanganate in 3 hi	s. at 3	37°C.	5.45	9.6	2.2
Colour (Hazen Units)			57	115	15
рН			7.1	7.3	6.9
Free Carbon Dioxide			2.8	4.6	1.4
Alkalinity as CaCo 3			40	45	35
Carbonate Hardness as	CaCo	3	40	45	35
Non-carbonate Hardne	ss as (CaCo 3	34	43	24
Total Hardness as CaC	03		74	87	65
Calcium Hardness as C	aCo ₃		58	65	52
Magnesium Hardness a	s CaC	Co 3	16	22	9
Chloride as C1			10	12	9
Phosphate as P ₂ O ₅			.02	.02	Nil
Silicate as SiO ₂			3	5	1.5
Iron as Fe			.15	.36	.06

< = less than.

PUBLIC BATHS

We are obliged to Mr. Sidney Fisher, the Baths Superintendent for the following information:—

The returns for the Central Baths, Branch Slipper Baths and the Schools for the year 1960 from January to December inclusive, and the returns for the corresponding period of 1959 are as follows:—

	Number of Bathers	
1959		1960
	Swimming	
176,952	Central Baths—2 pools	193,097
99,213	School Children	115,966
1,118	North Riding Schools	1,780
	Slipper	
74,024	Central	65,850
18,544	Dacre Street	14,404
21,716	Cannon Street	21,097
	Medicinal	
14,452	Central	16,453

An increase is shown in the swimming bath returns, and the school attendances for the baths have broken all records, which proves that a very great interest is taken by the Middlesbrough Education Committee and Authorities and the children themselves.

The decrease in the number of persons attending the Slipper Baths at the Central Baths was chiefly due to the closing down of that establishment for extensive repairs. With regard to the Medicinal baths and the increase on the previous year for these baths, many patrons are now realising that they are a good tonic to the system. These baths comprise of Turkish, Russian, Brine, Radiant Heat and Foam and are recommended for obesity and for the relief of rheumatism and allied disorders.

Life Saving in the town is of a very high standard and more popular than ever before, especially amongst the school children, and a special bouquet must be handed over to the Stainsby school boys who have succeeded in winning the following trophies in the North and East Yorks Branch competitions:—

The Northern Echo Trophy—Sir William Crosthwaite Shield—H. G. L. Sheard Cup—Van der Heyden Shield—The Master Trophy—The Sidney Fisher Shield—(Boy Scouts Association).

Over 2,000 life saving awards were gained during the year, and I would like to record my thanks to Mr. Stanley Hirst (now retired) and his staff for their very able and valuable assistance in the above work. Members of the Middlesbrough Police Force are keener than ever in swimming and life-saving, and thanks is due to the Chief Constable, Mr. R. Davison, for the facilities granted which has done much to help make a very successful police team, also Inspector L. Sample, Honorary Secretary of the North and East Yorks. Branch, and Sergeant Mitchell, who have done much to further the aims of the Society.

The first swimming bath in the town was officially opened on Thursday, 23rd October, 1884, by Alderman Samuel Sadler, J.P., Chairman of the Sanitary Committee, and Alderman Thomas Hugh Bell, the Mayor. On the 15th July, 1901, it was re-opened by Councillor Robert Mascall, J.P., Mayor. The pool itself is 75 feet long by 30 feet wide, and varies in depth from 2 ft. 6 ins. to 6 ft. For the benefit of non-swimmers, the floor of the pool does not commence to slope until 20 ft. from the shallow end, thus allowing quite a lot of safety space for learners. The construction is of reinforced concrete lined with glazed bricks. The pool contains 60,000 gallons of water which is continuously filtered and sterilised, and maintained at a temperature of 79 deg. Fah. It is equipped with a diving stage up to 9 feet. A balcony is provided along one side of the Bath Hall, with dressing cubicles to accommodate 40 bathers; and a further 20 cubicles are provided on one side of the bath. The Bath Hall was modernised, and a new scum trough built on to the bath in 1954, and an air conditioning system installed, this keeps the atmosphere at a correct temperature which is a necessity for the bathers.

A second Swimming Bath was erected on a site adjoining the existing Bath in 1931/32, and was officially opened on the 22nd March, 1933, by the then Mayor of Middlesbrough, Councillor J. Wesley Brown. This pool is 75 feet long by 40 feet wide, and varies in depth from 3 ft. 6 ins. to 7 ft. A modern filtration plant was installed and is worked in conjunction with both pools. The pool contains 110,000 gallons of water, which is continually filtered and sterilised and maintained at a temperature of 79 deg. F. There are 48 cubicles on the balcony which are used for women only, and four large dressing rooms adjoin the Bath Hall, which are for the use of men only. For the benefit of patrons, money and articles of value can be left at the General Office, and a High-Gard-All system is in operation in the male dressing rooms, whereby all clothing is locked away and looked after by an attendant in charge. For the safety of all concerned an electric alarm system has been introduced in both pools by the Baths Superintendent which minimises the danger of anyone in difficulties in the water. The Filtration Plant for this pool has a turnover of 30,000 gallons per hour, and the water in the pool is entirely changed every 3½ hours. Three filters, 8 feet in diameter are provided, these being of the 82

pressure type, and they contain graded quartz sand 30 tons in all. The water from the pool is carried to the filter beds by an electric centrifugal pump on similar lines as the smaller bath filtration plant, and after leaving the filters passes through a steam calorifier to be heated to the desired temperature, and continues on its journey through an aerator which keeps it in sparkling condition. On the last stage of its journey, the water passes through a modern chlorinator where it is treated with liquid chlorine, sufficiently to keep it bacteriological and chemically pure and even fit for drinking. Back washing of the filters is done whenever necessary, generally three times per week and water from the pool is used for this operation, approximately 1,000 gallons, this loss is then made up by fresh water from the mains, which involves as much as three to four thousand gallons weekly during the summer sessions.

The water supplying the pools travels from the Upper Tees and is supplied by the Tees Valley Water Board, it is of a soft peaty type and is classed by many as the best water in the country. The water is treated with chemicals i.e. alumina ferric and soda ash before entering the filters, this process forms a coagulation on the filter beds and traps the particles of peat, etc., thus preventing them entering the pools, this is part of the filtration system.

Six water tests are taken each day for alkalinity and acidity, these having to be neutralised to get the best results, the pH value of the water should be kept between 7 and 8. Tests for chlorine are also included. If the tests are kept in line with the operation of the filtration plant there will be no complaints from the bathers using the pools. Water tests are taken each week by the Chief Public Health Inspector and are sent to the laboratory and a report on same is sent back to the baths, this report being given to the Sanitary and Baths Committee each month for their perusal. It is pleasing to report that these tests show that the water is being maintained in a very satisfactory condition of bacteriological and chemical purity, the records have indicated that the water in both pools complies with the standard recommended by the Ministry of Health. The boiler plant in the baths is the most up-to-date one in the Country. Two Lancashire boilers 24 ft. x 7 ft. 6 ins. are installed in the building and these are worked alternately, three months for each boiler. A new system of underfeed stoking has been installed which not only saves fuel, but eliminates all smoke, this being a most important matter these days. Coal is fed to the boilers on a conveyor belt system, this does away with the old hand coal trimming and firing. There is also a 96 tube economiser attached to the boilers which superheats the boiler feed water, thus saving a great amount of fuel. A modern laundry is also installed in the baths, and many thousands of towels are washed in a week, each towel goes through a sterilising process, along with slight bleaching, the result being a pure white towel which is very much appreciated by the public. There are three washing machines, two hydro-extractors, one large callender ironing machine and one drying cupboard with hot rails, this is chiefly for turkish towels.

There are 37 slipper baths in the building, 32 for men and 5 for women and they are used to their full capacity every day. At the Branch Slipper Baths (Cannon Street), 8 new baths have been installed and there are 20 baths now in use, this is well appreciated by the people in that area where no baths are available in their homes and they are well patronised.

An up-to-date automatic gas boiler has also been installed in place of the domestic coke boilers, and the water is always hot, even at peak periods. The Branch Slipper Baths (Dacre Street) are very up-to-date, there are 17 baths installed in the building and although there are new flats in that area, the baths are well patronised.

New Slipper Baths are now under construction at North Ormesby, and there are 24 baths in all for men and women. There has been a great demand for slipper baths in that area and the baths will be open sometime in April, 1961, when they will be well appreciated and well patronised.

Yet another season is almost upon us and I am of the opinion that there will be record attendances, and I do hope that an early start will be made on the long promised new baths on the new Estates, although it is well waiting for, especially for a swimming minded public like Middlesbrough.

SEWERS AND DRAINS.

We are indebted to the Borough Engineer and Surveyor for the following information:—

The lengths of drains and sewers laid during the year were :-

		Sewers 1in. yds.	Drains 1in. yds.	Total lin. yds.
By Local Authority	 	4,120	9,613	13,733
By Private Enterprise	 	4,030	9,403	13,433

PUBLIC CLEANSING.

The Cleansing Superintendent, Mr. W. A. Turner, has kindly supplied the following information.

During the year under review 40,617 tons of house and trade refuse were collected and disposed, as compared with 38,695 tons in 1959.

Disposal was as follows :-

Separation and Inciner Controlled Tipping	ation	Tons 19,956 20,661	49.13 50.87
		40,617	100.00

2,698 tons of salvage were recovered and sold for the sum of £17,520.

Ten new vehicles of various types were purchased during the year.

APPENDIX A

NATIONAL HEALTH SERVICE ACT, 1946

SECTION 28-PROVISION OF MENTAL HEALTH SERVICES.

PROPOSALS APPROVED BY THE MINISTER OF HEALTH ON 26th JANUARY, 1961

Introduction.

- 1. The proposals following are additional to the arrangements already approved by the Minister relating to the prevention of mental illness, the care of persons suffering from mental illness or mental defectiveness and the after-care of such persons under Section 28 of the National Health Service Act. Existing arrangements for carrying out duties under the Lunacy and Mental Treatment Acts, 1890—1930, and the Mental Deficiency Acts, 1913—1938 continue in operation until the relevant sections of these Acts are repealed on dates appointed by the Minister by order under Section 153 of the Mental Health Act, 1959. The proposals relating to duties under the repealed sections will then cease to have effect.
- 2. The Authority will make appropriate arrangements for the provision of services to meet the needs of the mentally disordered living in the community and will make the services known to and available to those who are in need of them. In particular they will provide, or cause to be provided, junior training centres, such adult training centres as may prove to be necessary, home training where required, residential accommodation, day centres, social clubs and a home visiting service.

Organisation and Staffing of the Services.

The mental health services of Middlesbrough are under the surveillance of the Health Committee which entrusts them to the close scrutiny of a mental health sub-committee. This sub-committee will meet quarterly or oftener as may be found expedient, and will report to the Health Committee, which in its turn reports to the Council. The service is under the administrative control and direction of the Medical Officer of Health.

A staff of mental welfare officers will be particularly engaged on this service, but other officers of the Health Department, e.g. health visitors, handicraft instructors, social workers, will play a part.

The Authority will make such arrangements as are necessary, including secondment and in-service training, to ensure that their staff at all grades are adequately trained and/or qualified.

The Authority will increase their present staff until they have a sufficient number of officers to act as mental welfare officers under the Mental Health Act, 1959.

The Authority will make such arrangements as are necessary for strengthening the links with hospitals, general practitioners and other agencies, and they may make arrangements for the provision of services through voluntary bodies, other local authorities, or otherwise.

Junior Training Centres.

At present the Authority maintains a junior training centre with accommodation for 60 young persons, male and female. At present the Authority do not find a need for residential accommodation in connection with this junior training centre, but they will expand the junior training centre accommodation and provide residential accommodation should such need arise. Further provision will be made if necessary.

The Authority will make arrangements for regular medical inspection and dental inspection and treatment. Meals and milk will be provided and transport will be provided if necessary.

Adult Training Centres.

The Authority maintain a small carpentry and joinery training centre for older boys and young men, and a small class in simple needlework, etc., for women is provided at the junior training centre building. The Authority will increase the facilities for the training of adults, male and female, and will open such centres for them as may prove to be necessary. The Authority may make arrangements for medical inspection and dental inspection and treatment. Meals may be provided and transport will be provided if necessary.

The Authority will explore the possibility of maintaining one or more sheltered workshops as need may show to be necessary.

Residential Accommodation.

The Authority is contemplating the opening of a residential hostel for sub-normal older boys and young men who have been considered fit for discharge from former hospital for mental defectives.

The Authority will provide such other residential accommodation for the mentally disordered as may be necessary, either directly, or by arrangements with other authorities, voluntary bodies, or otherwise.

The Authority will continue to provide short-term care.

Home Training.

The Authority will arrange home training for mentally disordered persons capable of benefiting by it and who are unable for any reason to attend at appropriate centres.

Day Centres, Social Clubs and Other Activities.

The Authority will make arrangements for the provision of day centres, social clubs and other activities as may be necessary, either directly, or by arrangements with other authorities, voluntary bodies, or otherwise.

Home Visiting Services.

The Authority, through its mental welfare officers, will undertake the visitation of mentally disordered persons in the community or under guardianship. Additional mental welfare officers will be appointed if necessary.

The mental welfare officers will be supplemented when necessary by such other officers as health visitors, etc.

The Authority will make such arrangements as may be necessary to allow mental welfare staff to take suitable training and will encourage them to do so.

Guardianship.

The Authority intend to exercise their functions under the Mental Health Act, 1959, in respect of persons placed under guardianship, whether that of the Authority or that of other persons.

APPENDIX B

Summary of the services available to old persons in the County Borough of Middlesbrough as outlined to the Minister of Health on the occasion of his visit to Middlesbrough on the 5th April, 1961.

Broadly speaking the services available to old persons in the County Borough of Middlesbrough are those offered by three Committees of the Corporation—Health, Welfare and Housing—and those offered by Voluntary Societies.

Services coming under the Welfare Services Committee:

Welfare Officer-E. C. Parr, Esq., LL.B.-Town Clerk.

(1) Hostel Accommodation:

Superintendent of Residential Accommodation— D. C. Barlow, Esq., M.B.E.

Matron- Mrs. G. M. Barlow.

The Corporation maintains at the present moment a central Old People's Hostel containing over 300 beds and known as Holgate. This is the former Public Assistance Institution with many extensions and conversions and is now practically a modern building. In it are housed the offices of the administration of the Council's hostels, a certain number of old people—at present 245—an infirm block with at the moment 33 occupants, and 42 beds which are let to the Regional Hospital Board and come under the jurisdiction of the Senior Geriatric Consultant; a dispensary from which medicines are sent to the other hostels, and a laundry which serves all the hostels is also maintained there, and when aged people in the other hostels are more than temporarily sick they are brought by ambulance to the central hostel for nuring care.

A very great advantage of having 42 Regional Hospital Board beds in the same building is that there can be, and is, exchange both ways between the Welfare Services Committee's infirm beds and the Geriatric Consultant's accommodation.

A general practitioner—Dr. Rudd—acts as "family doctor" to the old people in Holgate, except such as come under the jurisdiction of the Geriatric Consultant.

The other four hostels coming under the jurisdiction of the Welfare Services Committee are:—Nunthorpe Hall, situate in a pleasant village five miles from Middlesbrough, with 41 Residents, the majority being female; the Albert Cocks Home—a new and very beautiful structure in a housing estate with 42 residents of both sexes; South End—a converted mansion fairly centrally situated, with 35 residents, majority female; Norwood—a converted house at Saltburn-by-the-Sea, 14 miles from Middlesbrough, with 30 residents, both sexes.

The policy of the Welfare Services Committee is to situate hostels for old people in the large new housing estates and three more are projected; one in the Beechwood Estate, one in the Pallister Park Estate and one in the middle of the Linthorpe residential district known as Airedale/Lunefield. These will each take 30 to 40 residents.

Application for admission to these Homes—for which there is a short waiting list for males and a very modest waiting list for females—are made by the Geriatric Consultant, general practitioners, the Health Department, old people themselves, and other interested persons. The prospective residents are screened and interviewed with a view, first to ascertaining their wishes, and secondly as to fitting them into the hostel where they would be most likely to find kindred spirits.

It is felt that there is, and will continue to be, a need for a central hostel, first of all to house the administrative offices and such central services as laundries, etc., and secondly because there will always be a certain number of old people who are "difficult", or who, owing to habits, mannerisms or disposition, are not good mixers and might tend to upset the harmony of the smaller Homes.

(2) Handicapped Persons:

Certain old people are handicapped persons and if not in the hostels they come under the care of the Handicapped Persons Sub-Committee of the Welfare Services Committee.

Various services are available to them, according to their need. In this branch, again, the Town Clerk—as the Welfare Officer to the Committee—is advised on the handicap and of measures necessary by the Medical Officer of Health and the officers of the Health Department.

By a Council decision, officers employed by the Corporation for the special care of handicapped persons are members of the Medical Officer of Health's staff, although they may be seconded to other persons for day-to-day supervision.

(a) Blind:

The Council employs three Blind Visitor/Teachers who report to the Medical Officer of Health weekly, but otherwise are seconded to the Cleveland and South Durham Institute for the Blind for day-to-day work. The ascertainment of blindness or a condition of being partially-sighted for admission to the register is arranged by the Health Department, which also makes another arrangement necessary to secure the aged blind necessary treatment. Convalescent holidays are arranged by the Cleveland and South Durham Institute with the knowledge and sanction of the Handicapped Persons Sub-Committee.

The number of blind persons under the care of our Blind Visitor/Teachers who are over 60 years of age is 211, of whom 42 are partially-sighted, 169 being blind.

(b) Deaf:

The Council confines its supervision of the welfare and needs of the deaf to the South Durham and Cleveland Mission to the Deaf. At present this Institute is without a fully qualified deaf missioner, but it is hoped to recruit one soon. To this Body—as to the Institute for the Blind—the Council makes a considerable grant and the Council provided the major part of the capital sum necessary recently to erect a Club and Social Centre for the deaf.

(c) Other types of handicapped person:

The Medical Officer of Health keeps a series of registers of the various classes of handicapped persons in the town and from time to time advises the Handicapped Persons Sub-Committee of any measures which they can take to promote their welfare, e.g. the admission of epileptics to institutions or colonies; the provision of convalescence; the adaptation—with

the co-operation of the Housing Committee—of houses where a handicapped person has need, e.g. provision of banisters or stair rails; enlargement of doors; ground floor lavatories; accommodation for wheel chairs, etc., etc.

(3) Meals on Wheels:

The Welfare Services Committee subsidises a Meals on Wheels Scheme run by the Women's Voluntary Services. It has recently taken a decision to enlarge that service considerably.

For the month of February, 1961, the number of Meals on Wheels ordered was 490 and those sold 465. The charge is 1/-, which may have to be increased to 1/2d.

Now that another van with a new system of heating is being put into service, it is hoped soon to give most old people a substantial meal three times a week.

(4) Library Service:

In our Survey of old people we found about 236 whom we felt could benefit by a library service, so the Welfare Services Committee has recently taken a decision and inaugurated—in conjunction with the Libraries Committee—a pilot scheme for the delivery of books to bedfast people in a portion of the town. If this is found to be successful and the demand is proven, it is hoped to extend this service to cover the town.

(5) Laundry Service:

The need for a laundry service has been considered, but the evidence seems to show that no great number of old people are deprived of such a service at the moment. In the first place the Home Helps do one wash per week, relatives do many, and the springing up in the town of launderette establishments may possibly meet the need. This is being carefully watched, as it is realised that laundry service in other towns has been a very great help.

Services coming under the Health Committee:

(1) Domestic Help Service:

The Health Department maintains a service of Domestic Help in accordance with the National Health Service Act, under the Council's Scheme. The vast majority of persons receiving this help are aged persons and for old people who have only their old age pensions, plus any supplementary, the charge is only a shilling or two, and sometimes there is no charge. For cases requiring long-term Home Help—such as aged people usually do—there is a special low rate of charge even if they have some other resources. It is felt that this service maintains 200 or 300 people in their own homes who otherwise if deprived of this help would either have to be admitted to the geriatric wards of hospitals or to Part III accommodation. The Medical Officer of Health keeps a register of old people known to be living alone in the town and we get information here from a great number of sources.

There is at the moment a total of 1330 elderly people known to the Health Department and on our geriatric register. Of these there are 133 elderly men living alone and 514 elderly women living alone. But, of course, it must be recognised that in quite a number of cases close relatives or neighbours come in everyday and Home Help is not always required. 79 old people last year were referred for Part III accommodation, but, of course, some refused to be referred and some of those who were referred at the last moment refused to avail themselves of it. Last year, 116 old people were referred for Meals on Wheels, 92 were referred to the W.V.S. for clothing and 80 were referred for chiropody.

Females, living alone, receiving	Home	Help	 201
Males, living alone, receiving H	ome I	Help.	 60
Couples receiving Home Help			 47
			308

(2) Geriatric Nurses:

The Health Department maintains six geriatric nurses who are State Registered Nurses, usually those who have been Sisters or have had considerable experience in old people's and chronic sick wards. These ladies work under the supervision of the Superintendent Health Visitor and they perform a most useful service. They do not in any way conflict with the Home Nurses who deal with such matters as injections and complicated dressings. The geriatric nurses perform chiefly toilet techniques—cutting of hair; brushing of teeth; cleaning of ears; paring of toe-nails; manicure; blanket bathing and giving patients baths. This service, in its way, contributes tremendously to keeping old people at home, rather than giving them hospital accommodation.

As far as male persons are concerned, a Male Orderly is employed in the Health Department to do shaving and corresponding toilet techniques for males.

Medico-social reports on home circumstances are prepared on request for the Geriatric Consultant, enabling him to assess priority of admission from his waiting list.

The Senior Assistant M.O. (General) attends the geriatric out-patients clinic each week and an invaluable two-way link has been established. We are able to provide the Consultant with any information he requires about home conditions; he gives us valuable information about patients needing home care, rehabilitation or visiting.

This is a service of which we are immensely proud and saves highly qualified Health Visitors to give their services to other persons in need of them.

(3) Home Nursing:

In Middlesbrough the Middlesbrough District Nursing Association is an agent of the Council for Home Nursing. Four members of the Council sit on its Committee, the Medical Officer of Health attends its Executive Committee as adviser and the Council defrays 97.5% of the expenses. The Superintendent District Nurse reports specially monthly to the Medical Officer of Health on the number of persons 70 years and over nursed. The report for February, 1961, was that they were nursing 63 old men and 142 old women, and that this involved 744 visits to men and 1453 to women.

(4) Handicrafts Instructress:

A Handicrafts Instructress is employed by the Health Department to give occupational therapy to old persons in their homes who can profit by it, with a view to affording them recreation and diversion.

(5) Social Worker:

A Social Worker is also employed by the Health Department to advise old people on their needs and entitlements and any other kindred problems.

Voluntary Societies:

(1) Darby and Joan Clubs:

There are 22 Darby and Joan Clubs in Middlesbrough, scattered well over the town. The Health Department maintains close touch with these Clubs and a scheme is on foot for the portable Miniature X-ray to visit each Club and X-ray these old people. It was pleasant to note how many of the old people welcomed the suggestion.

(2) Middlesbrough Community Council:

The Middlesbrough Community Council is a Voluntary Body receiving a grant from the Corporation and it has an Old People's Committee which keeps in touch also with the Darby and Joan Clubs.

The Middlesbrough Council recognises the Community Council as a Body with whom the care of old people may be discussed.

The Health Department is represented on the Old People's Care Committee.

(3) Chiropody Service:

Now that Local Health Authorities have been given authority to run Chiropody Schemes, the Middlesbrough Council have prepared a scheme and substantially agreed it with the local Chiropodists. The only reason why it is not yet in operation is the failure to produce any nationally agreed scale of fees for sessional work, but when such is agreed we can very quickly bring the Chiropody Scheme into operation.

It is hoped that the Chiropody Scheme will operate (1) for bed-ridden persons at the bed side, (2) for those who can travel by ambulance car in certain cases at the Chiropodist's surgery, (3) that the Chiropodists will attend at peripheral clinics on the estates for ambulant old people.

Our investigations lead us to believe that the need for this scheme is very great and when put into operation it will have a very great effect on the good health and mobility of old people and prolong their useful working or social life.

In the meantime, thanks to a charitable fund which provides money from time to time for the purpose, the Medical Officer of Health has the right to recommend certain old persons for free chiropody, the Organiser for this at the moment being the Social Worker to the Community Council. 80 such old people were recommended during last year.

It should, however, be realised that in each of the old people's Welfare Hostels chiropody services are provided free by the Welfare Services Committee, that the hospitals have the power to provide chiropody services free for patients and that the Blind Institute also provide such for the aged blind.

Other Services:

The blind, and particularly the aged blind are issued with free 'bus travel within the town of Middlesbrough at the expense of the Transport Committee.

Services coming under the Housing Committee:

There is a great demand in Middlesbrough for old people's bungalows and the Council and the Housing Committee view this with the greatest sympathy.

We have 172 pre-war bungalows. At the moment there are a number of bungalows which have just been completed round and in the neighbourhood of the South End Welfare Home and 12 on the Thorntree Estate. 32 post-war bungalows have also been built. Round the Albert Cocks Home further bungalows are being built.

Old people's bungalows are given to married couples onlynever to single persons.

There are also 78 flatlets for old people, some of which are in converted houses and some have been built round South End Hostel, and a large number are being built round the Albert Cocks Hostel. They are let to single persons or to couples. Many more bungalows are projected as there is still a waiting list and it is felt that others would apply if they thought there was a chance of getting them in the near future.

Waiting List:	Bungalows	 	455
	Flatlets	 	418
	Flats	 	253
			1,126

The policy of nesting old people's bungalows and flatlets round the Welfare Hostels is deliberate. The idea is that the old people should stroll across the lawn, so to speak, and join the community living in the hostel for such things as concerts, film shows and little celebrations; that they should get to know them and that then, when the time came when they were too old to do housekeeping in their own flats, even with Home Help Service, they would be glad to go across the lawn and live, so to speak, in the big house and have all services rendered to them.

Conclusion:

In this little review, it will be seen that the Welfare Services Committee, the Health Committee and the Housing Committee are very live to their duty to the old people of the town. They have done much and they wish to do much more. They also obtain in other matters the greatest of assistance from the Transport Committee and other Committees of the Council who can in any way help.

The relations with the Council and the appropriate Voluntary Councils are close and cordial.

Lastly, I should mention that there are still in the town three Nursing Homes who are willing to take—sometimes at quite moderate ratese bedfast or invalid old people who desire that particular kind of privacy. The Council has been known, on occasion when their hostels have not had accommodation, to, so to speak, board out old people in these Homes.

Temporary Accommodation:

Both the Geriatric Department of the hospitals and Welfare Services Committee Part III accommodation have very greatly helped at times by taking old persons in temporarily so that the younger members of the family could have a break or an annual holiday. The old persons then go back to their families for care throughout the rest of the year. This is a very valuable aid.

To the Mayor, Aldermen and Councillors of the County Borough of Middlesbrough

I now have the honour to present, Mr. Mayor, Aldermen and Councillors, the portion of my Annual Report which is based on figures and statistics compiled by the Chief Public Health Inspector, Mr. F. G. Sugden, and recording the work of his colleagues, his pupils, his ancillary staff and by no means least, himself.

I commend this report to the Committee as representing a very large volume of good and hard work which Mr. Sugden has carried out and which, under his instructions, has been carried out by his portion of the Department.

Considering that we are far from our complete establishment of public health inspectors, this is a most creditable record and it is made more easily digestible by the extremely lucid, clear and practical comment with which Mr. Sugden has interlarded it.

It will be seen that the Committee has taken forward and decisive steps with a view to the recruitment of the department up to establishment and to ensure if possible the maintenance of a full staff in the future.

It will also be clear to any young man, ambitious of an honourable career with plenty of variety and interest in it, or to the parents or head teachers advising such young men, that here is a most interesting and worthwhile opportunity in the Public Service, where a reasonable living can be earned and at the same time fine service rendered to the community.

I would like, also, to pay a tribute to the amount of time—quite often coming out of his alleged leisure—that the Chief Public Health Inspector, Mr. Sugden, has spent in educating, coaching and other ways helping his pupils, and in this he has been well and loyally seconded by his Deputy, Mr. T. E. Peterson.

I have the honour to be,

Mr. Chairman, Aldermen and Councillors,

Your obedient Servant,

ERIC C. DOWNER, Medical Officer of Health.

THE SANITARY AND BATHS COMMITTEE. Appointed May, 1960.

Chairman: Alderman L. Taylor

His Worship the Mayor (Alderman W. Flynn, J.P.)

Alderman M. C. Newton Councillor C. W. Fretter

Councillor W. Grosvenor Alderman N. Peters

Councillor D. V. Allen Councillor J. T. Horsman

Councillor J. N. Bennington Councillor R. I. Smith

Councillor J. A. Brown, C.B.E., J.P. Councillor W. J. Story

Councillor A. T. Crosby Councillor H. Whitfield

Councillor C. L. Elder, M.B. Councillor J. Wilson

Councillor W. Ferrier

STAFF.

Chief Public Health Inspector :-

F. G. Sugden, D.P.A., M.R.S.H., F.A.P.H.I., A.M.I.P.C., A.M.I.P.H.E.

Deputy Chief Public Health Inspector :-

Thomas E. Peterson, M.R.S.H., M.A.P.H.I.

Public Health Inspectors :-

**D. Anderson (To 31.3.60)

**A. Chisholm, M.A.P.H.I. *D. B. Coull, M.A.P.H.I.

**G. Elliott, M.A.P.H.I.

**L. A. Harrison, M.A.P.H.I.

E. W. Kelley, M.A.P.H.I.

**G. Stewart, A.R.S.H., M.A.P.H.I.

D. H. Thompson, M.A.P.H.I. (On National Service)

Pupil Public Health Inspectors :-

C. Atkinson

G. B. Coulthard. (From 20.6.60)

J. L. Croft. (From 15.8.60)

B. N. Heaton. (From 8.8.60)

M. D. Nayman. (On National Service)

A. H. Simpkins

Technical Assistants :-

H. Butterfield

J. W. Fox. (From 22.2.60)

Shops Inspector :-

R. G. Thompson, M.I.S.A.A.

Rodent Officer :-

G. W. Tyreman

Public Slaughterhouse Supervisor :-

R. B. Crooks

Chief Clerk :-

P. E. Taggart

Clerks :--

J. Piper. (From 26.9.60)

P. Thomas

Shorthand Typists :-

K. M. Milner

E. G. Proudfoot P. R. Basham

** Meat Certificate of R.S.H.

Meat Certificate (Scotland)

STAFF

The establishment of the Department provides for a Chief Public Health Inspector, a Deputy Chief Public Health Inspector, and 13 Additional Public Health Inspectors. At the beginning of the year, 8 of these 13 posts were occupied but one officer was absent throughout the year on National Service. At the end of March one Inspector left to take up a post with another Authority. For most of the year, therefore, the effective number of Additional Public Health Inspectors was 6.

Detailed consideration was given during the year to this problem of staff shortages, and measures were taken to overcome some of the difficulties encountered. As a long term step, the number of Pupil Public Health Inspectors was increased to 6, and the fact that these men are being trained in the Department gives good ground for hoping that within the next few years the staffing position will improve. To deal with the immediate problem of making the best use of the existing staff, improved transport facilities were made available to the inspectorate; a new recording system was introduced and a General Division Clerk appointed to keep these records. As a result, a considerable amount of repetitive clerical work has been abolished and the Inspectors have also been relieved of much of the recording work which was previously done by them.

An additional Technical Assistant for duties under the Clean Air Act was appointed during the year, and work on Smoke Control Areas proceeded at an improved rate as a result.

GENERAL

In spite of the staffing difficulties previously referred to, the Department has had a successful year. Everything possible has been done to ensure that each aspect of the work has received an appropriate share of attention, and the various tables and reports which follow, show what has been achieved.

Altogether, more than 31,000 inspections of one kind or another have been carried out. The enforcement of house repairs and the abatement of nuisances, still form an important part of the work of the Department, and continue to demand a high priority of attention. The results which ensue, well justify the effort which is expended. The individual householder whose necessary repairs are enforced, benefits directly, and the community generally benefits indirectly, in so far as the town's stock of houses is maintained at a higher standard, and the risk of houses becoming liable to slum clearance as a result of disrepair, is lessened.

The control and supervision of food and food premises is another important aspect of the work of the Department. The public generally, has little knowledge or conception of the great amount of work which is done to ensure that food supplies are safe, pure and clean. During the year, detailed inspections were made of the carcases of 47,147 animals slaughtered in the town, and more than 46 tons of unsound food was condemned. 1,930 samples of food were submitted for analysis or bacteriological examination, and 7,407 inspections were carried out of food premises.

In addition to all these normal routine duties, the year saw the introduction of the Corporation's first Smoke Control Area, and the completion of the survey work for a second area. This has put us in the forefront of North-Eastern Authorities in this work.

Detailed inspections of houses for inclusion in slum clearance areas were also stepped up during the year, and enabled the submission for clearance, of the largest number of houses yet achieved in a single year.

Heartening as all this progress is, it leaves no room for complacency. Although much has been done, much remains to be done, and there are many fields of work which will benefit from the greater attention which it is hoped to be able to give them as the staffing position improves.

SANITARY INSPECTION OF AREA.

Total numbers of inspections, visits, etc., made by inspectorial staff during the last five years :—

	1956	1957	1958	1959	1960
General Inspections	 23,000	20,378	18,298	21,150	21,635
Food Inspections	 6,307	5,716	6,451	7,186	9,477
Interviews	 1,927	1,700	1,685	2,274	2,352

NUISANCES Found. Abated. Choked and defective drains or gullies 459 450 Choked or defective Yard gullies ... 37 47 7 Yard gully covers 3 Yard gully grates Defective sink waste pipes Choked Water-closets 134 130 Broken or Defective Water-closets Basin/Drain joint 17 13 24 Basin/Flush joint 25 Basins .. 112 73 Cisterns 207 169 Seats 108 87 3 Flushpipes Burst water-pipes 153 132 Dilapidated Water-closet Compartments Roofs 160 106 Walls 66 57 Wallplaster 146 109 Floors 11 16 Doors .. 103 85 Door-frames 40 Dilapidated Coalhouses Roofs 33 64 Walls 29 26 Floors 1 2 Doors 75 70 Door-frames 37 33 Leaking House roofs

Defective Spoutings and/or Fallpipes ...

470

Other defects of External	Fabri	c			
Chimneys				40	33
Walls				77	59
Dampness				424	221
Defective Plasterwork					
Wallplaster Ceilings	::			170 158	139 94
Defective Internal Woodw	ork				
Floors				118	73
Skirting-boards				21	17
Sashcords				192	126
Windows				214	125
Doors				187	159
Door-frames				36	20
Handrails Stairtreads				34	12
Stairtreads				9	9
Broken and Dilapidated F	irepla	ces, Ov	ens, etc	II materials	
Fireplaces				52	31
Fireranges				19	10
Flues				17	9
Defective Washing Accom	moda	tion			
	moun	iioii		2	2
Gas wash-boilers		modet	ion	3	3
Absence of washing		modati	IOII	R of Ton	1
Inadequate or defective Si	nks			50	26
Defects of Water supply					
Burst water pipes				50	49
Absence of water sup	pply			6	16
Defective Yard surfaces					
Yard surfaces				39	42
Back passages surfac				4	3
Other defects of Yards, V		Doors	etc		
		D0013,	cic.	104	91
				104 111	91
Yard doors Yard door-frames				58	58
Inadequate Refuse accomi	nodati	on.		373	404
and the second second second	nounci	on			
Offensive accumulations				10	4
Keeping of Animals				1	_
Miscellaneous				238	201
Summary: Notices se	rved	. 2.9	000 to c	over	
			49 Nui		
37.1	abata			Julio03.	
Nuisances	abate	u 4,3	70	57 C. 40 Ond	

In addition to the above, 1,380 choked drains were cleared by employees of the Department free of cost to the owners.

Summary of Nuisances abated during the last 5 years.

George Through and	1956	1957	1958	1959	1960
Notices Served	 4,941	3,716	3,821	3,561	2,900
Nuisances concerned	 9,695	7,525	7,456	7,817	5,849
Nuisances Abated	 7,242	4,858	5,437	5,965	4,570
Drains cleared by Department free of cost	 1,688	1,450	1,405	1,474	1,380

In several cases owners have not complied with Abatement Notices served, and in order to enforce items which cannot be termed "Health Nuisances" recourse to the Housing Act procedure has followed.

(See Section F-Housing).

The attention of the Borough Engineer has been called to the following defects:—

Apparently dangerous structures 25

Water Supply to Houses

All the houses in the town are supplied with drinking water from the mains of the Tees Valley and Cleveland Water Board. At the beginning of the year there were 32 houses whose water supply consisted merely of a tap in the back yard and during the year notices were served in respect of all these houses requiring the water supply to be brought inside the dwelling and requiring the provision of suitable sinks and sink waste drainage.

At the end of the year 26 of these notices had been complied with and steps are being taken to enforce the work in the remaining 6 cases.

Closet Accommodation

A survey was carried out during the year of all premises in the town which were not on the water carriage system but which were served by chemical or pan closets. The survey recorded that there were only 21 such premises in the town made up as follows:—

Residential property	 	8
Commercial or industrial premises	 	6
Railway signal boxes	 	7

In none of the cases was there a sewer reasonably available.

The very small number of premises concerned shows an extremely good position. Nevertheless, steps are being taken to deal with them and consideration is being given to making grants towards the cost of installing septic tanks in suitable cases to permit of conversion to water-closets.

Agriculture (Safety, Health and Welfare) Act, 1956

This Act makes it the duty of the local authority to ensure that there is adequate sanitary accommodation available on all agricultural premises where persons are employed.

There are 9 premises in the area which are subject to the Act. All were inspected during the year. In 4 cases the accommodation was satisfactory and in 5 cases it was unsatisfactory. Notices were served in respect of these 5 premises and the necessary remedial work carried out.

Infectious Diseases

During the year, 784 cases have been investigated, incurring 81 re-visits, compared with 610 investigations and 29 re-visits last year, owing to cases of Infectious Diseases (including Tuberculosis) and reports thereon have been made.

The number of inhabited rooms disinfected owing to cases of Infectious Diseases was 307 as compared with 250 last year.

Offensive Trades.

Number on Register		 		19
Tripe Boiling		 	 4	
Fat Melting		 	 3	
Blood Drying		 	 2	
Fat Extracting		 	 3	
Hide and Skin Deal	lers	 	 1	
Rag and Bone Deal	ers	 	 5	
Gut Scraping		 	 1	
Number of Inspections		 		39

The Offensive Trades on the Register have been conducted satisfactorily, and in every instance where minor alterations or improvements have been recommended, these have been carried out.

Prevention of Damage by Pests Act, 1949.

A whole-time Rodent Officer and a Rodent Operative are employed on duties under the above Act. The following table shows the work carried out during the year.

	(1) Local Authority	Dwelling Houses (incl. Council Houses)	(3) All Other (incl. Business Premises)	(4) Total of Cols. (1) (2) & (3)	(5) Agri- cultural
Number of Properties inspected as a result of:					
(a) Notification(b) Survey(c) Otherwise Discovered	$\frac{55}{1}$	557 29 5	1 <u>22</u> 8	734 29 14	=
Total inspections carried out (including re-inspections)	233	2,104	422	2,759	1
Number of properties inspected which were found to be infested by:					
(a) Rats (Major (Minor	3 18	1 282	3 42	7 342	<u></u>
(b) Mice (Major (Minor	32	233	69	334	18 =
Number of infested properties treated by Local Authority:	53	505	109	667	1
Total Treatments carried out (including re-treatments)	72	535	130	737	1

Free treatment is given at dwellinghouses but business premises are charged with the cost of the work.

In addition to the work shown above, 701 rats were killed by a Rat Club, 91 visits being made for the purpose.

Occupiers of infested premises co-operate well with the Department and it has not been necessary to serve any Statutory Notices during the year.

Sanitary Condition of Theatres and Music Halls.

There are 11 places of public entertainment within the Borough, 9 Cinemas and 2 Theatres.

The Public Health Act empowers Local Authorities to inspect the sanitary condition of Cinemas, Theatres, etc., and 24 visits were paid during the year, resulting in a good standard of cleanliness being maintained.

Hairdressers.

Section 286 of the Middlesbrough Corporation Act, 1933, makes it compulsory for all hairdressers and barbers to be registered with the Local Authority.

Number on Register						136
Number of Inspections ma	ide					124
Number of letters sent re	minor	cont	raventi	ons, al	tera-	
tions to premises, etc.						15

In all cases where a new business has been established, washhand basins with properly trapped waste discharge pipes to external gully have been provided, together with an adequate hot water supply, and also approved containers for waste material, including hair.

The good standards which prevailed in the establishments has been continued—only minor contraventions of the Bye-laws have been found.

Shops within the Borough.

Bakers and Confectioners	 	 	 70
Boot and Shoe Dealers	 	 	 30
Boot and Shoe Repairers	 	 	 40
Butchers	 	 	 132
Cars and Garages	 	 	 48
Coal Dealers	 * *	 	 59
Cycles	 	 	 28
Chemists	 	 	 46
Dairies	 	 	 7
Departmental Stores	 	 	 20
Drapers	 	 	 69
Entertainments	 	 .,	 11
Fish Friers	 	 	 103
Fishmongers	 	 	 26
Fruiterers	 	 	 90
Furniture	 	 	 37
General	 	 	 359
Glass and Fancy Goods	 	 	 10
Grocers	 	 	 193
Hairdressers (Ladies)	 	 	 77
Hairdressers (Gents)	 	 	 59
Ironmongers	 	 	 48

Shops within the Borough.

Jewellers							21
Newsagents and To	bacco	nists					112
Outfitters (Ladies)							38
Outfitters (Gents)							24
Paints and Paper							36
Radio and Electric	al						52
Restaurants (includ	ling Ice	e-cream	Saloo	ns)			60
Sweets							55
Soft Furnishings							30
Sports Outfitters							3
Tailors							21
Wholesale Dealers							90
Miscellaneous							63
				To	tal		2,167
Number of Visits p	aid						2,450
Number of Patrols							10
Number of intervie	ews						185
Shops Opened							73
Shops Closed down	n						63
Additional facilitie	s have	e been	provid	led as	under	:	
Sanitary Ac	commo	odation			4		
Washing Ac							

Camping Sites.

One site is being used as winter quarters by members of the Showman's Guild—members of which are exempt from action under the Public Health Act and Local Act. Frequent inspections of the site are carried out and at no time has there been cause for complaint as the standard laid down by the Guild has been complied with.

Occasional caravans are found on sites within the Borough, but the enforcement of the Local Act powers has so far proved adequate for dealing with them.

Land Charges Act.

2,559 enquiries under the Land Charges Act were investigated during the course of the year.

Factories.

There are 435 Factories on the Register, as follows :-

			N	With Mechanical Power	Without Mechanical Power
Bakehouses				28	_
Joiners and Undertake	ers			42	3
Printers				9	
Motor Engineering				56	2
Boot Repairing				12	
Tailoring, etc				14	1
Mantle Alterations, et	c.			7	9
Upholstery				10	5
Cabinet Makers				3	
General Engineering				65	5
Electrical Engineering				9	1
Sugar Boiling				3	1
Laundries				9	_
Monumental Masons				2	-
Miscellaneous				122	17
	To	otals		391	44

In addition, 48 premises were inspected where notifications of Building and Engineering construction had been received.

On the whole, the Factories and other premises were found to be in a satisfactory condition and no legal proceedings were instituted.

Notices Received from Her Majesty's Inspector of Factories :-

Removed from Register		 24
Change of Business	 	 4
New Premises	 	 16
Sanitary Defects, etc.	 	 11

The responsibility for issuing Fire Certificates is that of the Fire Brigade. Certificates were issued as follows:—

New	 	 	 4
Amended	 	 	 3

Factories Acts, 1937 to 1959. Part I of the Act.

 INSPECTIONS for purposes of provisions as to health (including inspections made by Public Health Inspectors).

	Number	l N	lumber of	,
Premises (1)	Number on Register (2)	Inspections (3)	Written notices (4)	Occupiers prosecuted (5)
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	44	52	us memd m <u>eL</u> uni eI noneSi	
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	391	399	13	-
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	48	48	A realdal	_
Total	483	499	13	_

 Cases in which DEFECTS were found. (If defects are discovered at the premises on two, three or more separate occasions they should be reckoned as two, three or more "cases").

- May Eyerlise 's	Nun	Number of			
Particulars (1)	Found (2)	Remedied (3)	Refe To H.M. Inspector (4)	By H.M. Inspector (5)	Cases in which Prose- cutions were instituted (6)
Want of cleanliness (S.1)	2	2		_	0 -
Overcrowding (S.2)		_	_	_	Olitzea es
Unreasonable temperature (S.3)	_	_	_	_	_
Inadequate ventilation (S.4)	100-1		n L Turk	- N-	zaitoz
Ineffective drainage of floors (S.6)	1	1	Amanda Maria		under T
Sanitary Conveniences (S.7) (a) Insufficient	6	3	_	1	
(b) Unsuitable or defective	68	57	_	9	rel -
(c) Not separate for sexes	2	_	_	1	_
Other offences against the Act (not including offences relating to Outwork)	2	1		uoqeyi sa D <u>ab</u> asan	e align
Total	81	64		11	_

Part VIII of the Act.

Outwork.

(Sections 110 and 111).

		Section 110			Section 111	
Nature of Work (1)	No. of Out-workers in August list required by Section 110(1)(c) (2)	No. of cases of default in sending lists to the Council (3)	No. of prosecutions for failure to supply lists (4)	No. of Instances of work in unwhole- some premises (5)	Notices served	Prose- cutions (7)
Wearing apparel : Making etc.,	26		Line no:		negal.	
Cleaning and Washing						
Household linen						
Lace, lace curtains and nets						
Curtains and furniture hangings						
Furniture and upholstery	THE THE PARTY					
Electro-plate	MA THERE					
File making						
Brass and brass articles						
Fur pulling						
Iron and steel cables and chains	Tarrillo III					
Iron and Steel anchors and grapnels	ald Tanic	1933				
Cart gear	Hamillery (T				10 PM	
Locks, latches and keys	570.55010					
Umbrellas, etc	2					
Artificial flowers	ALCOHOL:	77 781 195	THE BUTTON		11 70 11	
Nets, other than wire nets					The state of	
Tents						
Sacks	Tolk root	II Isbu n			1	
Racquet and tennis balls						
Paper bags						
The making of boxes or other receptacles or parts thereof made wholly or partially of paper	19:4.1				Mark P	
Brush making					The same of	
Pea picking				Salter (S. 3)	Strawn	7 19
Feather sorting					Total All	
Carding, etc., of buttons, etc.		To build			dense!	
Stuffed toys						
Basket making		THE STATE OF		a lower land	The state of	
Chocolates and sweetmeats	77 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7					
Cosaques, Christmas stockings, etc				Sur Just 1	lane/i	
Textile weaving					THE PARTY	
Lampshades						
Total	28	_		_	_	-

Verminous Premises. Number of Inspections Number of Premises disinfested by the Department 401 Warning letters sent to tenants ... 46 Warning letters sent to owners ... 13 Reports to Medical Officer of Health 14 13 Reports to Housing Department . . Other Letters sent ... Houses Disinfested by Department. Bed Bugs .. Dwellinghouses .. 163 Other premises ... Cockroaches . . Dwellinghouses 182 Other premises 27 Fleas Dwellinghouses ... Other premises Miscellaneous .. Dwellinghouses .. 15 Other premises ...

The houses of all tenants about to be re-housed from slum clearance areas are inspected immediately prior to removal. Where evidence of vermin is found, the bedding and furniture is sprayed with liquid insecticide. The method has proved very effective, and cases of infestation of replacement houses are rarely found.

Rag, Flock and Other Filling Materials Act, 1951.

Number of Premises Registe	ered			7	
Number of samples taken				18	
Number Formal				_	
Number Informal				18	
Number conforming to stan	dard			18	
Fertilisers and Feeding Stuffs Act Number of Samples taken	, 1920.			20	
Number of Samples taken				20	
Number Formal				1	
Number Informal				19	
Number Conforming to De	Number Conforming to Declaration				
Number Not Conforming to	Number Not Conforming to Declaration				

The 2 samples found not to conform to declaration were 1 Informal and 1 Formal 'follow-up' sample of Fertiliser which was found to be a Compound Fertiliser containing phosphates insoluble in water, the presence of which was not stated on the Statutory Declaration. In consequence, the facts were reported to the Ministry of Agriculture, Fisheries and Food, who instructed that the matter be forwarded to the responsible Officer of the area where the Fertiliser was manufactured.

This was done, and a report later received intimated that an addition would, in future, be printed on the Statutory Declaration to include 'Insoluble Phosphates'.

Public Swimming Baths-Water Samples.

90 samples were taken on 23 occasions. On each occasion, a sample was taken at the inlet (shallow) and outlet (deep) ends of the bath. All samples, with the exception of 4, proved to be satisfactory.

The attention of the Baths Superintendent was drawn to these unsatisfactory samples.

Pharmacy and Poisons Act, 1933. Poisons Rules, 1952.

94 Premises with the persons nominated to sell poisons under the above rules, are now registered.

Upon registration, each person nominated was informed by letter of the need for separation of the commodity from foodstuffs, and where this was impossible, to store same upon the floor of the shop.

An inspection was made at each of the premises during the year.

Pet Animals Act, 1951.

(Market Stall)

40 Inspections of these premises were carried out during the year.

ATMOSPHERIC POLLUTION

In order to assess the amount of soot and dust deposited on the town, ten deposit gauges are installed and sited at strategic points—five in the industrial belt along the north side of the town, and five in the non-industrial zones. The following table gives the findings:-

DEPOSIT GAUGE RECORDINGS—TOTAL DEPOSITS IN TONS PER SQUARE MILE 1960 COUNTY BOROUGH COUNCIL OF MIDDLESBROUGH

Month	Stock- ton Road	Gas Works Cannon Street	Easter- side Road	Harbour Master's YardDocks	South Bank Road	Caldicotes School Brambles Farm (Formerty Millbrook Avenue)	The Gables Marton Road	Acklam Hall School	Special School Roman Road	Parkside
January	17.57	29.66	19.45	27.28	44.90	29.92	20.55	12.38	21.70	29.15
February	12.00	18.07	7.18	14.88	20.21	14.63	10.70	8.41	10.65	12.72
March	12.31	13.58	9.01	21.62	31.47	14.07	12.73	7.76	12.33	17.26
nril	13.49	15.61	10.58	15.47	23.40	12.92	12.72	6.30	14.09	13.79
Mav	14.40	18.34	11.51	14.96	18.77	15.64	13.05	10.55	14.22	1
une	18.53	14.47	7.47	13.18	18.06	23.70	11.68	8.27	10.42	17.60
July	16.80	30.00	12.29	24.75	24.41	22.60	17.98	16.70	14.34	22.36
ugust	23.32	26.53	21.13	22.67	30.85	37.97	19.24	12.39	17.59	18.65
September	12.71	25.18	11.12	22.25	22.90	30.67	16.48	9.12	13.16	18.87
October	21.44	47.04	14.16	31.88	40.88	33.79	17.68	13.66	32.95	21.76
November	15.97	20.78	12.13	22.89	18.07	21.39	16.69	8.23	11.81	16.83
December	17.88	26.98	13.97	24.18	1	23.00	18.13	9.42	16.34	20.10
Monthly							100			100
Average 1960	16.37	23.85	12:50	21.33	26.72	23.36	15.64	10.26	15.80	19.01
1959	14.87	20.52	10.22	20.98	22.90	21.71	12.08	8.65	10.17	13.30
1958	21.58	24.73	13-86	27.22	34.38	27.39	16.85	10.78	13.94	19.07
1957	20.25	20.68	1	23.08	37.73	20.72	14.19	13.35	12.28	16.91
1956	23.65	23.09	1	23.42	39.26	26.24	18.81	10.47	20.62	23.21
Monthly	1111		Ha.							
over 5 years	19.34	22.57	12.19	23.21	32.20	23.88	15.51	10.70	14.56	18.30

Industrial Pollution.

The various soot deposit gauges in use throughout the town showed an increase in deposit in 1960 as compared with the previous year. At first sight this appears disappointing, but it must be remembered that 1959 was remarkable for a long dry summer, and experience has shown that in such weather conditions recorded deposit tends to be reduced. A comparison of annual deposits is never an entirely satisfactory method of estimating trends because of the difficulty of the occurrence of short term exceptional circumstances, and it is usual to place more reliance on a comparison of averages over a longer period of time.

The following table shows the average monthly deposit for the previous five years, at the end of each of the years enumerated :—

1960	 19.86	Tons	per	Square	Mile
1959	 21.4	,,	,,	,,	,,
1958	 22.58	,,	,,	,,	,,
1957	 22.64	,,	,,	,,	,,
1956	 24.21	,,	,,	,,	,,
1955	 24.34	,,	,,	,,	,,
1954	 24.45	,,	,,	,,	,,

It seems clear that there has been a definite reduction in the extent of atmospheric pollution since the introduction of the Clean Air Act in 1956, and that despite occasional fluctuations, the trend is definitely towards a decrease.

During the year some trouble was experienced from a new process being carried out in a local works. Upon investigation it was found that the process concerned was one which came under the control of the Alkali Inspectorate. The work which was being carried out was of an experimental nature, and it is understood that before this process comes into regular use, the provision of grit and dust arrestors of the most efficient type available, will be demanded.

Black smoke emission from railway engines continued to be noted during the year, and appropriate representations were made to British Railways. Although these representations have an effect in ensuring that greater care is taken in firing locomotives, it is realised that the ultimate solution depends upon the replacement of the coal fired steam engines.

Considerable smoke nuisance has arisen from time to time as a result of the use of mobile steam cranes. One large firm whose cranes were a frequent cause of nuisance has, as a result of our representations, decided to convert their coal fired steam cranes to oil firing.

A notice was received during the year of intention to install a new type of incinerator at a works in course of construction. In view of the difficulty which has been experienced in the past from various types of small incinerators, the proposals were given very thorough examination. Enquiries were made from a number of Local Authorities in whose areas similar incinerators were already working, and arrangements were made for officers of the Department to see one in operation. As a result of these investigations it seemed as though the incinerator would operate within the requirements of the Clean Air Act. Installation is now awaited. If the appliance fulfils the high standards expected of it, it may be possible to recommend its use at other premises to overcome what have up to now proved very difficult problems.

There is still much work to be done in the field of industrial pollution, but there is no doubt that industry is alive to the importance of reducing atmospheric pollution, and there is an increasing tempo in the steps which are being taken to bring this about. A grit and dust arrestor of the type referred to earlier, can cost up to £150,000; the replacement of coal fired shunting engines by diesel locomotives requires considerable capital expenditure, and work of this nature must be programmed ahead and carried out in stages. More and more firms are preparing programmes of this nature, and a close liaison exists between the officers of the Local Authority and the Alkali Inspectorate, which should ensure that those firms which have not yet prepared schemes will do so.

Domestic Smoke Control.

During the year, the Middlesbrough (Saltersgill, Beechwood and Easterside) Smoke Control Order came into operation. At that time, the number of houses in the area was 1,270, of which 1,154 are Council Houses and 116 privately owned houses.

By the time the Order came into operation the necessary alterations and adaptations of fireplaces had been carried out, and steps were taken to ensure that householders would experience the minimum of difficulty in getting used to the new conditions. Advisory leaflets were prepared and distributed; discussions were held with local fuel merchants to ensure the delivery of suitable types of smokeless fuel, and thanks to the co-operation of the Housing Committee and the Northern Gas Board it was possible to arrange practical demonstrations in the technique of burning smokeless fuel.

Some problems were met with at first, most of them arising from incorrect fitting of replacement grates, but no cases of contravention of the Order have been experienced.

Survey work commenced on the Middlesbrough No. 2 (Acklam and Brookfield) Smoke Control Area, and before the end of the year the 1,866 premises in the area had been inspected and the Sanitary and Baths Committee had recommended the submission of the Order to the Minister, for approval.

Publicity.

Arrangements were made for a Mobile Clean Air Exhibition to visit Middlesbrough in December. The exhibition was staged for two days in the town centre, and for two days in the proposed smoke control area at Acklam and Brookfield. Attendances at all sites were very good, and a particularly keen interest was shown by the residents of Acklam and Brookfield.

SECTION F

HOUSING.

Number of new houses erected in the Borough during the year :-

(1)	Erected by the Local Author	ority	 	412
(2)	Erected by other persons		 	403
(3)	Houses demolished			291

The ward distribution of the new houses referred to is as follows:-

Acklam Ward		 		 390
Ayresome Ward		 		 1
Berwick Hills War	rd	 		 2
Grove Hill Ward		 		 21
Linthorpe Ward		 		 4
Park Ward		 		 2
St. Hilda's Ward		 		 45
Thorntree Ward		 		 16
Tollesby Ward		 		 331
Whinney Banks W	/ard	 		 3
		Т	otal	 815

Housing Statistics-Repairs to Dwelling houses.

Unfit houses made fit and houses in which defects were remedied:—

	By owner	By local authority
After informal action by local authority	 1,068	_
After formal notice under:		
(a) Public Health Acts	 970	3
(b) Sections 9 and 16, Housing Act, 1957	 15	2
Under Section 24, Housing Act, 1957	 _	_

Certain work completed during the year referred to notices served in the previous year.

Full information of Housing Procedure is submitted to the Ministry quarterly.

Housing Act, 1957.	
Section 17: Sub-Section 1.	
Number of Houses in respect of which a Closing Order was made	10
Number of Houses in respect of which a Demolition Order was made	11
Number of Houses demolished as a result of a Demolition Order	19
Section 18: Sub-Section 1.	
Number of underground rooms in respect of which a Closing Order was made	_
Overcrowding.	
During the year, 64 visits were made to houses known overcrowded.	n to be
Rent Act, 1957.	
During the year, the following action has been taken un First Schedule :—	der the
Part I-Applications for Certificates of Disrepair	г
Number of applications for Certificates	48
Number of decisions not to issue certificates	_
Number of decisions to issue certificates:— (a) in respect of some but not all defects	42
(b) in respect of all defects	11
Number of undertakings given by landlords under paragraph 5 of the First Schedule	38
Number of undertakings refused by Local Authority under proviso to paragraph 5 of the First Schedule	_
Number of certificates issued	7
Part II—Applications for Cancellation of Certificates	s
Applications by landlords to Local Authority for cancellation of certificates	6
Objections by tenants to cancellation of certificates	2
Decisions by Local Authority to cancel in spite of tenant's	
objection	
Certificates cancelled by Local Authority	3

Common Lodging Houses.

Number of Houses					5
Number of Keepers					5
Number of Inspections					10
Number of Lodgers who nightly	can		ommoo	lated	207
Number registered during	the	year			_
Number closed or discont	tinue	d durin	g the y	ear	_
Number of Notices a cleanliness, etc.	nd	Letters	1	pairs,	7

SECTION G

INSPECTION AND SUPERVISION OF FOOD

Bacteriological Examination of Raw Graded Milk.

405 Samples were procured during the year and submitted for examination. 288 or 71.11% were found to satisfy the statutory test, and 117 or 28.89% unsatisfactory.

Summary	•
---------	---

Grade	Number Taken	%	Number Satisfactory	%	Number Un- satistactory	%
(Farm Bottled) . T.T. (Farm Bottled).	. 9	2.22 9.88	7 31	77.78 77.5	2	22.22 22.5
Tuberculin Tested .	. 356	87.90		70.22	106	29.78
Total .	. 405	100	288	_	117	_
				-	-	-

Samples were found to be satisfactory as follows :-

On 1st Test	 	 	 237
On 2nd Test	 	 	 37
On 3rd Test	 	 	 9
On 4th Test	 	 	 2
On 5th Test	 	 	 2
On 6th Test	 	 	 1

Total	 288

						-	_
Origin			No. of rs Samples	Satis No.	factory	Unsatis No.	factory
Inside the Borough Outside the Borough		2 95	8 397	7 281	87.5 70.78	1 116	12.5 29.22
Total		97	405	288	71.11	117	28.89

Analysis of Unsatisfactory Samples :-

Allarysis of Clisatis	3244	···	, Dai	iipies .	Winter	Summer	Total
Decolourised	in	1	hour		 1	4	5
,,	,,	1	,,		 1	8	9
19	,,	11	.,		 2	9	11
,,	,,	2	,,		 4	8	12
,,	,,	21	,,		 3	6	9
	,,	3	,,		 3	6	9
,,	,,	31	,,		 5	10	15
	,,	4	,,		 4	13	17
	,,	41			 4	11	15
	,,	5	,,		 12	-	12
	,,	51	,,		 3	_	3
		-			_	_	
				Total	 42	75	117
					_		
Total samples take	en i	n p	eriod		 212	193	405
Percentage unsatis	fac	tory	1		 19.82%	38.86%	

Of the 117 samples of Tuberculin Tested Milks unsatisfactory, 116 samples were from outside the Borough, having been procured from 60 producers. Notification of the results was given to the County Milk Regulations Officer, Ministry of Agriculture, Fisheries and Food.

From 35 other farms outside the Borough, a total of 91 samples were procured, and in every case the milk was satisfactory.

Summary of Bacteriological Milk Samples taken over last 5 years.

				Not	
Year	Total	Satisfactory	%	Satisfactory	%
1956	466	377	80.90	89	19.10
1957	452	329	72.79	123	27.21
1958	414	325	78.50	89	21.50
1959	359	296	82.50	63	17.50
1960	405	288	71.11	117	28.89
Total	2,096	1,615	77.05	481	22.95

The increase in the percentage of unsatisfactory samples is disconcerting and it would appear that Farmers are not paying the care and attention to clean milk production which is desirable.

Rinse Samples.

65 samples were procured during the year from the 5 dairies in the Borough where milk is bottled. In each case these dairies use one or more automatic bottle sterilizers. Samples were procured from each sterilizer; 7 in all, and the average counts varied from 5 to 710 per pint bottle.

The sterilizing machines at the dairies have functioned very satisfactorily during the year. Nevertheless one new sterilizer is being fitted making the fourth new machine fitted in two years.

Pasteurised Milks.

Bacteriological Tests	Number Submitted	Number Satisfactory	Number Unsatisfactory
Pasteurised T.T. Pasteurised	 148 144	145 142	3 2
Total	 292	287	5

Pasteurised Milk.

2 Sample failed to pass the Phosphatase Test.

3 Samples failed to pass the Methylene Blue Test.

The 2 samples which failed to pass the Phosphatase Test (improperly pasteurised) were also submitted to the biological test and both were subsequently reported to be negative.

Included in these figures are 40 samples of Pasteurised Milk supplied as drinking milk to school children. Of these samples, 1 failed to comply with the Methylene Blue Test.

Pasteurised Milks-5 year Summary.

		Pasteu	rised	T.T. Pasteurised			
Year	Number Taken	Number Satisfactory	Number Un- satisfactory			Number Un- Satisfactory	
1956	136	126	10	93	92	1	
1957	181	165	16	104	102	2	
1958	180	173	7	106	103	3	
1959	140	138	2	124	122	2	
1960	148	145	3	144	142	2	
Total	785	747	38	571	561	10	
	Tota	Total taken		. 1	,356		
	Satis	factory		. 1	,308 (96.46	%).	
	Unsatisfactory				48 (3.54		

Sterilized Milks.

Bacteriological Tests	Number	Number	Number
	Submitted	Satisfactory	Unsatisfactory
	53	53	-

Sterilized Milks-5 year Summary.

Year		Number Taken	Number Satisfactory	Number Unsatisfactory
1956	 	 46	46	_
1957	 	 47	47	_
1958	 	 49	49	_
1959	 	 50	50	_
1960	 	 53	53	_
				_
	Total	 245	245	-

Biological Examination of Milk.

(a) Tubercle Bacilli.

Grade		Number of Samples Submitted	Number free from Tubercle Bacilli	Number Containing Tubercle Bacilli	
Channel Island		 5	5	_	
T.T. (Farm Bottled) .		 14	14	_	
Tuberculin Test	ed	 121	121	_	
Pasteurised		 2	2		
				_	
T	otal	 142	142	_	
			-		

(b) Brucella Abortus. (Ring Test) Number Positive Number of Number Samples Grade Submitted Negative Channel Island 5 2 1 7 2 T.T. (Farm Bottled) 30 16 7 223 10 12 Tuberculin Tested ... 267 15 12 20 19 Total 302 241 10

(c) Brucella Abortus. (Biological Test).

Grade		Number of Samples Submitted	Number free from Brucella Abortus	Number Containing Brucella Abortus
Channel Island		5	4	1
T.T. (Farm Bottled)		13	13	_
Tuberculin Tested		60	57	3
Т	otal	78	74	4
		Windows Control of the Control of th	-	-

A commencement has been made this year by the Public Health Laboratory Service with the Ring Test to milk samples for the purpose of checking the freedom of milk from the organism Brucella Abortus, the cause of Undulant Fever in man.

In the past, when milk was examined biologically, it was done by inoculating Guinea Pigs (Cavies) and subsequently it was possible to ascertain if each sample was free from Tubercle Bacilli and Brucella Abortus. With the almost complete eradication of Tubercle Bacilli from milk, this method became very wasteful of Guinea Pigs, and milk sampled for the presence of Tubercle Bacilli was pooled, thus enabling one Guinea Pig to be used for 10 samples. Subsequently, a negative result indicated the absence of Tubercle Bacilli in all 10 milk samples. Unfortunately, it is not possible to adopt the same practice in relation to the examination for Brucella Abortus, and the Ring Test has therefore been evolved. This test is not an inoculation test, and any positive results must be sent forward for subsequent inoculation into Guinea Pigs. From the above table, however, it will be seen that almost 80% of the samples were eliminated by the Ring Test, thus making it necessary to apply only 20% to the Inoculation Test. 51 Samples were in fact submitted to the Inoculation Test, and 47 found to be Negative; 4 therefore being Positive.

All the Positive Biological Sample results were immediately reported to the Divisional Veterinary Officer of the Ministry of Agriculture, Fisheries and Food for investigation at the farm where the milk was produced.

As the milk from each of these farms was subsequently Pasteurised at the receiving Dairy in Middlesbrough, it was not necessary to take any further action under the Milk and Dairies Regulations.

Biological Examination of Milk :- 5 Years' Summary.

	Tube	rcle Bacilli		Brucella	a Abortus			
	Number ubmitted	Number Negative	Number Positive	Number Submitted	Number Negative	Number Positive		
1956	202	202		202	192	10		
1957	161	161	-	161	157	4		
1958	132	132		122	116	6		
1959	78	78		20	20	-		
1960	142	142	_	78	74	4		
Total	715	715	_	583	559			
	-	-	-		-			

Bacteriological Examination of other Foodstuffs.

During the year, 35 samples of miscellaneous foodstuffs were procured and submitted to the Public Health Laboratory for examination. Only 2 of these samples were taken in connection with suspected outbreaks of Food Poisoning. With the exception of 3 samples of Mussels, all the foodstuffs were found to be free from pathogenic organisms. In the case of the samples of Mussels, it was reported that they contained more than 50 presumptive coliforms and faecal coliforms, and this was unsatisfactory according to the grading of the Worshipful Company of Fishmongers. The facts were reported to the Authority in whose area the Mussels were produced.

The list of Foodstuffs examined, is as follows :-

Cake—Containing	Frozen	1	Whole		Egg		1	
Coconut—Desiccat	ted						11	
Cream—Fresh				٠			3	
Cream—Imitation							2	
Egg—Albumen Cr	ystals						1	
Egg-Albumen Fro	ozen						1	
Egg-Frozen Who							2	
Egg-Liquid Whol	e						1	
Y . (1 11'							1	
M D'.							1	
Mussels							4	
Periwinkles							4	
Salmon—Tin							1	
Soup							2	
			Tota	1			35	

The Milk (Special Designations) (Pasteurised and Sterilized Milk) Regulations, 1949.

The following licences have been granted during the year under the above Regulations (concerning the 388 establishments from which milk is sold):—

					1959	1960
1.	Pasteurisers				5	5
2.	Sterilizers				. 1	1
3.	Pasteurised (Dealers)				207	229
4.	Sterilized (Dealers)				336	348
5.	Pasteurised Dealer (St	upple	mentary)	1	1
			Total		550	584

In future these licences will be renewed over a period of 5 years.

The Milk (Special Designation) (Raw Milk) Regulations, 1949.

The following licences have been granted during the year under the above Regulations :—

			1959	1960
1.	Tuberculin Tested (Dealers)	 	27	35

In future, these licences will be renewed over a period of 5 years.

The Milk and Dairies General Regulations, 1959.

There are 12 Distributors registered under the above Regulations.

Purveyors of Milk.

Bottled Milk-5 Year Summary.

		1956	1957	1958	1959	1960
1.	Pasteurised Milk	 149	162	183	207	229
2.	Tuberculin Tested	 23	27	32	27	35
3.	Sterilized	 314	303	328	336	348
	Total	 486	492	543	570	612

Ice Cream Producers and Dealers.

Section 16, Food and Drugs Act, 1955, makes it obligatory upon all persons dealing with Ice Cream to be registered; the number on the register being:—

Producers	 	 	 13
Dealers	 	 	 442

There are also 64 Mobile Sales Units operating in the Borough selling Ice Cream.

During the year 72 Certificates were issued, 41 being new Dealers, and 31 changes of Proprietors in the Dealers' Register. 33 Registrations were withdrawn, as the sale of Ice-Cream had been discontinued.

The results of the analysis of all samples procured, were forwarded to manufacturers. "Follow-up" samples were taken as necessary, after discussing methods of manufacture so far as producers in the Borough were concerned.

A summary of Ice-Cream Producers and Dealers over the last 5 years is as follows:—

		1956	1957	1958	1959	1960
Producers		 17	16	15	13	13
Dealers (Shops and	Vans)	 465	483	482	496	506
	Total	 482	499	497	509	519
		-				

Ice-Cream.

The number of manufacturers of Ice Cream has remained static during the year, and careful supervision has been carried out entailing 88 visits to manufacturers' premises, and 343 to dealers' shops. The provisions of the Ice Cream (Heat Treatment) Regulations, 1947, have in the main been complied with, and where minor contraventions have been found, ready co-operation has been given to rectify them. The complete re-building of the largest manufacturer's factory on an adjoining site is now nearing completion, and production in the new factory will commence early in 1961.

Ice Cream Sampling.

Bacteriological Examination.

128 Samples of Ice Cream were procured from 19 Producers; 110 were found to be satisfactory and 18 unsatisfactory as indicated in the following tables:—

Table 1. Results of "Cold-Mix" Samples.

Time taken to reduce	I	rovision	nal Gra	ding	
Methylene Blue (hrs.)	No.	1	2	3	4
41	13	13	_	_	
$4 - 2\frac{1}{2}$	1	_	1	_	
2 - 0	1	_		1	-

All the above samples were from 4 Local producers.

Table 2. Results of "Hot-Mix" Samples.

Time taken to reduce	Provisional Grading					
Methylene Blue (hrs.)	No.	1	2	3	4	
41	82	82	_	_	_	
4 2 1/2	14		14	_	_	
2 — Õ	17	_	_	14	3	

Table 3.

Results of "Follow-up" Samples of those given Grading 3-4 (after supervision in local cases).

Time taken to reduce	Provisional Grading						
Methylene Blue (hrs.)	No.	1	2	3	4		
41	12	12	-		_		
4 — 21	1	_	1				
2 — 0	4	_	_	3	1		

(It was not possible to follow up 1 unsatisfactory sample).

Table 4.

Summary Results of All Samples Taken

	Provisio	onal Gi	rading	
No.	1	2	3	4
128	95	15	15	3

Table 5.

Showing Results of Samples Taken which were Produced Inside and Outside the Borough.

Where			Provis	ional	Grading	
Produced	Producers	No.	1	2	3	4
Outside Borough .	6	35	31	3	1	_
Inside Borough .	. 13	93	64	12	14	3
Total .	. 19	128	95	15	15	3

Summary over Last 5 Years.

				1956	1957	1958	1959	1960
Total Tak	en			90	107	100	127	128
Provisiona	al Grad	le 1		77	71	65	86	95
,,	,,	2		8	22	20	19	15
,,	,,	3		4	11	13	12	15
,,	,,	4		1	3	2	10	3
Percentage	e Satisf	actor	y	94.44	86.92	85.00	82.68	85.94

Drinking Water Samples.

During the year, 24 samples of Drinking Water were procured from dwellinghouses and drinking fountains throughout the town. 22 of these were given Class 1 and were therefore satisfactory, 2 were given Class 2.

All drinking water which is chlorinated should attain Class 1. The 2 samples given Class 2 were considered to be unsatisfactory, and the Tees Valley and Cleveland Water Board were notified, and the water mains subsequently flushed.

Meat and Other Foods.

Slaughter of Animals Acts, 1958.

There are now 35 persons on the Register of Licensed Slaughtermen. Of these, only 14 are regularly employed at the 3 Slaughterhouses.

Slaughterhouses.

December, 1960			 	2
Public Slaughterhouses			 	1
Number of Inspections (
houses-see Public H	ealth	(Meat)		
Regulations)			 	1,862

Public Health (Meat) Regulations, 1924/52.

Qualified Inspectors are employed wholetime upon inspection at the Public Abattoir in Stockton Street and the Co-operative Society's Abattoir in Saltwells Road. In addition, inspections are made as necessary at St. Luke's Hospital where a small abattoir is in use solely for the production of meat for this hospital.

The following have been slaughtered and inspected before removal from the slaughterhouses :—

		Public Abattoir	Saltwells Road Abattoir	St. Luke's Abattoir	Total
		29	32	_	61
		2,534	1,486	_	4,020
		1,392	842	51	2,285
		1,014	1,197	2	2,213
		344	225		569
		7,889	3,281	41	11,211
Boars		987	696	6	1,689
		18,371	6,509	193	25,073
		_	_		_
		26	_	_	26
tal .		32,586	14,268	293	47,147
	 Boars	Boars	Public Abattoir 29	Public Abattoir 29 32	Public Abattoir

Summary of Animals Slaughtered during the last 5 years.

Total

		1956	1957	1958	1959	1960
Bulls		99	94	81	64	61
Bullocks		3,868	4,382	3,618	3,116	4,020
Cows		1,614	1,856	2,212	1,959	2,285
Heifers		3,083	2,883	3,169	2,220	2,213
Calves		1,783	1,161	631	484	569
Sheep		21,665	20,660	20,359	26,979	25,073
Pigs		15,558	15,408	14,824	13,101	12,900
Horses			_	_		_
Goats		-		21	-	26
То	otal	47,670	46,444	44,915	47,923	47,147

234,099

Carcases Inspected and Condemned.

		Cattle excluding Cows		Calves	Sheep and Lambs	Pigs	Horses	Goats
Number killed		6,294	2,285	569	25,073	12,900	_	26
Number Inspected		6,294	2,285	569	25,073	12,900	_	26
ALL DISEASES EX TUBERCULOSIS CYSTICERCI								
Whole carcases condemned		8	20	13	85	18	_	_
Carcases of which so part or organ condemned		3,691	1,302	2	1,750	2,358		_
	ted		7					
Cysticerci		58.77	57.85	2.64	7.32	18.42		-
TUBERCULOSIS ONLY								
Whole carcases condemned		_	_	_	_	1	_	_
Carcases of which so part or organ v condemned		62	57	1	_	270	_	_
Percentage of the nu ber inspected affect with tuberculosis	ted	0.98	2.54	0.18	_	2.1	_	_
CYSTICERCUS BOVIS								
Carcases of which so part or organ v condemned		76	12	_	_	_		
Carcases submitted treatment by refriation		11	2	_	_	_	_	_
Generalised and tota condemned	ally	_	_	_	_		_	

Of the 47,147 animals slaughtered, 37,421 or 79.39 % were found to be sound and unaffected by diseases or conditions of any nature; 391 or 0.82 % were found to be affected with Tuberculosis and 9,335 or 19.79 % were found to be affected with other diseases or conditions.

Discuss or Condition Cov Inches Post of the condition Multicometed by the condition Fig. 10.14 Post of the condition Multicometed by the condition Fig. 1.15 Post of the condition <															
Bed Other Bed Ded De	sease or Condition		Co	W	Other	Pork	Mutton	Veal	Offal	Fish	Rabbits	Canned	Vege-	Misc.	Totals
1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	nonament to access		Beef	Offal	Beef					1014	2000000	Goods	tables		
Series 1. 1	:	:	-	1,124	34	158	188	1	3,171	1	ı	1	ı	1	4,675
14 16 173 176 175 176 175 176 175 176 175 176		:	1	90	267	n	1	1	204	1	1	1	1	1	405
Sovier 1, 2, 2, 1, 2, 2, 3, 2, 4, 4, 6, 3, 6, 1, 1, 1, 2, 4, 4, 6, 1, 1, 1, 1, 1, 2, 4, 4, 6, 1, 1, 1, 1, 1, 2, 4, 4, 6, 1, 1, 1, 1, 1, 2, 2, 3, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	sisoni	: :	1	16	100	116	73	65	76	11	11	11	11	11	360
Sovier 10-15		:	1	1	326	06	1	1	1	ı	1	1	1	ı	416
Sovier 1.53 1.54 1.55 1.55 1.55 1.55 1.55 1.55 1.55	iration	:	15	62	32	18	1	1	221	1	1	1	1	1	315
Sovies 1.54 1.55 1.56 1.54 1.55 1.55 1.55 1.55 1.55 1.55 1.55		:	53	13	163	39	6	1	15	ı	1	1	1	1	264
1,941 413 410 41		:	1	213	1	1	1	1	430	I	1	ı	1	1	543
Sovies 1,544 1,570 758 1,442 8.2 527 491 33 9,576 1,192 1,194 463 200 440 388 210		:	11	30	11	1	1 1	11	208			1 1	11	11	303
Sovies 1, 1, 541	ition	: :		2	1,709	758	1,412	82	527	491	33	9.576	1	1,192	11.
Sovies: 1,941 4655 200 4540 388 2,10	13	::	1	118	1	9	1	1	09	1	1	1	ı	1	184
Sovies 162 168 172		:	1,941	463	200	440	388	1	210	I	١	1	1	ı	3,642
Sovies: 1, 1, 27	: ::	:	1	22	1	352	36	1	237	1	1	1	1	1	647
Sovies 1, 297 1, 292 2	:	:	1	24	1	1	1	1	10	1	ı	1	1	1	34
Sovis 1,297 1,297 1,297 1,294 1,294 1,294 1,294 1,297 1,297 1,297 1,294	iration	:	1	732	1	1	1	i	3,622	ı	I	ı	1	1	4,354
Sovies 1.297 7.922	:	:	1	44	1	1	1	1	2 000	I	1	1	1	1	000
Sovis 1,297 7,922	uon	:		ŧ,	1	7	35		2,039	11	1 1				2,105
Sovis 1,297 7,922		:	324	457	010	11	2		153						1 144
Sovis 1,297 7,922		:	1	1	2	11	11	145	30		11	1	!	1	175
1,297			1	1		300	1	2	3	ı	1	1	1	1	300
500 by 100 by		: :	1.297	7.922	1	1	244	1	99	١	1	1	1	1	9.529
35ovis 162 148 — 416 — 20 — — — 10 —		:	1	1	1	724	1	1	44	ı	1	1	1	1	768
976 100 416 85 120 139 17 18 18 18 18 <t< td=""><td>:</td><td>:</td><td>1</td><td>48</td><td>1</td><td>1</td><td>1</td><td>1</td><td>18</td><td>1</td><td>1</td><td>1</td><td>1</td><td>1</td><td>99</td></t<>	:	:	1	48	1	1	1	1	18	1	1	1	1	1	99
Sovis	: :	:	926	100	ı	416	10	ı	50	I	1	ı	!	1	1,512
Sowis 162 168 712 — 1,264 —	eath	:	1	12	1	1	60		100	1	1	1		1	8.5
300 sovies 150 548 603 1741 1764	:	:		32		288	35	1	117	ı	1	1	1	1	472
Sovies	Dropsy)	: :	323	150	548	1	603	1	357	1	1	ı	ı	!	186'1
sovis 162 168 712 — 1,264 — — 1,264 — — — 1,264 —	Sprie		1	ı	1	1	1	1	741	1	1	I	1	1	741
S	sticercus Bovis	:	162	891	712		1	1	1.264	1	1	1	1	1	2,306
2,948 — 5,948 — 5 — 17,769 — — 17,769 — — — 17,769 — <td>ninococcus</td> <td>: :</td> <td>! </td> <td>01</td> <td>! </td> <td>1</td> <td>1</td> <td>1</td> <td>56</td> <td>1</td> <td>1</td> <td>1</td> <td>1</td> <td>1</td> <td>99</td>	ninococcus	: :	!	01	!	1	1	1	56	1	1	1	1	1	99
598 134 5 — 1,787 — — 1,787 — <	ike	:	1	2,948	1	1	1	1	17,769	1	1	1	1	1	20,717
888 3104 1.003	classified	:	18	32	1	2	1	1	1,707	1	1	I	1	1	1,744
1,003 327 1,003 32	8	:	298	104	18	1	10	1	158	1	-	ı	1	1	860
1,000 1,00	B	:	888	327	1,003	1	146	1.1	1,087			1			3,400
314 81 406 1,096 1,596 1,596 1,596 1,596 1,596 1,596 1,596 1,596 1,596 1,596 1,596 1,596 1,568 1,568 1,568 1,916 1,568 1,916 1,9		:	3,0,1	034	33	44	205		2 533						4,616
380 80 1,096 95 85 187 — <t< td=""><td></td><td>:</td><td>314</td><td>100</td><td>406</td><td>1</td><td>157</td><td>215</td><td>216</td><td></td><td>11</td><td>11</td><td>11</td><td>11</td><td>1,389</td></t<>		:	314	100	406	1	157	215	216		11	11	11	11	1,389
252 951 1,288 4,160 53 109		: :	380	80	1.090	1.096	98	85	187	1	1	ı	1	1	3.013
ioma)	518	: :	252	951	1.288	4,160	1	53	109	1	1	ı	1	1	6.813
ioma) 24 1,568	njury)	:	183	52	244	029	120	1	79	I	1	ı	1	ı	1,348
ioma) 24 1,568 — — — — 36 — — — 36 — — — — — — — — — —	: ::	:	1	1	913	1	1	1	119	1	1	1	ı	I	1,032
30 191 68 97 63 169 —	asis (Angioma)		24	1,568	1	1	1	1	36	1	1	1	1	1	1,628
8,766 19,415 9,877 9,752 3,877 708 41,218 491 33 9,576 — 1,192 16,345 15,254 8,732 10,654 5,458 276 40,560 1,335 60 19,951 870 2,681 18,719 25,537 12,223 7,722 2,593 367 52,122 1,210 30 14,699 7,840 846 18,135 15,305 10,678 1,973 805 33,6156 2,224 60 13,164 5,040 7,890 15,648 15,648 19,733 805 33,6117 2,224 12,117 88,144 2,948	:	:		200	101	89	07	159	7091	11		11		11	600
8,766 19,415 9,877 9,752 3,877 708 41,218 491 33 9,576 — 1,192 16,345 15,254 8,732 10,654 5,458 276 40,560 1,335 60 19,951 870 2,681 18,719 25,537 12,223 7,722 2,593 367 52,122 1,210 30 14,699 7,840 846 18,135 15,876 10,677 2,593 36,756 36,756 13,164 5,040 7,890 15,648 15,648 19,787 19,73 805 33,611 2,224 12,117 88,144 2,948		:		-	121	000		00	101						600
16,345 15,254 8,732 10,654 5,458 276 40,560 1,335 60 19,951 870 2,681 18,719 25,537 12,223 7,722 2,593 367 52,122 1,210 30 14,699 7,840 846 28,603 18,135 15,805 10,017 2,506 874 36,756 2,521 60 13,164 5,040 7,890 25,508 15,645 12,307 9878 1,973 805 33,611 2,224 12,117 88,144 2,948	STN	:	8,766	19,415	6,877	9,752	3,877	208	41,218	491	33	9,576	ı	1,192	104,905
28,603 18,135 15,805 10,017 2,506 874 36,756 2,521 60 13,164 5,040 7,890 25,908 15,645 12,307 98,8 19,73 805 33,611 2,224 — 12,117 88,144 2,948	for 1959	:	16,345	15,254	8,732	10,654	5,458	276	40,560	1,335	99	19,951	870	2,681	122,167
2010 1.2.10			28,603	18,135	15,805	10,017	2,506	874	36,756	2,521	88	13,164	5,040	7,890	141,371

Summary.

	Total No. of Animals Slaughtered	Diseases o	by r	No. Affected by Tuberculosis	%	No. Affected by other Diseases or Conditions	%
1950	6 47,670	40,400	84.74	1,540	3.23	5,730	12.02
195	7 46,444	37,905	81.61	1,632	3.51	6,907	14.88
1958	8 44,915	34,646	77.14	1,487	3.31	8,782	19.55
1959	9 47,923	38,877	81.12	784	1.64	8,262	17.24
1960	0 47,147	37,421	79.39	391	0.82	9,335	19.79

Particulars of Surrenders and Seizures of Unsound Animals and Meat.

Number of Voluntary Surrenders of diseased carcases or part carcases or internal organs. Number of Seizures (with subsequent destruction) of diseased carcases or part carcases or internal organs.

			*********	o a Berrana	
Year	Tuberculosis	Other Conditions	Tuberculosis	Other s Conditions	Totals
1956	1,540	5,729	_	1	7,270
1957	1,632	6,907	_	_	8,539
1958	1,487	8,782		_	10,269
1959	784	8,262	-		9,046
1960	391	9,335		_	9,726
	C		Part Carcases affected	Organs only affected	
	1956 1957 1958 1959 1960	138 151 149 143 145	705 862 936 653 572	6,427 7,526 9,184 8,250 9,009	

Below is a list of food found to be unsound and unfit for human consumption. All were surrendered and destroyed. :—

			ected with		Diseases	-	
Species		No.	erculosis lbs.	or C	Conditions lbs.	No.	otal lbs.
		1,0.	103.	28	10,649	28	
Beasts		 -	60				10,649
Pigs		 1	58	18	4,429	19	4,487
Sheep & I	ambs	-	-	85	3,049	85	3,049
Calves		 _		13	652	13	652
Beef		 -	1,540	_	6,454		7,994
Pork		 _	4,102		1,163		5,265
Mutton		 _		-	828		828
Veal		 _	53	_	3		56
Offal		 _	1,060	_	59,573		60,633
Fish		 _		_	491		491
*Rabbits		 _			33		33
Tinned Go	oods	 -		4,328	9,576	4,328	9,576
Vegetables		 		_	_	-	
Miscellane	eous	 _	_	_	1,192	-	1,192
Totals	s		6,813		98,092		104,905
			(3.04 Ton	s)	(43.79 Tons)	(46	.83 Tons)

*All the above were voluntarily surrendered except one rabbit carcase which was found exposed for sale and was seized (see Magisterial Proceedings No. 20, Page 138).

Summary of Condemnations during last 5 years.

Year	Total Condemned Lbs.	Butchers' Meat Lbs.	Butchers' Meat affected by Tuberculosis Lbs.
1956	205,560	100,127	46,012
1957	141,371	112,696	51,113
1958	143,908	119,283	43,163
1959	122,167	97,270	23,058
1960	104,905	93,613	6,813

During the past five years, the incidence of Tuberculosis in animals slaughtered for human consumption was as follows:—

Year	Number of Animals Slaughtered	Number	Percentage
1956	47,670	1,540	3.23
1957	46,444	1,632	3.51
1958	44,915	1,487	3.31
1959	47,923	784	1.64
1960	47,147	391	0.80

Cysticercus Bovis.

A strict inspection was carried out in 1960 in accordance with the Ministry's instructions. 75 cases of Inactive Cysticercus Bovis were found, and 13 cases of Active infestation.

These 13 carcases were subjected to cold storage for 3 weeks in accordance with the Ministry's policy. After this period the carcases were released as being fit for human consumption.

Disposal of Meat Unfit for Human Consumption.

During the year, the Meat (Staining and Sterilisation) Regulations came into operation. The purpose of the Regulations is to ensure that condemned meat is properly disposed of. The previously operating arrangements at the Public Slaughterhouse were already close to the new requirements, and steps were taken to deal with the few items of detail necessary to achieve full compliance. At one other slaughterhouse the existing methods did not comply with the new Regulations, but as a result of representations made by the Department, arrangements were made for the disposal of the condemned meat in the same manner as at the Public Slaughterhouse.

Meat Distributor's Vehicles.

During the year, 16 inspections were carried out of vehicles used in connection with the distribution of meat. On the whole, these vehicles were maintained satisfactorily during the year.

ADULTERATION OF FOODSTUFFS.

Public Health (Preservatives, etc., in Food) Regulations, 1925-53.

During the year, 47 samples were analysed for the presence of preservatives, all being declared genuine.

Chemical Analysis of Food and Drugs.

397 Informal and 7 Formal samples were procured during the year. 273 of these samples were submitted to the Public Analyst as follows:—

ows :—				Informal	Formal
Almond (Flavour	ring)			 1	
Almonds (Groun				 2	
Almond Paste				 2 2	
Aspirin				 2	_
Bacon				 11	
Baking Powder				 1	
Bicarbonate of S				 1	
Boracic Acid Pov				 1	-
m				 1	
Brawn				 9	
Butter				 10	
Camphorated Oi	1			 1	
				 1	_
Cheese				 10	
Chocolate (Hot I	Drink			 1	
Cinder Toffee (M			ite)	 1	-
				1	
Coconut (Desicca				2	
Coffee				 1	
Condiment (Non	-Brew	red)		 12	_
Cream				 5	
Cream Cakes				 7	
				 1	
Custard Powder				 1	
Epsom Salts				 1	
Fish Cakes				 	6
				 1	_
Glacè Cherries				 1	_
Glucose Drink				 1	-
Ice Cream				 72	
Ice-Cream (Dair	v)			 5	_
Jam				 8	_
Jelly (Table)				1	_
Lard				10	
Lemonade				 5	_
Lemon Curd				 1	-
Lime (Drink)				 î	_
Margarine				 10	_
Marmalade				 1	
Marzipan				 1	_
maizipan				 1	15 30

				Informal	Formal
Meat Paste				 3	_
Meat (Potted)				 5	
Milk				 2	1
Mincemeat				 1	
Nutmeg (Ground	d)			 1	_
Orange Drinks				 5	_
Pepper (White)				 1	
Peas (Processed)				 1	_
Pudding (Christi				 2	
Salmon Spread				 1	
Sauces				 3	
Sausage Casings				 2	
Sausage Roll		4.4		 1	
Soup				 2	
Stuffing (Sage &	Onion)		 2	_
Suet (Shredded I				 1	
Sugar				 10	-
Syrup of Figs				 1	-
Tea				 10	-
Tomato Juice Co	ocktail			 1	-
Tomato Ketchur)			 1	_
Tomato Piquant				 1	_
Truffles (Dairy N		um)		 1	_
Vinegar (Malt)				 4	
					_
				266	7
	TTO	1	272		

Total :- 273

In addition to the above, 131 Informal Samples of Milk were tested in the Department.

Total	Samples	Procured	404
		Informal	397
		Formal	7

(In the case of all milk sampling, a Formal sample is procured at the same time as the Informal sample referred to above. Should the Informal sample tested in the Department's Laboratory prove to be "Non-Genuine", the Formal sample is immediately sent to the Public Analyst, and any further action taken on the certificate of the Public Analyst. The Gerber and Hortvet (Freezing Point) Tests are carried out in the Department's Laboratory. This system has worked well.)

Note.—2 Informal Milk Samples referred to in the schedules of samples submitted, were examined by the Public Analyst for the presence of foreign matter in the milk following receipt of a complaint, and not for Fat and Non-Fatty Solids content.

392 Samples were returned Genuine, and 12 Non-Genuine (All by the Public Analyst).

(See page 134 for action taken regarding non-genuine or adulterated samples).

Milk-Chemical Analysis.

The following table shows the average fatty content of the samples procured during the last 5 years and submitted for Chemical Analysis:—

Year	Number of Samples Taken	Average Fat content
1956	179	3.59%
1957	201	3.51%
1958	179	3.65%
1959	125	3.57%
1960	132	3.60%

The whole of the milk supplied is from 3 large and 2 small dairies inside the Borough, with a result that the milk is "Mixed", thus showing a high average fat content.

There are 5 plants within the Borough where milk is heat treated (Pasteurised or Sterilized). 181 Visits of inspection were paid during the year. These plants are being maintained in a satisfactory manner. One has had considerable modernisation carried out. Plans have been submitted for the replacement of one of the smaller plants by a modern pasteurising plant.

Ice Cream-Chemical Analysis.

Chemical analysis of Ice Cream sampled by the Department is mainly concentrated on local producers, from whom 66 samples were procured informally during the year. 11 further Informal samples were procured from National producers. All were declared to be genuine, and conformed to the standard laid down by the Food Standards (Ice Cream) Order, 1953, and the Food Standards (Ice Cream) Regulations.

Ice Cream is required to contain not less than 5% Fat, and not less than 7.5% Milk Solids other than Fat. In the case of Ice Cream sold as Dairy Ice Cream, the whole of the fat content must be derived from dairy produce, mainly milk. Only one local producer is manufacturing Dairy Ice Cream. The following table gives a summary of chemical Ice Cream sampling carried out during the year.

Summary :—				
Taken From		No. Taken	Average Fat Content	Average Non-fatty Solids
Local Producers		61	8.67%	10.19%
National Producers		11	10.55%	12.00%
	Da	niry Ice Cr	eam.	
Local Producers		5	9.14%	11.02%
Total		77	8.97%	10.51%

Action taken Regarding 12 Non-Genuine Samples. Reported by Public Analyst.

Case No.	Concerning	Offence	Samples	Action Taken
1.	Fish Cakes	3% Deficient in Fish Content	1 Formal	Vendor warned
2.	Non-Brewed Condiment	3.1% Acetic Acid (4% required)	1 Informal	do.
3.	Potted Meat	76% Meat (95% required)	1 Informal	do.
4.	Potted Meat	78 % Meat (95 % required)	1 Informal	do.
5.	Non-Brewed Condiment	3% Acetic Acid (4% required)	1 Informal	do.
6.	Non-Brewed Condiment	3.4% Acetic Acid (4% (required)	1 Informal	do.
7.	Dairy Milk Rum Truffles	Not Milk Chocolate. Description incorrect	1 Informal	do.
8.	Milk	Contained not more than 2% added water	1 Formal	do.
9.	Devon Cream Cakes	Filled with Synthetic Cream	1 Informal	do.
10.	Milk	Contained foreign matter (Iron Scale)	1 Informal	Legal Proceedings have been
11.	Milk	do.	1 Informal	instituted
2.	Milk Chocolate Cinder Toffee	Not Milk Chocolate Description incorrect	1 Informal	Vendor warned

Summary of Food and Drugs Samples Taken over Last 5 Years.

Year	Total Taken	Formal	Informal	Genuine	Non-Genuine
1956	426	15	411	411	15
1957	465	34	431	451	14
1958	428	9	419	422	6
1959	380	11	369	376	4
1960	404	7	397	392	12

HYGIENE OF FOOD PREMISES

Below is given a schedule of various food premises showing the number of each within the Borough, and the number of inspections carried out during the year.

Type of Business			Recorded in the Departme	
Subject to Registration.				
Fried Fish Shops			103	195
Ice-Cream : Producers			13	88
Dealers			442	543
Mobile Ur	nits		64	122
Preserved Food Prepar Butchers' Shops	ration	and	417	960
Not Subject to Registrati	ion.			
Bakehouses			28	139
Butter Factories			3	3
Cafes and Restaurants			49	169
Food Shops			854	2,442
Hotel Kitchens			11	18
Market Stalls			35 (w av	reekly 746 erage)
Meat Distributors			7	350
Public Houses and Clu	bs		162	55
School Kitchens and School Dining Halls			99	6
Snack Bars			23	202
Works Canteens			23	36
Street Traders. (Estim	ated verage		y 20	103

Food Hygiene.

A considerable amount of work has been done during the year on the inspection of food premises, and in the supervision and control of the methods adopted in the preparation and handling of food. The general policy of the Department is to give advice and guidance to the food traders wherever possible, and recourse to legal proceedings is only taken after all other approaches have failed to achieve the desired results.

Enforcement of the various legal provisions concerned with food hygiene forms a very important part of the drive to ensure a safe and clean food supply, but however well and adequately it is done it is not by itself sufficient to attain the desired ends. To prohibit this practice or to demand the other practice upon pain of a penalty, so often means that the rule will only be observed while inspection is taking place. So many of the problems with which we have to contend are matters of the practice and habits of food handlers and these are more capable of improvement by education than by enforcement of statutes. If we can teach the food handler not only what he should do, but why he should do it, we shall have gone a long way towards our objective.

It is a matter of regret that during the year, staffing problems have prevented us from doing much in this field, but measures are being taken to increase this type of work. As a first step towards this, arrangements have been made by which a Public Health Inspector remains responsible for the same collection of food premises over a period of time, and we hope that this will be the means of forging a stronger link between the trader and the Department. Our experience shows us that the majority of traders are keen and ready to fulfill their obligations, and we hope that they will learn to look upon the Public Health Inspector nor merely as an officer enforcing the law, but more as a wise counsellor and adviser to whom they can bring their food hygiene problems.

The unco-operative minority of food traders always remain with us, and during the year under review, legal proceedings had to be taken in 4 instances.

Merchandise Marks Act, 1926.

342 Visits were paid to premises in connection with the above Act in order to ensure the correct marking and labelling of food-stuffs. Experience has shown that there is little intentional incorrect marking, but there are still many instances noted, where as a result of carelessness, there is failure to adequately mark. Appropriate notice and warnings are given in these cases.

MAGISTERIAL PROCEEDINGS.

COMPLAINT.

RESULT.

- Failing to comply with Public Health Act Notice to abate nuisance.
- Case withdrawn on payment of costs (8/6d.), work having been satisfactorily completed.
- Contravening Food & Drugs Act, 1955, Sections 2 and 113;
 "Selling a Loaf of Bread containing foreign matter".

Fined £7 10s. 0d.

 Contravening Food Hygiene Regulations, 1955; Regulation 28 (1) (a): "Failing to provide an adequate supply of hot water at a suitably controlled tempernature on Motor Sales Vehicle".

Fined £2 Os. Od.

 Failing to comply with Court Order to cleanse premises under Public Health Act, 1936; Section 83. In view of the work having been satisfactorily completed, the Defendant was granted an absolute discharge, the costs being remitted.

 Contravening Food Hygiene Regulations, 1955; Regulation 28 (1) (a): "Failing to provide an adequate supply of hot water at a suitably controlled temperature on Motor Sales Vehicle".

Fined £1 Os. Od.

- Contravening Food Hygiene Regulations, 1955;
 - (i) Regulations 28 (1) (a):

 "Failing to provide an adequate supply of hot water at a suitably controlled temperature on Motor Sales Vehicle".
- (i) Fined £2 0s. 0d.
- (ii) Regulation 28 (1) (b):
 "Failing to provide clean towels or other suitable drying facilities on Motor Sales Vehicle."
- (ii) Fined £2 0s. 0d.
- Contravening Food Hygiene Regulations, 1955;
 - (i) Regulation 6 (1): "Failing to keep table in such good repair as to enable it to be thoroughly cleaned".
- (i) Fined £2 0s. 0d.
- (ii) Regulation 16 (2): "Failing to provide an adequate supply of hot water at a suitably controlled temperature for wash-hand basin".
- (ii) Fined £1 0s. 0d.
- (iii) Regulation 23(1): "Failing to keep clean walls of food room".
- (iii) Fined £2 0s. 0d.

- Contravening Public Health Act, 1936. Section 154; "Giving a balloon and a quantity of tinsel to a person under the age of 14 years in exchange for rags".
- Failing to comply with Public Health Act Notice to abate Nuisances.
- Contravening Food and Drugs Act, 1955; Section 2: "Selling a Meat Pie containing a Beetle".
- 11/ Failing to comply with Public12. Health Act notices (2) to abate nuisances.
- Application to Court for Nuisance Order to enable the Corporation to carry out repairs in default of the owner whose whereabouts are unknown.
- Failing to comply with Public
 Health Act notices (2) to abate nuisances.
- Contravening Food and Drugs Act, 1955, Section 2: "Selling a Toffee which contained a needle".
- Failing to comply with Public Health Act notice to abate nuisances.
- Contravening Food and Drugs Act, 1955; Section 2: "Selling a bottle of Orange Juice which contained dirt".
- Contravening Food and Drugs Act, 1955; Section 2: "Selling a bottle of Milk which contained a fruit-fly".
- Contravening Food and Drugs Act, 1955, Section 8 (1): "Exposing for sale a Rabbit carcase which was unfit for human consumption".
- Failing to comply with Public Health Act notice to abate nuisances.
- Failing to comply with Public Health Act notice to abate nuisances.
- Contravening Food and Drugs Acts, 1955; Section 2: "Selling a Meat Pie which contained a metal nut".

Defendant found guilty; discharged on payment of costs (4/-).

Ordered to carry out work within 21 days.

Fined £5 0s. 0d.

Ordered to carry out work in each (2) cases within 28 days, and to pay costs (33/-).

Order made requiring carrying out of works within 42 days.

Ordered to carry out work in each (2) cases within 28 days and to pay costs (33/-).

Fined £10 0s. 0d.

Ordered to carry out work within 2 months and to pay costs (£1 5s. 6d.).

Fined £25 Os. Od.

Fined £25 0s. 0d. and Ordered to pay costs (£2 10s. 0d.)

Fined £20 0s. 0d.

Case withdrawn, work having been satisfactorily completed.

Ordered to carry out necessary work to abate nuisances within 28 days and to pay costs, (£3 10s. 0d.), together with Court Fees (8/6d.). The Order also prohibits a recurrence of these nuisances.

Fined £3 0s. 0d.

STATISTICAL TABLES



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TABLE I.

ABSTRACT OF HEALTH REPORTS

												hooping Crogh		ickes- pos	Car	noer	Bronchi	in	Present	mia	Tub	l Forms erculosis		Influence		Hourt Diverse	Apper	ndi-	Nephritis	tie Poerperi Fever				henature limb, &c.			Syphilis												
YEA	POPULA	No. of Death	1381	England & Wales	No. of Rocks	England & Wales	No. of Deaths	Per 1,000 Berths	England & Water	Death	Rare per 1,000 pep.	Northe	Rate per 1,000 pep.	Notifed	Rase per	Notifed	Deaths	Rate per Litto per	Notifed	Deeths Rate per	1,000 pep.	Rate per	Destin	Rade per 1,800 pep.	Neithed	Doeths Rate per	Death	Rate per Little pop.	Deaths	1,000 pop.	Northed Deaths	Rate per 1,000 pep.	Northed	Deaths	1,000 pep.	Rate per	Loso pop.	Rate per 1,000 pop.	Death	Rate per 1,000 pep.	Rate par	Deaths	Rate per 1,000 pap.	Deaths	Contract of the Party	Ros per	Doubs	Rate per Loss pep.	Deaths (see)
190 191 192 293 293 293	153,308 153,308 153,300 139,600	1,82 2,03 1,76 1,72	7 25.07 2 17.02 6 15.32 0 14.13 1 12.31 8 13.30	13.3 3, 12.4 4, 13.4 3, 15.6 2,	,480 12.1 ,431 33.5 ,304 26.5	4 25.1 1 25.4 3 16.3 7 15.1	496	144 135 79	134 186 79 60 13 50	0 0		71 17	0.00	2,271 2,459 629	24 0.24 11 0.10 43 0.33 45 0.33 2 0.01 20 0.07	183 371 447 675	3 6 2 2	0.03	25 143 176 104 286 266	3 0.6 23 0.1 12 0.6 8 0.6 12 0.6 30 0.3	33 13 99 12 96 1 99 2	62 0.64 53 1.45 25 0.95 16 0.31 14 0.17	3 32 3 24 3 38 7 3	0.29	- 1,044 1,058 389	0 -	80	0.69 0.71 0.79 1.31 1.53 1.33	122 L 139 L 64 0. 43 0.			3.31	451 500 297	153 1 178 1 218 2 153 1	.42 .34 .63	6 01	100 12 114 12 12 13 14 14 15	0.56 2.60 2.92	- 5	0.04	0.25 27 0.25 29 0.22 48 0.36 46 0.32 31 0.22	4 7 6	0.04 0.05 0.05 0.04	11 0 9 8 7 0 9 0 6 0 8 0	08 18 03 17 07 12 04 9	7 1.79 9 1.38 4 0.90 2 0.65	72 66 39 81 80 86	0.56 0.45 0.61 0.57	7 0.01 6 0.06 13 0.00 3 0.02 8 0.06 3 0.02
294 294 294 294 294 296 296	(20,000 (20,100 (23,900 (22,400 (28,620 (37,730 (40,460	1,394 1,764 1,454 1,634 1,201 1,791	6 15.1 6 15.0 8 24.26 4 24.08 6 13.04 4 12.70 1 12.35 3 12.77	12.9 2, 11.6 2, 12.1 2, 11.6 2, 11.4 2, 12.0 5,	,642 20.9 ,466 19.9 ,538 20.7 ,974 22.5 ,695 20.9 ,398 24.6 ,630 23.8	00 14.6 00 14.2 01 15.8 01 16.5 00 17.6 02 16.1 07 19.1 05 20.5	102 199 195 166 189 215 112 232	12 16 19 65 65 79 56 64	# 25 - 40 - 40 - 41 - 41 -		1111111		0.01	388 2,544 429 3,516 1,242 1,171 931 2,733	0.00 4 0.01 1 0.01 12 0.09 2 0.00 1 0.01 2 0.00 6 0.00	141 159 368 597 571 362 522		0.00 0.00 0.00	279 597 597 595 205 213 52 41	32 0.3 37 0.3 38 0.3 29 0.3 11 0.1 90 0.1 — 0.3	30 2 30 4 23 2 88 1 87 5	25 0.37 22 0.38 20 0.32 27 0.21 29 0.35 20 0.46 21 0.05 22 0.37	9 3	0.02 0.07 0.02 0.01 0.02 0.01 0.07 0.00	834 1,749 696 1,656 534 1,232 679	11111	219 217 230 190 216 233 270		140 1. 162 6. 62 6. 82 6. 93 6. 164 6.	88 36 83 25 84 15 72 15 73 25 71 16	23 100 20 137 77 100 50 93 28 96 63 44	1.83 0.83 1.77 0.86 0.72 0.69 0.31	267 253 262 261 239 243 281	200 1 166 1 176 1 171 1 174 1 115 0 132 0	.39 4 .41 3 .85 1 .86 1	37 0,2 81 0,3 9 0,0 15 0,2 16 0,1 17 0,1 18 0,1	(3 430) (7 400) (8 43) (2 600) (2 379) (2 438) (2 645)	3.47 3.47 3.19 2.94 3.18 3.16	11 5 9 6 5 5 4	8.09 1 0.04 4 0.07 1 0.04 4 0.04 3 0.03 3 0.02 4	44 0.33 36 0.28 61 0.33 99 0.31 03 0.35 12 0.26 15 0.25 99 0.34		0.01	# 0. 3 0. 4 0. 8 0. 3 0. 3 0. 2 0.	06 94 00 51 00 51 06 61 06 104 04 91 80 62	0.72 0.46 0.46 0.61 0.51 4 0.81 7 0.75 0 0.45 6 0.39	136 101 115 92 90 74 63 51	0.80 0.93 0.74 0.71 0.13 0.45 0.36	# 0.06 17 0.13 9 0.07 # 0.08 12 0.02 # 0.06 # 0.06 9 0.06
194 194 195 *195 *195 *195 *195	145,000 145,500 146,600 147,200 147,900 146,100	1,710 1,700 1,700 1,714 1,640	0 11.44 1 2 12.08 1 2 12.25 1 3 11.75 1 1 10.81 1 4 11.79 1 5 11.47 1	1.7 3/ 1.6 3, 2.3 3/ 1.3 3/ 1.4 3, 1.3 3/	121 21.4 073 20.9 096 21.0 165 21.6 038 20.5		159 157 111 109 102 115 104 3 100 1	48 51 36 33 33 36 4.23 2 (3.38 2	34 - 32 - 30 - 30 - 28 - 27 - 5.5 - 4.9 -		11111111		1111111	5,414 2,099 825 3,362 3,066 960 2,067 1,500	1 0.00 1 0.00 3 0.00 1 0.00 1 0.00 1 0.00	347 136 197 401 499 291 237 141	HILLIA		49 36 26 18 2 10 3	5 61 3 61 1 61 1 61	16 1	66 0.25 11 0.35 17 0.13 10 0.06 8 0.05 3 0.05 9 0.06	1 2 4 1 1 1 1	0.01 0.03 0.03 0.01 0.01	1,291 904 1,802 1,513 1,313 1,238 1,155		229 248 300 343 243 283 251 251	1.61 1.30 2.06 1.62 1.66 1.91 1.69 1.72	97 0. 127 0. 75 0. 95 0. 98 0. 85 0.	73 11 67 11 86 11 51 1 64 1 57 1	11 91 18 98 15 94 96 95 75 82 90 95	0.67 0.60 0.63 0.66 0.65 0.64 0.55 0.63	323		126 124 163 163 148 132 128 125 137	3 0.0 90 0.1 17 0.3 15 0.2 2 0.0 10 0.0 2 0.0 3 0.0	0 451 3 499 2 507 4 520 6 532 7 497 6 544 3 312			0.02 4 0.03 3 0.03 3 - 1	0.35 0.25 0.19 0.13 0.13 0.10 14 0.00 17 0.11	1111111	11111111	3 0. 2 0. 2 0. 2 0. 3 0. 1 0.	80 40 81 81 81 81 81 81 81 81 81 81 81 81 81	0.28 0.25 0.34 7 0.18 1 0.14 7 0.18 9 0.19 9 0.19	63 34 38 37 39 90 12 89	0.37 0.40 0.39 0.19 0.61 0.48 0.39	8 0.05 9 0.06 7 0.08 8 0.03 4 0.02 2 0.01 6 0.04 4 0.02
*29:5 *29:5 29:5 29:5 29:5 29:5	149,900 151,000 153,500 153,800	1,721 1,892 1,679		1.5 1. 1.7 1. 1.6 1.	700 24.3 473 22.5	5 26.1 3 26.4 8 36.5	99 2	0.8 D 6.2 2 9.35 2 8.51 Z 9.50 D	2,6 -	11111	11111			2,178 1,927 1,315 1,841 1,637	1 0.81	189 339 129	11111	11111	=	11111	-	5 0.04 6 0.04 11 0.05	-	0,01	1,278 1,278 835 1,335 2,009	= =	293 270 291 300 316	1.95 1.76 1.91 1.95 2,04	96 D.	49 15 45 1 53	61 122 57 110 90 104 72 78 62 94	0.80 0.70 0.68 0.51 0.64	180 169 138 117 105		137 131 132 132 132 142	8 0.0 15 0.0 3 0.0 8 0.0	8 507 9 530 12 537 15 479 - 339	3.31 3.51 3.52 3.11 3.62	111111	11111	17 0.11 17 0.11 19 0.12 11 0.14 6 0.04	111111	10000	11111	2 3 3 3 3 3	9 0.18 7 0.24 0 0.19 4 0.22 5 0.16	96 96 25 102 86	0.60	5 0.03 4 0.00 6 0.04 6 0.04 3 0.00
_		-						_	_		-	_		_	-	_					_		-	and the same		-	- 100		niuries and	Carrie	of Death	1948	-	-	-	-	-	-		_	-	-	-	-	-	-	_	-	_

* Deaths classified in accordance with the International Systemical Classification of Diseases, Injuries and Causes of Death, 1948.

TABLE II.

NOTIFICATIONS OF INFECTIOUS DISEASES IN 1960, CLASSIFIED ACCORDING TO AGE GROUPS.

	1	F.	- =- -	25
	45	M.	1 3 12 1 1 1 1 1 1 1 1	55
Ī	1	ъ.	E LE 24 L 2 51 E	64
	25-	W.	E - 24 4 7	46
	.1	F.	E 2 1 2 2 4 1 E 8	59
P	15	W.	- 20 0	23
Notific	1	F.	1526.888 - 6	70
Cases Notified	10	M.	10002011111012	94
		F.	253 253 253 253 253 253 253 253 253 253	893
Number of	5	M.	273 273 36 36 36 37 36 1	974
Z		н.	2843 238 238 43 43 43 43 43 43 43 43 43 43 43 43 43	651
	3-	Ä.	2224 241 219 37 37 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	572
	1	F.	1242 52 1 1 1 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	514
		M.	12522547 1 1 1 1 4 4 1 1	549
		F.		146
	9	W.	9 3242 99 1 1 1 1	145
	- 82	Ŧ.	222 222 222 206 206 29 29 29 29 29 29 29	2433
	All	M.	829 829 1182 1021 215 215 32 32 43 67	2445
			:::::::::::::::::::::::::::::::::::::::	:
			:::::::::::::::::::::::::::::::::::::::	:
	Notifiable Disease		Food Poisoning Scarlatina Measles (excluding Rubella) Whooping Cough Chicken-Pox Dysentery Dysentery Ophthalmia Neonatorum Meningococcal Infections Erysipelas Fulmonary Pneumonia Influenzal Pneumonia Other Tuberculosis Virus Encephalitis	Tes .
	ible L		ng Ru h h nator infecti neum nonia rculor ssis	Total
	Votifia		oning Coug Ox - Syrexi a Nec ccal 1 Preur Preur Tube	
	2		Food Poisoning Scarlatina Measles (excluding Rubella Whooping Cough Chicken-Pox Dysentery Puerperal Pyrexia Ophthalmia Neonatorum Meningococcal Infections Erysipelas Influenzal Pneumonia Influenzal Pneumonia Other Tuberculosis Other Tuberculosis Virus Encephalitis	
			Food Pois Scarlatina Measles (e Whooping Chicken-P Dysentery Puerperal Ophthalm Meningoc Erysipelas Acute Pri Influenzal Pulmonar Other Tul	

TABLE III.

ANNUAL RETURN OF FOOD POISONING.

1. LOCAL AUTHORITY: Middlesbrough County Borough, Year: 1960.

2.	(a)	FOOD POISONING NOTIFICATIONS	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Total
		(CORRECTED), AS RETURNED TO REGISTRAR GENERAL	Nil	9	2	4	16
	(b)	CASES OTHERWISE ASCERTAINED	Nil	Nil	Nil	Nil	Nil
	(c)	SYMPTOMLESS EXCRETERS	Nil	1	2	Nil	3
	(d)	FATAL CASES	Nil	Nil	Nil	Nil	Nil

- 3. PARTICULARS OF OUTBREAKS—Nil.
- 4. SINGLE CASES.

	No. of	Cases	Total Ma
Agent	Notified	Otherwise Ascertained	Total No. of Cases 2 1 1 4
Agent identified : Salmonella— S. Dublin S. Derby S. Typhi-Murium	2 1 1	=	2 1 1
Totals	4	_	of Cases 2 1 1 4
Agent not identified	12	_	12

5. SALMONELLA INFECTIONS, NOT FOOD BORNE—Nil.

.

TABLE IV.

Deaths Registered in the Borough during 1960, Classified according to ages.

Uncertified M. F.										AGES .	AT DEA	TH							
Croutosis Resp.	Cause of Death			all	one	and under 2	and under 3	and under 4	and under 5	and under 10	and under 15	and under 20	and under 25	and under 35	and under 45	and under 55	and under 65	yrs. and	
reulosis Resp.					0.99	1009	_		=	Ξ	=	=	=	=			=		
Other Accidents	Other obhilitic Disease of Infective and Parasitic Diseases obiseases obisease	4 1 2 21 51 82 9 7 121 181 197 182 101 101 101 103 136 136 136 222	3 	1	1 	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						1 1 1 1 3 1 1 2 2 1 1 1 1 1 1 1 1 1 1 1				1	
	Other Accidents	13	2	15				=	Ξ		=		1		1	1		6	

								Ag	ES AT I	DEATH								1
CAUSE OF DEATH			At all ages	under one year	and under 2 yrs.	and under 3 yrs.	and under 4 yrs.	4 and under 5 yrs.	5 and under 10 yrs.	10 and under 15 yrs.	15 and under 20 yrs.	20 and under 25 yrs.	25 and under 35 yrs.	35 and under 45 yrs.	45 and under 55 yrs.	55 and under 65 yrs.	65 yrs. and over	Deaths in
All Causes Certified Uncertified			=	=	=	_	_	_	_	=		=	=	=	=	=	-	I dud
"Breast "Uterus Other Malignant and Lymphatic Neoplasms { Leukæmia Aleukæmia Diabetes Vascular Lesions of Nervous System Coronary Disease Angina Hypertension with Heart Disease Other Heart Disease Other Heart Disease Other Circulatory Disease Influenza Pneumonia Bronchitis Other Diseases of Respiratory System Ulcer of Stomach and Duodenum Gastritis, Enteritis and Diarrhœa Nephritis and Nephrosis Hyperplasia of Prostate Pregnancy, Childbirth, Abortion Congenital Malformations Other Defined and Ill-defined Diseases Motor Vehicle Accidents All Other Accidents Suicide		M. 6 2 2 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	8 — — — — — — — — — — — — — — — — — — —								1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1	1	2		4 — — — — 6 8 — — 22 — — 2 31 1 26 — 9 35 15 — 14 17 2 5 1 1 1 3 — — — — — — — — — — — — — — — —	88 ———————————————————————————————————
	. 20	8 154	362	14	_	_	1	_	1	2	4	2	9	15	26	68	220	318

TABLE VI.—PREMATURE BIRTHS.

Return for year ended 31st December, 1960.

1. No. of premature live-births notified as [adjusted by transferred notifications].

nounications).	171	96	(c) in private nursing homes	267
g	:	:	:	:
transierr		:	:	al
oy			:	Tot
adjusted	:	:		
SE				
поппед		:	nomes .	
/e-Dirths		:	nursing }	
ature in	hospital	home	private	
CIII	E.	at	E.	
pi	(a)	9	0	
5				
NO.				

							PRE	PREMATURE LIVE BIRTHS	LIVE E	IRTHS					
Weight	Вогг	Born in Hospital	pital	Born nur a	Born at home and nursed entirely at home	e and rely	Born trai hosp befo	Born at home and transferred to hospital on or before 28th day	to or day	Borr	Born in nursing home and nursed entirely there	sing ursed ere	Born home ferred on or	Born in nursing home and trans- erred to hospital on or before 28th day	rsing rans- spital 28th
Birth	Total	E % -	Sur- vived 28 days	=	Died within 24 hrs. of birth	Sur- vived 28 days	Total	Died within 24 hrs. of birth	Sur- vived 28 days	Total	Died within 24 hrs. of birth	Sur- vived 28 days	_	Died within 24 hrs. of birth	Sur- vived 28 days
(1)	(2)	(3)	(4)	(5)	9	0	(8)	(6)	(10)	(E)	(12)	(13)	(14)	(15)	(19)
3 lb. 4 oz. or less (1,500 gms. or less)	25	7	Ξ	1	1	-	4	2	-	1	1	1	1	1	1
Over 3 lb. 4 oz. up to and including 4 lb. 6 oz. (1,500-2,000 gms.)	40	2	37	9	-	5	9	1	2	1	1	-	-1		1
Over 4 lb. 6 oz. up to and including 4 lb. 15 oz. (2,000-2,250 gms.)	33	2	30	=	1	11	3	-	2			1	1	1	1
Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2,250-2,500 gms.)	73	-	7.1	62	2	09	4	- 1	4	1	1	1	I	1	-
Total	171	12	149	62	3	92	17	3	12	1	1	1	1	1	1

TABLE VII.

Public Health (Tuberculosis) Regulations, 1952.

PART I.—Summary of notifications of Tuberculosis during the period from the 1st January, 1960 to the 31st December, 1960, in the County Borough.

						For	mal N	Notifica	tions.					
		N	lumber	of P	rimary	Notifi	cation	s of n	ew cas	es of	tubere	ulosis		100a
Age Periods	0-	1-	2-	5-	10-	15-	20-	25-	35-	45-	55-	65-	75-	Total (all ages
Respiratory, Males	 -	1	9	2	3	2	4	10	7	11	12	5	1	67
Respiratory, Females	 1	-	2	-	3	4	4	8	4	1	4	-	-	31
Non-Respiratory, Males	 -	-	-	-	-	-	-	-	1	-	-	-	-	1
Non-Respiratory, Females	_	-	_	1	_	_	_	2	1	-		_	_	4

PART II.—New cases of Tuberculosis coming to the knowledge of the Medical Officer of Health during the above-mentioned period, otherwise than by formal notification.

						Numb	er of	cases	in age	e Gro	ups					
information		0-	1-	2-	5-	10-	15-	20-	25-	35-	45-	55-	65-	75-	Tot	al
Dooth Botoma Boom	М	-	-	-	-	-	-	-	-	-	1	-	-	-	1 (A)
from Local	F	-	-	-	-	-	-	-	-	-	-	-	-	-	(B)
Non-		-	_	-	-	-	-	-	1	-	-	-	-	-	1 (C)
Respi	F	-	-	-	-	-	-	-	-	-	-	-	-	-	(D)
Dooth Paturna Passi	M	-	-	-	-	-	-	-	-	-		-	-	-	((A)
from Registrar	F	-	-	-	-	-	-	-	-	-	-	-	-	-	((B)
(Transferable Non-		-	-	-	-	-	-	-	-	-	-	-	-	-	((C)
deaths) Respi	F	-	-	-	-	-	-	-	-	-	-	-	-	-	((D)
Passi	M	-	-	-	-	-	-	-	-	-	-	-	-	-	((A)
Posthumous Notifications	F	-	-	-	-	-	-	-	-	-	-	-	-	-	((B)
Non-	M	-	_	-	-	-	-	-	-	-	-	-	-	-	((C)
	ratory F	_	_	-	_	_	-	-	_	-	-	-	-	-	((D)

OTALS (A) 1
(B) (C) 1
(D) -

TABLE VIII.

Cancer.

DEATH RATES PER 1,000.

Year		M	iddlesbrough	England & Wales
1945	 		1.68	1.94
1946	 		1.86	1.84
1947	 		1.92	1.85
1948	 		1.61	1.85
1949	 		1.71	1.87
1950	 		2.06	1.89
1951	 		1.67	1.96
1952	 		1.66	1.67
1953	 		1.91	1.99
1954	 		1.69	2.03
1955	 		1.72	2.05
1956	 		1.95	2.07
1957	 		1.78	2.09
1958	 		1.91	2.14
1959	 		1.95	2.14
1960	 		2.04	

TABLE IX.

Deaths from Cancer.

AGE DISTRIBUTION.

Ages		Male	Female	Total
1 to 5 years	 	_	_	_
5 to 45 years	 	10	16	26
45 to 65 years	 	83	52	135
65 and over	 	79	76	155
Total	 	172	144	316

,22

COMPARATIVE STATISTICS FOR 1941-1960.

TABLE X.

		S																				
ATHS	Rate	Total Births	1.80	1.55	2.67	4.03	2.22	1.40	0.55	0.88	0.64	0.64	0.64	0.63	0.62	0.65	0.32	09.0	1.14	1.07	1	
MATERNAL DEATHS	J.	Total	2	4	00	12	9	2	3	3	2	7	7	7	7	7	-	7	4	4	I	
MATER	Number	Other	5	4	00	00	2	5	3	3	7	7	7	-	7	2	-	7	3	4	1	
		Sepsis	1	I	I	4	-	I	1	I	1	1	I	1	1	I	I	1	-	1	ı	
	Rate ner 1 000	Live	75	79	65	65	80	56	64	48	51	55	35	33	36	34	33	31	36	24	29	24
INFANT DEATHS	Torai	TO TO TO	199	195	166	189	215	192	232	159	157	173	109	102	115	104	103	102	126	90	66	6.4
INFANT	4 Weeke	12 Months	134	57	83	75	85	50	115	84	64	1111	48	50	53	36	41	40	38	25	29	22
	Under	-	65	138	83	114	130	142	117	75	93	62	61	52	62	89	62	62	88	65	70	57
THS	Rate	Est. Pop'n	15.00	14.26	14.08	13.04	12.70	12.35	12.77	11.44	12.08	12.25	11.75	10.81	11.59	11.09	11.47	11.3	11.4	11.1	10.82	11 93
DEATHS	Number		1,896	1,768	1,724	1,656	1,634	1,701	1,793	1,640	1,752	1,782	1,723	1,591	1,714	1,643	1,707	1,706	1,723	1,692	1,664	1 838
BIRTHS	Rate ner 1 000	Total	35.20	20.83	21.38	22.43	34.10	31.34	29.40	23.81	19.75	28.20	22.58	22.10	25.85	24.40	32.09	26.51	28.44	23.18	28.53	22 55
STILL	Number ner 1 000		95	113	79	107	95	111	111	81	62	88	71	70	84	92	66	68	66	88	102	18
SIRTHS	Rate Number per 1 000	Est. pop'n	20.90	19.92	20.73	22.58	20.92	24.67	25.85	23.16	21.21	21.45	20.95	21.05	21.40	20.51	20.74	22.1	23.05	24.33	22.58	17 55
LIVE BIRTHS	Number		2,642	2,468	2,538	2,867	2,691	3,398	3,631	3,321	3.077	3,121	3,073	3,098	3,165	3,038	3,085	3,314	3,481	3,710	3,473	2 510
	Est.	Toman do v	126,100	123,900	122,400	126,920	128,620	137,730	140,460	143,400	145,050	145,500	146,600	147,200	147,900	148,100	148,700	149,900	151,000	152,500	153,800	154 550
	YEAR		1941	1942	1943	1944	1945	1946	1947	1948	1949	1950	1951	1952	1953	1954	1955	1956	1957	1958	1959	1060

TABLE XI.

MENTAL DEFICIENCY ACTS, 1913—1938.

		Particulars of cases reported during the period 1.1.60 to		Under age 16		Age 16 and over	
1.	Par			F.	M.	F.	
		10,60 :		-			
	(a)	Cases ascertained to be defectives "subject to be dealt with":					
		Number in which action taken on reports by :					
		(1) Local Education Authorities on children:					
		(i) While at school or liable to attend school	9	6	-	-	
		(ii) On leaving special schools	900		1	5	
		(iii) On leaving ordinary schools					
		(3) Other sources	2	2	1	-	
		(3) Other sources				Appen .	
		TOTAL of I (a)	11	8	2	5	
	(b)	Cases reported who were found to be defectives but					
		were not regarded as " subject to be dealt with " on					
		any ground	1		1	9	
	(c)	Cases reported who were not regarded as defectives				1	
		and are thus excluded from (a) or (b)		34491		inne	
	(d)	Cases reported in which action was incomplete at					
		31st October, 1960, and are thus excluded from					
		(a) or (b)					
		TOTAL of 1 (a)-(d) inc	12	8	3	14	
2.		sposal of cases reported during the period 1.1.60 to					
	7.5	10.60 :					
		e total of 2 (a), (b) and (c) must agree with that					
		(a) and (b) above)					
	(a)	Of the cases ascertained to be defectives "subject					
		to be dealt with " (i.e. at 1 (a)), number :	6	8		5	
		(i) Placed under Statutory Supervision (ii) Placed under Guardianship	6	0	1	3	
				nen		-	
		Got Admitted to Hespitals	3		1	1000	
		(iv) Admitted to Hospitais					
		TOTAL of 2 (a)	9	8	2	5	
	(b)	Of the cases not ascertained to be defectives					
	0.000	"subject to be dealt with" (i.e. at 1 (b)), number:					
		(i) Placed under Voluntary Supervision	1		1	9	
		(ii) Action unnecessary	-				
		TOTAL of 2 (b)	1		1	9	
	(c)		1		1	9	
	(c)	Cases reported at 1 (a) or (b) above who removed	1	2000	1	9	
	(c)	Cases reported at 1 (a) or (b) above who removed from the area or died before disposal was					
	(c)	Cases reported at 1 (a) or (b) above who removed	2		1	9	







P8(6)

