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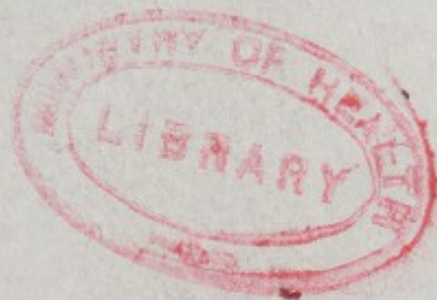
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OF THE

Medical Officer of Health

FOR THE YEAR

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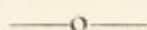
By J. L. NEWMAN, M.D.



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Midhurst Rural District Council



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1937.

By J. L. NEWMAN, M.D.

TO THE CHAIRMAN AND MEMBERS OF THE
MIDHURST RURAL DISTRICT COUNCIL.

Mr. Chairman, Ladies and Gentlemen,

The report which I have the honour to present is my second in the sixty-fourth of the series. It begins with an introductory section describing the more important events of the year and giving some personal impressions and opinions. This is followed by a summary in the form prescribed by the Minister of Health.

OFFICE REORGANISATION. By the beginning of 1937 it had become apparant that the existing office routine and records had lagged far behind developments in public health activities, particularly in view of the increase in the staff. Accordingly a fresh system was introduced. Each individual item subject to sanitary inspection (cowshed, bakehouse, reservoir, etc.) has its own foolscap folder, to be filed in a drawer with the others of its kind, and containing a dossier of information relating to it. Thus for each cowhouse, for example, the folder would contain :—

1. A plan of the premises.
2. A full record of the conditions found, entered on a special form under appropriate headings.
3. A statement of any action taken, together with copies of correspondence relating to it.
4. A summary of the re-inspections made.

This method was adopted after a study of the systems in use in certain other districts and should be capable of unlimited expansion, and also of providing any member of the staff with full information at a moment's notice. Another innovation has been a complaints book into which are entered particulars of all complaints, the conditions found on investigation, and the action taken.

Unfortunately the adoption of these methods was disappointingly slow. Indeed I had to report in June that virtually no progress had been made ; and though there has been an improvement since then the putting of our own house in order remains one of the chief tasks to be faced in 1938, and it is a task which is rendered all the more difficult by the inadequate office accomodation and the lack of proper equipment.

MINISTRY OF HEALTH SURVEYS. In July an Inspector of the Ministry of Health visited the district and spent a week in scrutinising the sanitary supervision and administration of the district. The survey was a very thorough one and went into all the activities of the Public Health department, except those concerned with housing. As a result representatives of the Local Authority were invited to attend a conference at the Ministry of Health in December, and at this meeting the officials of the Ministry expressed their dissatisfaction at the state of affairs that had been found in general, and particularly with regard to the supervision of food and drink. Before his departure the Inspector made a number of suggestions as to the way the service could be improved and it will be my duty to include in my next year's report a statement of the extent to which these recommendations have been complied with. The chief cause of the trouble had been the allocation to the Sanitary Inspector of first one and then another duty outside his proper sphere, till it was no longer possible for him to carry out his sanitary duties with reasonable efficiency.

In December another Inspector of the Ministry of Health visited the district and devoted two days to a survey of the housing problem.

My impression of these surveys was that they served an extremely useful purpose. Only too often are Local Authorities left to do their job in their own way, like fowls incubating their own little clutch of eggs, ignorant alike of the methods and standards adopted elsewhere, till it is only on the failure of the eggs to hatch or the discovery that they are positively addled that any notice is taken, and then rather in a spirit of criticism than in appreciation of the effort previously involved. This isolation is apt to induce what almost amounts to a doctrine of defeatism—'I may be bad but others are worse.' Visits of officers of the Ministry, with their unrivalled knowledge of all that is best in Public Health work, are both informative and encouraging; and I should like to see them made a frequent feature of sanitary administration.

PUBLICITY AND PUBLIC CO-OPERATION. Though no direct publicity has been undertaken by the Council there is no doubt that the services available might be much more widely known than they are. Perhaps this is due to some extent to the very general neglect of the requirement that the name and address of the Medical Officer of Health should be entered in every rent book, but it is contributed to as well by the rather complex allocation of duties between the County and Rural District Council which leaves even the more educated ratepayer in doubt as to who is responsible for what. To try to combat this ambiguity I have included at the end of this report a summary of the available services and the way they may be secured.

The co-operation of the public in drawing the attention of the Public Health authorities to conditions which they believe to be detrimental is very valuable and is always appreciated. True, the complaint may prove to be ill founded or not amenable to treatment; but if it is addressed, as it should be, to the Medical Officer of Health of the Midhurst Rural District, it will always be treated confidentially and carefully investigated, and, if necessary, laid before the appropriate committee. The best way to Midhurst is not necessarily via London, S.W.1.

WATER. Water supplies have been very much in the public eye this year and the difficulties of the Midhurst Rural District are not unusual in being amenable to no ready solution. Last year I had to report on the unsatisfactory situation at Upperton, and this year I have reported on the parishes of Harting and Rogate. In the former South Harting receives an uncontrolled supply of doubtful purity through the medium of stand-pipes; while Nyewood is dependant on a totally inadequate number of wells. In Rogate parish the inhabitants of Durleigh Marsh go to a roadside ditch, and the village itself uses a number of wells (like those at Upperton) some of which yielded samples which proved very unsatisfactory on analysis. The needs of these two parishes are now under investigation by Messrs. Taylor, the Councils water engineers.

The trouble in Upperton and Rogate, and also no doubt in other villages not yet specifically investigated, resolves itself into two main factors. First, that the inhabitants have to dispose of the contents of their earth closet pails in their gardens; and in those gardens, often uncomfortably near by are the wells on which they are dependant for their water supply. Secondly these wells are almost all of a type notoriously liable to admit surface water which, from what has gone before, is only too likely to be polluted. They have stone or brick sides devoid of any waterproof rendering, their tops are not raised and sloped away from the opening, and the water is lifted by bucket and windlass.

In this connection a word on the value of sampling may be of value. A sample shows no more than that a supply was or was not polluted at one particular moment. This was well demonstrated in the investigation into the Bournemouth typhoid outbreak of 1936 where repeated examinations gave a satisfactory result before contamination and the *Bacillus Typhosus* were found. What really matters, in fact, is not the state of the water on one occasion, valuable as the information may be, but the liability of a supply to pollution. The analyst's report may be useful in confirming this liability. It is particularly valuable where regular sampling is practiced, since then a change from the standard usually maintained by that particular supply will immediately secure attention.

The obvious remedy to the risks of individual wells is to instal a main supply; and there is no doubt that such a supply would be an enormous contribution not only to the health but also to the general welfare of the users, as will be readily appreciated by anyone who has to lift by hand every drop of water he uses. But the cost of collection, preparation and distribution render such a procedure prohibitive for all but the larger centres, and there are bound to be many houses for ever out of range of any main supply. Moreover, as the experience of Croydon has shown, the private well has one great advantage to the community, that whatever the danger to the individual may be, the number of persons at risk is always small, and the possibility of an extensive outbreak of water-borne disease is reduced to a minimum. Proper disposal of sewage and a more extensive use of the best methods of maintaining wells in good condition would go a long way towards removing their dangers, and attention to these points will be needed wherever the advantages of a main supply cannot be secured.

In discussions on the water supplies of the Midhurst Rural District reference is sometimes made to the report prepared by Messrs. Binnie, Deacon and Gourley for the West Sussex County Council when a comprehensive scheme was contemplated in 1934. As this report has not been generally available, and as conditions are more or less the same still, I have included the relevant section as an appendix to this Report, by kind permission of the County Medical Officer.

HOUSING. Seeing that the vast majority of the working class houses in the District were imperfect the first thing was to adopt some classification which would shew which were most in need of attention. Accordingly the following standards were adopted:—

Class A are either entirely satisfactory houses or houses with such minor defects as need cause no anxiety to the Sanitary Authority if left uncorrected; they are cases in which the advice of the Authority may be welcome to the owner.

Class B are difficult to define exactly since they are worse than A and better than C. They are houses which need minor structural repairs or moderate sanitary ones; houses which, if left untreated, will need further action.

Class C The Ministry of Health memorandum suggests that a house should be:—

1. Free from serious dampness.
2. Satisfactorily lighted and ventilated.

3. In good general repair.
4. Properly drained and provided with proper sanitary conveniences, and with a sink and suitable arrangements for the disposal of slops.
5. Provided with a proper water supply, washing accommodation, ventilated food store, and facilities for preparing and cooking food.

Any house that is seriously defective in any of these respects would automatically come into Class C. So would any house moderately defective in several of them. Structural considerations alone are not the deciding factor.

In the main this Class C corresponds to the 1 (3) in Section D of the report that follows. It also contains a few houses with nuisances within the scope of the Public Health Act.

For one assistant sanitary inspector with totally inadequate secretarial assistance, this programme of inspecting, recording, and following up soon became quite unmanageable; and with constantly repeated requests for fresh inspections it was the recording and following up which had to suffer. A very great deal of work of this kind still remains to be done, and the efficiency and utility of the whole programme has suffered as a result. It is much to be hoped that reallocation of the Sanitary Inspectors duties in 1938 will have the effect of correcting this defect.

The procedure followed where defects have been found has been to send to the owners of Class B property a polite reminder of the existence of defects, and to the owners of the Class C houses a list of works which ought to be carried out and a request that they will proceed with them as soon as possible. That this informal method has been the means of securing much improvement in housing conditions is quite obvious; but that it should invariably be used and that the provisions of the Housing Act should be ignored is a proposition which increasing experience of the informal method leaves me less and less able to accept.

In the first place there are bound to be a certain number of houses which are of a type which should be got rid of once and for all. Such a house is a bungalow at Nyewood, a back-to-back structure with an almost entirely North aspect. In October, 1936, I reported that "I do not think it could be made fit for human habitation even if it were put into a good state of repair." None the less the Council asked for certain works to be carried out, and this was done during the course of the year. To-day I remain unrepentantly convinced of the truth of my original recommendation.

Secondly the avoidance of statutory action has inevitably prolonged the use of unfit houses. In 1936 fifty houses were found to be in such a state as to be injurious to health. Forty of these were reported on in February 1937, and in the ensuing discussion I suggested the application of the Clearance Area provisions of the Housing Act wherever possible. However, the Councils Architect was instructed to draw up lists of necessary repairs for informal presentation to the owners. This was done, and at the end of the year the position was as follows :—

A.	Nothing done	...	...	...	23	
	„	„	by agreement with R.D.C.	...	2	
	„	„	but subsidy applied for (H.R.W.A.)		6	
					—	31
B.	Minor repairs	...	...	...		4
C.	Extensive repairs	...	...	...		12
D.	Repairs in progress	...	...	...		3
						—
						50
						—

These houses were originally unfit for human habitation, many of them grossly so; yet ten months after the original representation the majority of them are, if changed at all, changed only for the worse.

Thirdly the universal rejection of demolition has resulted in the perpetuation of standards long since obsolete, while denying to the ratepayers the advantages of modern homes which, with the aid of a "slum-clearance" subsidy, could have been let at a more economic rent than that at present charged for council houses.

Of course there are arguments in favour of the other course of action, but my own feelings in looking back at the results of the campaign of 1937 are largely feelings of disappointment that the more serious aspects of the problem should be so little improved.

But, not to end my observations on a note of chagrin, it is a pleasure to record the growing interest in the improvement of sanitary conditions generally, and the co-operation not only of so many members of the Council but of the public in general.

I am, Ladies and Gentlemen,

Your obedient servant,

J. L. NEWMAN.

PART 2.

PUBLIC HEALTH OFFICERS OF THE RURAL DISTRICT COUNCIL.

J. L. NEWMAN, B.A., M.D., B.Ch. (Cantab), M.R.C.P. (Lond.), M.R.C.S. (Eng.), D.P.H. Medical Officer of Health. Also Assistant County Medical Officer and Assistant School Medical Officer, West Sussex County Council.

S. E. STRATFORD, Senior Sanitary Inspector. Also Waterworks and Sewage Works Manager. Manager of Scavenging and Cleansing Department. Housing Manager. Inspector under the Petroleum Consolidated Act.

J. B. JACKSON, A.R.S.I. Additional Sanitary Inspector.

C. W. SPRING, Clerk.

SECTION A.

Area (acres)	...	...	...	...	66,892
Registrar General's estimate of resident population (mid. 1937)	...	...	...	...	14,350
Estimated No. of inhabited houses according to Rate Books* (end of 1937)	...	...	...	...	4,170
Rateable Value	...	...	...	...	£99,348
Sum represented by a penny rate	...	...	...	...	£407

SOCIAL CONDITIONS.

Midhurst district is mainly agricultural, the chief industry being dairy farming. Common lands and woodland occupy a relatively large part of the district but the number of people employed on the latter is inevitably small. There is a residential area in the neighbourhood of Haslemere, and this is likely to grow more rapidly now that the Southern Railway line to London has been electrified. There is virtually no unemployment in the district.

*The number of houses actually inhabited was not recorded. The total number of houses in the District is 4,470.

EXTRACTS FROM VITAL STATISTICS FOR THE YEAR.

			M.	F.	TOTAL
1 (a)	Live births.	Legitimate	... 98	91	189
		Illegitimate	... 3	5	8
		Total	... 101	96	197
(b)	Birth rate per 1,000 of the estimated resident population	...	...	...	13.73
2 (a)	Still births.	Legitimate	... 4	3	7
		Illegitimate	... 0	0	0
(b)	Rate per 1,000 total (live and still births)			...	34.31
3 (a)	Deaths	...	... 81	101	182
(b)	Standardised death rate per 1,000 of the estimated resident population	...	...	...	10.02
4	Deaths from puerperal causes.	Rate per 1,000 total births.			
	No. 29 puerperal sepsis	1		4.90	
	No. 30 other puerperal causes	0		0.00	
	Total	1		4.90	
			M.	F.	TOTAL
5 (a)	Deaths of infants under one year of age.				
	(1) Legitimate	...	... 4	6	10
	(2) Illegitimate	...	... 1	0	1
	(3) Total	...	... 5	6	11
(b)	Death rate of infants under one year of age.				
	(1) Legitimate infants per 1,000 legitimate live births	...	...	...	52.91
	(2) Illegitimate infants per 1,000 illegitimate live births	...	...	...	125.00
	(3) All infants per 1,000 live births			...	55.84
6	Deaths from Cancer (all ages)	...	11	14	25
7	Deaths from Measles (all ages)	...	0	0	0
8	Deaths from Whooping Cough (all ages)	...	0	1	1
9	Deaths from Diarrhoea (under two years of age)	...	0	0	0

VITAL STATISTICS, 1937. COMPARATIVE TABLE.

England & Wales	West Sussex				Administrative County
	Urban Districts	Rural Districts	Midhurst R. D.		
Birth Rate	14.9 (14.8)	13.32 (13.06)	14.66 (14.62)	13.73 (14.09)	13.93 (13.76)
Death Rate	12.4 (12.1)	13.88 (13.98)	11.87 (11.99)	10.02 (13.04)*	12.98 (13.08)
Infant Mortality Rate per 1,000 births	58 (59)	46 (38)	45 (33)	55.86 (34.43)	46 (35)
Maternal Mortality Rate per 1,000 births	3.11	0.5 (3.3)	3.5 (2.4)	4.90 (4.69)	1.9 (2.9)
Death Rate from T.b (Respiratory)		0.50 (0.46)	0.34 (0.49)	0.63 (0.48)	0.43 (0.47)
Cancer Death Rate		2.23 (2.4)	1.76 (1.87)	1.71 (1.45)	2.02 (2.16)

The figures in brackets are those for 1936.

*This figure is not strictly comparable since it is the "crude" death rate whereas the other figures are the "standardised death rate."

CAUSES OF DEATH.

			M.	F.	TOTAL
1	Typhoid and paratyph fever	...	0	0	0
2	Measles	... ..	0	0	0
3	Scarlatina	... ..	0	0	0
4	Whooping Cough	... ..	0	1	1
5	Diphtheria	... ..	0	0	0
6	Influenza	... ..	6	5	11
7	Enceph. Lethargica	... ..	0	0	0
8	Cerebro-spinal Fever	... ..	0	0	0
9	Tuberculosis of resp. system	... ..	7	2	9
10	Other Tuberculosis	... ..	1	1	2
11	Syphilis	... ..	0	0	0
12	G.P.I. Tabes, etc.	... ..	0	0	0
13	Cancer	... ..	11	14	25
14	Diabetes	... ..	2	1	3
15	Cerebral Hæm., etc.	... ..	6	11	17
16	Heart Dis.	... ..	17	24	41
17	Aneurism	... ..	1	0	1
18	Other circulatory dis.	... ..	6	7	13
19	Bronchitis	... ..	1	2	3
20	Pneumonia (all forms)	... ..	2	2	4
21	Other resp. diseases	... ..	1	1	2
22	Peptic Ulcer	... ..	1	2	3
23	Diarrhœa (under 2 years)	... ..	0	0	0
24	Appendicitis	... ..	0	2	2
25	Cirrhosis of liver	... ..	0	0	0
26	Other liver dis.	... ..	1	0	1
27	Other digestive dis.	... ..	0	0	0
28	Ac. & Chr. Nephritis	... ..	1	2	3
29	Puerperal Sepsis	... ..	0	1	1
30	Other puerperal dis.	... ..	0	0	0
31	Con. deb., Prem. birth, etc.	... ..	3	4	7
32	Senility	... ..	4	6	10
33	Suicide	... ..	1	0	1
34	Other violence	... ..	3	3	6
35	Other defined dis.	... ..	6	10	16
36	Ill-defined or N.K.	... ..	0	0	0
	Total	...	81	101	182

SECTION B.

1. (ii) (a) Laboratory facilities.

The Council is a member of the Clinical Research Association, but new facilities became available during the course of the year in the form of the West Sussex County Council laboratories at the County Hall, Chichester. This laboratory is under the supervision of C. J. Harwood Little, O.B.E., M.B., and is equipped for all the usual serological and bacteriological work. Outfits for the collection of specimens are available for all medical practitioners in the district on application to the laboratory or to the public health department, and specimens can be sent by Post or by Southdown Bus to the West Street depôt of the Bus Company whence they can be collected if the Laboratory is rung up and asked to do so.

This dual laboratory service is likely to be an improvement since the examination of specimens on the day they are taken may represent a saving of twelve hours in the obtaining of a result. The Council's Officers will find too that it simplifies the transmission of milk samples; and in the case of water analyses the simple bacteriological tests carried out there will probably prove an economy. On the other hand there will be several medical practitioners whose work takes them into other districts whose Local Authorities are members of the Clinical Research Association and who will prefer to continue to send their routine specimens to the Association.

The West Sussex County Council continues to undertake the pathological work in connection with the services which it specifically administers—tuberculosis, venereal diseases, and maternity and child welfare.

(b) Ambulance Facilities.

The general ambulance work of the district is carried out by the British Red Cross.

The old ambulance, a converted Morris commercial van, was at last becoming worn out and incapable of carrying out its duties, and so the Council presented the Detachment with a new

ambulance, a Bedford 26 h.p., which is now in use, having been adapted and improved. On one side is a stretcher on a special sliding device to permit of easy handling, and on the other a locker which can be used as a seat or expanded to take a stretcher stowed inside it. First aid equipment is carried on board, and blankets and splints are kept in readiness in the Commandant's house. I am indebted to Mr. N. J. Melhuish, the Commandant, for the following details of the year's activities, which show that the useful work of the Detachment has been continued, though in somewhat diminished extent owing to the fact that at the end of its career the old ambulance was not fit to undertake long journeys.

Personnel—One Commandant, 12 members.

No. of miles travelled	...	...	...	1234
No. of patients carried (sickness)		...	...	35
" " " " (accidents)		...	...	8
				—
				43

(c) Nursing in the home is carried out by thirteen Queen's Nurses eleven of whom live in the District (c.f. the summary in Appendix 2).

(d) Treatment Centres and Clinics.

Clinics for expectant mothers and/or young children under school age are under the control of the West Sussex County Council. Attendances at these clinics have been as follows.

Clinic	Sessions	Children		Mothers
		Birth—1	1—5	
Midhurst	47	667 (41)	852 (17)	19 (16)
Camelsdale	51	440 (25)	426 (13)	— —
Milland and Rake	12	43 (3)	137 (3)	2 (2)

The figures in brackets refer to new attendances.

In addition the County Council's specialist and consultative facilities are available for children under five as they are for school children.

There is no school clinic in the District, but children in need of the various forms of treatment undertaken by the County Council receive it at Chichester. They may thus be brought under the care of the Tuberculosis Officer, Orthopædic Surgeon, Aural Surgeon or Oculist. Dental treatment, and the operative treatment of tonsils and adenoids, are provided locally, the former by Mr. E. N. Stevens, L.D.S., the latter at Easebourne Cottage Hospital.

SECTION C.

1. (i.) Water.

No new sources of supply or extension of mains on a large scale have been brought into use during the year. The Council's main supply has continued to be entirely satisfactory as to quantity. A sample taken direct from the borehole showed the following features.

				grains per gallon.
Total solids	...	...	...	25
Chlorine	...	...	...	1.7
Ammonia	...	...	...	absent
Albuminoid ammonia	...	...	...	„
Nitrogen as nitrites	...	...	...	„
„ „ nitrates	...	...	...	0.05
Lead	...	...	...	absent
Other metals	...	...	...	„
Total hardness (Clark's scale)	...	...	...	15.1 deg.

Microscopic examination satisfactory.

“ From these results I am of opinion that the water is of a high degree of organic purity, it has a moderate degree of hardness and is well suited for drinking and general domestic purposes.

R. A. Cripps.

A sample of water from the Harting sump hole showed B. Coli present in 50 c.c.'s. As it was thought that this might have been a contamination from the cork the sample was repeated with the following results:—

THE COUNTIES PUBLIC HEALTH LABORATORIES.

Chemical results in parts per 100,000.

Appearance	Clear and bright	
Colour	Normal	Odour Nil
Reaction pH.	Neutral : 7.3	Free Carbonic Acids 1.31
Electric Conductivity at 20° C.	380	
Total Solids, 180° C.	25.0	
Chlorine in Chlorides	1.3	
Nitrogen in Nitrates	0.08	Nitrites absent
Hardness :		
Permanent	3.0	
Temporary	16.0	
Total	19.0	
Metals	Iron absent	Slight trace of Zinc
Free Ammonia	0.0004	Ammoniacal Nitrogen
Albuminoid Ammonia	0.0016	Albuminoid Nitrogen
Oxygen absorbed at 80° F.	0.020	

Bacteriological Results.

No. of Bacteria per c.c. or m.l.		
On Agar in 3 days at 20° C.	12	
1 day at 37° C.	1	
2 days at 37° C.	1	
The Bacillus Coli	Present in —	Absent in 100 c.c.
Bacillus Welchii	Present in —	Absent in 100 c.c.
(B. Enteritidis Sporogenes)		

REPORT. This is a clear and bright water, of normal colour, neutral reaction and containing a trace of free carbonic acid. The water contains no excess of saline matter, is hard in character, though not unduly so, contains a negligible trace of zinc, and is of good organic quality.

Bacteriologically it is of the highest degree of purity.

It is a pure and wholesome water, suitable for drinking and domestic purposes.

JOHN F. BEALE,

For Drs. Beale & Suckling.

In addition individual wells sampled gave the following results :

Satisfactory	...	...	18
Unsatisfactory	...	...	30
			—
Total	...	...	48

SUMMARY OF WATER SAMPLES TAKEN DURING YEAR 1937.

Ref. No.	Address.	Chemical or Bacteriological	Date taken	Report
47	Ryefield, W. Harting	C	4 1 37	Satisfactory
48		C	11 2 37	Unsatisfactory
49	School house, Wardley	C	11 2 37	do.
50	Smugglers, Gatehouse Lane	C	20 2 37	Satisfactory
51	Upperfold, Fernhurst	C	20 2 37	Unsatisfactory
52	Ayling, Trotton	C	20 2 37	Unsatisfactory
56	do.	C	2 3 37	do.
54	Gilbert, Quag, Minsted	C	31 3 37	do.
55	Council Cotts., Rogate	C	6 4 37	Satisfactory
56	Gen. Carey, Trotton	C	6 4 37	Unsatisfactory
57	Gilbert, Stedham	C	15 4 37	Satisfactory
58	Heyshott Spring No. 1	C	4 5 37	Satisfactory
59	do. No. 2	C	4 5 37	do.
60	do. No. 3	C	4 5 37	do.
61	Morley, Halfway Bridge	C	4 5 37	do.
62	Dip well, Terwick	C	8 5 37	Unsatisfactory
65	Ayling, Trotton	C	8 5 37	do.
64	Dip well, Durleigh	C	24 5 37	Satisfactory
65	South Heath Farm, Selham	C	25 5 37	do.
66	Kent House, Harting	C	27 5 37	Unsatisfactory
67	Hurst, Lickfold, No. 1	C	12 6 37	do.
68	Firs, Nyewood	C	28 6 37	do.
69	Hurst, Lickfold, No. 2	C	28 6 37	do.
70	Baldwyns, Fernhurst	C	28 7 37	do.
71	The Hole, Lurgashall	C	20 7 37	Satisfactory
72	Hurst, Lickfold, No. 3	C	20 7 37	Unsatisfactory
73	Killarney, W. Harting	C	22 7 37	do.
74	Whites Cottages, Camelsdale	C	6 8 37	Satisfactory
75	Ivy Cottages, Camelsdale	C	6 8 37	Unsatisfactory
76	Grove Cottages, Bell Road	C	6 8 37	do.
77	School House, Rogate, No. 1	C	12 8 37	do.
78	Hurst, Lickfold, No. 4	C	17 8 37	Satisfactory
79	Kent House, Harting	C	27 8 37	Unsatisfactory
80	Westons Farm Cottage, Iping	C	27 8 37	do.
82	Upper Tybalds, Fernhurst	C	5 10 37	Satisfactory
83	Lower Tybalds, Fernhurst	C	5 10 37	Unsatisfactory
84	Morleys Cottages, Fernhurst	C	5 10 37	Satisfactory
85	School House, Rogate, No. 2	C	19 10 37	Unsatisfactory
86	Hilton, Cocking Causeway	C	19 10 37	do.
88	Cowdray Cottages, Bepton	C	8 11 37	Unsatisfactory
91	Terwick Bungalows	C	27 11 37	Unsatisfactory
92	Aburrow, Milland	C	27 11 37	do. zinc
93	Dudley M. Paul, Linchmere	C	1 12 37	Satisfactory
94	Taylor's Cottages, Rogate	C	11 12 37	Unsatisfactory
95	Watercress beds, Cocking	C & B	14 12 37	Satisfactory
96	Terwick Bungalows	C	17 12 37	Unsatisfactory
97	Kings Arms, Fernhurst	C	17 12 37	do.
99	Telephone Exchange, Rogate	B	31 12 37	Satisfactory

Appropriate advice has been given to those whose supplies were found to be unsatisfactory and they will be followed up during the course of the coming year.

Main supplies sampled were as follows.

No.	Source	Chemical or Bacteriological	Date	Result
81	No. 2 bore Rotherfield	C.	11. 9.37	Satisfactory
87	Fernhurst (Wey Valley)	C.	8.11.37	Satisfactory
89	Standpipe, S. Harting	C.&B.	16.11.37	Unsatisfactory
90	Standpipe, S. Harting	C.&B.	26.11.37	Satisfactory

The water supply of South Harting has been found to be insufficient, that of Nyewood both insufficient and unsatisfactory, that of Durleigh Marsh and Rogate village unsatisfactory. These facts, together with some of their implications, are discussed in greater detail in the Introduction. The whole question for these areas is now under review by the Council's engineers.

(ii) Drainage and Sewerage.

The comprehensive scheme for the drainage of the populous areas around Camelsdale, situated in the parishes of Linchmere and Fernhurst has been completed, and 272 fresh connections have been made to the sewer.

The next step is to secure a main sewer for Fernhurst village itself. A plan for this service was the subject of a public enquiry held in the village hall on September 23rd, but the Minister's sanction had not been received by the end of the year.

A small septic tank and contact bed installation to deal with the sink wastes of Rogate was under construction.

2 Rivers and Streams.

The brook at South Harting has long been in an unsatisfactory state, and a long spell of dry weather aggravated its condition and brought matters to a head with a number of complaints. A special investigation and report followed. It was found that the domestic drainage was discharged to a large extent into the brook, some directly, some via the storm-water drains. The inadequate water supply to the houses left this drainage very concentrated, and the poor flow was apt to lead to nuisance from the road-side

gratings. The brook itself is enough to carry away these domestic waste waters only when there is a good flow ; but for a great part of the year there is a mere trickle, and this is obstructed by stones, and by domestic refuse which was carelessly dumped into it instead of being disposed of in the collection provided.

The conclusion of the report was as follows :—

“ Whatever else is done it will be necessary to put an end to the disposal of house refuse in the brook. This will involve :—

1. The posting of notice boards forbidding the practice, and the enforcement of this, as already approved.
2. The provision of proper dustbins to make it possible for the householders near the brook to store their refuse between collections.

As regards the drainage nuisance there are two possible alternatives.

1. To institute a complete drainage system and purification plant for the whole village. This would be a complete remedy for this part of the trouble, and would put an end to the expense of emptying e.c. pails and cesspools (at least one of which—in North Street—is situated close against the back door). On the other hand it is very costly and would leave the water question unsolved.

2. To lay a sufficient supply of water throughout the village with domestic pipes and fire hydrants. An increased outflow of water from the existing drains would so dilute the sink outflows as materially to lessen their nuisance. The fire hydrants would be invaluable in an emergency, and their use in dry weather to flush the road-side drains would stop the smells that arise from gratings when lack of storm water allows the sink wastes to stagnate. If also the brook bed were cleared of obstructions, and a proper conduit constructed at the lower end (the present one does not extend far enough and is too small to prevent flooding in the winter) it is possible that the present difficulties would be surmounted ; while at the same time a ready water supply would confer on all the inhabitants a much more real advantage than they would obtain from a drainage system designed to eliminate smells that worry only a proportion of them.”

A combination of these two methods, the provision of both water and drainage, is now under consideration.

3 (i) CLOSET ACCOMODATION. Most of the houses in Camelsdale that have made connections to the main sewer already enjoyed a water-carriage system. Consequently there has been little reduction in the number of earth closets during the year, and exact information is not available for the number that still exist.

(ii) PUBLIC CLEANSING. No alterations have been made in the previous arrangements. A nuisance at the Harting Dump was abated by the council's employees.

(iii) SANITARY INSPECTION OF THE AREA. Partly owing to the alterations described in the beginning of my introduction to this report there has been no systematic record-keeping comparable with what has been in use before or will be in use hereafter. The usual statistical summary has therefore been omitted this year.

(iv) SHOPS. No action has been taken during the year under the provision of the Shops Act, 1934.

(v) SMOKE ABATEMENT. No action under this heading has been called for during the year.

(vi) SWIMMING BATHS. No swimming baths are open to the public.

(vii) BED BUGS. No bed bugs have been reported in the district.

(viii) FACTORIES & WORKSHOPS.

Factories, Workshops and Workplaces.

1. Inspection.

Premises	Inspections	Written Notices	Occupiers Prosecuted
Factories ...	18	0	0
Workshops ...	20	0	0
Workplaces ...	0	0	0
Total ...	38	0	0

Particulars.	Number of Defects.			Number of offences in respect of which Prosecutions were instituted.
	Found.	Remedied.	Referred to H.M. Inspector.	
<i>Nuisances under the Public Health Acts :—*</i>				
Want of cleanliness ...	1	1		
Want of ventilation ...	3			
Overcrowding ...				
Want of drainage of floors ...				
Other nuisances ...	1			
Sanitary accommodation—				
Insufficient ...				
Unsuitable or defective ...	1			
Not separate for sexes ...				
<i>Offences under the Factory and Workshop Acts :—</i>				
Illegal occupation of underground bakehouse (s. 101) ...				
Other offences ...				
(Excluding offences relating to outwork and offences under the Sections mentioned in the Schedule to the Ministry of Health (Factories and Workshops Transfer of Powers) Order, 1921).				
Total ...	6	1		

*Including those specified in sections 2, 3, 7 and 8 of the Factory and Workshop Act, 1901, as remediable under the Public Health Acts.

4. Schools.

The Medical Officer of Health, in his capacity of Assistant school medical officer, reports on matters adversely affecting the health of school children after each visit to a school, and through the information thus supplied the County Director of Education has been able to end the insanitary conditions which have long been a reproach to Harting School. Last year the Medical Officer's efforts were confined rather to the abatement of actual nuisances, but through the latter part of 1937 he has been making a comprehensive review of the school properties. This review is not yet complete but the information collected is being forwarded to the proper authorities from time to time in the hope that something amounting to reconstruction will be carried out in the worst specimens.

And no-one who is familiar with the condition of the Church Schools throughout the District is likely to question the need for reconstruction. There is not a single up-to-date building of the kind, and the lofty neo-gothic halls of the late Victorian epoch are utterly out of keeping with all modern ideas of what a school ought to be. In a district which is distinguished for its admirable climate and its unpolluted atmosphere a surprising feature is the complete lack of suitable shelters where rest and education can be conducted on open-air lines. And though open spaces abound, the lack of proper play-ground facilities must render almost impossible the proper use of the admirable physical education syllabus of to-day. At Midhurst, for instance, the playgrounds are a rough piece of hillside and an unpaved patch of soil, dusty in the summer and unusable in wet weather. And many other schools are little better off.

Another defect, conspicuous in a district in which very many of the children have to make long journeys to school in all weathers, is the almost complete lack of any provision for the drying of clothes.

At a meeting of the responsible authority it was decided to abandon the project of building a new senior church school in Midhurst, and instead to devote its resources to improving existing church schools. There can be little doubt that this latter course will be far more beneficial to the school population as a whole, and it is much to be hoped that it will not lack the funds which were so generously offered for the more spectacular plan originally proposed.

SECTION D.

HOUSING.

1. Inspection of dwelling houses during the Year:—			
(1)	(a)	Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	356
	(b)	Number of inspections made for the purpose	530
(2)	(a)	Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925	353
	(b)	Number of inspections made for the purpose	527
(3)		Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	36
(4)		Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	273
2. Remedy of defects during the Year without service of formal notices:—			
		Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers	167
3. Action under Statutory Powers during the Year:—			
A.—Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936:—			
(1)		Number of dwelling-houses in respect of which notices were served requiring repairs	0
(2)		Number of dwelling-houses which were rendered fit after service of formal notices:—	
	(a)	By owners	0
	(b)	By Local Authority in default of owners	0
B.—Proceedings under Public Health Acts:—			
(1)		Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	0

- (2) Number of dwelling-houses in which defects were remedied after service of formal notices :—
- | | | | | |
|---------------|-----|-----|-----|---|
| (a) By owners | ... | ... | ... | 0 |
|---------------|-----|-----|-----|---|

- | | | | | |
|---|--|--|--|---|
| (b) By Local Authority in default of owners | | | | 0 |
|---|--|--|--|---|

C.—Proceedings under Sections 11 and 13 of the Housing Act, 1936 :—

- | | | | |
|---|-----|-----|---|
| (1) Number of dwelling-houses in respect of which Demolition Orders were made | ... | ... | 0 |
|---|-----|-----|---|

- | | | | |
|--|-----|-----|---|
| (2) Number of dwelling-houses demolished in pursuance of Demolition Orders | ... | ... | 0 |
|--|-----|-----|---|

D.—Proceedings under Section 12 of the Housing Act, 1936 :—

- | | | | | |
|--|-----|-----|-----|---|
| (1) Number of separate tenements or underground rooms in respect of which Closing Orders were made | ... | ... | ... | 0 |
|--|-----|-----|-----|---|

- | | | | | |
|---|-----|-----|-----|---|
| (2) Number of separate tenements of underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit | ... | ... | ... | 0 |
|---|-----|-----|-----|---|

4. Housing Act, 1936.—Part IV.—Overcrowding :—

- | | | | | |
|---|-----|-----|-----|----|
| A.—(1) Number of dwellings overcrowded at the end of the year | ... | ... | ... | 48 |
|---|-----|-----|-----|----|

- | | | |
|---|-----|----|
| (2) Number of families dwelling therein | ... | 56 |
|---|-----|----|

- | | | |
|--|-----|-----|
| (3) Number of persons dwelling therein | ... | 324 |
|--|-----|-----|

- | | | | | |
|---|-----|-----|-----|---|
| B.—Number of new cases of overcrowding reported during the year | ... | ... | ... | 8 |
|---|-----|-----|-----|---|

- | | | | | |
|---|-----|-----|-----|----|
| C.—(1) Number of cases of overcrowding relieved during the year | ... | ... | ... | 39 |
|---|-----|-----|-----|----|

- | | |
|--|-----|
| (2) Number of persons concerned in such cases... | 226 |
|--|-----|

- | | | | |
|---|-----|-----|---|
| D.—Particulars of any cases in which dwelling-houses have again become overcrowded after the Local Authority have taken steps for the abatement of overcrowding | ... | ... | 0 |
|---|-----|-----|---|

The abatements were carried out as follows :—

1.	By Local Authority—				
	(a)	By transfer to Council Houses	...	...	5
	(b)	By ejectment (for non-payment of rent)	...	...	1
2.	By owner	...	...	...	5
3.	By tenant—				
	(a)	Moving to larger house	...	...	3
	(b)	Increasing own accomodation	...	...	1
	(c)	Leaving district	...	...	7
	(d)	Leaving to another parish	...	...	1
	(e)	Reducing number of occupiers	...	...	9
4.	By inclusion of landing as bedroom	...	...	...	7
					—
					39

SECTION E.

INSPECTION AND SUPERVISION OF FOOD.

(a & b) Milk supply and meat and other foods. It was on these subjects particularly that the Minister of Health expressed dissatisfaction. Since action as a result of his report was not possible during the year it would be inopportune to enter into greater detail; but a more particular survey of the duties of the Sanitary Authority and the way in which they have been carried out will be incorporated in next year's report. The following summary relates to meat inspection since July 14th.

CARCASES INSPECTED.

	Cattle excluding Cows	Cows	Calves	Sheep & Lambs	Pigs
No. killed if known	not known	—	—	—	—
No. inspected ...	16	6	6	77	86

No carcasses or parts of carcasses were condemned for Tuberculosis or other disease.

(c) ADULTERATION, ETC. The West Sussex County Council is the authority responsible for action under this heading.

(d) CHEMICAL AND BACTERIOLOGICAL EXAMINATION OF FOOD. The West Sussex County Laboratory will in future undertake the work of bacteriological testing of milk samples.

(e) NUTRITION. No nutrition propaganda has been undertaken.

SECTION F.

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS
AND OTHER DISEASES.

1. Under §63 of the Local Government Act, 1929, the County Council was required to make a survey of the existing hospital accommodation for cases of infectious disease, and to prepare a scheme for adequate hospital accommodation of this kind. To quote the Ministry of Health memorandum on the subject—

“ Experience has shown that a large Hospital serving a wide area forms a more satisfactory administrative unit than a number of smaller Hospitals serving smaller areas, and with modern means of transport the removal of patients to a Hospital situated at some distance from their homes presents little difficulty. It is suggested therefore that the County Council should consider whether it would be advisable to close any small Hospitals which are found not to be satisfactory, and to enlarge those Hospitals which are satisfactory in all respects and can conveniently be extended and made to serve a wider area.”

It was further pointed out that there was a growing need for provision of Hospital accommodation for complicated cases of measles and whooping cough, and for the acute infectious diseases of the central nervous system.

Accordingly a new scheme has been brought into operation. In brief this scheme provides that the Midhurst R.D.C. shall form part of one area (along with Petworth and Chichester Rural Districts, Bognor Regis U.D., and Chichester City) which shall be served by two Hospitals, Bognor Regis of twenty-eight beds and Chichester City of twenty-six. Midhurst Rural District will retain four beds in the Chichester City Isolation Hospital. This is fewer than is usually reckoned on a population basis, but it is thought to represent an adequate provision for any one moment to meet ordinary demands; while in the event of extraordinary circumstances the combined accommodation of the two Hospitals working in conjunction should be enough.

The Chichester City Isolation Hospital provides fourteen beds in its old buildings, and an up-to-date block of twelve beds in cubicles has recently been added. The nursing staff consists of a matron and one sister who are fully trained, and by five nurses trained in infectious diseases. Its medical superintendent is A. M. Barford, M.D., F.R.F.P.S., D.P.H., the Medical Officer of Health.

Thus officially comes to an end the original arrangement for the treatment of infectious diseases at the Brighton County Borough Isolation Hospital. This arrangement had always proved entirely satisfactory, and the hospital staff are to be thanked for all they have done in the past.

2. INFLUENZA.

The epidemic of influenza which began to affect the district at the end of 1936 was at its worst in the beginning of the following year, but was of short duration. It seems to have contributed to five deaths in January, one in February, and three in April, an unexpectedly heavy mortality in view of the general mildness of the attacks and the fact that no other cases of influenzal pneumonia were brought to the notice of the health department.

CHICKEN POX AND WHOOPING COUGH.

There were the usual outbreaks of infection in schools and the returns of the teachers show them to have been as follows:—

School	Month	Disease	No. of cases Reported
Fernhurst	January	Chicken Pox	15
Tillington	February	Whooping Cough	6
Fernhurst	March	Whooping Cough	31
Camelsdale	June	Chicken Pox	32
Easebourne	December	Chicken Pox	10

These returns are probably more or less incomplete for the particular schools mentioned, and no doubt smaller outbreaks were unrecorded.

DIPHTHERIA IMMUNISATION.

A beginning of immunisation was made in December, 1936 with 32 children attending Midhurst school, the only work of the kind before having been a special request visit to Easebourne when twelve children were immunised. For the sake of completeness these have been included in the tables that follow. In these the figures represent the number of children whose full course of injections was completed; the figures in brackets represent the number of children in addition who received a first injection only.

Under		5	6	7	8	9	10	11	12	13	14	Total
School Age.												
Bepton	4	1	7	4	4	4	1 (1)	5	0	1	0	31 (1)
Camelsdale	2	4 (1)	12 (1)	9	11 (2)	12 (2)	6 (1)	2 (1)	2 (1)	2 (1)	0	62 (10)
Cocking	0	0	1	0	0	4	0	0	0	0	0	5
Easebourne	2 (1)	1 (3)	4 (2)	6 (1)	8	4 (1)	6 (1)	3	6	2	1	43 (9)
Elstead	2	2	2	3	5	2	1 (1)	3	1	0	0	21 (1)
Fernhurst	8 (4)	8	7	12	6	11 (1)	10	10	9	10 (1)	2	93 (6)
Grafham	0	2	0	1	1	2	0	0	0	0	0	6
Harting	20 (1)	3	8	7	5 (1)	8	3	1	0	2	0	57 (2)
Heyshott	9	3	5	7	5	6	5 (1)	8	5	3	1	57 (1)
Hollycombe	3	4	1	6	2	1	7	1	2	4	0	31
Lynchmere	5	3	4	2	0	2	4	0	3	1	0	24
Lodsworth	1	0	6 (1)	8	1	4	1 (1)	1 (1)	0	2	3	27 (3)
Lurgashall	1	1	5	3	6	5	1	4	2	3	1	32
Midhurst	4 (1)	5	7	6	5	2	4	1	0	0	1	35 (1)
Milland	6	6	5	7	6 (1)	3	4 (1)	1	0	1	0	39 (2)
Rogate	6 (2)	9	11	4	9	6	5	0	2	0	0 (1)	52 (3)
Stedham	6	1	4	5 (1)	6	4	8	6	3	1	3	47 (1)
Tillington	2	6	5	3	7	1	8	2	2	0	0	32
W. Lavington	1	2	4	3	1	0 (1)	4	1	0	0	0	16 (1)
Woolbeding	1	2	1	0	2	3	1	1	3	4	0	18
Camelsdale I.W.C.	15 (7)	0	0	0	0							15 (7)
Midhurst I.W.C.	22 (1)	1	1 (1)	0	1							25 (2)
Total	120 (17)	64 (4)	99 (6)	96 (2)	91 (4)	80 (9)	79 (7)	50 (2)	40 (1)	36 (2)	12 (1)	772 (50)

The number of school children who have completed immunisation expressed as percentages of the school population is as follows :—

1	Heyshott	...	73	9	Rogate	...	44
2	Fernhurst	...	72	10	Woolbeding	...	38
3	Bepton	...	69	11	Camelsdale	}	37
4	Lynchmere	...	63		W. Lavington		
5	Elstead	...	61	12	Harting	...	34
6	Tillington	}	52	13	Lodsworth	}	33
	Milland				Easebourne		
	Lurgashall			14	Graffham	...	20
7	Stedham	...	46	15	Midhurst	...	16
8	Hollycombe	...	45	16	Cocking	...	11

Compared with the rest of W. Sussex the results are as follows :—

	Population	No. on School Registers	No. of children Immunised
Urban Districts—			
Arundel	2414	230	159
Bognor	19560	1612	848
Chichester	16370	1971	1416
Horsham	14770	1313	360
Littlehampton	11130	1450	484
Shoreham	10790	1252	475
Southwick	9266	916	355
Rural Districts—			
Chichester	17090	3427	1653
Chanctonbury	32620	1264	316
Horsham	22430	2381	1364
Midhurst	14350	1489	772
Petworth	8160	915	479
Worthing	22350	1549	506

For the sake of convenience the first batch of Tillington children were immunised at an adjacent session in Petworth, where the Medical Officer of Health, Dr. C. F. Brockington, gave each a single injection of 0.5 c.c. A.P.T. Apart from these none have been treated on "one-shot" lines. Excellent results and a freedom from unpleasant results have been reported from other districts as a result of using two injections of Alum Precipitated Toxoid, the first of 0.1 c.c. and the second (three or more weeks later) of 0.5 c.c., and accordingly, this has been the method used in the Midhurst District. The absence of severe reactions has been confirmed in the Midhurst series for the worst result reported was no worse than a wasp sting and the vast majority of the younger children escaped even this.

The alternative method of immunisation with three doses of Toxoid Antitoxin Floccules was used in some four children whose general health rendered any possible reaction particularly undesirable. These were given by a private medical practitioner.

As to the efficacy of the general method no evidence can be adduced. There was no preliminary Schick testing because it was felt that the level of natural immunity would naturally be low in a rural district of this kind. And no Schick tests have been performed since immunisation partly because of the large number of children involved and partly because of the good figures reported elsewhere, e.g. only two children Schick-positive out of 1,078 tested in Poole after this method of immunisation (Chesney G. *Brit. Med. Journal*, 17-4-37).

Dr. J. Graham Forbes, one of the foremost authorities on the subject, has stated (*Brit. Med. Journal*, 18-12-37) that 60 per cent. of the population must be immune in order to affect the general incidence of diphtheria, and to maintain this figure 50 per cent. of the children born each year must be immunised. In Midhurst District 42.9 per cent. of the school children on the registers have now been "immunised" but in any case the risks of a widespread epidemic in so scattered a population are remote, and the benefits of the campaign are likely to be felt individually rather than statistically demonstrated. It may be as well again to point out that immunisation offers no more infallible a guarantee against an attack of diphtheria than does a previous attack of the disease. But the attack rate is ten or twelve times less among the protected, and the disease among the "protected" is usually very much less severe, both matters of great importance in view of the fact that for the past ten years the yearly average for England and Wales has been over 58,200 cases with 3,120 deaths.

On the whole the response in the District has been decidedly encouraging (with the exception of Midhurst itself), the more so since the campaign has had neither publicity or propaganda. It is much to be hoped that what has been done so far will be recognised for what it is—only a beginning—and that parents will continue to avail themselves of immunisation for the younger children. For this reason the work done at the Welfare Centres, though relatively small numerically, is of particular importance and is likely to be of greater importance in future years. The immunising material is also available for use by the private medical practitioners of the district.

DIPHTHERIA TREATMENT.

Diphtheria antitoxin is supplied by the Public Health Department, as it is the custom for 8,000 units to be given forthwith to every case notified. This is a very valuable practice for two reasons, first because it ensures that treatment shall be begun at the earliest possible moment, and secondly because it leaves the physician at the Isolation Hospital in no doubt as to what has been done for the patient before admission.

The two cases of pneumonia in this table were of the influenzal type and were notified by the Registrar of Deaths. Looking back on the records of past years it appears that there has only been one case of acute primary pneumonia since June, 1934 and that was of the unusual streptococcal variety, which is odd, seeing that in the rest of England and Wales the disease, together with its influenzal form, is notified at the rate of 1.36 per 1,000 of the population.

The two cases of paratyphoid had nothing to do with the Croydon epidemic. One was apparently contracted in Scotland and was of interest only on account of the administrative curiosity that the patient was treated in Sussex but his cesspool was overflowing in Hampshire.

In the second case the evidence at first was strongly suggestive of the infection having been contracted in a local restaurant. The two firms of physicians practicing in the town were accordingly written to and warned of the possibility of other cases being met with; but fortunately further investigation showed that it was a purely sporadic case and no special steps were needed.

4a. PREVENTION OF BLINDNESS is under the care of the County Council.

b. TUBERCULOSIS.

New cases and mortality during 1937 are shown in the following table.

NEW CASES AND MORTALITY.

Age Periods	New Cases				Deaths			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	M.	F.	M.	F.	M.	F.	M.	F.
0								
1								
5			2					
15				1	1			1
25		1						
35	2	1	1		3	1		
45					1			
55								
65—and over	1				1		1	
Totals	3	2	3	1	6	1	1	1

Of the nine deaths two were of un-notified patients.

SUMMARY OF CURRENT CASES OF TUBERCULOSIS.

	MALE		FEMALE		TOTAL
	Pulmonary	Non-pulmonary	Pulmonary	Non-pulmonary	
No. of cases of tuberculosis on register at beginning of year	36	4	24	9	73
No. of new cases notified	3	3	2	1	9
No. of cases removed from register	6	1	1	1	9
No. of cases on register at end of year	33	6	25	9	73

APPENDIX 1.

Extract from the report of Messrs. Binnie, Deacon and Gourley on the water supply of the Midhurst Rural District, part of a report submitted to the W. Sussex C.C. in March, 1934.

MIDHURST RURAL DISTRICT.

"There are 14 parishes provided with a pipe supply and 12 without.

The population in 1911 amounted to approximately 15,287 persons and had decreased to 15,027 persons by 1931.

The number of supplies furnished in 1911 amounted to 1,050 which had increased to 1,700 by the year 1931, the population of the parishes now supplied amounting to 10,361 persons, there being 2,616 houses in the latter year, i.e., about 65 per cent. of the houses situated in parishes where pipes have been laid are provided with water.

SOURCES OF SUPPLY.

MIDHURST RURAL DISTRICT have a well at Knights Field which is numbered 15 on the map, and two boreholes at Rotherfield numbered 16 on the map. They also take water from springs at Henley which are numbered 17 on the map. Well No. 15 pumps into a service reservoir adjacent to the pumping station containing 240,000 gallons, the top water level being about 300 O.D.

A new service reservoir has been constructed capable of holding 180,000 gallons, situated close to Well No. 15 into which water is pumped from the boreholes at No. 16. A tank is provided at the spring (No. 17) which holds 25,000 gallons.

The bores at Well No. 15 penetrate the Hythe Beds (Lower Greensand) for a depth of 143 feet and are continued for about 33 feet into the underlying Atherfield Clay, one bore being 12 inches and the other 8 inches in diameter. A test was made in 1894, and it is stated that the yield was 31,000 gallons per diem. The average quantity taken from this well is 20,000 gallons per diem.

In 1894 the water rose to 17 feet above ground level, but in 1921 the "rest" level had sunk to 20 feet below the surface.

Well No. 16: two boreholes 6 inches and 12 inches in diameter have been sunk recently to a depth of 211 feet at Rotherfield through the Sandgate into the Hythe Beds. The 12-inch borehole has been tested and yielded 6,000 gallons an hour for 24 hours, the water level being depressed only from 1 foot to 5 feet 6 inches.

There are four springs at No. 17 which give an average yield of 20,000 gallons a day, but fluctuate greatly.

These three sources supply the parishes of Midhurst, Easebourne and West Lavington, the number of houses in these parishes amounting to 870 in 1931, of which 775 are supplied with water.

The population supplied is about 3,240 out of a total of 3,636 persons.

The supply is at the rate of 90,000 gallons per diem (1931/2) so that the consumption is at the rate of 28 gallons per diem per head of population.

The estimated yield of all three sources is between 200,000 and 300,000 gallons per diem, depending on the maintainable yield of well No. 16.

We have to conclude that when the new well at Rotherfield is equipped, the Midhurst Rural District will be able to supply the needs of the parishes in the district which require water.

WEY VALLEY WATER COMPANY.—The statutory limits of the Company include the parishes of Fernhurst, Linchmere and North Ambersham, and parts of the parishes of Iping, Linch, Steadham and Trotton, the boundary being edged brown on the map. The first three parishes and a few houses in Iping are supplied. The number of supplies given in Fernhurst, Linchmere and North Ambersham amounts to 450 as compared with 705 houses erected in 1931, i.e., the Company supplies about 64 per cent. of the houses erected.

The population of Fernhurst has increased 21 per cent. and Linchmere 14 per cent. during the last twenty years, but there was no growth in North Ambersham between 1911 and 1931.

These parishes vary in level from about 200 to over 600 feet above O.D. and the high lying portions could not be supplied from Midhurst Rural District service reservoirs without having to pump to an elevation of about 700 feet, a lift of about 400 feet.

THE PETERSFIELD RURAL DISTRICT supply water in Rogate to about 70 houses out of 283. These supplies are furnished to houses which are situated from 300 to over 500 feet above O.D. and could not be supplied by the Rural District without having to "boost" the pressure and laying a connecting main.

PRIVATE SUPPLIES.

Lord Cowdray furnishes supplies from five springs, which are numbered 18-22 on the map.

At No. 18 the water is pumped into a service reservoir at an elevation of about 300 O.D. by means of a Ram. This source furnishes a supply to the Parish of Bepton where 20 houses are supplied out of 63.

No. 19: The water is pumped in a reservoir holding about 50,000 gallons, the top water level of which is about 270 feet above O.D. This source supplies the Parishes of Cocking and Heyshott, 40 houses out of 113 being supplied in the former parish, and 14 out of 104 in the latter.

Nos. 20-22 supply the Parishes of Easebourne and West Lavington, there being 136 supplies in the former parish out of 326 houses, and two in West Lavington. Spring No. 21 is connected to the Midhurst mains, but is not being used at present for Midhurst.

LORD WOOLAVINGTON supplies water from a spring, No. 23 on the map, to the Parishes of East Lavington and Graffham, there being 32 supplies out of 49 houses (1931) in the former parish, and 63 out of 131 (1931) in the latter.

THE EXECUTORS OF J. GROVES, Esq., supply 70 houses in Linchmere from a well numbered 24 on the map.

LORD LECONFIELD supplies 24 houses in Tillington out of a total of 195 (1931) from a spring numbered 25 on the map.

VILLAGES IN NEED OF A SUPPLY.

The only two villages which were stated to be in need of a supply were South Harting in the Parish of Harting, and Rogate.

SOUTH HARTING AND EAST HARTING.

Water is taken from three ponds just south of the village of South Harting for the supply of the Little Green Estate, the water being pumped out of the watershed into a service reservoir near Compton Park.

Statutory powers would be necessary before water can be taken from one drainage area to another in this way. This seems a case for compromise which would secure a water supply for the two villages.

The village of Rogate requires a supply, which could be furnished by the Midhurst Rural District if a main were laid from Midhurst to Rogate, which would also be capable of supplying Stedham, Woolbeding, Iping, Chithurst, Trotton, Terwick and Fyning.

GENERAL SUMMARY

MIDHURST RURAL requires additional mains for supply in the rural area to the west of Midhurst. It would appear that there should be no difficulty in obtaining the additional supply from the new well No. 16, the Wey Valley Company supplying the high lying northern area."

It was recommended that from the new well at Rotherfield a main should run westward to a service reservoir at Rogate, at a roughly estimated cost of £9,000. This proposed new main would serve an additional population of 2,500.

MIDHURST RURAL DISTRICT. **Parishes Furnished with a Piped Supply.**

Name of Parish	1911			1931			Percentage increase or decrease in Population	Supplied by	Source of Supply	Statutory Area of Supply	Whether Sewered or not	Remarks
	Population	No. of Houses	No. of Houses supplied	Population	No. of Houses	No. of Houses supplied						
1	2	3	4	5	6	7	8	9	10	11	12	13
Bepton	274	74	nil	245	63	20	— 11%	Lord Cowdray°	Spring 18		No	
Cocking	469	110	18	437	113	40	— 7%	Lord Cowdray°	Spring 19		No	
Easebourne	1641	336	268	1537	326	{ 136 191	— 6%	Lord Cowdray°	Springs 20, 21 & 22		Yes	
East Lavington	165*	45	nil	168	49	32	+ 2%	Midhurst R.D.C.	Wells 15, 16 & Spring 17		No	
Fernhurst	1304	347	55	1576	405	235	+ 21%	Lord Woolavington°	Spring 23	Wey Valley Water Co.	Part contemplated	
Grafham	487	127	nil	461	131	63	— 5%	Lord Woolavington°	Spring 19		No	
Heyshott	353	110	nil	385	104	14	+ 9%	Lord Cowdray°			No	
Iping	415	107	nil	432	105	3	+ 4%	Wey Valley Water Co.		Part Wey Valley Water Co.	No	
Linchmere	924	224	167	1057	261	{ 191 70	+ 14%	Wey Valley Water Co.	—	Wey Valley Water Co.	Part contemplated	
Midhurst	1894	506	472	1812	468	526	— 4%	Executors of J. Groves, Esq.°	Well 24		Yes	
N. Ambersham	169	38	22	168	39	23	— 1%	Midhurst R.D.C.	Wells 15, 16 Spring 17		No	
Rogate	1083	270	nil	1098	282	70	+ 1%	Wey Valley Water Co.	—	Wey Valley Water Co.	No	
Tillington	852	203	26	698	195	24	— 18%	Petersfield R.D.C.	Spring 25		No	Shortage has occurred in Rogate village.
West Lavington	267	69	24	287	75	{ 58 2	+ 7%	Lord Leconfield°	Wells 15, 16 Spring 17		Partly	
								Midhurst R.D.C.	Spring 21			
								Lord Cowdray°				

MIDHURST RURAL DISTRICT. Parishes Not Provided with a Piped Supply.

Name of Parish	1911				1931			Percentage increase or decrease in Population	Supplied by	Source of Supply	Statutory Area of Supply	Whether Sewered or not	Remarks
	Population	No. of Houses	No. of Houses supplied		Population	No. of Houses	No. of Houses supplied						
1	2	3	4		5	6	7	8	9	10	11	12	13
Chithurst	261	82			266	70		+ 2%				No	Bordon Wood Estate has its own private supply for House and Estate.
Elsted	197	46			193	39		— 2%				No	Elsted village partly supplied from private spring. Shortage has occurred at South Haring.
Haring	1270	333			1166	306		— 8%				No	
Linch	96	22			83	21		— 14%			Part Wey Valley Water Co.	No	
Lodsworth	584	151			510	148		— 13%				No	
Lurgashall	686	163			588	157		— 14%				No	
S. Ambersham	162	37			154	33		— 5%				No	
Stedham	592	135			592	152		0			Part Wey Valley Water Co.	No	Part of Stedham village supplied from Mrs. Scrimgeour's private reservoir.
Terwick	167	41			203	46		+ 22%				No	
Treyford	170	40			194	47		+ 14%				No	Treyford village partly supplied from the same private spring as supplies Elsted.
Trotton	466	100			429	103		— 8%			Part Wey Valley Water Co.	No	
Woolbeding	339	61			288	60		— 15%				No	

APPENDIX 2.

SUMMARY OF PUBLIC HEALTH & ALLIED SERVICES
AVAILABLE IN THE MIDHURST RURAL DISTRICT.

Services are administered by—

1. The Midhurst Rural District Council.

Communication may be established as follows:—

by personal call at the Council Offices during office hours.
by telephoning Midhurst 36.

by letter. All communications should be addressed to the
Medical Officer of Health.

2. The West Sussex County Council,
County Hall,
Chichester.
Telephone No. Chichester 3001.

All communications should be addressed to the County
Medical Officer.

In emergency, if communication cannot be established through
the Public Health Department, the following private
telephone number is available.

Medical Officer of Health - Lavant 163

SUMMARY OF SERVICES AVAILABLE IN THE
MIDHURST RURAL DISTRICT

1. AMBULANCE. British Red Cross. Commandant, Mr. N. J. Melhuish, North Street, Midhurst. 'Phone: Midhurst 6.
2. BLIND PERSONS. West Sussex Association for the Blind. Secretary, Dr. R. D. Smedley, County Hall, Chichester.
3. DRAINAGE & SEWERAGE. Midhurst R.D.C. Services administered by the Council—the Drainage Manager.
4. FACTORIES & WORKSHOPS. Sanitary condition of, by Midhurst R.D.C.
5. FOOD. Adulteration by the W. Sussex County Council. Other aspects by the Midhurst R.D.C.

6. HOSPITALS. i County. Southlands Hospital Shoreham.
'Phone: Shoreham 520.
Institutions. Budgenor Lodge, Easebourne.
'Phone: Midhurst 37. Admission arranged
by Relieving Officer q.v.
- ii Isolation. Spitalfields Lane, Chichester.
'Phone: Chichester 126. Admission arranged
by Midhurst R.D.C.
- iii Maternity. West Sussex C.C. Maternity
Ward. Worthing Hospital. 'Phone: Worthing
4488. Admission arranged through the County
Medical Officer.
- iv Mental. Graylingwell Hospital, Chichester.
'Phone: Chichester 9. Admission arranged
by Relieving Officer q.v.
- v Voluntary. Easebourne Cottage Hospital.
'Phone: Midhurst 105. Haslemere and
District Hospital. 'Phone: Haslemere 31.
Petersfield Hospital. 'Phone: Petersfield 19.
Petworth Cottage Hospital. 'Phone: Pet-
worth 6. Royal West Sussex Hospital,
Chichester. 'Phone: Chichester 585.

7. HOUSING & OVERCROWDING by Midhurst R.D.C.

8. INFECTIOUS DISEASES.

1. Ophthalmia Neonatorum }
Puerperal Pyrexia } by the West Sussex County Council.
Smallpox }
2. Other notifiable infectious diseases notification, consultation,
removal, hospital treatment, provision of diphtheria antitoxin,
disinfection, the Midhurst R.D.C.

9. LABORATORY SERVICES.

1. General Pathological specimens should be sent either to
The Clinical Research Association, Ltd., Watergate House,
York Buildings, Adelphi, London, W.C.2., or to the
County Laboratory, County Hall, Chichester. 'Phone
Chichester 3001, extension 58.
2. Tuberculosis and Venereal Disease specimens to the
County Laboratory.

10. MATERNITY & CHILD WELFARE. Clinics are held as under.

Camelsdale. Village Hall every Thursday, 2.30-4 p.m.
The Medical officer is in attendance on the first Thursday of the month.

Midhurst. Petersfield Rd. every Tuesday, 2.30—4 p.m.
The Medical Officer attends fortnightly.

Milland & Rake. The Women's Institute, Rake, on the second Wednesday in the month, 2.30—4 p.m.

11. NURSING. The names and addresses of the Queens' Nurses who work in the district are as follows:—

Allan—16, Stedham, Nr. Midhurst.

Beckett—North Lane, South Harting.

Clayton—Laburnum Cottage, Northchapel.

Dickinson—"Downview," The Causeway, Cocking.

Green—Nurse's Cottage, Redford, Nr. Midhurst.

Jackson—9, Heathfield Gardens, Midhurst.

Jolly—Nurse's Cottage, Hammer, Nr. Haslemere.

McMillan—Well Cottage, Lodsworth.

Morton—Nurse's Cottage, Fernhurst.

Townsend—Graffham House, Graffham.

Read—357, East Street, Petworth.

Wadey—Nurses Cottage, Rake, Nr. East Liss.

Wray—c/o Mrs. Matthews, Fyning, Rogate.

12. PUBLIC ASSISTANCE MEDICAL OFFICERS. c.f. Vaccinators.

13 REFUSE DISPOSAL. By the Midhurst R.D.C.

14 REGISTRARS OF BIRTHS, DEATHS AND MARRIAGES. Relieving Officers.

(a) For the parishes of Tillington, Graffham, Lodsworth, Lurgashall. H. H. Dike, Meadow Cottages, North Mead, Petworth.

(b) For the rest of the District. A. F. Werry, Red Lion Buildings, Midhurst.

15 SANITATION, NUISANCES, ETC. The Midhurst R.D.C.

16 SCHOOL MEDICAL SERVICE. The W. Sussex C.C. School Medical Officer, Dr. R. D. Smedley.

17 SHOPS, as for sanitation, the Midhurst R.D.C.

18 TUBERCULOSIS. The W. Sussex C.C.

(a) Dispensaries are held at Chichester, The Clinic, Chapel Street, every Tuesday morning 9.30—12.

(b) Sanatorium, Aldingbourne House, near Chichester.
'Phone : Eastergate 29.

19. VACCINATION by the W. Sussex C.C.

The Public Vaccinators and Public Assistance Medical Officers are :—

D. C. Druitt, M.R.C.S., L.R.C.P., The Surgery, Petworth.

M. Fawkes, O.B.E., M.B., B.CH. The White House, Midhurst.

E. S. Johnson, M.B., Courts Hill Lodge, Haslemere.

C. A. Kirton, M.R.C.S., L.R.C.P., Nyewood, Rogate.

20. VETERINARY by the Ministry of Agriculture & Fisheries.
Dr. L. Jordan, The County Hall, Chichester.

21. VENEREAL DISEASES by the W. Sussex C.C.

Clinics are held as follows :—

1. Worthing Hospital, Lyndhurst Road, Worthing.

Women on Wednesdays, 3—4 p.m.

„ „ Fridays, 5—6 p.m.

Men on Wednesdays, 4—5 p.m.

„ „ Fridays, 6—7 p.m.

2. Royal Portsmouth Hospital, Landport, Portsmouth.

Women Mon., 3.30—5.30 p.m.

„ Wed., 2—4 p.m.

„ Fri., 10 a.m.—12 noon.

Men Tues., 10 a.m.—12 noon and 5—7 p.m.

„ Wed., 4 p.m.

„ Thurs., 10 a.m.—12 noon and 5—7 p.m.

22. WATER SUPPLIES by Midhurst R.D.C.

