[Report 1950] / Medical Officer of Health, Newton-le-Willows U.D.C.

Contributors

Newton-le-Willows (England). Urban District Council.

Publication/Creation

1950

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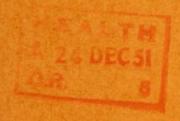
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Urban District Council of Newton-le-Willows



ANNUAL REPORT

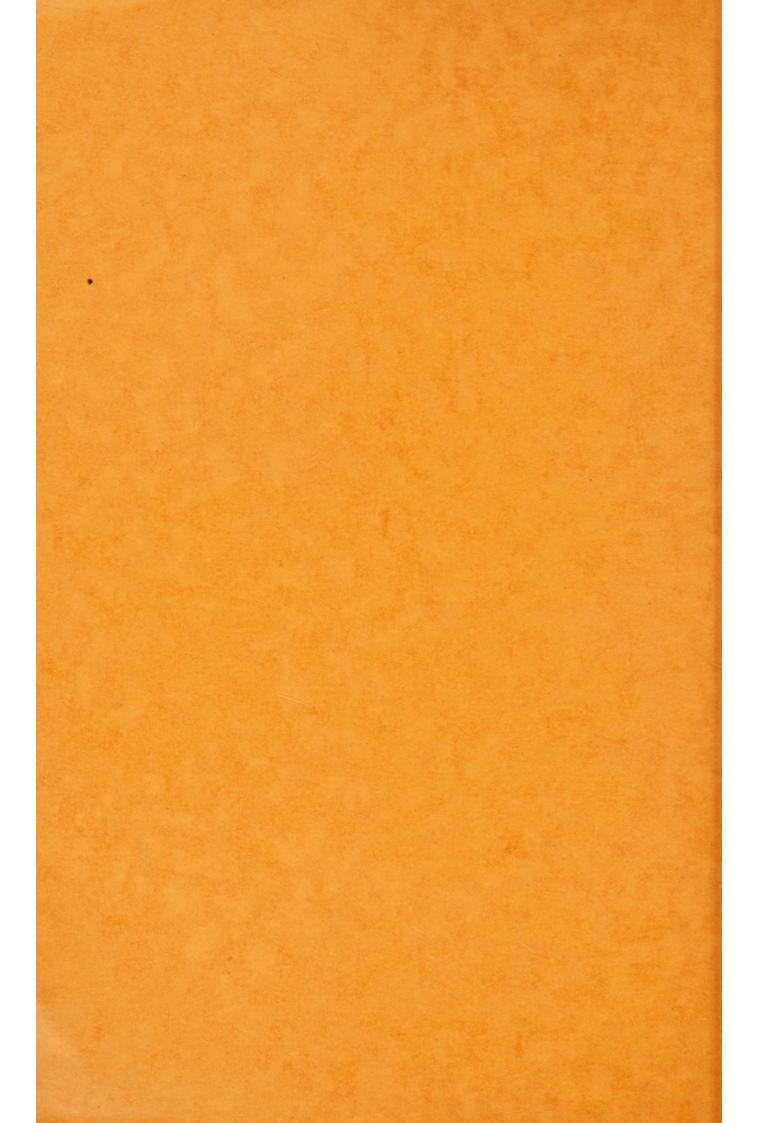
of the

Medical Officer of Health

for the

Year Ended 31st December, 1950





Urban District Council of Newton-le-Willows

ANNUAL REPORT

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Medical Officer of Health

for the

Year Ended 31st December, 1950

NEWTON-LE-WILLOWS URBAN DISTRICT COUNCIL.

Chairman of the Council:
COUNCILLOR MRS. E. CROUCHLEY, J.P.

Vice-Chairman :
COUNCILLOR MRS. C. CARR.

Clerk and Solicitor of the Council:
W. H. J. BROWNE (to 30th September, 1950).

Clerk and Chief Financial Officer:

L. J. SHIELDS, A.S.A.A. (from 1st October, 1950).

Health Committee:

Chairman:

COUNCILLOR L. KENT.

Vice-Chairman : COUNCILLOR C. L. TVRER.

Members:

Councillor A. E. BARNETT

- .. MRS. C. CARR
- " MRS. E. CROUCHLEY, J.P.
- ,, E. J. GILLESPIE
- " MRS. E. NIGHTINGALE
- " E. J. THOMPSON

PUBLIC HEALTH DEPARTMENT:

Staff:

Medical Officer of Health:
A. C. CRAWFORD, T.D., M.B., Ch.B., D.P.H., D.T.M.

* Chief Sanitary Inspector : L. M. BOOTH, M.R. San.I., M.S.I.A.

* Additional Sanitary Inspector:

K. HILTON, M.S.I.A. (to 20th February, 1950).

G. DAVIES, M.S.I.A. (from 10th July, 1950).

Clerk:

MISS B. TWISS

* Qualified Meat and Other Foods Inspectors (R.S.I.).

The Chairman, and Members of the Newton-le-Willows Urban District Council.

LADIES AND GENTLEMEN,

I have pleasure in submitting for your perusal my Report on the health conditions of the Urban District for the year 1950, a year which has seen the consolidation and expansion of schemes engendered by the provisions of the National Health Service Act, 1946, and the National Assistance Act, 1948. Only one of the major provisions of Health Service Act, which prescribe the Local Health Authorities' duties now remains unfulfilled, i.e., the provision and administration of Health centres; but the implementation of this plan must perforce remain in abeyance pending improvement in the national and international political and economic situations, and a more ready supply of labour and building materials.

So far as the Vital Statistics of the District are concerned, there has been a slight fall in the number of live births from 357 in 1949, to 343 in 1950, resulting in a drop in the Live Birth Rate from 16.5 to 15.6 per thousand of the population. This figure of 343 includes 11 illegitimate children, a decrease of 2 on 1949. The number of Still births was 7, also a decrease of 2 on the 1949 number, giving a Still birth Rate of 20 per 1,000 total births (Live and Still births), or 0.31 per 1,000 population, compared with 25 and 0.41 respectively in 1949. Deaths totalled 261, an increase of 27 on the previous years figure of 234, a crude death rate of 11.9 per 1,000 population, and an adjusted rate (a rate modified by a comparability factor based on age and sex distribution) of 12.8 per 1,000, as compared with a crude death rate of 10.8 and an adjusted rate of 11.8 in 1949. The natural increase for the year 1950 is thus only 82, as compared with 123 last year.

It is usual, when dealing with birth statistics, to consider also those concerning infant and neo-natal mortality, i.e., the deaths of infants under I year old and under 4 weeks old respectively. I am happy to be able to record a significant improvement in this respect, the number of infant deaths being I4, and the rate per I,000 live births 4I, as compared with 20 and 56 in I949, a decrease of 6 and of 15 on those figures, and a decrease of I9 on the mean rate for the previous quinquennial period. The number of neo-natal deaths was 9, giving a neo-natal death rate of 26 per I,000 live births, a decrease of I2 on the rate for the previous year. Despite the fact that our rates still exceed the mean rate of infant mortality for the current year in England and Wales of 29.8, these figures are nevertheless heartening.

Turning to the details of deaths in general, we find that once again three main groups of illness are responsible for 74%, practically three quarters of the total; these groups are, in order of magnitude; first, diseases of the heart and blood vessels including vascular lesions of the nervous system (the "Strokes") which accounted for 130 deaths out of the total of 261; second, the malignant group of diseases, the "Cancers," which caused 46 fatal illnesses, and third,

the "Chest" diseases, (i.e., bronchitis and pneumonia, but excluding tuberculosis) which claimed a further 18 lives. Of the total 130 deaths mentioned above, 27 were due to vascular troubles of the nervous system (Strokes). Tuberculosis itself claimed a total of only 6, which is 3 less in number than in 1949. Once again, happily, there have been no maternal deaths.

As regards notifiable diseases, the year has not been a particularly severe one in incidence, a total of 350 cases (excluding tuberculosis cases) being notified, as against 507 in the previous year; but it was a year of distinct interest, in that a high incidence of Whooping Cough (221 cases) offset a much reduced incidence of measles (63 cases), contrasting strongly with the position in 1949, when only 67 cases of Whooping Cough, but no fewer than 314 of measles were recorded. The incidence of Scarlet Fever was relatively much reduced, only 20 cases as against 89 last year; pneumonia was slightly more prevalent, (30 cases, as against 23). Whilst poliomyelitis, or infantile paralysis was notified in 2 cases during 1950, the same figure as in 1949.

The number of new cases of tuberculosis was 24, of which 21 were respiratory, figures very similar to those of last year, which were 14 and 6 respectively, making 20 in all.

The only two notifiable diseases which have caused death during the year have been tuberculosis 6, and pneumonia 14.,

It is very satisfying to record that there have been no confirmed cases of any of the following: small-pox, the enteric group fevers, (typhoid), diphtheria, puerperal pyrexia or ophthalmia neonatorum.

In my view the further requirements of the District as regards the health and happiness of the public are more houses, improvement of existing houses, and the reduction of overcrowding; the prevention of pollution of streams and of the Newton Lake, a matter which still awaits the completion of the Sankey Valley Sewerage Scheme, a more generous supply of animal protein in the daily dietary, and material improvements in the fabric of some of the older school buildings, especially as regards natural lighting, closet accommodation, washing and drinking facilities and playground paving. Of these requirements, by far and away the most important to the physical, mental, moral and social well-being of the people, is improvement of their present homes, and the erection, of further houses, and I would say, with the greatest sincerity:—"Let us have more houses, and let us improve our older existing houses, at any financial cost." Next in priority comes the better dietary standards for all, not solely for the children, then school improvements, and lastly, the question of improving the existing pollution of streams.

Again, included in this Report is a section giving information relating to those personal health services provided by the Local Health Authority—the County Council—under its scheme of Divisional Health

Administration; these Services have a very material and far-reaching effect on both individual and community health, and cannot properly be divorced from what may be termed the environmental health responsibilities of the Local Sanitary Authority under the Public Health Acts. Each is the complement of the other.

May I conclude this preface to my Report by expressing to you, Madam Chairman, to all members of the Council, and to my colleagues on the staff of other Departments, my gratitude for the help you have all recorded me, and for the great interest you have taken in the Health Department during the year. Finally, to Mr. Booth, Chief Sanitary Inspector, and to Mr. Davies, the Additional Inspector, I offer my special thanks for their ever-willing and highly efficient help in the work of the Department:

I have the honour to be,

Madam Chairman, Ladies and Gentlemen,

Yours obediently,

A. C. CRAWFORD,

Medical Officer of Health.

ENVIRONMENTAL CONDITIONS AND GENERAL INFORMATION.

The major portion of the district is truly urban in character, with a relatively small acreage of a rural character. It is "built up" with the homes of the people, with Shops, Offices, Workshops, Factories, Churches, Mission Halls, Clubs, Hotels and all the usual ancillary buildings which serve a civilised community. The main industries are Light and Heavy Engineering, Sugar Refining, Printing and Stationery manufacture, Bleaching, Dyeing and Calico Printing and Raincoat manufacture. As would be expected from the urban character of the district, agriculture plays only a very minor role in its activities.

2. STATISTICS—GENERAL.

Area in acres: 3,103 Population (Census, 1931): 20,150.

(Estimated mid-1950): 21,920.

Inhabited Houses: (Census, 1931): 4,862.

Rate Books (end 1949): 6,312.

Rateable Value		£105,957
Sum represented by a penny	rate	£410
Births assignable to Distric	t	343
Deaths assignable to Distric	et	261
" Natural Increase "		82

3. VITAL STATISTICS.

Births:

Live Births 343.	Legitimate 332	Illegitimate	II
	Male 175	Male	6
	Female 157	Female	5

Live Birth Rate=15.6 per 1,000 population.

Still Births 7. Male 3. Female 4.

Still Birth Rate 20 per 1,000 total Live and Still Births.

Deaths.

General	Male	Female	Death Rates
261	142	119	"Crude" 11.9 "Adjusted" 13.0

The "adjusted" death rate is the "Crude" death rate after adjustment by a "comparability factor" supplied by the Registrar General.

Infant Deaths (Deaths of Infants under 1 year of age).

Total Infant Mortality Rate, 41.

Total 14. Male, 6. Female, 8. In:

Infant Mortality Rate of Legitimate Infants, 42 Infant Mortality Rate of Illegitimate Infants, nil.

Neo-Natal Mortality. Deaths of infants under 4 weeks of age, 9

Mortality rate per 1,000 live births, 26

Maternal Deaths.

Nil. Maternal Death Rate, Nil.

COMPARATIVE STATISTICAL TABLES.

Rates per 1,000 of Estimated Population.

- 100	Lina	Coude	Death rate	Dooth		l M'tality per 1,000	Deaths
	Live Birth Rate	Crude Death Rate	from Tuberculosis of Respirat'y system	Death Rate from Cancer	Live Births	Total (live and still) births	under One Year per 1,000 Live Births
Increase or decrease in	17.3 16.5 15.6	11.2 10.8 11.9	0.39 0.37 0.23	1.83 1.80 Nil.	1.10 Nil. Nil.	1.06 Nil. Nil.	60 56 41
1950 on 5 years avge 1945–1949 Previous yr	-1.7	+0.7 +1.1	-0.16 -0.14	Nil. Nil.	-1.10 Nil.	—1.06 Nil.	—19 —15

Comparison of Births Rates, Death Rates and Analysis of Morbidity and Mortality with those for England and Wales.

	Newton-	le-Willows	England and
	1949	1950	Wales 1950
	Rate	per 1,000	Population
Births-Live		15.6	15.8
Still	0.41	0.31	0.37
DeathsAll causes	11.8	11.9	11.6
Typhoid and Paratyphoid Fevers	0.00	0.00	0.00
Whooping Cough	0.00	0.00	0.01
Diphtheria	0.00	0.00	0.00
Tuberculosis	0.27	0.23	0.36
Influenza	0.15	0,00	0.10
Small Pox	0.00	0.00	0.00
Ac. Poliomyelitis and Encephalitis	0.00	0.00	0.02
Pneumonia	0.50	0.63	0.46
	0.50	0.05	0.40
Notifications—	0.00		
Typhoid Fever		0.00	0.00
Paratyphoid Fever	10.000	0.00	0.01
Meningococcal Infection	0.00	0.00	0.03
Scarlet Fever	4.11	0.90	1.50
Whooping Cough	3.09	10.45	3.60
Diphtheria	0.00	0.00	0.02
Erysipelas	0.55	0.63	0.17
Small Pox	0,00	0.00	0.00
Measles	14.50	2.86	8.39
Pneumonia	1.06	1.36	0.70
Ac. Poliomyelitis (Paralytic)	0.09	0.09	0.13
(Non-Paralytic)	0.00	0.00	0.05
Food Poisoning	0.00	0.00	0.17
	Rate pe	er 1,000 Liv	
Deaths—All causes under 1 year of age	56.	41.	29.8
Enteritis and Diarrhoea			27.0
Under 2 years of age	0.71	0.18	1.9
Maternal Mortality—	Rate per	1,000 Live	& Still Births
Abortion with Sepsis	0.00	0.00	0.09
Abortion without Sepsis	0.00	0.00	0.05
Complication of pregnancy			
and delivery	0.00	0.00	0.54
Sepsis of Childbirth and the			
puerperium	0.00	0.00	0.03
Other complications of the			
puerperium	0,00	0.00	0.15
Notifications			
Notifications— Puerperal Fever and Pyrexia	0.00	0.00	5.01
Puerperal Fever and Pyrexia	0.00	0.00	5.81

The ward distribution of the live births was :-

Wards.				Males	. 1	emules	š	Total.
Town Hall	****			19		19		38
Viaduct				23		15		38
Crow Lane				23		23		46
Newton				13		14		27
Wargrave				25		20		45
Born in and belongi	ing to	the Di	strict	103		91		194
Born outside but bel	longing	g to th	e Distr	ict 78		71		149
								_
				181		162		343
				-				

Deaths.—The total number of deaths registered in the District was 178. Six of these were of non-residents ,and have been transferred to the districts in which they usually resided. 89 residents of this area died in other districts.

The distribu	ition	of the	deaths	was	:				
Wards.					Males.	F	emale	8.	Total.
Town Hall				****	24		21		45
Viaduct					22		26		48
Crow Lane	****	****			37		23		60
Newton					19		18		37
Wargrave	****				40		. 31		71
					142		IIO		261

An analysis of the causes of death is shown below :-

Causes of Death.		Mal	e.	Fema	ale.	Total.
Respiratory Tuberculosis		2		3		5
Malignant Neoplasm—Stomach		II		2		13
Lung, Bron	chus	2		I		3
Breast		_		2		2
Uterus		-		1		I
All other site	es	13		14		27
Diabetes i		I		I		2
Vas. Lesions of Nervous System	****	12		15		27
Coronary disease, angina		20		7		27
Hypertension with heart disease		2		7		9
Other heart disease	***	30		32		62
Other circulatory diseases		1		4	****	5
Influenza		1		I		2
Pneumonia		9		5		14
Bronchitis		II		7		18
Other respiratory diseases		2		_		2
Ulcer stomach and duodenum		I		_		I
Gastritis, enteritis and diarrhoea	****	I		3		4
Nephritis and nephrosis		2		4		6
Hyperplasia of prostate		2		_		2
Congenital malformations		1		2		3
Other defined or ill defined diseases		9		8		17
Motor vehicle accidents		3		_		3
All other accidents		5		_		5
Suicide		1		_		I
	-			-		
All causes	I	42		119		261

4. SANITARY CIRCUMSTANCES OF THE AREA.

Water Supplies.

The District's water supply continued to be obtained chiefly from the deep wells at the Council's Southworth Road Works, which were supplemented until 15th June by a wholesome, but unchlorinated, water, purchased in bulk from British Railways.

A borehole 433 feet deep, 412 feet of which (from 7 feet below ground level) is through Bunter Sandstone and 14 feet through Manchester Marl, was sunk on the Makerfield Harriers site.

Pumping tests indicated maintenance of a constant level of the water table at 137 feet when pumping at 35,000 gallons per hour.

Following a series of chemical analyses and bacteriological examinations of the raw water, which indicated that it was "a hard water of an exceptionally high degree of organic purity," it was arranged to chlorinate the water direct into the well, as a temporary measure, and bring it into Town's supply. This obviated augmentation of the Council's sources of supply although the borehole has still to be completed by lining, and by the provision of holding tanks to ensure sufficiency of contact time for chlorination purposes.

6,309 dwelling houses, housing a population of 21, 909 persons, are supplied with water from public mains. 3 houses with a total of 11 occupants, draw supplies from private wells and springs.

All new houses have been connected to the town's water mains.

The water is of a high degree of purity and, though very hard, is also very satisfactory chemically.

21 bacteriological examinations of the raw water, and 22 of the water going into supply after treatment, were made and were all highly satisfactory. The same applied to 3 chemical analyses of the raw water.

Food-Inspection and Supervision of Supplies.

(a) Milk Supply.

The Ministry of Agriculture and Fisheries became responsible for dairy farms in October 1949, and this transfer of functions from local authorities meant that the Council ceased to have duties in connection with the production of milk.

Supervision of the distribution of Milk was continued and the following action was taken in relation to :--

(a)	Raw	Milk.	No. of samples			No. atisfactory
	(i)	Tuberculosis— biological tests	9	8 (T.B. n	 ieg.) (T.B. pos.)
	(ii)	Bacteriological examinations	14			
(b)	" He	at Treated '' Milk.				
	(i)	Phosphatase test	17	17	****	Nil.
	(ii)	Turbidity test	2	2		Nil.
	(iii)	Methylene Blue reduc	tion			
		test	17	17		Nil.
	(iv)	Tuberculosis	7	···· (T.B. n	eg.)	Nil.

The Divisional Inspector of the Ministry of Agriculture and Fisheries was notified of the sample of tuberculous milk and an inspection revealed that animals had been sold prior to the investigation. A further sample from the same source was negative.

(b) Meat and Other Foods.

All meat retailed in the district continued to be supplied by the Ministry of Food from the Leigh distribution centre.

Except for occasional slaughter by pig-keepers of their own pigs for home consumption no slaughtering took place within the district.

All premises used for food preparation, butchers, grocers, ice cream manufacturers and vendors, bakehouses, etc., were kept under observation and inspected regularly.

No case of food poisoning was notified.

(c) Adulteration.

The Council is a Food and Drugs Authority and your Sanitary Inspectors are Sampling Officers.

11 informal and 26 formal samples were taken and submitted to the Public Analyst, County Offices, Preston.

Informal.						
Article.					Nur	nber taken.
Ice Cream						2
Sultanas						I
Prunes					****	I
Ground Almonds	S					1
Semolina			****		****	I
Pepper flavoured	com	pound		****		I
						I
Sponge Mixture						I
Cut Orange and	Lem	on Peel				I
Milk		****				I
					-	
						II
Formal.						
Article.					Nu	mber taken
Milk						22
Glace Cherries						I
Beef Sausage						2
Butter					****	I
					-	
						26
					-	

All were reported on as genuine except one formal sample of milk which was 10% deficient in milk fat. On the advice of the Analyst this case was dealt with by a warning.

Rivers and Streams.—Pollution of the several main streams running through the district from Ashton, Golborne, Haydock and St. Helens continues to varying degrees.

Drainage and Sewerage.—Extensions have been made to all new houses. Construction of the Sankey Valley sewer has commenced but it has not yet reached this district.

5. HOUSING.

1,720 houses are owned by the Council, 474 of which have been built in the post-war period.

During the year 82 traditional permanent houses have been erected by the local authority and 3 by other bodies or persons.

Two schemes of 78 and 58 houses respectively were in hand at the end of the year, and a further scheme of 82 houses was in course of preparation.

The number of houses needed to relieve the shortage, can only be estimated. Approximately 100 houses are needed to replace unfit dwellings; 50 for overcrowded families; and 450 for families living in apartments.

The types of house built between 60 to 120 years ago, are generally of sound construction but lacking amenities such as food stores, hot water, coal and other storage accommodation, as well as being below by elaw standard in varying degrees.

There is also a number of cottages, with ages ranging from 150 to 300 years, which have nothing to recommend them except that they are picturesque and kept in reasonable repair.

Back to back houses are 2 in number; back to earth houses 1; and single type (blank rear wall) number 3.

Housing Act, 1936-Part IV-Overcrowding.

r	29
	40
	249
during	-
year	50
7	

Closet Accommodation.—Every privy and pail in the district has been converted to the water carriage system, except the few which are beyond reach of a sewer, are below sewer level, or are isolated by streams, railway lines, or the canal.

Number	of privy middens .			34
Number	of closets attached to th	iese midden	S	46
	of pail closets			35
	of chemical closets			5
	of houses on water carr			6,225

There are no waste water closets and no dry ashpits in the district.

Public Cleansing.—A weekly collection of house refuse and salvage by motor vehicles and disposal of the former, by controlled tipping are supervised by the Sanitary Inspector.

No regular cleansing of cesspools is undertaken.

Scavenging, snow removal, gully emptying, etc., are carried out by the Surveyor's department.

SECTION 6.

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

Hospital facilities for the treatment of cases of infectious disease were provided at the Infectious Disease Hospital, Warrington. 18 cases were admitted to hospital compared with 88 during 1949.

Hospital Admissions.

Isolation and treatment in hospital was provided in the Infectious Diseases Hospital, Warrington, for 18 cases, principally of Scarlet Fever. Last year 88 cases were admitted, but as will be seen from the following Tables, the incidence of this disease has been very much smaller this year.

General Incidence.

As has been the case in other districts, the incidence of Whooping Cough (221 cases) has been very high, even higher than in 1948, when 195 cases were notified. Fortunately no fatalities resulted, but it must always be remembered that this disease often results in lung damage which may only become apparent in the later years of childhood, and also that during its acute stages it causes considerable distress to the victim and great anxiety trouble to the parents. It is sincerely to be hoped that current research into the production of an effective and safe vaccine for use in prophylaxis will soon be successful, and to enable a firm lead to be given to immunisation schemes similar to that used in combatting Diphtheria.

Pneumonia accounted for 30 notifications and for 14 deaths, mainly among children and old people. Despite the advent of the newer drugs and antibiotics, it still remains a disease to be reckoned with seriously.

Erysipelas notifications have risen slightly from 12 to 14, a figure which gives an incidence rate relatively and significantly higher than those for contiguous districts. It is very difficult to appraise the reason for this discrepancy, and for the arising trend in incidence, during the last five years, which has followed a relatively low incidence during the previous quinquennium, and which, in turn, followed a decade when the number of cases was much higher, of the order of 12—20 annually. It seems curious that during the war period the apparent frequency of this disease should be so much less than during years of peace; there is of course always the possibility that notification during these may not have been so complete as in peace time.

The total of poliomyelitis cases was 2, exactly the same figure as in 1949; fortunately neither proved fatal. No confirmed cases of Diphtheria occurred, the third successive year when this has been the case, nor was there any case of puerperal pyrexia, puerperal fever, ophthalmia neonatorum, small pox, enteric group fever or dysentery.

Tuberculosis. There has been some increase in the total number of cases notified in 1950 (24) from that in 1949 (20), but the number of fatal cases has been somewhat lower, a total of 6 deaths, as compared with 9. The site distribution of these infections, however, has shown some change; whereas in 1949, the number of respiratory infections was 14, the number for 1950 has been 21. Too much significance should not, however, be attached to this relative increase, as when dealing with such small figures, annual fluctuations not infrequently occur purely by chance. The number of Registered cases of Tuberculosis at 31st December, 1950, was 113, comprising 71 respiratory and 42 non-respiratory cases.

						Fotal	Total cases Notified	s No	tified				Hos	Hospitals
						Ag	Age Groups	sdno	1					Deaths in
Notifiable Discases	Total cases at all ages	Under 1	-+	ev +	v +	9 +	+ 15	+ 25	5+	65 and over	Age un- known	Total	cases removed to Hospital	hospital of persons belonging to district
Scarlet Fever Measles Whooping Cough Ac. Pneumonia Ac. Poliomyelitis Erysipelas	20 63 30 30 14	48	1 3 7 4 2 2 2	82421	1 1 2 1 2 2	4 -	0 -	4	111212	-4 2	11-111	111411	= 12 126	111111
Totals	350	22	102	110	20	5	9	13	14	7	-	14	18	-

Comparision of Principal Infectious Diseases, 1946-1950.

Disease	1946		1947	194	8 1949	1950
Diphtheria	 3		2	Nil.	Nil.	Nil.
Scarlet Fever	 38	****	34	67	89	20
Measles	 260		231	219	314	63
Whooping Cough	 78		54	195	67	221
Pneumonia	 40		51	50	23	30
Ac. Poliomyelitis	 1		5	Nil.	2	2

Distribution of Infectious Diseases	Town Hall	Viaduct	Crow Lane	Newton	Wargrave	Total
Measles	9	7	18	13	16	63
Whooping Cough	31	34	54	34	68	221
Erysipelas	2	3	1	1	7	14
Scarlet Fever	3	3	2	4	8	20
T.B. Lungs	5	2	5	3	6	21
T.B., other forms	_	1	_	1	1	3
Pneumonia, Primary	7	6	7	3	7	30
Ac. Poliomyelitis	-	_	1	-	1	2
Totals	57	56	88	59	114	374

Tuberculosis.

New cases and Mortality during 1950 :-

				New	Cases			Dea	aths	
Age	Perio	ds	Respi	ratory		on- ratory	Respi	ratory	No Respi	on- ratory
Years			M.	F.	M.	F.	M.	F.	M.	F.
0			 	_	_	_		_	_	_
1			 -	-	-	_	-		_	_
5			 	-	-	_	-	-		-
10			 -	_	_	_	_	-	_	_
15			 1	2	1	_	-	1		-
20			 2	1	1	-	_	-		_
25			 3	5	_	-	1	2	-	_
25 35 45 55			 4	_	_	_				_
45			 3	_	-	1		-		_
55			 1	_	_	_	1			1
65 and up	wards		 -	-	-	-	-	-	-	-
			13	8	2	1	2	3	_	_1
Totals			 2	1		3		5		1

SECTION 7.

FACTORIES ACTS, 1937 AND 1948.

Part 1 of the Act.

(1) Inspections for purposes of provisions as to health (including inspections made by Sanitary Inspectors):

	Number	N	Number o	f
Premises (1)	Number on Register (3)	Inspections (4)	Written notices (5)	Occupiers prosecuted (6)
(1) Factories in which sections 1, 2, 3, 4, and 6 are to be enforced by Local Authorities (2) Factories not included in (1) in which Section 7 is enforced	14	16	-	_
by the Local Authority (3) Other premises in which section 7 is enforced by the Local Authority (excluding	55	56	-	-
out-workers premises)	2	3	-	_
Totals	71	75	_	_

(2) 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").

	No. of c	ases in whic	h defects w	ere found	Number of cases in
Particulars	Found	remedied	Refe	rred:	which prosecution:
(1)	(3)	(4)		By H.M. Inspector (6)	were instituted (7)
Want of cleanliness (S.1)	2	2	_	-	_
Overcrowding (S.2)	-	_	-	-	-
Unreasonable temperature (S.3)	1	1	_	_	_
Inadequate ventilation (S.4)	_	_	-	_	-
Ineffective drainage of floors (S.6)	_	_	-	_	_
Sanitary conveniences (S.7)					10,800
(a) insufficient	-	-	-	-	-
(b) unsuitable or defective	2	2	_	_	_
(c) not separate for sexes	_	_	_		_
Other offences against the Act (not including offences relating to outwork)	_	_	1	_	_
Total	5	5	1		

SECTION 8.

PROVISION OF GENERAL HEALTH AND ANCILLARY SERVICES IN THE DISTRICT.

(1) Laboratory Arrangements.

Public Health Laboratory Service and County Analyst's Department.

Pathological specimens for bacteriological analysis may now be dealt with by the Public Health Laboratory Service at its Monsall Laboratory, Monsall Green, Near Manchester, or alternatively at the Public Health Laboratory, Mount Pleasant, Liverpool. Samples of food and drugs for qualitative analysis are submitted to the County Analyst's Department at Preston, whilst as regards water supplies, the arrangements previously in force with Messrs. Melling & Arden, Manchester, have been continued.

(2) Hospital Arrangements.

(Liverpool Regional Hospital Board: Warrington & District Hospital Management Committee).

As regards hospitals the District lies within the boundaries of the Liverpool Regional Hospital Board, which administers Newton-le-Willows War Memorial (General) Hospital in Bradlegh Road, Wargrave, with a nominal establishment of 10 beds. The former Isolation Hospital has remained closed since its transfer to the Ministry and the Regional Hospital Board.

The great majority of persons requiring both general out-patient and in-patient investigation and treatment are dealt with by the Warrington Infirmary and by the General Hospital, Warrington, whilst cases of infectious disease requiring isolation are admitted to the Isolation Hospital, Aiken Street, Warrington.

Expectant mothers requiring to be confined otherwise than in their own homes, whether on medical, obstetrical or environmental grounds, are normally admitted either to the maternity wards of the General Hospital, Warrington (if obstetrical complications are likely) or to the Victoria Park, Maternity Home, Latchford, Warrington.

Child patients requiring attention in Children's Hospitals are admitted to the Royal Liverpool Children's Hospital, Myrtle Street, Liverpool, and to the Royal Manchester Children's Hospital, Pendlebury, Manchester: and to the Leasowe Children's Hospital, Leasowe, Wirral, and the Biddulph Grange Orthopaedic Hospital, Biddulph, Near Congleton, when specialised Orthopaedic care is indicated.

(3) Ambulance Arrangements.

Local Health Authority Services (No. 10 Health Division, Lancashire County Council).

Full responsibility for the management and operation of the Ambulance Service was assumed by the County Ambulance Service as from 1st February, 1949, and the district is fortunately placed in containing a County Ambulance Station, sited, in conjunction with the Fire Station, in Gas Street, Earlestown (Telephone Newton-le-Willows 3134), from which three stretcher ambulances and two "sitting-case" cars have operated on behalf of all types of cases, i.e., emergency, infectious disease, and general.

There has been a very considerable increase in the public demand for ambulance transport, as is shown by the subjoined summary of cases conveyed from the Urban District. The Earlestown Ambulance Station, of course, serves other parts of No. 10 County Health Division also.

Summary of Cases Conveyed.

Emergency Cases, 603: General Cases, 3,863: Infectious Cases, 60: Total, 4,526.

(4) Treatment Centres and Clinics.

Maternity and Child Welfare Clinics are held weekly at Latham House, Cross Lane, on Monday and Tuesday afternoons, and an Ante-Natal Clinic each Wednesday afternoon. Attendances at these sessions have been well maintained throughout the year, as is shown by the following figures:—

Child Welfare Centre, Latham House.

Assistant Divisional Medical Officer—Dr. E. A. Lumley (Tuesday afternoon session).

Health Visitor in Charge —Miss I. Heap.

		of chil	No. of attendances.
Age under 1	 	 512	 7,418
1-2 years	 	 148	 1,306
2-4 years	 ****	 128	 841
		788	9,565
		-	

No. of individual expectant mothers attending C.W.C. 29. No. of attendances 145

Ante-Natal Clinic, Latham House.

Visiting Obstetrician—Dr. C. Macdonald. Health Visitor in Charge—Miss I. Heap.

No. of individual women attending, 299: No. of attendances, 917.

School Clinic, The Gables, Crow Lane West.

General. The work at this Clinic has continued, although not perhaps to quite the same extent as formerly, owing to the changes brought about by the National Health Service Act, whereby the general medical care and treatment of the school child becomes the responsibility of the family practitioner who has accepted the child on his list. Such advice and treatment by the practitioner is of course now given without cost to the parent, as was not formerly the case.

Both general medical and specialist sessions are held, as detailed below :-

Assist. Divisional School Medical Officer-Dr. E. A. Lumley.

School Nurse and Health Visitor-Miss Forshaw.

Assist. Divisional Medical Officer's Session each Friday morning during school term.

Nurse's re-dressing, etc., session each Wednesday morning during school term.

Dental.

Dental Surgeon-Mr. A. E. Shaw.

Dental Assistant-Miss Entwistle.

The Dental Officer is normally consulted by appointment, but exception has always been made in emergency, especially where urgent treatment is required for the relief of pain. Most of this work is, (as it should be) of a conservative nature.

It is, therefore, with the greatest regret that I have to record the resignation of Mr. A. E. Shaw, who has for so many years—ever since the opening of the School Clinic in Earlestown, rendered such signal service to school children, and to expectant and nursing mothers in this Urban District, all of whom will remember him with respect, admiration and even affection. For many years to come, his

ex patients will continue to reap the benefits of his excellent professional work, in which he has been so ably assisted by his Dental Attendant, Miss Entwistle.

It is greatly to be deplored that it has not so far been found possible to appoint a permanent successor to Mr. Shaw. A temporary appointment was made for a short period, when Mr. Rubenstein continued the good work, but he also has now taken up another appointment.

Ophthalmic.

Ophthalmologist-Mr. Barker.

School Nurse in attendance-Miss A. Forshaw.

Sessions held weekly each Monday morning.

The Ophthalmic Surgeon may only be consulted by appointment.

Orthopaedic.

Orthopaedic Surgeon—Mr. Almond. Orthopaedic Nurse—Miss Graham.

The Orthopaedic Surgeon attends one half day session monthly, seeing both new and old cases by appointment: the Nurse attends one whole day weekly, for the purpose of supervising the treatment prescribed, for adjustment of splints, etc., and for the tuition of remedial exercises to improve defects and deformities in posture, stance, feet, etc.

(5) Midwifery Arrangements.

Four whole-time salaried Midwives are employed by the Local Health Authority for the purpose of conducting domiciliary confinements either as midwives (when assuming sole responsibility for the delivery) or as maternity nurses (when assisting at delivery, etc., in conjunction with a doctor). Each midwife possesses a car in order to enable her to respond speedily to urgent calls, and to transport her anaesthesia apparatus.

Names and addresses of these Midwives are as follows:-

Mrs. S. E. Butler, 46, Kingsway, Wargrave, Newton-le-Willows;

Mrs. E. A. Howard, 89, Birley Street, Newton-le-Willows;

Mrs. M. Stead, 9, Heald Street, Earlestown;

Mrs. A. Whittle, 70, Cross Lane, Earlestown.

No private midwife practises in the District, so that these ladies were responsible for attendance on the 197 domiciliary confinements which took place during the year. The fact that there were no cases of puerperal pyrexia or fever, and no maternal deaths associated with child birth, is surely the highest tribute to the skill and care bestowed on the parturient mothers.

(6) Health Visiting Arrangements.

This work has been carried out by two whole-time and fully trained Health Visitors (who combine with Health Visiting duties those of School Nurse), and by one part-time Health Visitor: these domiciliary visits, so necessary from the standpoint both of the supervision of the children and the health education of the families, are of course, complementary to the work carried out at the Child Welfare Centre, as described above. The names and addresses of the Health Visitors engaged are:—

Miss I. Heap, Maynard, Belvedere Road, Earlestown;

Miss A. Forshaw, Shotley Mount, Newton Road, Lowton:

Mrs. M. Parker (Part-time), Higher Astley, Vitriol Square,
Earlestown.

(7) Home Nursing Arrangements.

Home nursing is undertaken by two whole-time nurses who formerly practised as "District Nurses" and who continue their beneficient roles in the homes of the sick. The demand for their services has grown very considerably during the year, and although part-time relief nurses have also assisted from time to time, an extension of the staff is contemplated in the near future.

The names and addresses of the Nurses are :-

Mrs. M. M. Charnley, 3, Park Avenue North, Newton-le-Willows;

Miss D. Johnson, 38, High Street, Newton-le-Willows.

(8) Home Help Arrangements.

This is a "permissory" service provided by the County Council through the No. 10 Divisional Health Committee, and is one which is not necessarily provided free of cost to the public. Its aim is to provide domestic help when required by reason of the presence in a household of sickness, maternity, mental deficiency, or to assist in the care of a child or children. The service has expanded during the year in question, as the public have become more fully aware of the facilities provided.

The Home Helps engaged are all part-time "helps": no wholetime workers are employed. The Home Help Organiser and Welfare Worker is responsible for the immediate day to day operation of the scheme and is of course one of the Divisional Medical Officer's Staff. Unfortunately Miss Wilson, the present Home Help Organiser, has been absent from duty on account of sickness for a considerable period during the year, but her work has been very ably undertaken, as a temporary measure, by Miss L. Rowe, of the Divisional Health Office Staff.

(9) Mental Health Arrangements.

The district is covered for this purpose by the Duly Authorised Officer of No. 10 Health Division and by a lady Mental Health Worker, who deal with the various aspects of mental health, including all cases in which investigation, supervision and appropriate action is required under the Lunacy Acts, Mental Deficiency Acts and the Mental Treatment Act. The names and addresses of these officers are:—

Mr. P. D. Parker, 12, Kenyon Lane, Lowton, Near Warrington; Miss M. Hargan, Divisional Health Offices, The Old Rectory, Winwick.

(10) Arrangements for the Prevention of Illness, Care and After-Care, (including Tuberculosis), and the provision of Convalescent Accommodation.

Responsibility for the above rests with the Local Health Authority partly on an obligatory and partly on a permissive basis: "illness" includes mental defectiveness. The scope of such arrangements is very wide, and includes all the methods of health education and propaganda relating to health matters, health visiting in the homes, including those of persons suffering from Tuberculosis, the provision of nursing and ancillary equipment, the after-care of patients who have suffered from illness either at home or in hospital, and the provision of convalescent accommodation and rehabilitation where this is required, to enable those recently sick to regain full health and strength.

The Tuberculosis Health Visitor for the District is Miss Webster, who maintains supervision of patients in their homes, and arranges for their examination or re-examination, and for that of contacts (including X-ray investigation) at the Chest Clinic (formerly the Tuberculosis Dispensary) at St. Helens, a branch of the main area Chest Clinic at Waterloo, Liverpool, administered by the Liverpool Regional Hospital Board.

As regards Health Education—(a very important and essential factor in the prevention of illness)—it is pertinent here to emphasize that although some responsibility for this section of preventive medicine may be accepted (as has been the case) by the Local Health Authority, the permissive power of the Council as a Local Sanitary Authority to

carry out measures of health education under Section 179 of the Public Health Act, 1936, is still extant, and should, in my view, continue to be exercised.

(11) Vaccination and Immunisation Arrangements.

Vaccination and Immunisation against Diphtheria are available to all who desire it, either through the family doctor, who carries it out as part of his duties to the patient, or by attendance at the monthly immunisation sessions held at the Child Welfare Centre, Latham House, where this work is carried out by the Assistant Divisional Medical Officer.

As regards the immunisation position, there are no grounds for complacency, whilst the vaccination state is to my mind, deplorable and potentially dangerous.

During the year a total of 330 children under 15 years of age, completed a full course of immunisation, of which 233 were under the age of 5 years, and 103 were infants under 12 months old. In addition to the above, 52 persons over the age of 15 years, also completed a full course of immunisation, making a grand total of 433.

The percentage proportion of the estimated child population under the age of 15 in an immunised state as at 31st December, 1950, was 57% as against a figure of 58% for the child population in Health Division 10 as a whole.

In contrast to the above, only 33 children and 10 adults underwent primary vaccination (all but one successfully) whilst 59 adults were re vaccinated. If one deducts from the total of 357 live births belonging to the District in 1949, the 14 infant deaths, this means that out of the 343 survivors, only 33 were vaccinated; or 1 every 11 children. This can only be regarded as an unsatisfactory state of affairs, and one likely to become even more serious as the older and better protected age groups become fewer with the passing of the years.

9. THE CHILDREN ACT, 1948.

In the main, this Act provides for the care and welfare of children and young persons up to the age of 18 years, who for one reason or another are deprived of normal home life, and it thus has an important bearing on the mental and physical health of such children.

The County Council, which is the Local Authority for the purposes of the Act, exercises its functions through its Children's Committee and the Children's Officer, who is responsible to the Committee for the

efficient administration and day to day operation of the Service, which is carried out on a regional or area basis.

The Newton Urban District lies administratively within the purview of the Area Children's Officer of the Huyton Area, who is assisted by Childrens Social Workers, the latter being responsible for all matters relating to "deprived" children, e.g., the provision of accommodation, the inspection and report on prospective foster homes, infant life protection, supervision of adopted children during the probationary period, the care and conveyance to suitable "places of safety" of children committed by the Courts to the care of the Authority as a "fit person" under the provisions of the Children and Young Persons Act, 1933, and so on.

The Area Children's Officers and their Visitors work in close cooperation with the Divisional Medical Officers and their staffs, and I am happy to say that in this District (included in No. 10 Health Division), the relationship is most effective and cordial.

The Wigan Area Children's Officer is :--

Mr. S. H. Pitt, Nutgrove Villa, 76 Derby Road, Huyton, Liverpool;

and the children's Visitor for the Urban District is :-

Miss J. W. Cole, Nutgrove Villa, 76 Derby Road, Huyton, Liverpool.

10. NATIONAL ASSISTANCE ACT, 1948.

So far as the Urban District is concerned, the Local Authority, carrying responsibility for the implementation of Parts III and IV of this Act, is the County Council, and the administrative machinery, in this case, also, is on the divisional basis. The main provisions of Part III, relate to accommodation for persons who, by virtue of circumstances which could not reasonably have been foreseen, are without lodging, and to Welfare Services in general for persons handicapped by infirmities such as Blindness, Deafness, Dumbness, crippling physical defects, and other disabilities.

The approved scheme of the County Council in regard to welfare utilises very fully the services rendered by the various voluntary agencies already in existence prior to this legislation.

Section 47 of the Act places on the Local County District Council responsibility for making application to a Court of Summary Jurisdiction for an Order to secure the removal to a suitable hospital or other institution of any aged and infirm person who is unable to devote to himself proper care and attention, and is not receiving such from other persons. The application is made following certification by the Medical Officer of Health that such removal is necessary.

Section 50 of the Act is of importance in that it places on this County District Authority the duty of arranging for the burial or cremation of the body of any person who has died or been found dead within the district when "it appears to the Authority that no suitable arrangements for the disposal of the body have been or are being made otherwise than by the Authority."

URBAN DISTRICT COUNCIL OF NEWTON-LE-WILLOWS.

REPORT OF THE SANITARY INSPECTOR FOR THE YEAR 1950.

LADIES AND GENTLEMEN,

I have the honour to present my report for the year ending 31st December, 1950.

Mr. Kenneth Hilton who had given four years valuable service to the Council as Additional Sanitary Inspector, resigned in February, on obtaining appointment as Chief Sanitary Inspector to the Urban District of Tyldesley, and was succeeded in July by Mr. George Davies, formerly of the Borough of Leigh.

My thanks are due to Mr. Hilton for untiring assistance he gave throughout his period of office; to Dr. Crawford for his encouragement and support; to all members of the staff of the Department for their efforts, which have been greatly appreciated; and to the Members and Officers of the Council for their consideration, particularly during the period from January to July.

Increasing demands have been made on the resources of the department for many years past, and the stage has been reached when necessary routine inspections and duties are having to be sacrificed in order to keep abreast of the specific demands.

An example of this is the increased number of complaints now being received which entails more inspections, more re-visits and lengthier periods between re-visits.

Comparison of the statistics for 1935, the year in which your first additional inspector was appointed and in which you had two inspectors for six months of the year, with those for 1950, in which there was the same number of inspectors for a similar period, indicate how the nature and scope of the work have altered due mainly to new legislation, the progressive policy of the Council, and to the effects of the war.

Extracts from these statistics are :-	1075	1050
	1935	1950
Population		21,920
Inhabited houses	5,421	6,312
Complaints received and investigated	54	363
No. of nuisances abated	277	617
No. of nuisances abated in connection		
with pail closets, ash-pits and privies		
(included above)	98	6
No. of visits and inspections	1,044	1,465
No. of visits, etc., in connection with		
pail closets, conversions, etc. (included		
above)	704	12

The Council became a Food and Drugs Authority in 1938, and sampling duties under the Food and Drugs Act, 1938, registration of ice cream premises, food hawkers and food preparing premises, and rodent control work are among the essential duties added since 1935.

The year's activities are covered in the following pages.

1. Housing.

Housing continued to demand a large proportion of attention.

Compliance with notices is becoming easier, the chief obstacles to more speedy attention being the rising cost of repairs, and the lengthy period which must elapse between re-visits.

The extent of overcrowding cannot be accurately stated without a survey, neither can the number of insanitary houses which are incapable of repair be more than an estimate. An indication from records kept is that known cases of overcrowding number 29, and insanitary houses incapable of repair approximately 150. A further 200 houses, to give another approximate figure, might be considered incapable of repair at reasonable expense.

The bottleneck in dealing with these is the number of new houses available for re-housing, and it is encouraging to know that the Council appreciates the difficulties and is making provision for new houses to be made available for some of these cases.

2. Inspection and Supervision of Food.

All types of food premises were visited as often as possible and forthwith upon request. The state of cleanliness of the premises, vehicles, utensils, workers and their clothing, etc., were noted at each visit, and advice given, or action taken, where necessary.

The only educational work possible to further the Clean Food Campaign, was by advice at each individual premises visited, and by lectures to organisations outside working hours.

(a) Milk Supply.

Whilst maintaining routine and special visits throughout the year, registrations and licences were granted or issued as follows:—

Milk and Dairies Regulations, 1949.

Number of Distributors of Milk registered 53

Milk (Special Designation) Regulations, 1949.

Dealers' Licences.

No. authorising the use of the special designation

"Pasteurised" 14

No. authorising the use of the special designation

"Sterilised" 38

No. authorising the use of the special designation

"Tuberculin Tested" 12

Supplementary Licences.

No. authorising the use of the special designation

"Pasteurised" 4

No. authorising the use of the special designation

"Sterilised" 3

No. authorising the use of the special designation

"Tuberculin Tested" 4

As a consequence of action by the department, the yard of one dairy was paved, and the names and addresses of two dairymen were caused to be displayed on their vehicles.

One new dairy including pasteurising plant and bottling facilities was in course of erection.

(b) Meat and Other Foods.

The following items were found to be unfit for human consumption and were voluntarily surrendered for destruction :—

Foodstuffs condemned :-

ustuns cond	milicu	•				
Nature.				Qu	antiti	es.
				Cwt.	qrs.	lbs.
Apples			 	3	I	_
Plums			 	-	-	7
Figs			 	_		6
Cheese			 		I	2
Tomatoes		****	 	_	1	_
Wet Fish			 		2	14
Beast Liver			 			14
Hindquarter	Lamb		 	-	-	14
Total			 	4	3	ı
						-

Canned Goods.

Meat		48 tins	Vegetables 88 tins
Fish	****	21 tins	Milk 169 tins
Jam		28 tins	Sauce & Pickles 176 bottles
Fruit		197 tins	Coffee Extract 24 bottles

Dry Goods.

Christmas Puddings	 82	Jellies	 38 pkts.
T 111 211	33	Cereals	 43 pkts.
Miscellaneous Goods	 13 pkts. 23 pkts.	Coffee	 28 tins

(c) Adulteration of Food.

The Council is a Food and Drugs Authority and 26 formal and 11 informal samples of food were taken and submitted to the County Analyst. One sample of milk was slightly deficient in milk fat and the producer-retailer was cautioned.

3. Refuse Collection and Disposal.

Three Dennis 10 cu. yard capacity vehicles were employed on refuse collection work, and a weekly collection of refuse was maintained. The few remaining pail closets are also emptied weekly, and the privies each fortnight.

Approximately 330,000 bins from dwellings, schools, churches, clubs, etc., were emptied of an estimated amount of 8,500 tons of refuse, excluding 149 tons of salvage.

The difference between the character of refuse collected during the summer and the winter months was even more marked than it was before the war.

The reduction of the ash content and the preponderance of tins, bottles, jars, during the summer months, created difficulties at the tip which will not be overcome until better means of consolidation, levelling and soiling are made available.

Although the total weight of materials salvaged exceeded the 1949 figure by 5 tons, the gross income was reduced by £3. These differences were accounted for by increased activity by dealers in connection with ferrous and non ferrous metals, rags and bones, and the low prices of waste paper which prevailed throughout the year.

Materials Salvaged during Year.

Mate	rial.			Weight		In	come	e.
			Tons	cwts.	qrs	£	s.	d.
Paper	****		148	3	2	 885		8
Rags			_	7	-	 3	IO	0
Ferrous	Metals		-	4		 0	IO	0
String	****	****		4	-	 2	0	0
Total	****		148	18	2	 891	9	8
			-			 -		

4. Infectious Diseases-Control.

Enquiries were made upon notification. Disinfection of rooms and bedding was carried out in all cases of removal of tuberculous patients. In other cases rooms were dealt with only on request.

Visits by Inspectors	 			41
Disinfections	 ****	****	****	6

5. Vermin Control.

No. of houses found to be infested :-

(a) Council houses			 5
(b) Other houses	****		 9
of visits to verminous	premise:	s	 20
of verminous premises	treated		 14

6. Rodent Control.

No.

The Prevention of Damage by Pests Act, 1949, operated from 31st March, 1950, replacing the Rats and Mice (Destruction) Act, 1919.

The new Act emphasises the primary obligation as being upon the local authority to ensure that, so far as practicable, its area is kept free from rats and mice. Agricultural land and premises became subject to inspection by local authority officers and, as the County Agricultural Executive Committees also have powers under the Agriculture Act, 1947, to treat infestations at these premises, cooperation between local authorities and County Agricultural Committees became essential.

Co-operation was greatly assisted by the Workable Area Committee Meetings at which representatives of contiguous local authorities, County Agricultural Committees, the Railway Executive, and the Ministry of Agriculture discussed matter of interest and co-ordinated action when necessary.

Reports must now be submitted to the Ministry, in the first place for the period from 31st March to 31st December, 1950, and thereafter annually.

One rodent operative was employed full time on rodent control work, a charge being made for treatment of business premises, but a free service is provided for dwelling houses.

Number	of properties inspected	****		3,928
Number	of infestations found and	treated	:	
	(a) business premises			.32
	(b) dwellings			30
	(c) Local authority's pro	perty		4

The sewers of the district were treated twice and the Council's sewage disposal works and refuse tip were baited regularly.

Treatment of Sewers Total number of manholes		Treatment No. 11 580
Dates of treatment	 1st to 12th May	y. 30th Oct. to 3rd Nov.
Bait base used		Sausage rusk.
Poison used	 Arsenic.	Zinc. Phosphide
Number of manholes baited*	 226	126
Number of manholes showing t		
of bait	45	31
Number of manholes showing co		
plete take	35	16
Number of manholes test bai		
and not included at*	60	Nil.
Scheme of baiting	 Consecut	ive days.

7. Statistical Summary of Inspections Made, Notices Served, etc.

Complaints received and investigated 363

Analysis of Visits made by Inspectors.

(a) General Sanitation.

Water supply					71
Drainage				*****	
		****	****		119
Stables and Piggeries		****		****	13
Fried Fish Shops	****		****		19
Common Lodging Ho	use				7
Factories				****	92
Bakehouses					12
Refuse Collection and	Dispo	sal .			45
Licensed houses					12
Shops		***			79
Schools					22
Rats and Mice		****	****		69
Smoke Observations					II
Tents, Vans, Sheds					6
Public Conveniences		***			8
Miscellaneous					25
Total		****			610

(b) Housing. Under Public Health Acts. 419 No. of houses inspected 1,056 Visits paid to above Under Housing Acts. No. of houses inspected 18 Visits paid to above Overcrowding. 23 No. of houses inspected 34 Visits paid to above Verminous Premises. 16 No. of houses inspected 20 Visits paid to above Miscellaneous Housing Visits (including Points Scheme 152 1,752 (c) Infectious Diseases. 28 Inquiries in cases of I.D. 6 Visits re disinfections 13 Miscellaneous I.D. visits 47 Total (d) Meat and Food Inspection. Inspection of meat—shops and stalls 23 16 -other premises 19 Visits to butchers 21 Fishmongers, etc. Grocers Greengrocers and fruiterers II3 23 Dairies and milk shops 46 Ice cream premises 20 Food preparing premises 414 Market Stalls 28 Street vendors and hawkers'carts 5 Restaurants

Visits in connection with Sampling.		
Milk-bacteriological	****	36
Milk—Tubercle bacilli		28
Food and Drugs Samples		29
Water Sampling		35
Miscellaneous Food Visits		II
Total	****	944
Total inspections and visits		3,353
N.C. C. I		
Notices Served.		
No. of informal notices served		310
No. of informal notices complied with		235
No. of statutory notices served		38
No. of statutory notices complied with	****	30
Analysis of Defects noted and remedied.	. T)	
Type of Defect. Recorder		emedied.
Drainage 55	****	52
Dustbins 77	****	46
Paving of yards and passages 9	****	6
Water supply 48		11
Roofs 67	****	60
Eavesgutters 68		33
Downspouts 24	****	18
Brickwork and/or pointing 41	****	48
Chimneys and Flues 23		15
Plastering 62	****	80
Floors 17		22
Windows, frames, sashcords, etc. 66	****	42
Doors and/or frames 11	****	8
Fireplaces 15	****	30
Washing accommodation 8		13
Cooking 6		6
Sinks, etc 9	****	10
W.C.'s, Basins, Cisterns, etc 53	****	66
Miscellaneous 44		51
Total 653		617

8. Additional Duties.

(a) Petroleum Acts and Orders.

There were 29 licensed storage premises for petroleum spirit, 22 of them for private use and 7 in connection with the supply of petrol to the public.

2 premises were licensed to store carbide of calcium.

Each of them was visited at least once during the year and was found to be satisfactory.

(b) Lethal Chamber.

334 dogs and 261 cats were disposed of by coal gas poisoning.

The gas chamber was found to be very dilapidated and it was decided to instal a modern electric one in its place. It is hoped that this will be in operation during 1951.

(c) Shops Acts.

The Shops Act 1950, came into operation on 1st October and, by consolidating eight different Shops Acts, helped to simplify the provisions to traders.

None of the administrative difficulties were eased and a Sub-Committee was appointed to consider the Act and to make recommendations to the full Health Committee.

Each shop was visited at least once during the year for Shops Act purposes, and observations on Closing hours, Sunday Trading, etc., were made at intervals.

Yours faithfully,

L. M. BOOTH,

Chief Sanitary Inspector.







