

[Report 1898] / Medical Officer of Health, Quarry Bank U.D.C.

Contributors

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—: THE :—
URBAN DISTRICT COUNCIL
OF
QUARRY BANK.

ANNUAL REPORT

OF THE
Medical Officer of Health,
including a Summary of Work done in the Surveyor's and
Inspector of Nuisances Departments,

FOR THE
YEAR ENDING 31st DEC., 1898.

STOURBRIDGE:—

MARK & MOODY, "COUNTY EXPRESS" OFFICES,

1899.

THE
URBAN DISTRICT COUNCIL

OF

QUARRY BANK

ANNUAL REPORT

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THE URBAN DISTRICT COUNCIL OF
QUARRY BANK.

ANNUAL REPORT

—OF THE—

Medical Officer of Health

FOR THE YEAR, 1898.

MR. CHAIRMAN AND GENTLEMEN,

I have much pleasure in presenting to you the Annual Report for 1898. You will remember that in 1897 the death rates in all classes were much below the average of the previous ten years. This year the death rates, especially Zymotic and Infantile, are above the average, mainly due to a heavy mortality from Diarrhœa and to epidemics of Measles and Whooping Cough. Scarlet Fever, although prevalent during the year, caused only two deaths.

Considerable progress has been made in the Water Supply since my special report on that subject in December, 1897, seventy-one houses having been connected to the South Staffordshire Water Company's mains during 1898. Dunn's Bank is still without any proper Water Supply.

The system of contracting for the removal of Night-soil has been abandoned, the Council now employing the necessary labour directly, and with greater efficiency. Several ashpits and privies have been constructed in accordance with the plans adopted late in 1897, and have proved satisfactory, contrasting strongly with the uncovered and dilapidated structures which still abound. These latter require your constant attention.

Extensive mining subsidences have occurred during the year, especially in the lower part of the district, and have caused the scheme for general internal sewerage formulated in 1896, to be further postponed.

The collateral scheme for paving the principal streets, namely: High Street, New Street, Maughan Street, and Queen Street, has been commenced during the year, and is still in progress.

Vital Statistics.

- Population.** The population in 1891 was 6,732 living in 1,292 houses, and estimating by the usual method, it should have reached 7,115 by the middle of 1898.
- Births.** During the year 254 births have been registered, of which 128 were of males and 126 of females, the birth rate being therefore 35·69 per 1,000 per annum, against 267 births, and a birth rate of 37·81 in 1897.
- Deaths.** 137 deaths were recorded during the year, 72 of males and 65 of females, giving an annual death rate of 19·25 per 1,000. In 1897 the deaths numbered 104, 59 of males and 45 of females, with a death rate of 14·73. From Table III. it will be seen that the death rate is above the average of the last 10 years.

The following tables show an analysis of the Mortality returns:—

Table I.—AGES AT WHICH DEATH OCCURRED.

Under 1 year ...	..	..	48
1 and under 5 years	...	...	34
5 " 15 "	...	...	4
15 " 25 "	...	...	7
25 " 65 "	...	...	24
65 and upwards	...	...	20
		Total	137

Table II.—DISEASES CAUSING DEATH.

A—CONSTITUTIONAL DISEASES.

Chest Affections ...	34	Rheumatism ...	1
Phthisis ...	7	Old Age ...	4
Heart Disease ...	6	Premature Birth ...	5
Inquests:—		Debility from Birth ...	4
Injuries ... 5 } ...	8	Wasting Diseases ...	9
Natural Causes 3 } ...		Dentition & Complications	1
Cancer ...	9	Convulsions ...	5
*Nervous Diseases ...	5	Lead Poisoning ...	0
Kidney Diseases ...	2	Other Diseases ...	8
†Influenza ...	1		

Total, 109

B.—ZYMOTIC DISEASES.

Scarlet Fever	...	2	Whooping Cough	...	
Enteric (Typhoid) Fever		2	Measles	...	7
Diarrhœa (including Gastro-Enteritis & Enteritis	...	...	Puerperal Fever	...	0
		11			
		Total 28.	Total deaths,	137.	

*Including Cerebral Hemorrhage and Apoplexies.

†Following the Registrar General, Influenza is not included in the zymotic death rate.

Table III.

Year.	Estimated Population.	No. of Births.	Birth Rate.	No. of Deaths.	Death Rate.	Deaths among Infants.	Inf'le Death Rate.	Zymotic Deaths.	Zymotic Death Rate
	A	B	C	D	E	F	G	H	I
1889	7093	244	34·36	101	14·22	32	131	17	2·39
1890	7193	297	41·20	139	19·30	54	181	17	2·35
1891	6732	295	43·67	131	19·45	45	152	7	1·04
Cns.									
1892	6802	293	43·07	147	21·61	55	187	23	3·38
1893	6862	271	39·46	120	17·48	44	162	10	1·45
1894	7000	268	38·28	96	13·71	35	130	13	1·85
1895	7127	256	35·92	129	18·10	39	152	44	6·17
1896	7007	230	32·82	123	17·55	44	195	16	2·28
1897	7060	267	37·81	104	14·73	28	104	4	0·56
1898	7115	254	35·69	137	19·25	48	190	28	3·93
Mean.	6999	267	38·22	122	17·54	42	158	17·9	2·54

Twenty-eight deaths were registered from Zymotic Diseases, giving a Mortality of 3·93 per 1,000 per annum. From column I, Table III., it will be seen this is above the average. I should state, however, that during the last two years I have classed the deaths from Enteritis and Gastro-Enteritis, of which there were seven in 1898, as deaths from Diarrhœa, thereby apparently increasing the Zymotic death roll considerably. Many deaths have also occurred from Measles and Whooping Cough. The Zymotic death rate in England and Wales in 1897 was 2·15, and for the County of Stafford 2·54.

Two deaths occurred from this disease. One of these was at the Infectious Hospital, but the patient did not reside in Quarry Bank.

**Zymotic
death
rate**

**Enteric
Fever.**

**Scarlet
Fever.**

Two deaths occurred from this cause.

**Erysipe-
las.**

No fatal case occurred.

Measles.

Seven deaths were attributed to Measles and its complications. The outbreak commenced in January in New Street and Maughan Street; by March it had nearly disappeared, but became prevalent again in May, and increased rapidly in June and July. From figures obtained from the Head Masters of the two Board Schools in the district, I found it was confined almost entirely to children attending the High Street Schools. At the Mount Pleasant Board Schools no child was absent on account of Measles on June 10th, and only two on July 8th. The following figures from the High Street Board School will show the progress of the epidemic.

Table IV.

High Street Board Schools. Absentees suffering from, or living with persons suffering from Measles :—

Department.	June			July.			
	10th	17th	24th	1st	8th	15th	22nd
Boys	15	14	18	22	43	62	61
Girls	18	18	20	28	46	69	72
Infants	24	24	24	50	80	closed	closed
	57	56	62	100	169	131	133

On July 8th I advised the closing of the Infant Department for six weeks, and on July 22nd I further advised the closing of the whole School; when the School re-assembled in August, the epidemic had practically vanished, a result which appeared to justify the measures taken. I wish to express my thanks to the Headmasters of both Schools for the readiness with which they furnished me with the particulars of absentees, and to the authorities for promptly closing the Schools at the Council's request. On July 8th I presented to the Council a special report on the epidemic, copies of which were sent to the Local Government Board and County Council.

Towards the end of the Measles epidemic, Whooping Cough appeared, and continued with varying severity till the end of the year, causing six deaths. In December it was very prevalent.

Whooping Cough.

From 1895, when the last severe epidemic of Typhoid Fever occurred, the district was comparatively free from Diarrhœa until the summer of 1898. An epidemic began in the first week of September, and existed in a severe form for 4 weeks, 5 of the 11 deaths occurring in that month.

Diarrhœa.

So many factors are concerned in the causation of Diarrhœa that it would not be practicable to refer to them all in this short report. The principal, so far as Quarry Bank and the epidemic of 1898 are concerned, are:—

(1) *Organic Pollution* of the soil, whether by vegetable or animal refuse, combined with a moderate degree of dampness.

(2) *Heat*.—Dr. Ballard showed some years ago, that Diarrhœa became most prevalent when the temperature of the soil, at a depth of four feet, reached 56° F.

(3) *Food*.—By popular opinion, Diarrhœa is attributed to this cause more than to any other; unripe and unsound fruit, and meat and fish tainted by putrefaction, being rightly held to be potent factors in its causation. But it is chiefly among the younger children, from three to nine months old, that Diarrhœa is fatal, that is, at an age when fruit and flesh are seldom taken; moreover, children fed at the breast are remarkably exempt, whilst among bottle-fed children the mortality is very high. Owing to the employment of mothers in factories away from home, a great number of children are of the latter class in your district. The problem, therefore, is to reduce the danger from bottle-feeding to the minimum, and this may be effected with reasonable care. The milk should be obtained from healthy cows, and whenever the weather is warm, and at any other time when its condition is not absolutely reliable, sterilized by boiling, being afterwards kept in an air-tight vessel, and used as soon as possible. With these precautions and the avoidance of artificial foods (especially the cheaper qualities of condensed milk), for six months at least, most of the danger may be averted. To the Council the practical points are:—

- (1) To prevent the pollution of the soil and atmosphere around the houses by enforcing proper drainage and scavenging, causing ashpits to be covered and kept as dry as possible, and preventing accumulations of refuse.

- (2) To control the Milk Supply by ensuring clean and wholesome Cowsheds and Dairies and healthy cattle.
- (3) To instruct Mothers by means of Pamphlets and Lectures in the chief points affecting the health of children.

The higher death rate from Diarrhœa in 1898, does not necessarily indicate, as it might appear to, that insanitary conditions are more abundant than in 1897, but that the soil being already polluted, the prolonged and intense heat of the Summer was alone required to develop the microbes of Diarrhœa. Had the temperature of the soil remained below 56° F., these germs might have remained dormant though living, and no epidemic would have occurred. The sun's heat being beyond our control, the germs must be deprived of the other conditions necessary to their growth, namely, moisture and polluted soil.

I have written at some length on this subject, because, although the death rate from Diarrhœa is higher than that of any other zymotic disease, it is not often seriously considered, and because with proper precautions it should be among the most preventable diseases of this class.

Influenza. Influenza was prevalent in January and February, but the type was not very severe.

Infantile Mortality. Forty-eight deaths were registered among children under 1 year of age, giving an Infantile death rate of 190 per 1,000 born. As shown in Table III., this is high compared with that of the previous year and much above the average. The mean Infantile death rate for England and Wales is about 146, for large towns in England 169, and for Urban Districts in Staffordshire 174.

Table V.

The causes of death during the first year of life were:—

Debility from Birth ...	4	Measles	1
Premature Birth ...	5	Whooping Cough ...	3
Acute Chest Diseases	10	Wasting Diseases ...	7
Diarrhœa	8	Convulsions	6
Cellulitis	1	Abscesses	1
Jaundice	1	Malformation of Heart	1
		Total	48

Of these 16 occurred within the first month of life, viz. :—

Debility from Birth ...	3	Convulsions	3
Premature Birth ...	5	Jaundice	1
Wasting Diseases ...	1	Malformation of Heart	1
Diarrhœa	2		—
		Total	16

In 1897 there were 28 deaths among children under 1 year old, of which 9 were during the first month of life. During the year the Council has passed resolutions favouring the greater control of the sale of Condensed Milk, (especially Condensed Skim Milk), and the supervision of Cowsheds, Dairies, and Milk supplies, with a view to the prevention of the sale of milk from tuberculous cows, as milk from this source has been proved to be the chief cause of consumption among young children, notably in the form of *Tabes Mesenterica* or consumption of the bowels.

Of these, eight have been held, the coroner certifying that death was due in 5 cases to injuries and in the remainder to natural causes.

There have been no deaths uncertified.

Notification of Diseases.

Ninety-four cases of Infectious Diseases have been notified, the number in 1897 being 26. A tabulated list is appended to this Report.

1897 closed with several cases of Scarlet Fever, and the disease continued to a moderate degree throughout the year, March and April being alone free from notifications. I have repeatedly stated that isolation at home in an industrial district like Quarry Bank is not very efficient, owing to lack of knowledge among the poorer classes and to want of accommodation in their houses. It is a common practice for children suffering from Scarlet Fever to be allowed (and often compelled) to mix with the other members of the family long before the last stages of infection have passed. The true remedy is removal to an Isolation Hospital and the advisability has been considered of using the present Hospital for this purpose, in the absence of Small Pox, in preference to isolation of Typhoid Fever. The isolation of Enteric Fever can be much more successfully effected at home than can that of Scarlet Fever, but, on the other hand, the former requires more skilful nursing. In my opinion it is now of greater importance to isolate the first case of Scarlet Fever than the first case of Enteric, as the latter is mainly conveyed by infected water and food and careless personal habits, whilst the former is

Inquests.

**Uncertifi'd
Deaths.**

**Scarlet
Fever.**
Cases 69
Deaths 2

usually air-borne and may attack at some distance. If, however, Enteric Fever should break out in an overcrowded house or area, or where the water supply is liable to contamination, such cases could only safely be dealt with by isolation. These conditions are becoming less common every year and may be largely corrected by systematic sanitary inspection. The chief question involved in the isolation of Scarlet Fever is that of expense, and the Council will shortly be called upon to consider what advantages may be derived from combining with other districts to form a "Hospital Area" for this purpose.

Consumption.

Seven deaths have occurred directly from Phthisis or Consumption of the Lungs, and 9 to Wasting Diseases, including Tabes Mesenterica and Marasmus. These latter may be regarded, in the majority of cases, as Tubercular or Consumptive Diseases affecting children. Moreover, some deaths certified as from Debility or from Chest Affections are probably complicated by Tubercle. The fatality of this disease in its manifold forms is therefore alarming. Owing to the discovery of many striking points of analogy between Consumption and Infectious Diseases, amongst them being the possession of a specific microbe in nearly all cases, the question of the infectiousness of Tuberculosis has recently become very prominent. It has been demonstrated that the secretions of the sufferers, notably the expectoration from the lungs (sputum) in human beings and the milk in cows, convey the infection, and whether the microbe be experimentally injected in a pure form into a susceptible animal, or injected as milk or sputa (or under certain conditions inhaled as a spray or taken as food) the result is the same, Tuberculosis being produced in the animal after a certain time. Among the domestic animals, cattle and fowls are the principal victims. It can be readily conceived that the sputum from a consumptive person confined to one room, is frequently dried up and scattered about the room as fine dust, rendering that room capable of imparting the disease to others. Further, all conditions tending to reduce vitality, predispose a person to infection, especially those that necessitate living in an atmosphere vitiated by human breath, such as overcrowding of individuals and bad ventilation. Damp also tends to aggravate this condition. On the other hand the air of the open country and the higher altitudes is not only free from Bacilli, but is inimical to their development, so that early and slight cases of the disease often recover under an open air treatment. The establishment of open air sanatoria for Phthisis has become a national question, but the onus of the sanitary details necessary to its

prevention rests at present on the Sanitary Authority. They should, as far as possible, secure open spaces in the town, and prevent and suppress any overcrowding, and, as in other infectious diseases, educate the people by means of lectures and pamphlets to a knowledge of the nature of the disease and its causes and prevention, especially as to the destruction of the sputa and the boiling of milk, and even require the disinfection of the houses where cases are known to exist, especially if they end fatally.

Table VI.

Showing dates and distribution of Scarlet and Enteric Fever cases during the year, with the probable cause of the latter.

Month.	Scarlet Fever.	Enteric Fever.	Locality of Enteric Fever.	Probable cause of Enteric Fever Cases.
January	9			
February	4	1	Sheffield Street	Insanitary premises. This area was the centre of the 1895 epidemic. S.S. water is now in use. Three of the cases had partaken freely of mussels about a fortnight previous to being attacked.
			Sheffield Street (4)	
March ..	0	7	Lower High Street (1)	A companion of one of the Sheffield Street cases above mentioned, had also eaten freely of mussels.
			Z Street (1)	Polluted and condemned well water on premises.
			Coppice Lane (1)	Cause doubtful. Premises clean and wholesome.
April ..	0	1	Sheffield Street	Same house as case in February, 1898
May ..	4	0		
June ..	4	0		
July ..	3	1	Lower High Street	Foul drains and cess-pool.
August ..	6	0		
Sept. ..	11	0		
October	9	2	Saltwells Coppice (1)	Doubtful. Both had S.S. water.
			Queen Street (1)	
Nov. ..	11	0		
Dec. ..	8	0		
Total ..	69	12		

The following streets were infected with Scarlet Fever :—

Street.	Date of First Case.	Number of Cases.
Oak Street	Jan. 4th.	1
Thorns Road	„ 6th.	5
Mears Coppice	„ 8th.	4
New Street	„ 20th.	4
Evers Street	„ 20th.	1
Caledonia	Feb. 13th.	1
Deeley Street	„ 14th.	2
Maughan Street	„ 15th.	2
Church Street	May 12th.	1
Rose Hill	„ 25th.	4
West Street	June 6th.	4
Saltwells Coppice...	July 21st.	4
High Street	„ 24th.	10
Cradley Forge	„ 29th.	1
Bower Lane	Aug. 10th.	6
Amblecote Road	Sep. 20th.	1
Hammer Bank	Nov. 5th.	1
Brickkiln Street	„ 11th.	6
Sheffield Street	„ 16th.	3
Stour Hill	„ 23rd.	1
Victoria Road	„ 23rd.	1
Merry Hill	„ 30th.	1
Queen Street	Dec. 6th.	2
Hill Street	„ 14th.	1
Oak Street	„ 19th.	1

Enteric Fever. Twelve cases were reported, all in persons over 5 years of age, one of which died. Seven were removed to the Hospital, and all recovered. Another death from Enteric Fever appears in your death returns, namely, that of a person coming from a district outside Quarry Bank, who died in the Isolation Hospital. It appears from Table VI., that with the exception of a small outbreak in Sheffield Street, all the cases were sporadic. This street was the centre of the great epidemic in 1895, and now that its water supply is obtained solely from the South Staffordshire Water Works, the renewal of Enteric Fever indicates that the germs persist in soil contaminated for many years by bad drainage and midden soakage. Living in an atmosphere vitiated by the exhalations from this soil, the powers of resistance are reduced so that children fall a ready prey to Diarrhœa and adults to Enteric Fever. In 4 cases the patients had partaken freely of mussels, 10 days to a fortnight previous to the attack, and although it would be unwise to advance this as the source of infection, some value may be attached to it, as it has of late years been repeatedly proved that Enteric Fever has been conveyed by both mussels and oysters.

Cases 12
Deaths (be-
longing to
District) 1.

To rid your district of the risk of this disease, the following precautions should be taken :—

- (1) To isolate all infected persons.
- (2) To disinfect immediately all excretions from the patients, and all bedding and clothing with which they came in contact.
- (3) To prevent soakage into the soil beneath and around dwelling houses by means of water-tight pavements, efficient and well-trapped drains and water-tight, covered and ventilated middens and ashpits.
- (4) To replace privies by water closets wherever practicable ; and
- (5) Where this is not practicable, to scavenge frequently and thoroughly.
- (6) To protect water, milk, and food supplies from risk of infection.

The suggestions in Clauses (1), (2), (5), and (6) have recently had much careful attention from the Council, but those in (3) and (4) have scarcely been considered.

This has again, in the absence of Smallpox, been used for Enteric Fever.

The particulars so far as relate to Quarry Bank patients are :—

Remaining from 1897	...	..	0
Admitted in 1898	..	...	7
Died	...	...	0
Discharged cured	...	...	7
Remaining on Dec. 31st, 1898	...	...	0

The steam disinfector still works well and is of great value in dealing with infected articles.

Happily this disease rarely occurs in Quarry Bank. One mild case was reported from Queen Street in July, and ended in recovery. The Council has taken advantage of a scheme promoted by the County Council, by which a bacteriological diagnosis of this disease can be obtained free of charge to the district. The necessary apparatus has been placed in my hands, and can be had on application by any of the Medical men having cases in the district.

One case of this disease (which is often identical with Diphtheria) occurred in Maughan Street, in August, and speedily recovered.

Eleven cases were notified in different parts of the district.

**Epidemic
Hospital.**

Diphtheria

**Membran-
ous Croup.**

Erysipelas

**Puerperal
Fever
and
Smallpox.**

No case of either of these diseases has been reported. I regret that I have no figures on which to base an estimate of the vaccination of the district, but have reason to believe that most of the children are vaccinated, the majority, however, very inefficiently. Should an outbreak of Smallpox occur, this district would, I fear, suffer severely owing to this neglect.

Sanitary Notes.

**Street
Paving.**

The footpaths of the principal roads are being paved, and a detailed statement by the Surveyor will be found appended.

Drainage.

Sewerage and drainage have been of a temporary nature only. The long expected deep drainage scheme is still delayed owing to mining operations. Surface drainage is in a bad condition in many places.

**Middens
and
Ashpits.**

A few Ashpits and Privies have been built after the improved model, and are satisfactory. Of the remainder, many are in a wretchedly dilapidated condition. The principal sanitary reform of the year has undoubtedly been the abolition of contract scavenging, this work being now done under the direct control of the Council. We have no longer the heavy arrears of over-full ashpits, which for many years have bred pestilence and harassed the sanitary administration.

**Water
Supply**

Seventy-one houses have been connected with the South Staffordshire Water Company's mains during the year, making a total of about 1,080 with tap water. Rather more than 200 still remain unconnected. Among the areas connected during 1898, the Dingle with a total of 27 houses, is the chief; Dunn's Bank with about 35 houses, Mears Coppice with 20 houses, and Ravensitch with 12 houses, are all still dependent on surface wells, surface collections, or rain water, all of which are, as shown in my special report on the water supply, in December, 1897, liable to contamination. I cannot too strongly urge the case of Dunn's Bank, which in a dry season is almost absolutely devoid of water.

**Slaughter-
houses,
Dairies, &
Cowsheds.**

These have been frequently inspected, and usually found to be clean. The horse-slaughtering establishment at Saltbrook End has given rise to many complaints during the year, especially in the hot season. On several occasions I visited the place, and found large collections of foul-smelling manure and offal. I called the owner's attention to the nuisance, but it was only tardily abated, and soon allowed to recur. The Council should, I think, bear these facts in mind when the renewal of the license is applied for.

No complaints as to the quality of meat exposed for sale have been brought to my notice. During the summer, some of the fish became very putrid, and was allowed to remain too long on the premises before removal.

**Inspection
of Meat.**

No nuisance has been reported under this Act.

**Factory
and Work-
shops Act.**

Fourteen cases of overcrowding were discovered, eleven of which were abated after notice. No houses have been formally condemned as unfit for habitation, but there are many in this condition owing to mining operations; some of these have been abandoned altogether. The Surveyor's Report appended hereto will show what progress has been made in house accommodation.

**Over-
crowding,
and House
Accommo-
dation.**

Appended you will find the statistical forms required by the Local Government Board and the County Council, together with a summary of work done in the Surveyor's and Sanitary Inspector's Departments.

In conclusion, I must thank the members of the Council for the ready help they have always given me in the performance of my duties in the district.

I beg to remain,

Your obedient Servant,

T. MAJOR TIBBETTS, M.B., D.P.H. (LONDON),

MEDICAL OFFICER OF HEALTH.

14th Feb., 1899.

Presented to the Council 9th March, 1899.

THOMAS BUTLER, *Chairman.*

ALFRED HOMFRAY, *Clerk.*

TABLE A.—TABLE OF DEATHS during the Year 1898, in the Quarry Bank Urban District
classified according to Diseases, Ages, and Localities.

NAMES OF LOCALITIES adopted for the purpose of these Statistics; public institutions being shown as separate localities.	MORTALITY FROM ALL CAUSES, AT SUBJOINED AGES							MORTALITY FROM SUBJOINED CAUSES, DISTINGUISHING DEATHS OF CHILDREN UNDER FIVE YEARS OF AGE.																					
	At all Ages.	Under 1 year.	1 and under 5	5 and under 15	15 and under 25	25 and under 65	65 and upwards	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22
								Smallpox	Scarlatina	Diphtheria	Membranous Croup	Typhus	Enteric or Typhoid	Continued	Relapsing	Puerperal	Cholera	Erysipelas	Measles	Whooping Cough	Diarrhoea and Dysentery	Rheumatic Fever	Phthisis	Bronchitis, Pneumonia and Pleurisy	Heart Disease	Influenza	Injuries	All other Diseases	Total.
Quarry Bank ...	137	48	34	4	7	24	20	1	1									7	5	10			2	25	1		2	29	82
								1	1			2							1	1	1	1	5	9	5	1	3	26	55
TOTALS ...	137	48	34	4	7	24	20	1	1									7	5	10		2	25	1	2	29	82		
								1	1			2							1	1	1	1	5	9	5	1	3	26	55
Deaths occurring within the district among persons not belonging thereto ..													1																

Area and Population of the District or Division to which this return relates :—Area in acres, 983 ; Population (last census, 1891), 6732 estimated to middle of 1898, 7115.

Death Rates { General, 19.25 per 1000 population, estimated to middle of 1898.
Infant (under one year of age), 190 per 1000 births registered.

Urban Sanitary District of Quarry Bank.

(A) Deaths registered during the year 1898, classified according to Diseases, Ages, and Localities; showing also the Population of such Localities and the Births therein during the year.

NAMES OF LOCALITIES adopted for the purpose of these Statistics; Public Institutions being shown as Separate Localities.	POPULATION		DEATHS FROM ALL CAUSES AT SURVIVED AGES							MORTALITY FROM SUBJOINED CAUSES, DISTINGUISHING DEATHS OF CHILDREN UNDER FIVE YEARS OF AGE																								
	Census, 1891	Estimated to middle of 1898	REGISTERED BIRTHS		At all Ages							FEVERS																						
			Males	Females	Total	Under 1 year	1 year and under 5	5 years and under 15	15 years and under 25	25 years and under 65	65 years and upwards	Smallpox	Scarlatina	Diphtheria	Membranous Croup	Typhus	Enteric or Typhoid	Continued	Relapsing	Puerperal	Cholera	Krysipelas	Measles	Whooping Cough	Dysentery or Diarrhoea	Rheumatic Fever	Ague	Phthisis	Bronchitis, Pneumonia & Pleurisy	Heart Disease	Injuries	All other Diseases		
Quarry Bank ...	6732	7115	128	126	254	72	65	137	48	34	4	7	24	20	under 5	1								7	5	10			2	25	1	2	29	
															5 upwds	1								1	1	1			5	9	5	3	27	
TOTALS ...	6732	7115	128	126	254	72	65	137	48	34	4	7	24	20	under 5	1							7	5	10			2	25	1	2	29		
															5 upwds	1								1	1	1			5	9	5	3	27	
															under 5																			
															5 upwds																			

Deaths occurring within the District among persons not belonging thereto, which may be deducted from the above totals in estimating the rate of mortality ...

TABLE B—TABLE OF POPULATION BIRTHS AND DEATHS OF INFANTS OF ALL AGES

SUMMARY of SANITARY WORK done in the Inspector of Nuisances' Department during the year 1898, in the Urban District of Quarry Bank.

		Inspections and Observations made.	Formal Notices by Authority.	Nuisances Abated after Notice.
Dwelling houses and Schools.	Foul Conditions	30	26	26
	Structural Defects	24	22	22
	Overcrowding	14	11	11
	Unfit for Habitation	None	in dis-	trict.
	Lodging Houses	20		
	Dairies and Milkshops	20		
	Cowsheds	10		
	Slaughter-houses	12		
	Canal Boats	None	in dis-	trict.
	Ashpits and Privies	500		
House Drainage	Deposits of Refuse and Manure	20	19	19
	Water Closets			
	Defective Traps	13		
	No Disconnection			
	Other Faults			
	Water Supply	250		
	Pigsties	23	6	6
	Animals improperly kept			
	Offensive Trades	20	11	11
	Smoke Nuisances			
Other Nuisances	41			
Seizures of Unwholesome food				Nos. None
Samples of Food taken for Analysis				None
" " Found Adulterated				None
" of Water taken for Analysis				13
" " Condemned as unfit for use				13
Precautions against Infectious Disease.				
Lots of Infected Bedding Stoved or Destroyed				12
Houses Disinfected after Infectious Disease				66
Schools ditto ditto				3
Prosecutions, for not notifying Existence of Infectious Disease				None
Convictions ditto ditto				
Prosecutions for Exposure of Infected Persons or Things				None
Convictions ditto ditto				

(Signed) DAVID SIDAWAY,

9th Jan., 1899.

Inspector of Nuisances.

Summary of Work done in the Surveyor's Department, during the year 1898, in the Urban District of Quarry Bank.

Kerbing and Channelling.

High Street—south side, from New Street to Bower Lane,
475 yards.

North side, from Oak Street to Thorns Road,
220 yards.

Thorns Road (Main Road)—east side, from High Street to
Coppice Lane, 315 yards.

West side, from Mount Pleasant to near Mile Stone,
84 yards 1 foot 6 inches.

Crossings, Gateways, etc.

High Street—60 yards 6 feet superficial.

Thorns Road—60 yards superficial.

Rowley Stone spread.

On Thorns Road, 304 yards.

On District Roads, 99 tons 10 cwt.

*The County Council will refund the cost of all the above works
on the Main Road.*

Drainage.

4 Road Grates fixed :—Main Road (1) Merry Hill Road ;
High Street (3), one near Sheffield Street, one near
Church Street, and one near New Street.

Fifty yards of 6-inch earthenware pipes laid in connection
with Grates in High Street.

Eighty yards of 6-inch earthenware pipes laid in con-
nection with Grates in Main Road.

Twenty yards of 12-inch earthenware pipes laid on Main
Road, jointly by the Mines Drainage Commissioners,
Messrs. E. J. & J. Pearson, and the Council, for the
purpose of carrying water from the road and also
from the clay mines of Messrs. Pearson into the
Stour at Caledonia Road.

During the year, a new road called Victoria Road, has been constructed, leading from Vine Street to Coppice Lane, kerbed and channelled and provided with sewer for surface water and deep sewer for the house properties. The works were carried out by Messrs. Vale, of Stourport, and the road has been adopted by the Council as a public highway.

The number of Plans passed by the Council during the year 1898, are as follows :—

Houses—

	2	Oak Street.
	1	Evers Street.
	1	Merry Hill.
	15	Victoria Road.
	—	
Total	19	
	—	

Other Buildings and Alterations to Buildings—

	1	Brewery, East Street.
	1	Shopping, Evers Street.
	1	Alterations, Brickiln Street.
	1	Improvements, Blue Ball Inn, Closets.
	—	
Total	4	
	—	

84½ yards of Oak and Iron Fencing have been fixed next the road at Aston's Fold and Caledonia, for protection of the public.

J. T. ABBISS,

SURVEYOR.

