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Contributors

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THE URBAN DISTRICT COUNCIL
OF QUARRY BANK.



REPORT

OF THE

MEDICAL OFFICER OF HEALTH

AND SUMMARY OF WORK DONE

IN THE

Surveyor's and Inspector of
Nuisances' Departments

FOR THE

Year ending 31st December, 1905.

BRIERLEY-HILL :

Ford and Addison, Steam Printers, "Advertiser" Office.



. . . THE . . .

Urban District Council

OF

QUARRY BANK.

1905.

Chairman :

ALBERT SHAW.

Vice-Chairman :

DAVID MATTHEW CHAPMAN.

Councillors :

ARTHUR BLOORE,
GEORGE DEELEY,
JOHN GOODWIN,
THOMAS GRIFFITHS,
LABAN HILL,
ELI RAYBOULD,
WILLIAM SIDAWAY,
NOAH TURNER,
WILLIAM WEAVER,
SAMUEL YARDLEY.

Clerk :


ALFRED HOMFRAY, Solicitor, Cradley Heath.

Medical Officer of Health :

T. MAJOR TIBBETTS, M.B. (London), M.R.C.S., D.P.H.

Surveyor and Sanitary Inspector :

FRANK ARTHUR FURBER (Diploma Royal Sanitary Institute),



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Annual Report
OF THE
MEDICAL OFFICER OF HEALTH
FOR THE YEAR 1905.

*TO THE CHAIRMAN AND MEMBERS OF THE QUARRY
BANK URBAN DISTRICT COUNCIL.*

GENTLEMEN,

In this Report I shall adhere to the general plan adopted in late years.

Several tables, formerly embodied in my Report, have now been adopted by the Local Government Board and County Council, so that wherever they are omitted from the text they will be found in the tables appended by the instruction of these two authorities. One, setting forth the causes of death under the age of one year, is particularly instructive, and is included with the hope of arriving at a solution of the causes and remedies of the high infantile mortality common of late years throughout the country.

In the mortality returns it will be found that the birth-rate and Zymotic death-rate are below, and the general and the Phthisis death-rates above the average, and the Infantile death-rate about the average of the previous ten years.

There have been epidemics of Measles, Whooping Cough, and Scarlet Fever, but Diarrhoea, Enteric Fever, and Diphtheria have been remarkable for their absence.

The principal problem to be faced is that of the extinction of the abominable privy middens, whilst such matters as the general improvement of inhabited houses, of eaves' spouting, and of cowsheds and dairies require constant attention.

Many problems of a mixed sanitary and social character have been propounded during the year, especially (1) as to

the advisability of school attendance for children under 5 years of age, and failing school attendance, the proper care and supervision of them among the poorer classes.

(2.) The causes of the high infantile death-rate and of the diminished birth-rate throughout the country.

(3.) The influence of hop-picking and its environments on the health and morals of children.

VITAL STATISTICS.

(See also Table I., appended.)

Population.

The population in April, 1891, was 6,912, living in 1,359 houses, giving an average of 5.09 persons to each inhabited house. Estimating by the usual methods it should have reached 6,994 by the middle of 1905, and on this estimated population the statistics for this report are based.

Births.

During the year 233 births have been registered, of which 118 were of males and 115 of females, the birth-rate being, therefore, 33.31 per 1,000 per annum, against 279, and a birth-rate of 40.00 per 1,000 per annum in 1904.

Deaths.

121 deaths in the district were recorded, to which should be added 7 deaths in institutions outside the district of persons who resided in the district, whilst one death in the Infectious Hospital of a person who resided in Brierley-Hill should be deducted, making a corrected total of 127 deaths, of which 59 were of males and 68 were of females, giving an actual death-rate of 18.16 per 1,000. The deaths and the corresponding corrected death-rate for 1904 were 129, and 18.49 per 1,000 per annum.

TABLE I—Ages at which Deaths occurred.

Under 1 year	...	35
1 year and under 5 years		19
5 " 15 "		6
15 " 25 "		7
25 " 65 "		39
65 and over	...	21
		—
	Total	127
		—

In May, June, July, and August, Measles was epidemic. Measles. It began in the upper part of the district, and together with 3 deaths. Mumps, rapidly spread, necessitating the closure of the day and Sunday schools in and near Mount Pleasant, on June 9th, for four weeks. The record of absentees at this school was:—

MOUNT PLEASANT COUNCIL SCHOOLS.

Mixed Department. Infants.

On Register	...	359	194
June 1.—Absentees	...	54	54
„ 8.—	„	68 (17%)	82 (42%)

THE HIGH STREET COUNCIL SCHOOLS were next affected, the records being:—

		Boys.	Girls.	Infants.
On Register	...	418	414	431
June 26.—Absentees	...	11	36	67
July 8.—	„	16	34	73
„ 11.—	„	24	53	130 (35%)
„ 12.—	Infant Schools closed for 4 weeks.			
„ 21.—		32	61	—

When the schools reassembled in August there were very few absent on account of Measles.

An outbreak of this disease occurred in August and continued until the end of the year, but was never of such extent as to necessitate school closing. A reference to Table IV. of the Local Government Board at the end of the report will shew that all the deaths, with one exception, from Measles and Whooping Cough were of children under 5 years of age, and that although there has also been an extensive epidemic of Scarlet Fever in the year, Measles and Whooping Cough have proved very much more fatal than this disease. The popular opinion was, and I suppose still is, among the less enlightened, that Scarlet Fever is a disease very dangerous to life, but that Measles and Whooping Cough were comparatively innocent, and to be accepted as the common lot of infant life. No doubt this opinion was based on the fact that as Scarlet Fever is compulsorily notifiable to the Sanitary Authorities, and has had great attention bestowed upon it by the Sanitary officials in the shape of isolation, disinfection, and hospital accommodation, it must be regarded by those in authority as of far more consequence than either Measles or Whooping Cough, which are not yet included in the diseases compulsorily notified. Whooping Cough. 3 deaths.

This, however, is not the true state of affairs. Scarlet Fever is a disease whose nature shews itself and is easily recognised in a few hours from the time it first becomes infectious, and prompt treatment does much to prevent its spread. On the other hand, Measles is not usually detectable until the infectious stage has continued three or four days, and Whooping Cough until after from seven to ten days; so that much of the mischief of infecting others has already been accomplished before the disease can be diagnosed. Sanitarians have, therefore, so far almost despaired of preventing an epidemic of these latter diseases by isolation. There is reason to believe that signs, of which we are not yet aware, will be discovered, by which it will be possible to detect these diseases in a very early stage, and isolation, if promptly carried out, should then do much to prevent epidemics. In the meantime such isolation as can be carried out at home is certainly advisable, and it is a pity that there are no legal enactments by which the exposure of children to the infection of Measles and Whooping Cough can be dealt with as summarily as in similar cases of exposure to Scarlet Fever and Small-pox. It becomes the duty of all medical men, nurses, sanitary officials, and other persons who exercise any influence over the opinions of the poor and ignorant, to constantly instil into them the fact that Measles and Whooping Cough are most dangerous to life and disastrous to health, and that they rank now among the most fatal diseases among children; that to a large extent they can be avoided, and that if contracted their fatality is directly increased by, if not entirely due to, the risk of taking cold, with its resultant bronchitis, pneumonia, and other chest diseases. Further, there is every reason to believe that these diseases are often the forerunners of consumption, as we know they are of asthma and ear diseases, so that if the immediate consequences are recovered from there is no limit to their possible remoter sequels.

Diarrhœa.
Deaths 0.

Not a single death is recorded as having been due to Diarrhœa and only one to simple Enteritis. This is, so far as my knowledge serves, a record for your district, and I am at a loss to account for it. I wish it could be justly attributed to the improved sanitary condition, which I have advocated year by year; but this cannot be, as long as the uncovered and leaking ashpits are still with us.

Mumps.
Deaths 0.

There was an outbreak of this disease in August.

Influenza.
Deaths 0.

There has been very little Influenza in the year.

TABLE II.—Zymotic Deaths.

Measles	...	...	3
Whooping Cough	...	...	3
Diphtheria	...	...	1
		Total	7

The Zymotic death-rate is, in spite of epidemics of Zymotic Measles, Whooping Cough, and Scarlet Fever, very low indeed. The previous records were:—

1900	...	2·35	1903	...	1·72
1901	...	1·73	1904	...	2·43
1902	...	2·74	See Table III. below.		

This low rate is almost entirely due to the absence of epidemic Diarrhœa.

TABLE III.

Synopsis of Birth and Death-rate in Quarry Bank District, County of Stafford, and England:—

	Quarry Bank. 1905.	County of Stafford. 1904.		England. 1903.	
		Genl.	Urban only.	Genl.	Large towns
Birth-rate	33·31	32·5	33·7	27·9	29·1
General Death-rate corrected	18·16	16·4	17·2	16·2	17·2
Infantile Death-rate	150·2	155	165	146	160
Zymotic Death-rate	1·00	2·14	2·41	1·94	2·49
Phthisis Death-rate	1·28	0·82	0·98	—	—

Thirty-five deaths were registered among children under one year of age, giving an Infantile death-rate of 150 per 1,000 births, against 43 and a death-rate of 154 in 1904. From Table I of the Local Government Board this will be found to be almost exactly the average (151) of the previous ten years; and in Table III. above it is shown as below the Infantile death-rate of the County of Stafford, but rather above that of the whole of England. The low birth-rate should be considered in connection with this estimate, as it is based on the ratio of

deaths to births. Details of the causes of death are given in the Local Government Board Table V., at the end of this report, and from this it will be seen that more than half the deaths (60 per cent.) are attributed to Atrophy, Marasmus, and Debility. Ten of these children died under the age of 14 days. It is difficult to explain why so many lives should be sacrificed at this early age. It seems to point to constitutional debility on the part of the parents, or to ignorance of the care of infants newly born.

I cannot do better than quote from an address delivered by Dr. Eustice Hill, County Medical Officer for Durham, on February 24th, 1905. He says, speaking of the causes operating to the prejudice of the child before birth:—

“Early marriage or physical weakness on the part of one or both parents, insanitary surroundings during the puerperal period, the employment of women (*i.e.* in factories, &c.), and intemperance, all contribute their quota to the enormous number of deaths from premature birth, atelectasis, and debility, and the remedies are obvious, but not easy to carry into effect. It has been suggested that the large increase in the deaths from premature birth is in part the result of unsuccessful means taken to prevent conception or to procure abortion. It is certain that the reduction in the birth-rate is almost entirely caused by preventive measures against conception, and many of the newspapers, especially those published weekly on Sundays, teem with advertisements on this subject, and contain scarcely veiled suggestions for the destruction of unborn children. The subject is an unsavoury one, but to grapple with the evil it must be boldly faced, and the first step towards overcoming it is to promote legislation for the suppression of the objectionable advertisements to which I have referred.”

With the advent of the Midwives Registration Act, it was hoped that more care for the child and instruction to the mother would be gradually brought about. It is, however, too early to expect much from this source, especially as the midwives are all at present of the untrained uneducated class, who hold their diplomas from long service; a class that will disappear in the lapse of time, to be replaced entirely by those who are better educated and qualified by examination. At both the Council Schools, Infant Hygiene has been taught to the girls in the upper standards since 1903, and the headmasters continue to speak of the enthusiasm with which it is taught and received.

This subject will almost certainly soon be taken as routine work in all Council Schools throughout the country; but the Education Authorities rightly insist on the training of the teachers in this particular subject, as a necessary preliminary to obtaining the best results among the children. They should also insist on practical demonstrations, including such elementary matters as the art and science of washing and clothing children, and object lessons in preparing foods, cleaning food vessels, &c., &c.

A Health Missioner is also badly needed to visit and to give practical and sympathetic advice in the homes of the poor, and the one theme that she must never tire of repeating is that the mother's milk is the best food, and that on no grounds except absolute failure of supply should it be supplanted.

During the past year a most interesting experiment has been instituted by the Mayor of Huddersfield. He selected a certain district in his town, the Longwood district, which had had an average Infantile death-rate of 122 per 1,000, and offered a prize of £1 to the parents of every baby born during his year of mayoralty who should be reared to the age of twelve months. The actual number of babies reared according to the conditions was 110. In the last eight months only one child had died, and the Infantile death-rate in this district was reduced to 54 per 1,000; the average for the whole borough at the same time being 144. This reduction of the death-rate by more than one-half, might suggest to persons disposed to philanthropy, how their money could be safely and profitably invested in similar localities.

Four inquests have been held, the verdict being in two cases "natural causes," one "injuries," and one "found drowned." Inquests.

No death was returned as uncertified.

Uncertified
Deaths.

Notification of Infectious Diseases.

102 cases of the usual notifiable infectious diseases have been reported, details of which will be found in Table III., L.G.B., appended.

For the past three years (1903—1905) there have been epidemics of Scarlet Fever in the district. This year there were two distinct outbreaks, neither, so far as one could judge, having any relation to that in 1904, as there was a period of Scarlet Fever.
Cases 93.
Deaths 0.

over three months between the last case in 1904 and the first in 1905. The first outbreak was from February 2nd to March 3rd, and comprised four reported cases only.

The second outbreak (89 cases) began on September 6th and continued in increasing severity till nearly the end of the year. Unlike the earlier outbreak, this was confined at first entirely, and throughout principally, to the lower and middle parts of the district, and affected children attending, or whose brothers or sisters attended, the High Street Council Schools. The distribution was such as to exclude home contact as the probable chief means of infection, and I was led to suspect school attendance as the true explanation. On September 28th, during one of my visits to the High Street Council Schools, I obtained the sanction of the Headmaster to inspect all the infants present. Dr. Fryer assisted me, and as a result we selected two doubtful cases only. A visit was paid to the homes of these children, but in neither had there been recent Scarlet Fever, and the diseases proved to be of a simple nature. By November 16th the attendance at the Infant Department of these Schools was so seriously affected that I advised that this department be closed forthwith. It was closed on November 19th for a period of three weeks. On reassembling on December 11th the attendance was still so poor that I advised a further closing until after the Christmas holidays. This was done. The record of absentees was as below :—

			On Register.		Absentees.
October	20	...	431	...	65
„	27	...	431	...	90
November	3	...	431	...	105
„	10	...	431	...	121
„	17	...	431	...	147

With few exceptions the cases were mild or moderately severe. Two cases only were removed to the hospital, both on account of the mothers' early expected accouchement. It was necessary, in one case, to compel the father to issue, in lieu of prosecution, a public apology to the Council and staff for having disregarded the law as to isolation. The patient had been allowed to remain in a room of the house which was used as a small provision shop. The following tables show the distribution of the disease as to place and time :—

TABLE IV.

Cases of Scarlet Fever occurred in each of the following districts :—

STREET.	DATE OF 1ST CASE	No. OF CASES.
High Street	February 2	23
Birch Coppice	" 2	5
Evers Street	" 21	3
Victoria Road	March 3	7
Merry Hill	August 29	3
New Street	September 6	16
Sheffield Street	October 3	4
Maughan Street	" 4	9
Hammer Bank	" 24	1
Oak Street	" 24	1
Mount Pleasant	November 2	2
Queen Street	" 7	1
West Street	" 14	2
Hill Street	" 17	5
Z-Street	" 29	2
Bower Lane	" 29	1
Stour Hill	" 29	1
Level Woods	" 28	1
Brick Street	December 2	2
Rose Hill	" 8	1
Thorns Road	" 17	1
Sun Street	" 19	2
		—
		93

TABLE V.

Month.	Scarlet Fever	Enteric Fever.	Locality of Enteric Fever.	Probable Cause of Enteric Fever.
January	..	...	...
February	3	...	...
March	1	...	...
April	...	...	...
May	...	...	...	Polluted well water
June	...	1	High Street	Uncovered ashpit
July	...	...	...
August	1	1	Belle Vue Rd.	Untrapped drain in cellar.
September	12	...	...
October	13	...	...
November	42	...	...
December	21	...	...
Total	93	2		

Enteric Fever.
Cases 2.
Deaths 0.

Only two cases of Enteric Fever occurred in the year; a marked contrast to the records in years previous to 1895, when the water supply of the district was obtained mainly from surface wells. One of the cases was in High-street, where the only water supply was from a well, open to pollution from a midden a few yards away. This well had been overlooked. A sample of water was taken from it and found to be polluted, and an order was made for a proper supply of water to be laid on. The other case was in Belle Vue Road, and here there was an untrapped drain in the cellar.

Diphtheria.
Case 1
Death 1.

The only case of Diphtheria was that of a child in Merry Hill, who had recently returned from the hop country, where it was thought the disease had been contracted. The illness ran so rapidly to a fatal end that no time was allowed for the use of antidiphtheritic serum. For some reason, at present unknown to me, Quarry Bank is particularly exempt from Diphtheria, and I have ceased to store antitoxin, which the Council has supplied gratuitously for use in the district for the past four or five years.

Puerperal
Fever.
Cases 0.

No case of this disease has occurred. See remarks as to midwives on page 10.

Erysipelas.
Cases 6.
Death 1.

Cases of Erysipelas have occurred in Merry Hill, Z-Street, Maughan Street, Victoria Road, Dunn's Bank, and Birch

Coppice. The ages of persons affected ranged from 28 years to 62 years.

The death-rate from this disease, which last year was very low (0.71 per 1,000), has increased again to 1.28 per 1,000, a figure which exceeds the averages of the previous nine years (0.99), and of the county (see Table III, page 9). I learn from the Sanitary Inspector that on calling, as instructed by me, to offer to disinfect the bedrooms occupied by persons who have died of Consumption, that he is occasionally refused. If it could only be brought home to members of Phthysical families how infectious this disease often is, I think they would more often ask for disinfection as a favour. A series of cases which I have recently attended, not in your district, will illustrate what I mean. About eighteen months ago I was attending a married man with this disease. I warned his wife of the risk of infection, which however, in their small house was hard to avoid. The husband died, and a few months after, his wife came to me with the disease fairly advanced. Being very poor, she was compelled to live with her sister, where she died, and within a few weeks of her death, one of her sister's children died of the disease, and another with Tubercular Meningitis, a disease entirely due to the same kind of infection. That this was clearly an instance of infection is shewn by the fact that the wife's relations were never consumptive, and that the two children had been quite healthy until their aunt (the patient) came to live with them. This is an extreme case of what medical men are always meeting with, where two or more members of the same family, or occupants of the same house, are taken with the disease at intervals of more or less duration, and we hold that after the death of a patient, and as many times before as is convenient, the house should be thoroughly disinfected, and that the patient should be taught to regard himself as to some extent a danger to others, and to dispose of his expectoration (the chief source of danger) by fire. The old-fashioned habit of spitting into the fire, although not conformable to modern ideas of æsthetics, has much to commend itself; and as a substitute, paper, old rag, and vessels that can be boiled should be used instead of handkerchiefs. The principal use of the Sanatoria which are being built, and to which every Authority in charge of the Public Health should give full countenance and free support, is to educate the few patients who gain admission in these and kindred matters, so that when they leave they shall act as object lessons and missionaries to those who are not able to gain admission.

Pulmonary
Tuberculosis
(Phthisis)
Deaths 9.
Death-rate
1.28.

I have enlarged so frequently on the causes, apart from

personal infection, that tend to the spread of this disease that I need scarcely now do more than name them. They are hereditary debility, overcrowding, underfeeding, alcoholic excess, and damp dwellings.

I have referred to alcoholic excess. This, which includes not only drunkenness but systematic indulgence short of it, is now known to be one of the most potent factors in inducing phthisis. It also contributes largely to deaths from many other diseases, *e.g.*, pneumonia, enteric fever, &c., whose fatality is enormously increased among habitual drinkers.

Vaccination
Returns.

Dr. Taylor, the public vaccinator, has again kindly given me the following statistics of the

No. of Children vaccinated by him in Quarry Bank.

In 1905	...	48	In 1903	...	60
1904	...	67	1902	...	36

Isolation
Hospital.

Only two cases from Quarry Bank have been taken to this Hospital, both of scarlet fever.

Hop-picking.

Large numbers of persons of all ages leave this district every autumn for hop-picking, and a great deal of discussion has arisen as to the advantages or otherwise of allowing children up to the end of school age to join them. The question is approached from two different standpoints:—

1. Effect on morality. This point I will leave to others more competent to judge.
2. Effect on health. Two contrary opinions are held.
 - (a) That the life in the open country for a month or so must tend to build up the constitution, and serve in place of the annual holidays of the well to do.
 - (b) That the conditions of life tend to the spread of whatever infectious diseases may arise, and that the habit of remaining for long periods unwashed, which I believe is strictly observed by many, must be detrimental, and together with the overcrowding at night, and exposure to wet and cold in the day when the weather is unfavourable, more than outbalance any advantages arising from fresh air and freedom.

It would be possible to argue very lengthily on these points, but if children will go to the hop country, as seems

likely, the question might easily be put to a simple test. With the assistance of the headmasters of the schools, I should be very willing to carry it out next season.

Let, say, fifty of the children who are about to go into the hop country, be carefully inspected for evidences of disease (*e.g.*, ringworm, impetigo, infectious disease), and weighed before going away and a record kept. On their return let them be again inspected and weighed. Let a further group of children of about the same social status who are *not* going be submitted to the same tests, and if there is marked difference in the incidence of infectious or contagious diseases, and in weight, this should go far to settle the question. It can be taken as practically true that if young people increase in weight they are thriving physically.

Sanitary Notes.

See Surveyor's Report.

Drainage and
Street Paving.

See Surveyor's Report.

Scavenging.

All new houses erected during this year have been fitted with wash-down closets of good type, and no special difficulties have arisen with them. The removal of night-soil is still performed with reasonable efficiency by a Contractor whose contract expires at the end of March next, when the work will, it is anticipated, pass under the direct control of the Council. Many difficulties are, however, encountered, arising entirely through the wholesale disregard of your bye-laws and of the demands of sanitation, in the existence of huge, uncovered, uncemented ashpits. I again plead with you to give this matter the earnest and urgent attention it requires. It would be well to encourage the use of large covered metal bins to receive house refuse and ashes, to be emptied weekly, in place of ashpits, as is becoming common in neighbouring districts. These bins are now manufactured largely in your own district.

The water is obtained almost entirely from the South Staffordshire Water Works supply. Thirty-four houses have been added to this service during the year, making a total of 1,393 houses now supplied by them. I have analysed ten samples of water during the year taken from wells and springs, five of which were condemned as showing evidences of pollution.

Slaughter Houses, Dairies and Cowsheds. These have been inspected, and although structurally far from perfect, the tendency is to keep them cleaner than formerly. A case was reported of sheep killing on unlicensed premises, which was immediately prohibited.

Inspection of Meat. Two or three samples of meat of suspicious quality were seized, but the evidence was not sufficient to warrant the destruction of the bulk. The meat on the whole is good.

Offensive Trades. Offal boiling is the only offensive trade which has been brought to my notice.

Overcrowding and House Accommodation. See Surveyor's Report.

Canal Boats. There are no canal boats or registered lodging houses in the district.

Van Dwellers. In March I inspected all the vans at the annual fair, and examined the occupants for any evidence of infectious diseases. I found that they made arrangements with the tenants of several of the adjoining houses for the use of their sanitary conveniences. A list of these houses was taken, and a fortnight after, inquiries as to sickness in them were made, with negative results.

Factory and Workshops Act. No material alteration has taken place since my report in 1903. The chain shops, which form 90 per cent. of the whole, are models of ventilation, but are only occasionally paved and seldom whitewashed. I think that they should be all whitewashed periodically, say once a year, and whenever practicable, paved. It is argued that, where heavy chains are made, the paved floors would soon be broken up, and this is possibly true, but this does not apply to places where the chains are lighter. The advantage would be that these could be regularly swept and cleansed. The keeping of animals in these places, formerly common, is now absolutely prohibited.

The question of closet accommodation is not often raised, but where females are employed, this needs stricter supervision. The standard of sanitary accommodation aimed at is not less than one sanitary convenience to every twenty persons, and separate accommodation for each sex. A schedule drawn up by the Local Government is attached to this report.

In conclusion, I have to thank the Members and Officers

of the Council for the ready help they have always given to me in the performance of my duties in the district.

I beg to remain,

Your obedient Servant,

T. M. TIBBETTS.

January 27th, 1906.

Local Government Board. **TABLE V.**
 QUARRY BANK URBAN DISTRICT.
INFANTILE MORTALITY DURING THE YEAR 1905.

Deaths from stated Causes in Weeks and Months under One Year of Age.

CAUSE OF DEATH.	Under 1 Week.	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total under 1 Month.	1-2 Months.	2-3 Months.	3-4 Months.	4-5 Months.	5-6 Months.	6-7 Months.	7-8 Months.	8-9 Months.	9-10 Months.	10-11 Months.	11-12 Months.	Total Deaths under 1 year.
	ALL CAUSES { Certified { Uncertified	7	8	15	6	2	2	3	2	..	2	2	1	35
Common Infectious Diseases { Whooping Cough	..	..	..	..	..	1	..	..	..	..	..	..	..	..	..	..	1
Wasting Diseases { Premature Birth... { Atrophy, Debility, { Marasmus	..	1	..	..	1	..	..	..	..	..	..	..	..	..	..	..	1
Tuberculous Diseases. { Tuberculous Peritonitis: Tabes { Mesenterica	..	5	..	..	10	4	2	1	1	2	..	1	..	..	..	..	21
{ Meningitis (<i>not tuberculous</i>)	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	1
{ Convulsions	2	2	..	..	4	1	..	1	..	..	..	..	..	..	..	..	6
{ Pneumonia	..	..	..	..	..	..	..	..	1	..	..	..	..	..	1	1	3

Population, estimated to middle of 1905, 6,994.

Deaths from all Causes at all Ages, 127.

TABLE VI.
 Being Table I. of the Local Government Board and Staffordshire County Council.
 Vital Statistics of Whole District during 1905 and previous Years.

YEAR.	Popula- tion estima- ted to Middle of each Year.	BIRTHS.		TOTAL DEATHS REGISTERED IN THE DISTRICT.			TOTAL DEATHS AT ALL AGES BELONGING TO THE DISTRICT.					
		Num- ber.	Rate.*	Under 1 Year of Age.		At all Ages.	Deaths of Non- residents registered in Public Institutions in the District.	Deaths of Residents registered in Public Institutions beyond the District.	Number.	Rate.*		
				Num- ber.	Rate per 1,000 Births Regis- tered.						Num- ber.	Rate.*
1	2	3	4	5	6	7	8	9	10	11	12	13
1895	6804	256	37.63	39	152	129	18.95	..	..	..	129	18.95
1896	6822	230	33.71	44	195	123	18.03	..	..	..	123	18.03
1897	6841	267	39.02	28	104	104	15.20	..	..	..	104	15.20
1898	6860	254	37.02	48	190	137	19.97	..	1	..	136	19.82
1899	6879	248	36.05	38	153	111	16.13	..	..	..	111	16.13
1900	6898	255	36.96	35	137	133	19.28	..	1	..	133	19.28
1901	6917	284	41.06	37	130	107	15.47	1	..	3	110	15.91
1902	6935	257	37.06	31	120.6	108	15.57	..	..	4	112	16.15
1903	6954	246	35.37	43	174.8	107	15.38	..	..	2	109	15.66
1904	6974	279	40.00	43	154.0	121	17.35	..	..	8	129	18.49
Average for years 1895-1904	6888	257	37.38	38	151	118	17.13	0.1	0.2	1.8	119	17.36
1905	6994	233	33.31	35	150.2	121	17.30	1	1	7	127	18.16

Area of District in acres (exclusive of area covered by water) 983, Total Population at all ages ... 6,912, Number of inhabited houses ... 1,359, Average number of persons per house, 5.09, At Census of 1901.

TABLE VII.
Being Table III. of the Local Government Board and Staffordshire
County Council.

Cases of Infectious Disease notified during the Year 1905.

NOTIFIABLE DISEASE.	CASES NOTIFIED IN WHOLE DISTRICT.						No. of Cases removed to Hospital from each Locality.
	At all Ages	At Ages—Years.					
		Under 1	1 to 5	5 to 15	15 to 25	25 to 65		65 & upwards
Diphtheria	1	1	...	...	..	...
Erysipelas	6	...	...	...	6	...	
Scarlet Fever	93	52	36	3	2	...	2
Enteric Fever	2	..	2	...	...	...
Totals	102	53	38	3	8		2

Conjoint Isolation Hospital for Quarry Bank and Brierley-Hill, situated in Quarry Bank.

TABLE VIII.

Being Table IV. of the Local Government Board and
Staffordshire County Council.

Causes of, and Ages at, Death during Year 1905.

CAUSES OF DEATH. 1	Deaths at the subjoined ages of "Residents," whether occurring in or beyond the District.							Total Deaths, whether of Resi- dents or Non-residents, in Pub- lic Institutions in the district. 16
	2 All ages.	3 Under 1 year.	4 1 and under 5.	5 5 and under 15.	6 15 and under 25	7 25 and under 65	8 65 and upward.	
Measles	3	...	3	...	...	...	...
Scarlet Fever ... ..	...	.	...	...	...	...	...	1
Whooping Cough	3	1	1	1	...	...	...
Diphtheria and Membranous Croup	1	...	1	...	...	...	...
Enteritis	1	...	...	...	...	...	...
Erysipelas	1	...	...	...	...	1	...	
Other Septic Diseases	1	...	...	...	...	1	...	
Phthisis (Pulmonary Tubercu- culosis)	9	..	1	1	3	4	...	
Other Tubercular Diseases	3	1	1	1	..	...	...
Cancer, Malignant Disease... ..	11	...	...	...	1	10	...	
Bronchitis	10	1	...	...	...	4	5	
Pneumonia	20	3	11	1	1	4	...	
Diseases and Accidents of Parturition	2	...	...	...	...	2	..	
Heart Diseases	13	...	...	1	1	6	5	
Accidents	4	..	1	...	1	2	...	
Senile Decay	6	...	...	...	...	..	6	
All other Causes	39	29	...	1	...	4	5	
All Causes	127	35	19	6	7	39	21	1

TABLE IX.

Being Table V. of the Staffordshire County Council.

SUMMARY OF SANITARY WORK*Done in the Nuisance Inspector's Department during the year 1905,
in the Urban District of Quarry Bank.*

		Inspections and Observa- tions made	Formal Notices by Authority.	Nuisances Abated after Notice.	
Dwelling-houses and Schools.	{ Foul Conditions	106	15	15	
	{ Structural Defects	106	73	70	
	{ Overcrowding	16	4	4	
	{ Unfit for Habitation	35	29	29	
	{ Lodging-houses	Nil	Nil	Nil	
	{ Dairies and Milkshops	50	10	10	
	{ Cowsheds	50	16	16	
	{ Bakehouses	35	6	6	
	{ Slaughter-houses	40	20	20	
	{ Canal Boats	Nil	Nil	Nil	
House Drainage	{ Ashpits and Privies	1750			
	{ Deposits of Refuse and Manure	72	35	35	
	{ Water Closets	40	4	4	
	{ Defective Traps	80	26	25	
	{ No Disconnection	40	20	17	
	{ Other faults, such as obstruct'ns	70	70	68	
	{ Water Supply	30	10	7	
	{ Pigsties	70	25	25	
	{ Animals improperly kept	10	4	4	
	{ Offensive Trades	10	Nil	2	
	{ Smoke Nuisances	Nil	Nil	Nil	
					Nos.
	Seizures of Unwholesome Food				3
Samples of Food taken for Analysis				Nil	
" " found Adulterated				Nil	
Samples of Water taken for Analysis				10	
" " condemned as unfit for use				5	
Precautions against Infectious Disease.					
Lots of Infected Bedding Disinfected or Destroyed				52	
Houses Disinfected after Infectious Disease				69	
Schools	ditto ditto			3	
Prosecutions for not Notifying Existence of Infectious Disease				Nil	
Convictions	ditto ditto ditto			Nil	
Prosecutions for Exposure of Infected Persons or things				Nil	
Convictions	ditto ditto			Nil	

TABLE X.**FACTORIES, WORKSHOPS, LAUNDRIES, WORKPLACES,
and HOMEWORK.****1.—INSPECTION.**

Including Inspections made by Sanitary Inspectors or Inspectors of Nuisances.

Premises.				Number of Inspections
FACTORIES (including Factory Laundries)	...	...	...	7
WORKSHOPS (including Workshop Laundries)	...	...	...	107
WORKSHOPS	...	...	...	16
HOMEWORKERS' PREMISES	...	...	...	10
Total	...	...	...	130

2.—DEFECTS FOUND.

Particulars.	Number of Defects	
	Found.	Remedied.
<i>Nuisances under the Public Health Acts—</i>		
Want of Cleanliness	25	25
Other Nuisances	12	12
Sanitary Accommodation—Unsuitable or Defective	6	6

3.—OTHER MATTERS.

HOMEWORK :—		Number of	
<i>Lists of Outworkers (s. 107) :—</i>		Lists.	Outworkers.
Lists received	...	2	27
Addresses of Outworkers	forwarded to other Authorities	3	25
	received from other Authorities	2	40
<i>Homework in unwholesome or infected Premises :—</i>		Wearing Apparel.	
Cases of Infectious Disease notified in Homeworkers' Premises	...	4	
Total number of Workshops on Register	...	124	

**SUMMARY OF WORK DONE IN THE
SURVEYOR'S DEPARTMENT
DURING THE YEAR 1905.**



METEOROLOGICAL.

The year of 1905 was, on the whole, a dry one, the rainfall for the district being 24·560 inches, while the average for England only reached 23·830 inches; 24·410 inches of rain fell in 1904, while for the ten years previous 30·277 was registered.

WATERING.

The year being dry the water cart was out on 46 days, principally in the months of May, July, August, and September.

SCAVENGING.

Considerable attention has been paid to this work, and inhabitants have been urged to take greater interest in it, so far as the streets are concerned.

STREET WORKS.

No Curbing and Channelling has been done during the year beyond repairs. Several streets are under consideration to be dealt with during the coming year. No paving has been done, but experiments are being made to test several substitutes for the ordinary blue brick.

336 tons of Rowley Granite, with 5 tons of Chippings, were used on the Main Roads in accordance with the County Council's contract. 250 tons of Broken Cinder were used on other roads in the district for repairs. The Steam Roller was employed on six days.

SEWERING.

A contract has been entered into for laying about 1,100 yards of 9 inch sewer, with the necessary manholes, etc., in High Street, Merry Hill, Coppice Lane, Oak Street, and West Street. The work is in progress and is expected to be finished about the end of February. The connections of the various properties are being made. Connections in other parts of the district to the number of six have been made.

WATER CLOSETS.

Fifteen Water Closets have been put in at new properties, and twenty-one ashpit privies have been converted.

WATER SUPPLY.

Six houses have been supplied during the year either from wells being closed or an insufficient supply. There are still a number of wells in the district.

BUILDINGS.

Thirty-eight plans were received and passed by the Council, divided up as follows:—

Dwelling-houses	...	27
Workshops	...	5
Additions	...	10
Stabling and Cowsheds	...	3

I am, yours faithfully,

F. A. FURBER,

Surveyor to Council.

JANUARY, 1906.

Presented 13th February, 1906.

ALBERT SHAW, Chairman.

