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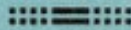
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BOROUGH of RICHMOND
YORKSHIRE.

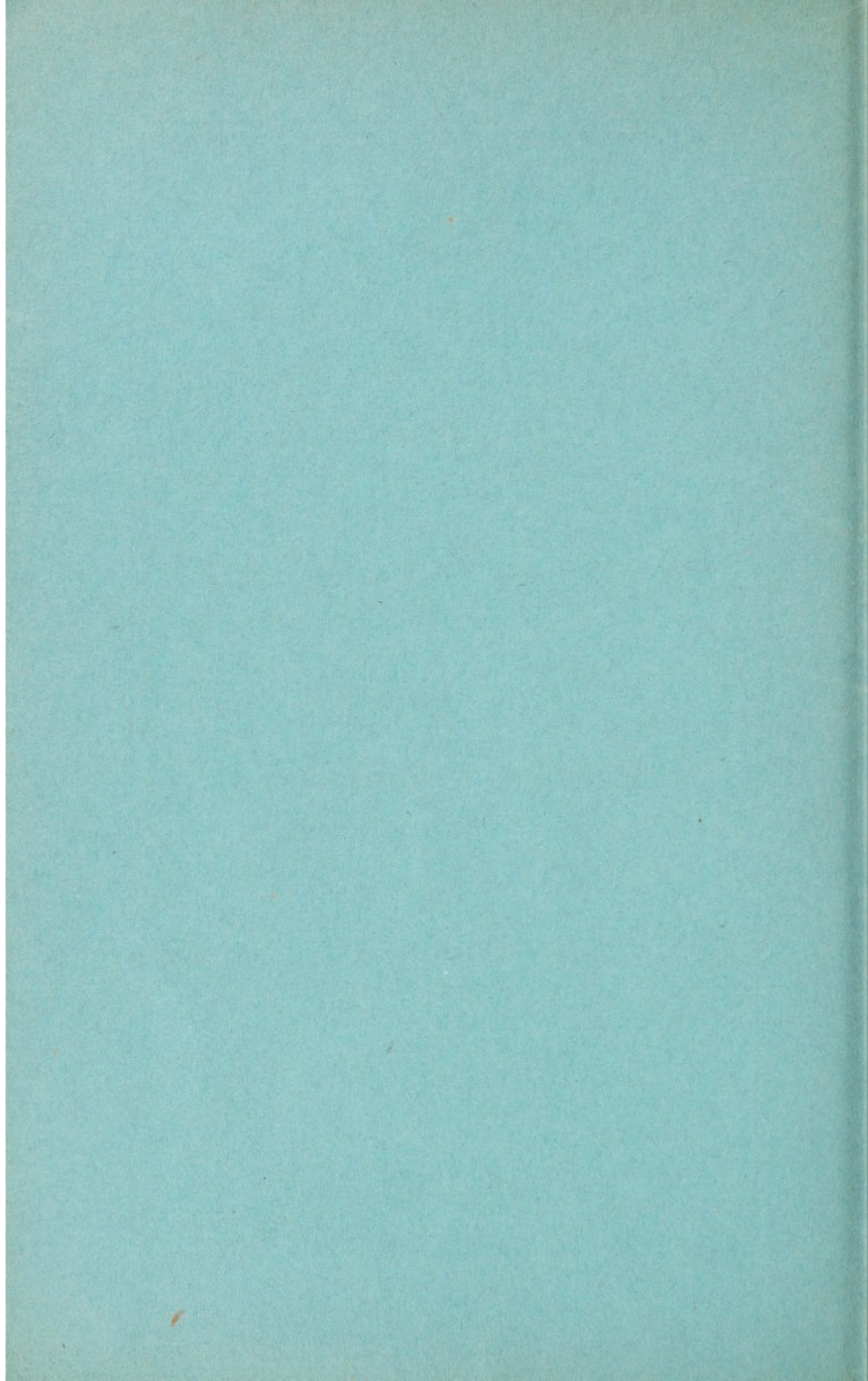


**ANNUAL
REPORT**

— OF —

John Williams, M.D.
Medical Officer of Health.

**For the year ended
31st December, 1938.**





BOROUGH OF RICHMOND
YORKSHIRE.


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OF

JOHN WILLIAMS, M.D.,
MEDICAL OFFICER OF HEALTH

FOR THE YEAR ENDED 31ST DECEMBER,
1938.

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BOROUGH OF RICHMOND

YORKSHIRE.

Report of Medical Officer of Health.

**To the Mayor, Aldermen and Councillors
of the Borough of Richmond.**

Mr. Mayor, Aldermen and Councillors,

I have the honour to present to you my Report on the health of the Borough for the year ended 31st Dec., 1938. The Report will be an ordinary Report, and will deal more especially with the year under review, as set out in the Ministry of Health Circular, 1728.

The political situation during the autumn of the year created alarm, necessitating extra work in connection with Air Raid Precautions.

The Report shows matters for congratulation on the one hand, and on the other, matters, some of which are serious and demand your attention, and others which, although not so immediate, nevertheless require remedying in the interests of the Borough. Allusion has already been made to all of these in previous reports.

With regard to the good points:—

1. Geographical situation.
2. A small number of Infectious Diseases.
3. A high Birth Rate.
4. A low Death Rate.

With regard to the unsatisfactory features:—

1. No Public Mortuary.

Negotiations are taking place with the Committee of the Victoria Hospital with a view to extending the Mortuary there for public requirements.

2. Shortage of Houses

(a) for aged people;

(b) a further number of 3 bedroom-type houses is required to relieve overcrowding.

3. No Public Abattoir. Steps should be taken by the Council to consider the adoption of a Public Abattoir. Complaints are continually being made, although strict observance is being given to existing private slaughter houses, which unfortunately practically adjoin residential property.

The substitution of a public establishment under Municipal control for the private slaughter houses in the Borough would facilitate inspection, protect the animals and do away with a perpetual sanitary nuisance.

As indicted in my last year's Report, the Old Paper Mill, which is now in a very dilapidated state, could be utilised to further advantage. The area occupied by the above, together with the surrounding land, is approximately 10 acres, and has a southern aspect.

There is a large dwelling house which could easily be converted into three flats.

I would like to see the whole of the Old Paper Mill demolished, and would recommend the site be utilised for:—

1. A Public Abattoir.

2. A Mortuary.

3. A Refuse Destructor.

This would be a good step towards "Centralisation," which should be the motto of every Council. The whole area is owned by the Corporation, who could house their employees in the flats aforementioned.

4. No Sewage Disposal Scheme.

The town is developing as a residential centre, and has been for the past 13 years. Apart from being a residential town it is a healthy place in which to live—the majority of the people living to a ripe old age. It is to be hoped, therefore, that your Council will consider the above unsatisfactory features and rectify them in due course.

Births.

The total births during the year was 105, of which 51 were males and 54 females. The Birth Rate for the year was 19.06 per 1000, that for the previous year was 22.3 per 1000. The Birth Rate can be considered very satisfactory when compared with England and Wales.

The excess of births over deaths, that is, the natural increase, was 45, which is a good deal lower than last year.

The natural increase per 1000 population was 8.2.

The Birth Rate for England and Wales during 1938 was 15.1 per 1000.

Three of the total births registered were illegitimate, 1 male and 2 females. There were 7 Still Births registered, 3 males and 4 females. There were 2 illegitimate Still Births, a male and female.

Deaths.

The total number of deaths during the year from all causes was 60, of which 25 were males and 35 females.

The death rate calculated on a population of 5508 was 10.9 per 1000, that for the previous year being 9.2 per 1000. The death rate for England and Wales during 1938 from all causes was 11.6 per 1000.

Infantile Mortality.

The total number of infants dying under one year of age was 9, 4 males and 5 females. The Infantile Mortality, which is measured by the proportion of deaths under

one year of age to every 1000 births registered, was 85.7 per 1000. There were no illegitimate deaths. The Infantile Mortality Rate for the previous year was 57 per 1000. The Infantile Mortality Rate for England and Wales was 53 per 1000 during 1938.

The smaller number of births no doubt has an influence on the above rate, as one infant death makes a great difference in the Infantile Mortality Rate.

The Infantile Mortality Rate was higher than the previous year, the main cause being congenital debility and premature birth. It is a problem which, although a matter of concern, will take some rectifying. Improved motherhood through the efforts of the Maternity and Child Welfare Centre and the Ante-Natal Clinic, together with an improvement in housing conditions, should help in reducing the mortality further.

Causes of Death of Children under 1 year.

CAUSE OF DEATH.	Under 1 Week	1-2 Weeks	2-3 Weeks	3-4 Weeks	4 Weeks and under 3 Months	3 Months and under 6 Months	6 Months and under 9 Months	9 Months and under 12 Months	Total deaths under 1 year
Congenital Heart Disease	1								1
Broncho-Pneumonia					1				1
T.B. Mesenterica ...					1				1
Cerebral Hæmorrhage	1								1
Premature Birth ...	3								3
Convulsions						1			1
Melæna Neonatorum		1							1
Total ...	5	1	0	0	2	1	0	0	9

It will be seen from the preceding table that 5 of the 9 infants died when they were under one week old. 4 children out of the 9 died in hospital. The home conditions in the other cases were satisfactory, and all of them had a fully certified Midwife at birth.

In order to keep the rate down, and if possible to further reduce it, mothercraft must continue to be taught, and home conditions improved wherever possible.

The alleviation of overcrowding is noticeable, owing to the increased number of new houses which have been erected. A further effort will be necessary in the erection of new houses of the three-bedroom type to further reduce overcrowding.

Natural and Social Conditions of the Area

Area (in Acres)	{	Land and Inland Water	2520
	{	Land	2481
Population (Census, 1931)	...	...	4769
Registrar General's estimate of Resident Population, mid-1938	...	...	5508
Number of inhabited houses (end of 1938)			
according to Rate Books	...	...	1324
Rateable Value, 1st April, 1939	...	£29,379	
Rate in £ levied 1938-1939	...	...	11s. 0d.

Actual product of a Penny Rate, £115 16s. 6d. (calculated in accordance with the Product of Rates and Precept Rules, 1929). Rateable Value per head of population, £5 6s. 8d., based on estimated figure of 5508.

The Borough of Richmond is situated in the North Riding of Yorkshire on the banks of the River Swale in a circular bend which the river takes.

It extends East and West to an approximate distance of $3\frac{2}{3}$ miles. It is $\frac{5}{6}$ of a mile in width throughout its most populated part, whilst its rural portion extends to $1\frac{1}{2}$ miles. It has an area of 2,481 acres, and is bounded by the Rural District of Richmond on all sides.

The soil to the East and South-East is gravel; to the West it is sandy; and to the North and North-East calcareous.

The town is for the most part built of stone. The surface is hilly, this causing many parts of it to be very steep. The altitude above the sea-level of the different parts in feet is as follows, viz. :—

The Beacon, which is the highest point, 1048.

The inhabited portion of the district at the highest point, viz. :—Pilmoor Hill on the East and Hurgill Estate on the West are respectively about 625 and 700 O.D. Quaker Lane, which runs horizontally through the district, is 453. The Market Square is 450 and the River Swale 320. It will thus be seen from these levels that Richmond is situated ideally for the disposal of sewage and collection of surface water. The town itself is entirely residential; the old Paper Mill is now closed down. The rest of the Borough is agricultural, the chief occupation being Sheep and Cattle Breeding, pasturage, and the cultivation of meadow land. With the exception of overcrowding already referred to, the social conditions and occupations of the inhabitants are not unfavourable to the general health.

Extracts from Vital Statistics of the Year.

LIVE BIRTHS :—

	Total	Males	Females	
Legitimate ...	102	50	52	Birth Rate 19.06 per 1000 of the estimated resident population.
Illegitimate ...	3	1	2	
	—	—	—	
	105	51	54	

STILL BIRTHS :—

Legitimate ...	5	2	3	Rate per 1000 total (live and still) births 62.5
Illegitimate ...	2	1	1	
	—	—	—	
	7	3	4	

Deaths ...	60	25	35	Death rate 10.8 per 1000 of the estimated resident population
------------	----	----	----	---

The corrected Death Rate was 10.38. (Factor for correction 1.03).

Deaths from Puerperal Causes (Headings 29 and 30 of the Registrar General's Short List)—

	Deaths	Rates per 1000 total (Live & Still) Births
No. 29—Puerperal Sepsis ...	nil	nil
No. 30—Other Puerperal Causes	nil	nil
	—	—
Total ...	nil	nil

Death Rate of Infants under one year of age:—

All Infants per 1000 live births ...	85.7
Legitimate Infants per 1000 legitimate live births ...	88.2
Illegitimate Infants per 1000 illegiti- mate live births ...	nil
Deaths from Cancer (all ages) ...	9
„ „ Measles (all ages) ...	nil
„ „ Whooping Cough (all ages)	nil
„ „ Diarrhœa (under 2 years of age)	nil

There were no deaths from Measles, Whooping Cough (all ages) or Diarrhœa (under two years of age). I am pleased to be able to report these facts again, there being no deaths from these diseases in the previous year.

The above are amongst the worst diseases which befall infants, and therefore every endeavour should be made to convey, either by house visitation *or* circularisation of the homes, information with regard to the:—

1. Dangers.
2. Importance of efficient and thorough nursing.

Causes of Death during the Year 1938.

	Males	Females
Tuberculosis of Respiratory System	1	2
Other Tuberculosis		2
Other Respiratory Diseases		1
G.P.I. Tabes, etc.	1	
Cancer	3	6
Cerebral Hæmorrhage, etc.	4	3
Heart Disease	4	4
Other Circulatory Diseases		2
Influenza	1	
Bronchitis	1	
Pneumonia (all forms)	2	3
Other Digestive Diseases		2
Acute and Chronic Nephritis		2
Congenital Debility, Premature Birth	3	3
Other Violence	1	
Other Defined Diseases	4	5
	—	—
Total	25	35

There were no cases of sickness or invalidity which were specially noteworthy during the year. No conditions of occupation or environment appeared to have had any prejudicial effect on the general health of the inhabitants. There was no evidence either that unemployment had any significant influence on the health of the above.

There was nothing unusual or excessive in the mortality during the year to require any comment, with this exception—that diseases of the Circulation and Heart account for the largest proportion, as hithertofore. This is seen in each succeeding year.

The chief causes of death are still diseases of the Heart and Blood Vessels, Respiratory Diseases and Cancer. The death rate per 1000 population from Pulmonary Tuberculosis, Pneumonia, Influenza, Bronchitis and

Cancer was as follows:—

Pulmonary Tuberculosis	...	...	.54
Pneumonia	...	...	.90
Influenza	...	...	.18
Bronchitis	...	...	.18
Cancer	...	...	1.6

The figures for the year 1937 were as follows:—

Pulmonary Tuberculosis	...	...	.91
Pneumonia	...	...	.91
Influenza	...	...	.36
Bronchitis	...	...	.36
Cancer	...	...	1.46

It will be seen from the above figures that the death rate from Cancer shows a slight increase from the previous year. The death rate from Pulmonary Tuberculosis and Bronchitis was lower; in the case of Pneumonia the rate remains about the same.

General Provisions for Health Services in the Area.

General.

There is a Cottage Hospital consisting of two wards and a private ward for accident and general diseases; the staff consisting of a matron and two nurses. Extra help is obtained when occasion arises.

The number of patients nursed in the hospital during the year was 106, 56 males and 50 females, against 82 for the previous year. The daily average number of patients was 2.6, against 3.4, and the average number of days for each patient 9.4, against 15.7 for last year. 67 cases were admitted from Richmond, the remaining 39 being from the Rural District and outside.

Midwives.

The Richmond and District Nursing Association has three fully trained Nurses, each with the C.M.B.

The area covered by the Association comprises the Borough of Richmond and the following villages:—Gilling with Aske, Brompton-on-Swale, Hudswell, Skeeby, Easby, St. Martins, Slegill, Hartforth, Hipswell and Scotton.

The number of visits paid by the nurses from August 1st, 1938, to July 31st, 1939, is as follows:—

Midwifery Visits	...	...	2127
General Visits	...	...	1789
Public Health Visits	...	...	4612
			8528
		Total	8528

Number of cases attended by Midwives during the year in the Borough:—

1. As Midwives	...	...	57
2. As Maternity Nurses	...	...	40

Number of cases during the year in which medical aid was summoned by a Midwife under Section 14 (1) of the Midwifery Act, 1918:—20.

Number of women sent by the Council during the year to other Maternity Institutions:—2.

The work of the inspection of Midwives is carried out by the Maternity and Child Welfare Officer (Dr. Dow) for the County Council, they being the supervising authority. Dr. Dow also takes charge of the Ante-Natal Clinic, which meets on the first Friday afternoon in each month with the exception of August, which is the holiday month.

Ante-natal work in connection with their own cases is undertaken by the nurses, and records are kept.

There is one registered Maternity Home in the Borough:—Miss Cherry, Sledwick, 6 Neville Walk. 15 cases were admitted during the year; 5 of these were Midwifery cases, the other 10 being Maternity cases. 6 of the cases were from the Borough, the remaining 9 from the Rural District and outside. All of the babies were breast fed, which is recommended whenever possible.

It is only by skilled advice being available for mothers that good results can be obtained. Every expectant mother should now be able to obtain the services of a certified midwife.

Under the Midwives Act, 1936, no uncertified woman may act as a Maternity Nurse for remuneration. This became operative under a Ministry Order, 1st September, 1938.

The responsibilities of motherhood should be taught in all schools and should form part of the curriculum, as does Domestic Science. In this way our girls would leave school more fitted for motherhood on account of the knowledge they would receive. By a combination of the various services—Public Health, Maternity and Child Welfare, Medical and Educational—only can it be possible to reduce Maternal Mortality to a minimum.

The problem of Maternal Mortality is a matter of the gravest concern, not only to Health Authorities, but also to the general public.

Ante-natal and post-natal supervision is essential, not only for the welfare of the mother, but also for the future of the child, for after all, the children of to-day are the generation hereafter.

Post-natal supervision is most important and should be encouraged. A post-natal Clinic has been formed, the work of which is undertaken by the County Council.

It behoves us, therefore, as a Maternity and Child Welfare Centre, to do our utmost, not only to safeguard the mother, but also to look after the interests of the child.

Clinics and Treatment Centres.

Eleven meetings of the Ante-Natal Clinic were held during the year. 75 mothers attended the Clinic and made 143 attendances, or an average attendance of approximately 7 mothers per meeting.

Expectant mothers are availing themselves more of the opportunities which are afforded them at the Clinic. The Doctors and Midwives do all in their power to advise expectant mothers to make use of the service which has been provided by the Borough.

Everything is done to help to prevent deaths during childbirth. Arrangements have been made by which cases of abnormal pregnancy, complicated cases or cases where the home conditions are not satisfactory can be admitted to the Maternity Ward in Greenbank Hospital, Darlington. Two cases were sent during the year.

A Maternity and Child Welfare Centre is provided by the Local Authority; the meetings are held once a fortnight, the children are weighed at each visit and their respective weights recorded. Twenty-six meetings were held during the year

The establishment of a Maternity and Child Welfare Centre has met with unqualified success, as is shown by the numbers attending the Centre, which are increasing each year.

Plans have been passed for the new Clinic and Nurses' Hostel, and building would have been commenced had it not been for the "crisis." It is to be hoped that soon conditions will be more favourable.

Medical Consultations and Examinations are undertaken by the Medical Officer of Health, and advice on feeding, clothing and treatment of minor defects given. Supplies of Virol, Trufood, Malt and Cod Liver Oil are obtainable for the children from the Health Visitor when required at a reduced rate.

Breast feeding is recommended whenever possible, and every effort is made by the nurses and the M.O.H. to encourage it in order to minimise so far as possible the danger of Rickets. It is the exception now-a-days to see a case of definite Rickets.

Artificially fed babies are recommended Cod Liver Oil and orange juice as a routine practice.

The total number of attendances at the Centre during the year was 1061, the average for the year being 41 per meeting. The figures for 1937 were 1022, giving an average of 42 per meeting.

Total number of attendances at the centre during the year:—

1. By children under 1 year of age ...	526
2. By children between the ages of 1 and 5 years	535

Total number of children who attended at the centre for the first time during the year:—

1. Children under 1 year of age ...	61
2. Children between the ages of 1 and 5 years	17

Total number of children under 5 years of age who attended at the centre during the year and who, at the end of the year, were:—

1. Under 1 year of age	52
2. Over 1 year of age	56

Total quantity of milk supplied during the year to expectant mothers and nursing mothers and young children:—

1. Liquid gallons	28
2. Liquid pounds	390

Tea is provided at the clinic, a small charge being made to cover the cost. Thanks are due to the ladies of the committee who take their turn in attending the meetings and help in keeping the registers, and in other ways. Without some voluntary help it would not be possible, owing to increasing numbers, to carry on the centre. The Health Visitor visits babies as soon after 14 days as possible, and thereafter at regular periods during the first year. The progress of the child is followed continually to five years of age by further visits and by attendance at the Centre.

Co-ordination between Maternity and Child Welfare Department and School Medical Service.

As the children attending the centre reach the age of 5 years, their cards are passed on to the School Medical Officer, and thus there is a direct continuity of their pre-school records.

School Clinics.

Eye Clinics are held in the various schools; any children requiring attention are examined and a report is given to the parents upon which to act. Those whose eyesight is defective are referred to the Ophthalmic Surgeon.

Four Dental Clinics were held during the year, during the months of May, June, September and October. These were under the charge of Mr. F. H. Gargett, L.D.S., N.R.C.C.

Number of Children treated	...	...	5
Number of Extractions (temporary teeth)			6
Number of Adults treated	...	...	6
Number of Extractions (permanent teeth)			10

In addition to the above, numerous mothers attended with their children for advice, etc. One mother came for conservative treatment, but failed to attend later to have the treatment completed.

An Orthopædic Clinic is also held from time to time in the old Roman Catholic Infant School in Victoria Road. It is well attended, and full advantage is taken of the facilities afforded. The Orthopædic Surgeon and an Orthopædic Nurse are in attendance. Suitable cases are sent to Kirbymoorside Orthopædic Hospital.

The Schools are visited frequently by the School Nurses, who inspect the children and make a report to the County Council, and if necessary the parents are seen and advised to consult their own medical man.

Tuberculosis.

Dispensaries available for treatment of Tubercular cases at Northallerton, South Bank, Scarborough and Thornaby.

Venereal Diseases.

Clinics at Darlington Greenbank Hospital, Leeds General Infirmary, Scarborough New Hospital and Stockton and Thornaby Hospital.

Hospitals provided or subsidized by the Local Authority or by the County Council.

1. Tuberculosis Sanatoria—Beds provided by the County Council.

(a) Adults. Pulmonary Tuberculosis.

Wensleydale Sanatorium, Aysgarth.

18 beds.

Mowbray Grange Sanatorium, Bedale.

30 beds.

(b) Children. Pulmonary and Non-Pulmonary Tuberculosis (Glands).

Morris Grange. 60 beds.

2. Maternity—None.

3. Children—Yorkshire Children's Orthopædic Hospital, Kirbymoorside (Bone and Joint Cases). 124 beds

4.—Fever—There is an Isolation Hospital within the Borough which is supported wholly by the Council, consisting of two separate buildings connected by a corridor. The one is stone built and slated, the other timber built with corrugated iron sheeting outside.

Owing to arrangements which exist with the Richmond Rural District Council, cases from the Rural Area can be admitted. 6 cases were admitted during the year.

9 cases of Scarlet Fever were treated during the year, 3 from the Borough, the remaining 6 being from the Rural District.

With regard to the Borough cases, they were all children and isolated cases. All were mild in character, and there were no complications. No definite periodicity was noticed.

The Rural cases were admitted from Gilling 3, Aske 1, Catterick Bridge 1, and Catterick Camp 1.

Here again, as in the Borough, the cases were isolated ones, being notified from different parts of the district.

There were **no** deaths from Scarlet Fever.

No cases of Diphtheria were notified during the year.

Plans for a new Isolation Hospital are under consideration, but owing to administrative changes in the Health Services these are held in abeyance for the time being.

A fully trained Nurse **Matron** is in charge. The Medical Officer of Health is the Medical Superintendent.

5. Small Pox—In the event of an outbreak of Small Pox the Local Authority have made provision for an Isolation Hospital at the Grand Stand on the Old Racecourse. The Rural District Council give a yearly grant for the use of this Hospital.

No cases were notified during the year.

There is no public mortuary in the town, which is to be deprecated, and although the question of having one has been raised on many occasions, the matter has been shelved. The want of a public mortuary has been emphasised again and again, and allusion in previous reports has often been made. As it is, when occasion arises, either the one at the Victoria Hospital or the one at the Richmond House has to be used. Difficulties arise in both cases, and it is quite time the Borough had one of its own.

Maternal Mortality.

Should any cases occur, these are investigated by the Medical Officer of Health and reported to the Ministry of Health. No deaths from child-birth occurred during the year.

Mothers each year are beginning to realise the dangers of child-birth owing to being more informed at the Clinics which are at their disposal. Ante-natal and post-natal care no doubt play a very important part in reducing the maternal mortality rate.

Cases of Puerperal Pyrexia are sent to the Isolation Hospital, Darlington. Three cases were notified during the year. All of these were admitted to hospital.

Health Visiting.

Children up to five years of age are visited regularly by the Health Visitor, and anything requiring attention is at once reported.

To children under 1 year of age:—

First Visits 112 Total Visits 411.

To children between the ages of 1 and 5 years:—

Total Visits 1184.

Every care is required during these first five years, and therefore I would stress the importance of regular Health Visiting and regular attendance at the centre.

Ambulance Facilities.

(a)—For Infectious Cases.

A Motor Ambulance is used for the conveyance of infectious cases to the Isolation Hospital. The risk of further infection is minimised with quick transport, and disinfection can be carried out immediately.

(b)—For Non-Infectious and Accident Cases.

A Motor Ambulance is supplied under arrangement made by the British Red Cross Society and is stationed at Richmond.

The Ambulance Service is adequate and satisfactory.

Public Health Officers of the Local Authority.

The Staff consists of a part time Medical Officer of Health who is also M.O. of Health to the Richmond Rural District Council. A Sanitary Inspector and Surveyor, who is a whole time officer and holds the certificate of Sanitary Inspector and is a member of the Royal Sanitary Institute. A Nurse Matron at the Isolation Hospital.

Legislation in Force.

1. Public Health Acts (Amendment) Act 1890.
Parts III. & IV. Date of Adoption, 8-2-06.
2. Public Health Acts (Amendment) 1907.
Parts II. to VI. inclusive. Date of Adoption 14-8-13.
3. Public Health Act, 1925.
Parts II., III., IV. and V. Date of Adoption 11-2-26.
4. Infectious Diseases (Notification of) Order 1924.

Sanitary Circumstances of the Area.

Water.

The Water Supply for the Borough now comes from three sources:—

1. Coalsgarth.
2. Aislabeck.
3. Feldom.

The Coalsgarth and Aislabeck Reservoirs form the high zone supply, and have a capacity of 150,000 gallons and 25,000 gallons respectively.

The Feldom Reservoir is the low zone supply, and has a capacity of 300,000 gallons.

The total capacity of the reservoirs is 475,000 gallons, which is approximately two and a half days' supply.

The source of supply for the low zone reservoir from the springs at Clapgate, five miles west of Richmond, was found to be contaminated in February of the present year.

The chemical examination was satisfactory, but the bacteriological examination was not good, B Coli being present. The cause of the contamination was thought to be due to the sliding of the ground and the percolation from the surface due to rabbits.

The works were finished in September, 1935, previous to which many samples were taken, the water always being of good quality, but rather hard.

Messrs. Wallace & Tiernan, Ltd., of Gunnersbury, London, were consulted with regard to the contamination. Their Northern Agent, Mr. Toon, from West Hartlepool, came over and advised chlorination. Chlorination was commenced forthwith, but in view of the fact that complaints were made with regard to the taste of the water (due to certain properties in the water which act on the chlorine), NH_3 was added, thus producing chloramine.

The NH_3 removed the musty taste produced by the Cl_2 , and thus the water was not only rendered sterile but palatable.

The Council were recommended to purchase and install two units of Wallace & Tiernan's Automatic Chlorometer for the automatic sterilisation by the chloramine process, the units to supply sodium hypochlorite and ammonium sulphate solutions respectively. This was at once done and has given every satisfaction.

The above facts go to prove the most excellent water is in constant danger of becoming contaminated. The only safe water, therefore, is a sterilised water.

The other source of supply for the high zone reservoir from the Coalsgarth Spring was also examined and found to be quite satisfactory.

The supply is adequate under all conditions and for all purposes of existing layout schemes.

The following table shows the rainfall in the Borough for the past twelve years:—

1927	...	...	...	38.03ins.
1928	...	...	...	36.34ins.
1929	...	...	...	23.90ins.
1930	...	...	...	40.16ins.
1931	...	...	...	27.43ins.
1932	...	...	...	23.47ins.
1933	...	...	...	22.48ins.
1934	...	...	...	27.07ins.
1935	...	...	...	32.58ins.
1936	...	...	...	27.22ins.
1937	...	...	...	28.65ins.
1938	...	...	...	33.13ins.

Rainfall during 1938.

January	...	4.15in.	July	...	4.25in.
February	...	1.71in.	August	...	2.30in.
March	...	.31in.	September	...	1.47in.
April	...	.03in.	October	...	5.81in.
May	...	2.35in.	November	...	3.81in.
June	...	2.92in.	December	...	4.02in.
					33.13in.

Approximately four and a half inches more rain fell in the year as compared with the previous year.

It will be seen that the highest rainfall was in October, 5.81in., which is the highest recorded for this month for 13 years. The lowest was in April, .03in. July and October were the wettest months, March and April being the driest. The rainfall for the first six months was 11.47in., and for the last six months 21.66in.

The figures for the previous year were 28.65in.

I am indebted to Mr. Robert Hornby, Headmaster of the C. of E. School, for the above rainfall details.

Drainage.

All the sewers discharge at various points of the river; the outlets are, however, some distance apart—rather over a mile from the highest to the lowest point.

It is to be hoped the Council are keeping in their minds the Sewage Disposal Scheme for the Borough, and will not defer it any longer than absolutely necessary. In view of A.R.P. and the consequent influx of evacuees owing to the Borough being a reception area, the above scheme becomes more than ever imperative.

Scavenging.

The majority of the houses are now provided with covered Ashbins, which are emptied once weekly, and the refuse, etc., taken to the Corporation Tip situated on Reeth Road.

The prevailing wind being "west," the smell from the tip is very noticeable in the north and north-west parts of the Borough. Many complaints have been received, and it is for this reason I have advocated a Refuse Destructor.

So long as the present system of controlled tipping is in operation, I would recommend a small incinerator be purchased for the destruction of "offal," which is not only offensive but attracts and harbours rats.

The Ash Rate to my mind should be dispensed with as an individual item and the rate charged in the general rate. This would obviate the dumping of refuse in gardens, etc., and thus from a sanitary point of view would be in the interests of the inhabitants.

The Market Place and main thoroughfares are well scavenged. The surface drains are cleaned out and the road surfaces tar dressed so as to reduce the production of dust to a minimum.

Factories and Workshops Act, 1901.

The Workshops and Workplaces have been periodically inspected and found satisfactory. The special report has been forwarded to the authorities. The following is the summary of the work carried out during the year.

Report.

1.—Inspection of Factories, Workshops and Workplaces, including Inspections made by the Sanitary Inspector :

Premises	Inspections	Number of Written Notices	Occupiers Prosecuted
Factories ...	21	2	nil
Workshops ...	47	nil	nil
Workplaces ...	27	nil	nil
	—	—	—
	95	2	nil

2.—Defects found in Factories, Workshops and Workplaces. Nuisances under Public Health Acts:—

Particulars	Found	Remedied	Referred to H.M. Insp.	No of Offences in resp. of which prosecutions were instituted
Want of Cleanliness	1	1	—	—
Want of Ventilation	—	—	—	—
Overcrowding	—	—	—	—
Want of Drainage of Floors	—	—	—	—
Other Nuisances	—	—	—	—
Sanitary Accommodation:—				
Insufficient	—	—	—	—
Unsuitable or defective	1	1	—	—
Not separate for sexes	—	—	—	—
Offences under Factories and Workshops Acts and other Offences	—	—	—	—
	—	—	—	—
Total	2	2	nil	nil

Sanitary Inspection of the Area.

Schools.

The Public Elementary Schools were regularly visited during the year, and the sanitary conditions and water supply were regularly inspected and found satisfactory.

MEMORANDUM ON CLOSURE AND EXCLUSION FROM SCHOOL, 1930.

There is close co-operation between the Authorities concerned with respect to infectious diseases, and every precaution is taken to prevent their spreading. The rules of the Board of Education respecting contacts and exclusions from schools are carried out. Valuable help in this direction has been given by the School Teachers, the School Nurses and the School Attendance Officer. The Head Teachers of the various schools notify cases of suspected or definite infectious disease. These notifications are useful in the cases of Measles or Whooping Cough, which are not notifiable in the Borough.

The co-operation of the School Attendance Officer is of great value, for when investigating cases of absence from school cases of illness are referred to the M.O.H. if medical attention is not being obtained.

Housing.

Fourteen houses have been erected during the year, six by private enterprise and eight by the Corporation.

Houses built by private enterprise:—

4 houses Stanley Grove.

1 house Gilling Road.

1 house Bridge Street.

Houses built by the Corporation:—

8 houses New Whitcliffe Housing Site.

The housing conditions have definitely improved since the Council have put in operation their scheme for 56

houses. In addition to the above, various owners have submitted plans for the improvement of their property. Owners are encouraged to do so, otherwise more demolition orders would be necessary and inevitable.

With regard to housing, the immediate needs appear to be:—

1. Houses suitable for aged persons (Bungalow Type).

These are necessitated owing to the fact that single persons have had to be moved from clearance areas into Council houses which would normally have been occupied by a family. The above houses should be as near the centre of the town as possible.

2. A further number of three-bedroom type houses will be necessary, as it is impossible to relieve overcrowding in two-bedroom type houses.

Housing Statistics for Year 1938.

Number of new houses erected during the year:—

Total ... 14

1. Inspection of dwelling houses during year:—

(1) (a) Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts) ... 198

(b) Number of inspections made for the purpose 198

(2) (a) Number of dwelling houses included under subhead (1) above which were inspected and recorded under the Housing consolidated Regulations, 1925 ... 23

(b) Number of inspections made for the purpose 23

(3) Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation nil

- (4) Number of dwelling houses (exclusive of those referred to under the preceeding sub-head) found not to be in all respects reasonably fit for human habitation ... nil
2. Remedy of Defects during the year without Service of formal notices:—
- Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their Officers ... 12
3. Action under Statutory Powers during the year:—
- A.—Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936:—
- (1) Number of dwelling houses in respect of which notices were served requiring repairs 8
- (2) Number of dwelling houses which were rendered fit after service of formal notices
- (a) By owners ... 8
- (b) By Local Authority in default of owners ... nil
- B.—Proceedings under Public Health Acts:—
- (1) Number of dwelling houses in respect of which notices were served requiring defects to be remedied ... 30
- (2) Number of dwelling houses in which defects were remedied after service of formal notices
- (a) By owners ... 30
- (b) By Local Authority in default of owners ... nil
- C.—Proceedings under Sections 11 and 13 of the Housing Act, 1936:—
- (1) Number of dwelling houses in respect of which Demolition Orders were made ... nil
- (2) Number of dwelling houses demolished in pursuance of Demolition Orders ... nil
- D.—Proceedings under Section 12 of the Housing Act, 1936:—
- (1) Number of separate tenements or underground rooms in respect of which Closing Orders were made ... nil

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

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

- A.—(1) Number of dwellings overcrowded at end of the year 19
 (2) Number of families dwelling therein ... 20
 (3) Number of persons dwelling therein ... 102½
- B.—Number of new cases of overcrowding reported during the year nil
- C.—(1) Number of cases of overcrowding reported during the year nil
 (2) Number of persons concerned in such cases nil
- D.—Particulars of any cases in which dwelling houses became overcrowded after the Local Authority had taken steps for the abatement of overcrowding nil

Summary of Notices served by the Borough Surveyor and Sanitary Inspector.

Defective Spouts and Roofs	...	...	...	4
Houses disinfected and inspected after				
		Infectious Diseases		8
Defective Drains and W.C's.	...	...	...	4
Defective Ashbins	...	...	...	20
Bugs	...	...	...	3
Rats	...	...	...	8
Deposits of Manure	...	...	...	1
				—
		Total	...	48

These were all informal notices and were complied with.

Eradication of Bed Bugs.

1. Number of

(a)	Council Houses found to be infested	...	nil
	Council Houses disinfested	...	nil
(b)	Other houses found to be infested	...	2
	Other houses disinfested	...	2
2. Methods employed for freeing infested houses from bed bugs:—
Zaldecyde was used for the above.
3. With regard to the belongings of tenants prior to removal to Council Houses, no action has been necessary.
4. Disinfestation is carried out by the Local Authority.
5. Measures taken to prevent infestation and re-infestation consist of frequent inspections.

Inspection and Supervision of Foods.

The greater part of the milk consumed in the Borough is supplied by farmers living in the Borough or just outside.

The milk is delivered twice daily by the majority of them.

The farms and dairies have been periodically inspected. All precautions are taken to ensure so far as is practicable a safe and wholesome supply.

The health of the cows is of great importance, and it is the duty of the inspectors to examine them so that the supplies from any diseased animals can be stopped.

The need for scrupulous cleanliness in everything connected with the Milk Trade is most important. Sterilised containers should be used and these should be stored under suitable temperature conditions.

Personal cleanliness is continually being urged upon those connected with the supply, so that the milk produced will have a low bacterial count. All cows should pass the

tuberculin test, *i.e.*, be free from any signs of tuberculosis; in short, an "Attested Herd" should be aimed at. This is a herd of cows free from tuberculosis and which produces milk with a low bacterial count.

Milk (Special Designations) Order, 1936.

Three grades are now substituted for the Order of 1923:—

1. Tuberculin Tested.
2. Accredited.
3. Pasteurised.

Licenses for 1 and 2 are issued by the County Council. Licenses for 3 are issued by the Urban or Rural District Council, as the case may be.

These grades are certainly simpler than hithertofore—even now there is a good deal of misunderstanding amongst the public.

I am still of the opinion that there should be two grades of milk, tested and untested, and all milk should be sold in bottles and labelled plainly "tested" or "untested". In this manner the public would be safeguarded, for there is no doubt that untested milk is a source of danger, especially to infants and invalids, and may be a means of spreading tuberculosis and other infections.

If Tubercle Free Milk cannot be obtained there is no other measure left but Pasteurisation. This method, however, calls for special plant and supervision and can only be carried out satisfactorily in a communal establishment. The essentials of Pasteurisation are the heating of the milk to a temperature of 150°F. for half an hour, followed by its immediate cooling below 55°F. So far as children are concerned it is advisable that either:—

1. Tuberculin Tested
2. Pasteurised

should be used if obtainable.

If the above cannot be obtained, then ungraded milk might be used after heating in a double saucepan to a temperature just below boiling point.

Pasteurisation or the boiling of milk reduces the risk of tuberculosis and other infections to a minimum, and will prolong the period during which milk can be kept sweet.

I would like to impress on all milk producers a most important factor which should be kept clearly in their minds, and that is—the cleaner the milk they can produce and the freer it is from any signs of disease, the longer will universal pasteurisation be delayed.

Meat.

Every facility is allowed for the inspection of Carcasses at the time of slaughter. The slaughter houses have been visited regularly and are kept in a clean condition.

Limewashing is carried out periodically, and attention is given to the removal of refuse. The standard of cattle used for human consumption is good. Every care is taken that no unsound meat is offered for sale. Under the Public Health (Meat) Regulations, 1924, the butchers are under an obligation to notify the Meat Inspector of any disease or suspected disease found. Tuberculous cattle when found are at once isolated and ordered to be destroyed. None were found during the year.

The Shops, Stalls, etc., have been inspected frequently and are satisfactory. The interior of the shops, including counters, blocks, knives, and other implements used are kept in a clean condition.

The Stalls in the Covered Market have been periodically inspected and are kept in a clean condition.

Other Foods.

The Sanitary conditions of the premises where foods are prepared or exposed for sale have been regularly inspected and found satisfactory. The bakehouses have been frequently inspected by the Sanitary Inspector and faults remedied where found. They are lime-washed twice yearly as required by Section 99 of the Factory and Workshops Act.

No cases of food poisoning have been brought to my notice during the year.

Prevalence and Control over Infectious Diseases.

6 cases of Scarlet Fever were notified, 3 being removed to the Isolation Hospital; the remaining 3 cases were treated at home, as it was found that satisfactory isolation could be effected.

The cases were mild in character and without any complications, and with the exception of two were in children under school age. There was no connection between any of the cases, and they did not occur in any particular part of the Borough.

No serious outbreak of any significance occurred during the year.

No cases of Diphtheria were notified during the year.

The three cases of Puerperal Pyrexia were sent to hospital under the M.C. & W. Scheme, and all made good recoveries.

The usual sources of spreading infection are the Schools and Cinemas and places where children congregate. There is still a lack of responsibility, and exposure of children who are infected in public, in such diseases as Measles, Chicken Pox and Whooping Cough, is frequent.

In the case of Measles particularly, a medical opinion is necessary, as often it is thought by the laity when the rash goes the complaint goes. This is an erroneous idea, for very often the patient is left very debilitated, and it is in this state, unless treated, that more serious complaints may be superimposed.

With regard to Measles and Whooping Cough, I am of the opinion that compulsory notification would be beneficial, at any rate for five years. The dangers would then be realised and the importance of thorough nursing more readily understood. At the present time, both of the above diseases are looked upon far too lightly. The death rate of Measles and Whooping Cough in England and Wales during 1938 was .04 and .03 respectively per 1000, as compared with .01 per 1000 for Scarlet Fever, and yet the latter is looked upon with much greater concern.

All houses where cases of infectious disease have been notified are visited and full investigations made with a view to:—

1. Tracing the cause of infection.
2. Ascertaining if there are any contacts.

Appropriate measures are always taken to prevent the spread. The premises are inspected and notices are served for defects where found.

All infected bedding and clothing is removed from infected houses and disinfected by steam.

The houses are disinfected by formalin and SO^2 gas.

Diphtheria Antitoxin is supplied free of charge by the Local Authority to the Medical Practitioners practising in the district when required.

Bacteriological examination of throat swabs are made for the Medical Practitioners by the Clinical Research Association, London, in regard to Diphtheria.

The County Council have made arrangements for the bacteriological examination of specimens of sputum in cases of Pulmonary Tuberculosis.

Influenza vaccines are provided by the County Council to the Medical Officer of Health for distribution to Practitioners where necessary.

Disinfection is also carried out following deaths from Cancer and Tuberculosis.

To reduce infectious diseases the exciting cause must be dealt with, and of these overcrowding and defective houses are the chief.

Immunisation by alum precipitated toxoid has been used in private cases against Diphtheria, but as yet it has not been employed to any great extent.

Immunisation is easy and safe and should be universally adopted. Children between the ages of one and eight are most prone to contract the disease. As it takes one to two months after immunisation to ensure protection for each child, it is dangerous to wait until an epidemic appears, as no one can foresee when this may take place.

Immunisation against Scarlet Fever has been done in a few private cases, but has not been universally adopted.

Notifiable diseases during the year 1938.

DISEASE	Total Cases notified	Cases Admitted to Hospital	Total Deaths
Small Pox ...	nil	nil	nil
Scarlet Fever ...	6	6	nil
Diphtheria ...	nil	nil	nil
Enteric Fever (including Paratyphoid)	nil	nil	nil
Puerperal Pyrexia ...	3	2	nil
Pneumonia ...	8	nil	2
Erysipelas ...	2	nil	nil

Prevention of Blindness.

No action taken under Section 66 of the Public Health Amendment Act, 1925, for the prevention of blindness or for the treatment of persons suffering from any disease or injury to the eyes.

One case of Ophthalmia Neonatorum was notified during the year, the child being born in the Richmond House Institution.

Tuberculosis.

New Cases and Mortality during 1938.

AGE PERIODS. AGES.	NEW CASES.				DEATHS.			
	Respiratory		Non Respiratory		Respiratory		Non Respiratory	
	M.	F.	M.	F.	M.	F.	M.	F.
Under 1 year ...	—	—	—	—	—	—	—	1
1 and under 5 years ...	—	—	—	1	—	—	—	—
5 and under 15 years ...	—	—	—	—	—	—	—	—
15 and under 25 years ...	—	—	—	—	—	—	—	—
25 and under 35 years ...	—	—	—	—	—	1	—	1
35 and under 45 years ...	—	—	—	—	—	—	—	—
45 and under 55 years ...	1	1	—	—	—	1	—	—
55 and under 65 years ...	—	—	—	—	1	—	—	—
65 years and upwards ...	1	—	—	—	—	—	—	—
TOTAL ...	2	1	—	1	1	2	—	2

The death rate from Pulmonary Tuberculosis was .54, and that from all cases of Tuberculosis .90.

Public Health (Prevention of Tuberculosis) Regulations, 1925.

No notification has been received of any Tubercular employees in connection with the Milk Trade, therefore no action was necessary.

Public Health Act, 1925, Section 62.

No action was taken by the Council under the above Section, where power is given for the compulsory removal to hospital of urgent cases of Pulmonary Tuberculosis if proper isolation is not possible at home.

All cases reported are officially notified to the Medical Officer of Health for the County and the Medical Officer of Health weekly. A Quarterly Return is also sent to the County Medical Officer.

Under the Public Health (Tuberculosis) Regulations, 1912, all cases of Tuberculosis, whether Pulmonary or Non-Pulmonary, must be promptly notified. The question is certainly receiving more attention than hitherto, but deaths from Tuberculosis do occur where the case has not been notified. Without early notification no preventive scheme can be a great deal of use. In the case of patients returning from Sanatoria difficulties have arisen owing to the necessary isolation which is required. In such cases more suitable accommodation is recommended and offered wherever possible.

My thanks are due to the Staff who have worked loyally with me, to the Head Teachers of the various Schools, to the School Attendance Officer, the School Nurses, and the Chairman and Members of the Sanitary Committee for their co-operation and help at all times.

I am, Mr. Mayor, Aldermen and Councillors,

Your obedient servant,

JOHN WILLIAMS, M.D.

