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BOROUGH OF RYE



ANNUAL REPORT

of the

Medical Officer of Health for the Year 1954

By

M. I. SILVERTON, T.D., M.R.C.S., L.R.C.P., D.P.H.



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To the Mayor, Aldermen and Councillors

I have the honour to present the Annual Report of the Medical Officer of Health for the year 1954.

The statistics reveal that the health of the Borough compares favourably with the rest of England and Wales, and it is interesting to note the increased Birth Rate.

The immunisation campaign against diphtheria is pursued with undiminished vigour, its success is exemplified by the absence of any cases during the past ten years, but this is no reason for complacency. A relaxation in our efforts would see the return of this deadly disease.

The past record for new Council housing having regard to the population has been excellent, however, no new Council houses were completed during this year but it is hoped that further development will not be long delayed and thus bring new hope to the many applicants still on the housing list.

Mr. R. C. Green succeeded Mr. H. C. Gower in January, 1954, and I would like to take this opportunity to thank Mr.Gower for his past helpful and courteous co-operation and to welcome Mr.Green as a valued colleague who has given me every assistance during the year under review.

The Chief Sanitary Inspector (Mr. Green) has supplied the statistical information relevant to the Sanitary circumstances of the Borough given in this report. It will be noted that his other official duties include those of Borough Surveyor and Water Engineer, and that he has submitted reports on these subjects.

I am obliged to the Town Clerk for his unfailing courtesy and help. I wish to thank you for your encouragement and support during the past year.

> I have the honcur to be, Mr.Mayor, Ladies and Gentlemen,

> > M. I. SILVERTON

Medical Officer of Health.

The Watch Oak, BATTLE, Sussex.

BOROUGH OF RYE

STAFF

Medical Officer of Health:

M. I. SILVERTON, T.D., M.R.C.S., L.R.C.P., D.P.H.

Chief Sanitary Inspector, Surveyor, Town Planning Officer and Water Superintendent:

R.C.GREEN, M.S.I.A., M.R.San.I.

Additional Sanitary Inspector:

D.T.REES, Cert.R.S.I., M.S.I.A. (Appointed 1.5.1954)

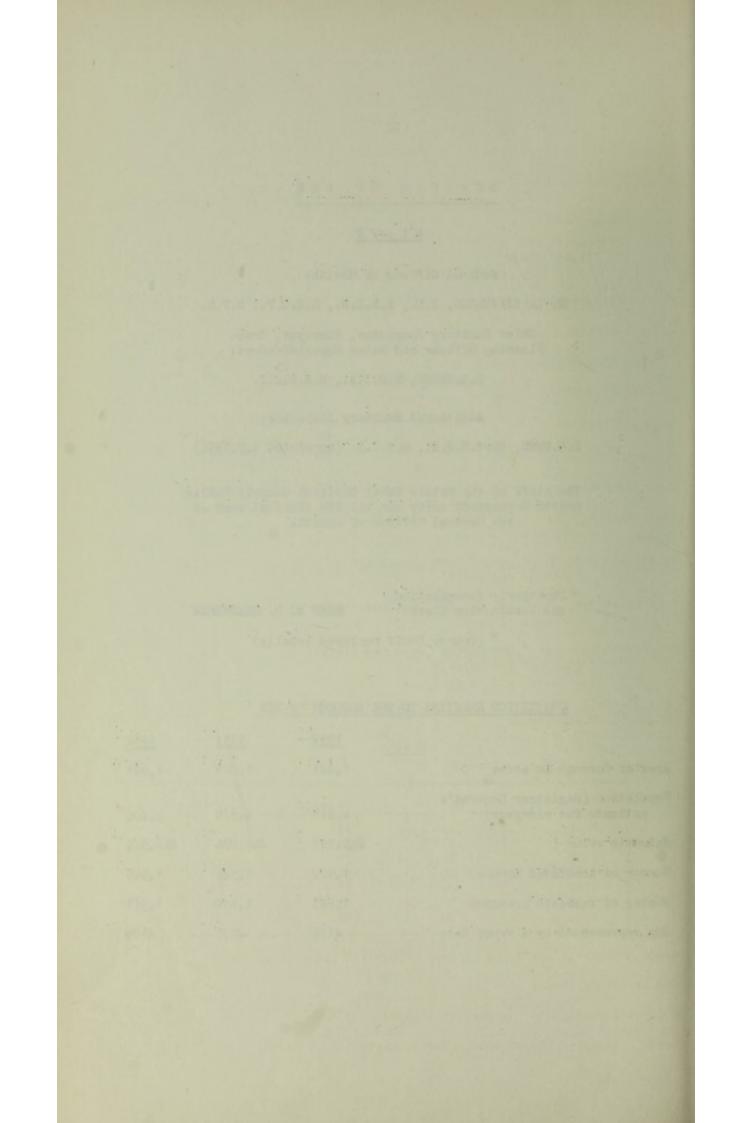
The staff of the Battle Rural District Council Public Health Department carry out all the clerical work of the Medical Officer of Health.

* Diphtheria Immunisation and Vaccination Clerk: MISS M. H. HEARNSHAW

* (County Staff employed locally)

STATISTICS RELATING TO THE BOROUGH OF RYE

	1952	1953	1954
Area of Borough in acres	1,021	1,021	1,021
Population (Registrar General's estimate for mid-year)	4,517	4,570	4,600
Rateable value	£45,227	£46,284	\$46,544
Number of inhabited houses	1,542	1,545	1,549
Number of rateable premises	1,863	1,910	1,911
Sum represented by a Penny Rate	£174	£179	£180



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-	-	-	-	-		

BIRTHS AND BIRTH RATES.

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	Male	Female	Total
Live Births			
Legitimate Illegitimate	34 	45 2 47	79 2 <u>81</u>
Stillbirths			
Legitimate Illegitimate	1 0 1	0 0 0	1 01 1
ive Birth Rate per 1,000 of home population		1	7.6
Comparability Factor			1.03
Corrected Birth Rate		1	8.1
ive Birth Rate per 1,000 of home population (England and Wales)		1	5.2
tillbirth Rate per 1,000 home population (Borough of Rye)			0.21
tillbirth Rate per 1,000 of home population (England and Wales)			0.36
tillbirth Rate per 1,000 births (live and still (Borough of Rye)	.)	1	2.19
tillbirth Rate per 1,000 births (live and still (England and Wales)	.)	2	3.4

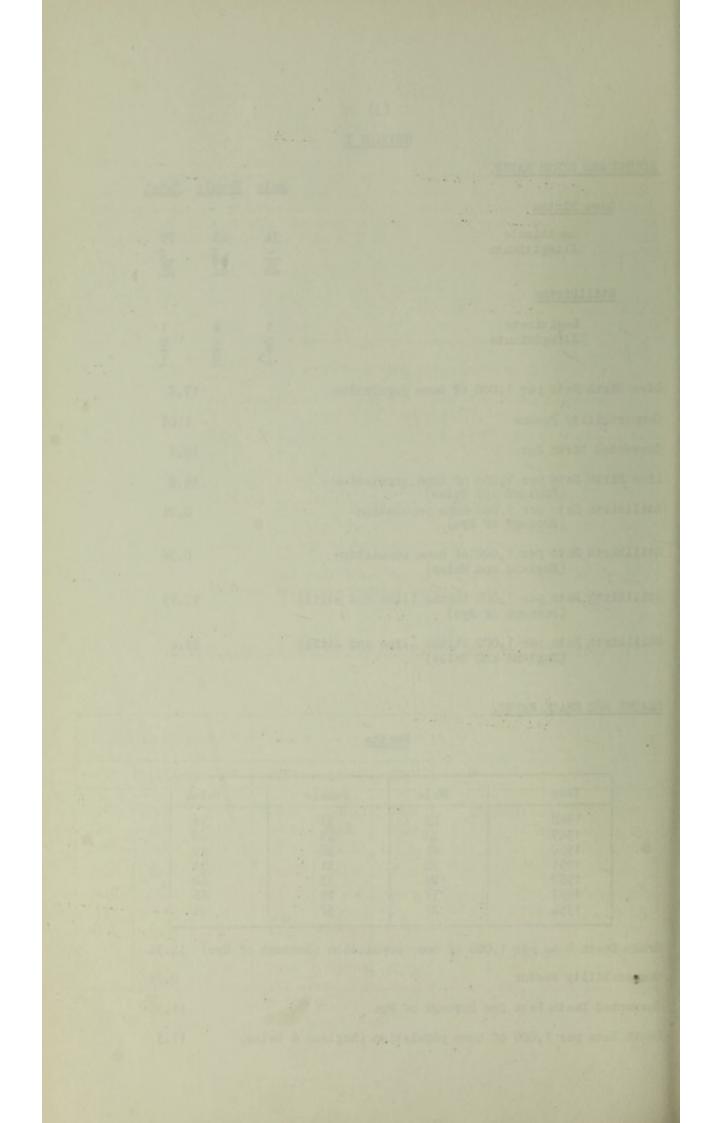
DEATHS AND DEATH RATES.

Deaths

Year	Male	Female	Total
1948	23	33	56
1949	3.3	33	66
1950	21	38	59
1951	20	31	51
1952	- 29	33	56 66 59 51 62 66 66
1953	37	29	66
1954	29	37 _G	66

Grude Death Rate per 1,000 of home population (Borough of Kye)	14.34
Comparability Factor	0.79
Corrected Death Rate for Borough of Rye	11.32
Death Rate per 1,000 of home population (England & Wales)	11.3

(3)



It is well known that this Borough is particularly favoured by those persons retiring from active life and is thus heavily weighted for age as compared with England and Wales as a whole, and so we get an apparently increased death rate. The Registrar-General is aware of this and has given us a method of overcoming this bias by introducing a "comparability factor" of 0.79 for this Borough, thus giving a Corrected Death Rate of 11.32 which compares with 11.3 for England and Wales.

Infant Deaths and Death Rates.

Deaths	of infa	nts und	er 1 year (Bo	orough of	Rye)	One
Infant	Death R	ate per	1,000 live 1	births		12.3
Infant	Death R		1,000 relate gland and Wal		oirths	25.5

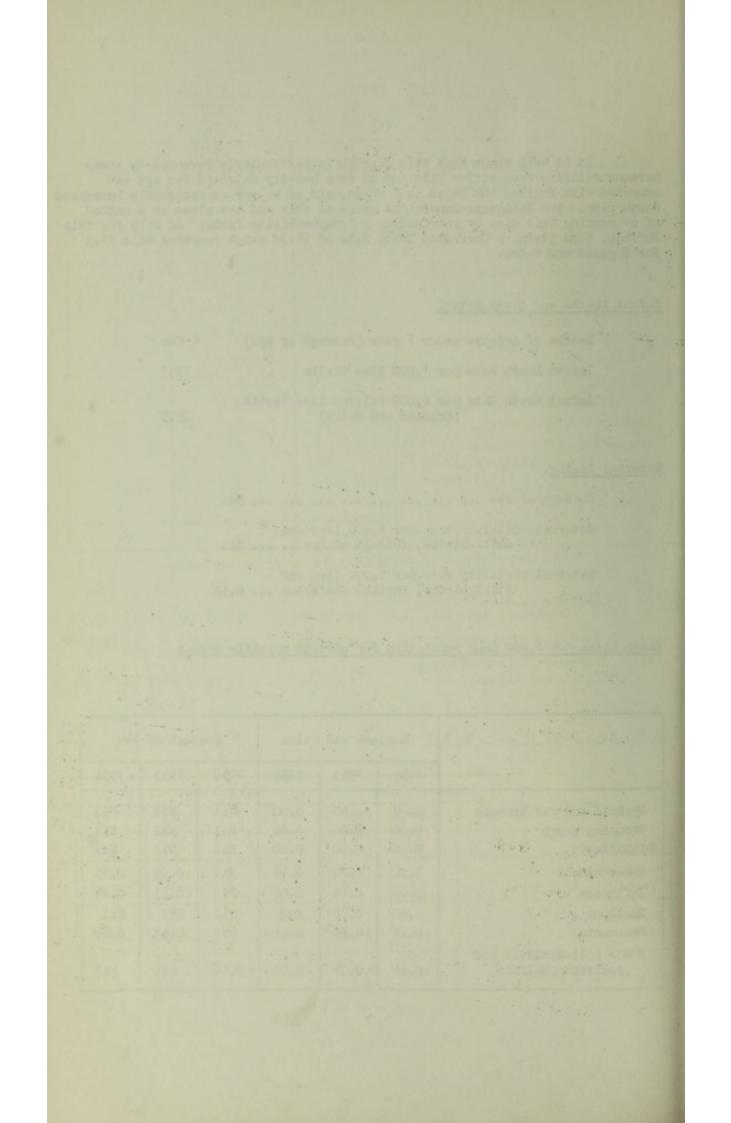
Maternal Deaths.

Borough of Rye Nil Maternal mortality rate per 1,000 live and still births, Borough of Rye Nil Maternal mortality rate per 1,000 live and

still births, England and Wales ... 0.69

Death Rates per 1,000 home population for certain specific causes.

	Engl	and and	Wales	Borough of Rye		
	1952	1953	1954	1952	1953	1954
Typhoid and paratyphoid	0.00	0.00	0.00	Nil	Nil	Nil
Whooping cough	0.00	0.00	0.00	Nil	Nil	Nil
Diphtheria	0.00	0.00	0.00	Nil	Nil	Nil
Tuberculosis	0.24	0.20	0.18	Nil	0.65	0.65
Influenza	0.04	0.16	0.04	Nil	0.43	0.21
Smallpox	0.00	0.00	Nil	Nil	Nil	Nil
Pneumonia	0.47	0.55	0.41	Nil	0.43	0.86
Acute poliomyelitis and polioencephalitis	0.01	0.01	0.00	0.44	Nil	Nil



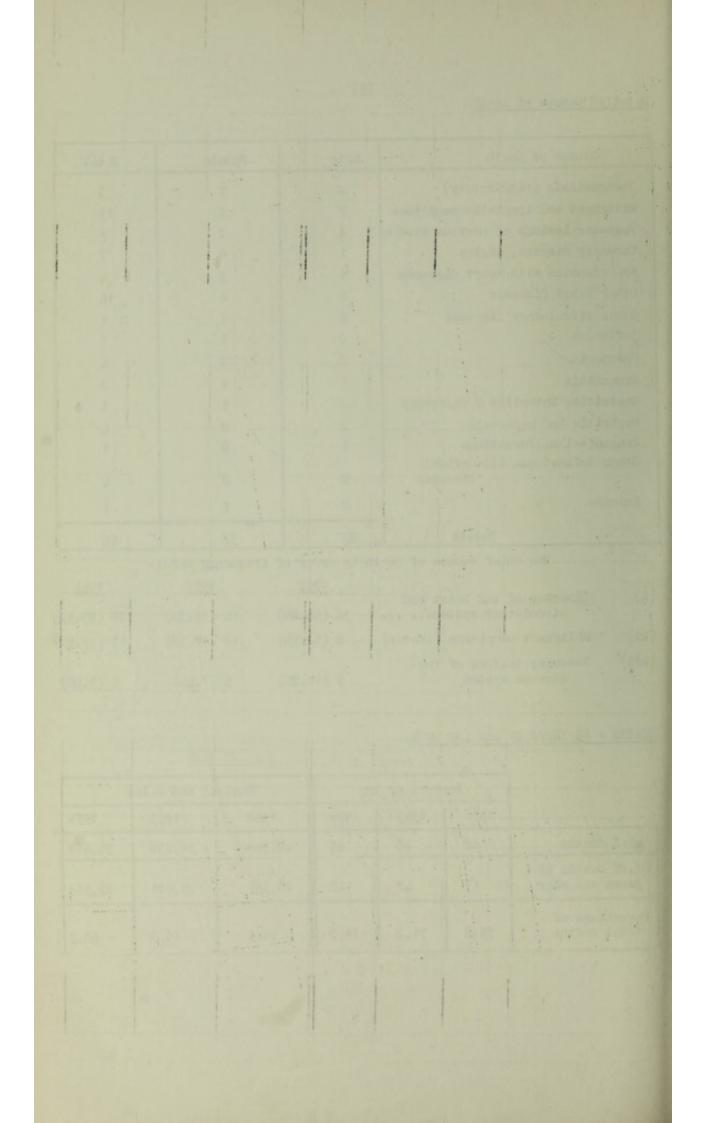
Detailed Causes of Death

Causes of Death	Male	Female	Total
Tuberculosis (respiratory)	2	1	3
Malignant and lymphatic neoplasms	7	6	13
Vascular lesions of nervous system	4	2	6
Coronary disease, angina	1	6	7
Hypertension with heart diseases	1	3	4
Other heart diseases	6	8	14
Other circulatory diseases	0	1	1
Influenza	0	1	1
Pneumonia	2	2	4
Bronchitis	1	1	2
Gastritis, Enteritis & diarrhoea	0	1	1
Nephritis and nephrosis	2	2	4
Congenital malformations	1	0	1
Other defined and ill-defined discases	2	2	4
Suicide	0	1	1
Totals	29	37	66
The chief causes of deat	th in order of i	frequency were :-	
i) Diseases of the heart and	<u>1952</u>	<u>1953</u>	<u>1954</u>
circulatory system	34 (54.8%)	24 (36.3%)	26 (39.3%
ii) Malignant neoplasms (cancer)	8 (12.9%)	12 (18.1%)	13 (19.6%)

(iii) Vascular lesions of the nervous system 5 (11.2%) 5 (7.5%) 6 (9.0%)

DEATHS - 65 YEARS OF AGE AND OVER.

	Bo	rough of 1	Ryre	Engla	and and Wales	3
	1952	1953	1954	1952	1953	1954
Total deaths	62	66	66	40,368	36,636	34,469
No.of deaths 65 years and over	47	47	47	26,368	25,821	23,563
Percentage of total deaths	75.8	71.2	71.2	66.3	66.8	68,3



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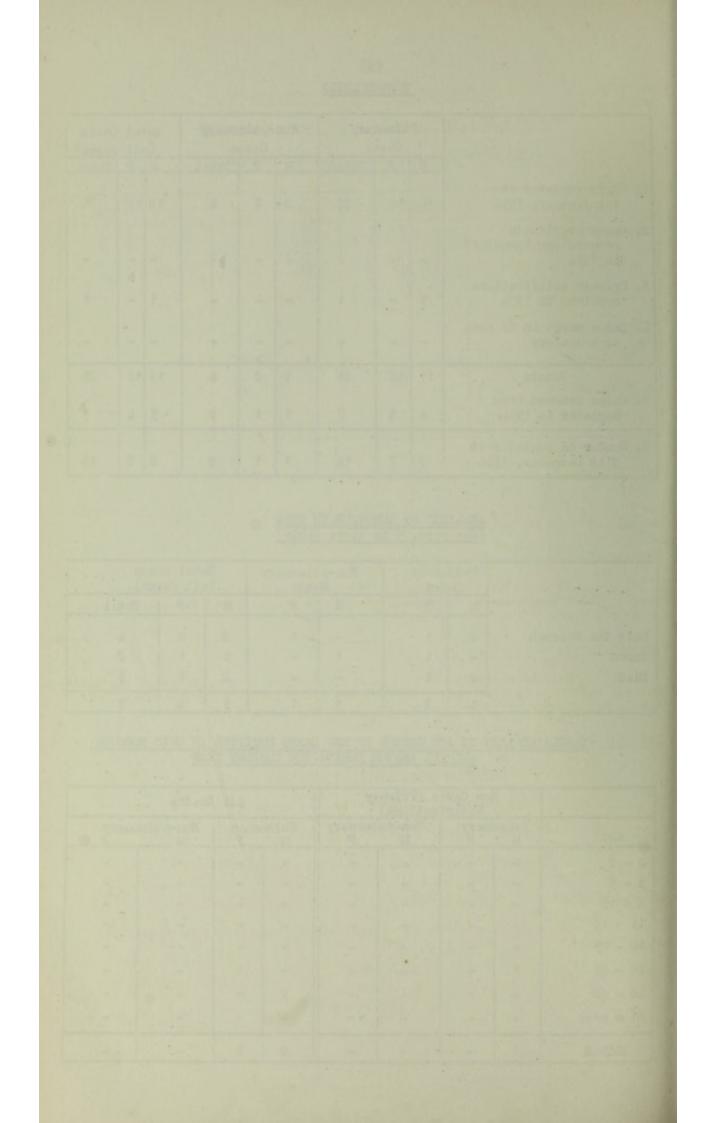
	Pulmonary Cases			Non	-puli Case	nonary es	1 1		Cases forms)	
	M	F	Total	M	F	1 Total	And the state of t		Total	
1. No.on register at 1st January, 1954	10	10	20	2	2	4	12	12	24	
2. Cases previously removed and re-notified in 1954	-	-	-	-	-	-	-	-	-	
3. Primary notifications received in 1954	1	-	1	-	-	-	1	-	1	
4. Cases moved in to area as transfers	-	-	-	-	-	-	-	-	-	
* Totals	11	10	21	2	2	4	13	12	25	
5. Cases removed from Register in 1954	4	3	7	1	1	2	5	4	9	
6. Number on Register at 31st December, 1954	7	7	14	1	1	2	8	8	16	

* ANALYSIS OF REMOVALS IN 1954 (See para, 5 in above Table)

		monary ases	Non-pr	Total cases (all forms)			
	M	F	М	F	М	F	Total
Left the Borough	2	1	-	1	2	2	4
Cured	-	1	1	-	1	1	2
Died	2	1	-	-	2	1	3
	4	3	1	1	5	4	9

TABULATED LIST IN AGE GROUPS OF NEW CASES NOTIFIED IN THIS BOROUGH AND ALL LEATHS DURING THE CURRENT YEAR

	New Cases (Primary Notifications)					All Deaths					
Age	Pulmo	F	Non-pulmonary M F		Pulmonary M F		Non-puln	nonary F			
0 - 2	-	-	-	-		-	-	-			
3 - 5	-		-	-		-	-	-			
6 - 10		-	-	-	-	-	-	-			
11 - 15	-	-	-	-	-	-	-	-			
16 - 25	-	-	-	-	-	-	-	-			
26 - 45	1	-	-	-	-	1	-	-			
46 - 60	-	-	-	-	2	-	-	-			
61 & over	-	-	-	-	-	-	-	-			
TOTALS	1	-	-	-	2	1	-	-			



INCIDENCE OF INFECTIOUS DISEASES

Comparative Statistics for the years 1949 - 1954

	1949	1950	1951	1952	1953	1954
Scarlet fever	4	13	10	22	2	3
Measles	30		116	8	156	
Fneumonia	13	- 3	12	12	10	11
Erysipelas	4	2	3	1	2	1
Whooping cough		58	54	1	26	5
Poliomyelitis		2	2	16		
Meningococcal infection				1		

1st January - 31st December respectively

Poliomyelitis.

I am happy to record that there have been no cases of policmyelitis in this Borough during the past two years.

Measles.

No cases were notified in 1954 but it is likely that 1955 will reveal a high incidence in accordance with the biennial trend experienced with this infection.

Scarlet fever.

Mild in character and of no special significance, the usual investigations were made in each case regarding the possibility of ford handlers being involved, and where indicated, alternative work was advised and accepted.

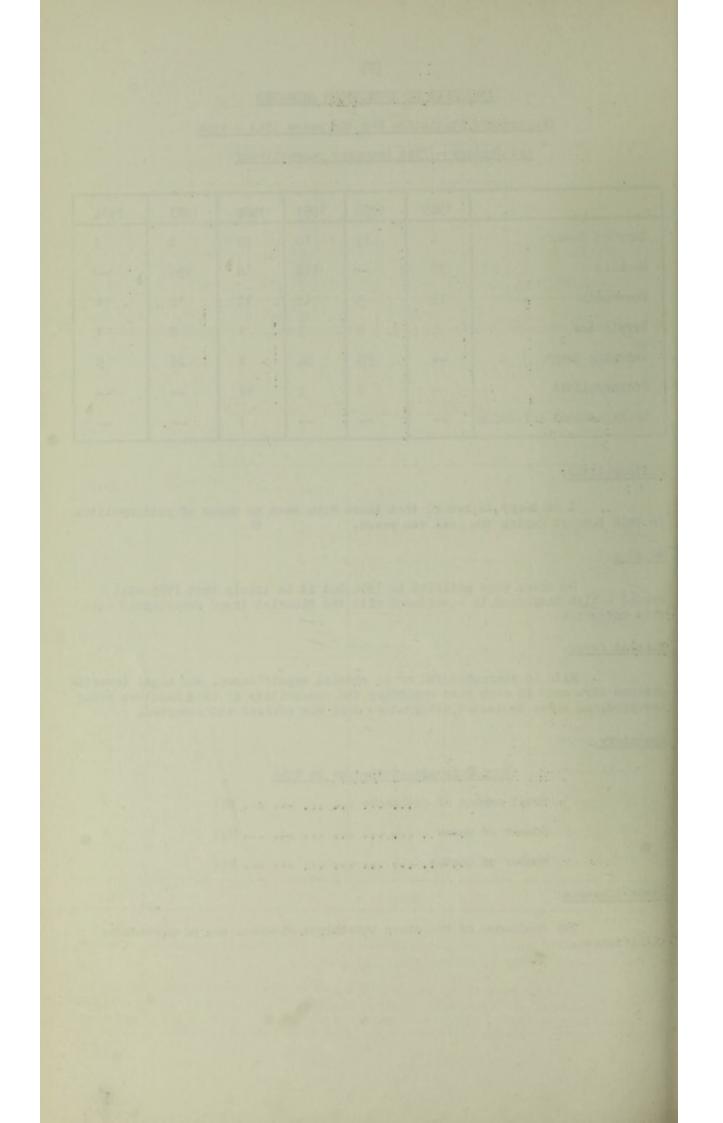
Dysentery.

Food Poisoning Outbreaks in 1954

Total n	umb	er of	outbre	aks	 •••	 •••	Nil
Number	of	cases			 	 	Nil
Number	of	deaths			 	 	Nil

Other diseases.

The incidence of the other infectious discases has no particular significance.



	Jan	Feb	Mar	Ap1	May	Jun	July	Aug	Sep	Oct	Nov	Dee	TOTALS
Scarlet fever	-	-	-	1	-	-	-	-	1	1		-	3
Pneumonia	3	-	1	1	-	-	1	1	-	1	1	2	11
Erysipelas	-	-		1	-	-	-	-	-	-	-	-	1
Whooping cough	-	-	-	-	-	-	3	2	-	-	-	-	5
TOTALS	3	-	1	3	-	-	4	3	1	2	1	2	20

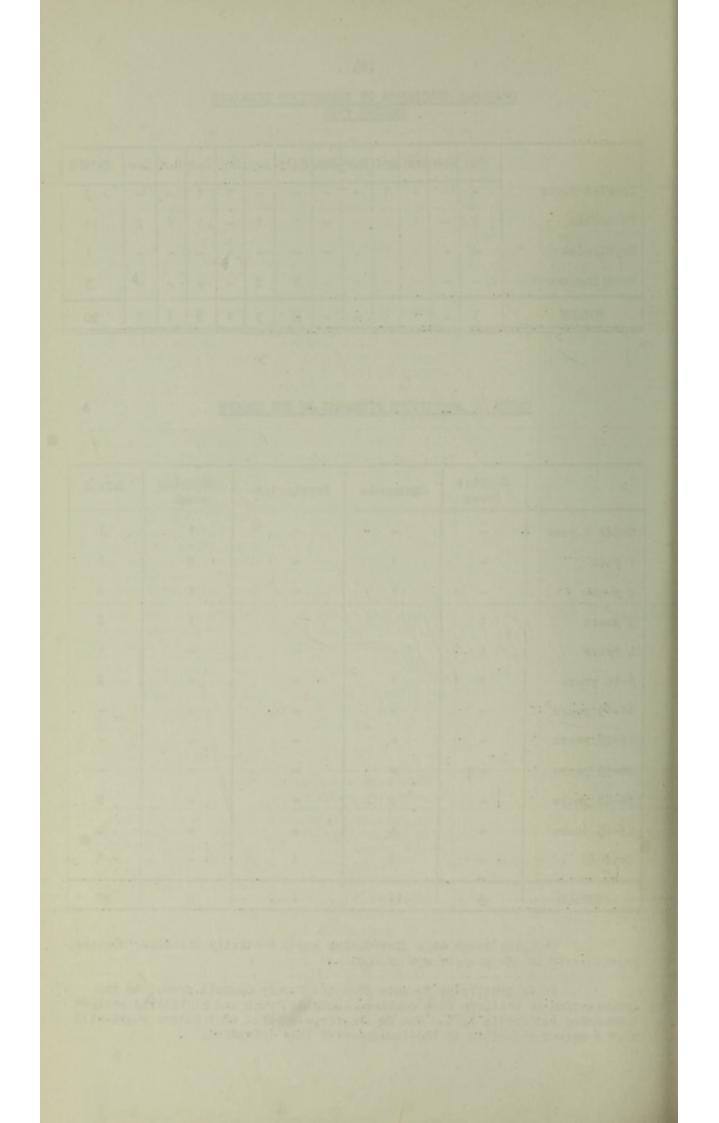
SEASONAL INCIDENCE OF INFECTIOUS DISEASES DURING 1954

CASES OF INFECTIOUS DISEASES IN AGE GROUPS

	Scarlet fever	Pneumonia	Erysipelas	Whooping cough	TOTALS
Under 1 year	-	-	-	1	1
1 year	-	1	-	2	3
2 years	-	1	-	1	2
3 years	1	-	-	1	2
4 years	1	-	-	-	1
5-10 years	1	1	-	-	2
11-15 years	-	-	-	-	-
16-25 years	-	-	-	-	-
26-35 years	-	-	-	-	-
36-45 years	-	2	-	-	2
46-65 years	-	4	-	-	4
Over 65	-	2	1	-	3
TOTALS	3	11	1	5	20

Whooping cough is a distressing and potentially disabling disease, particularly in the younger age groups.

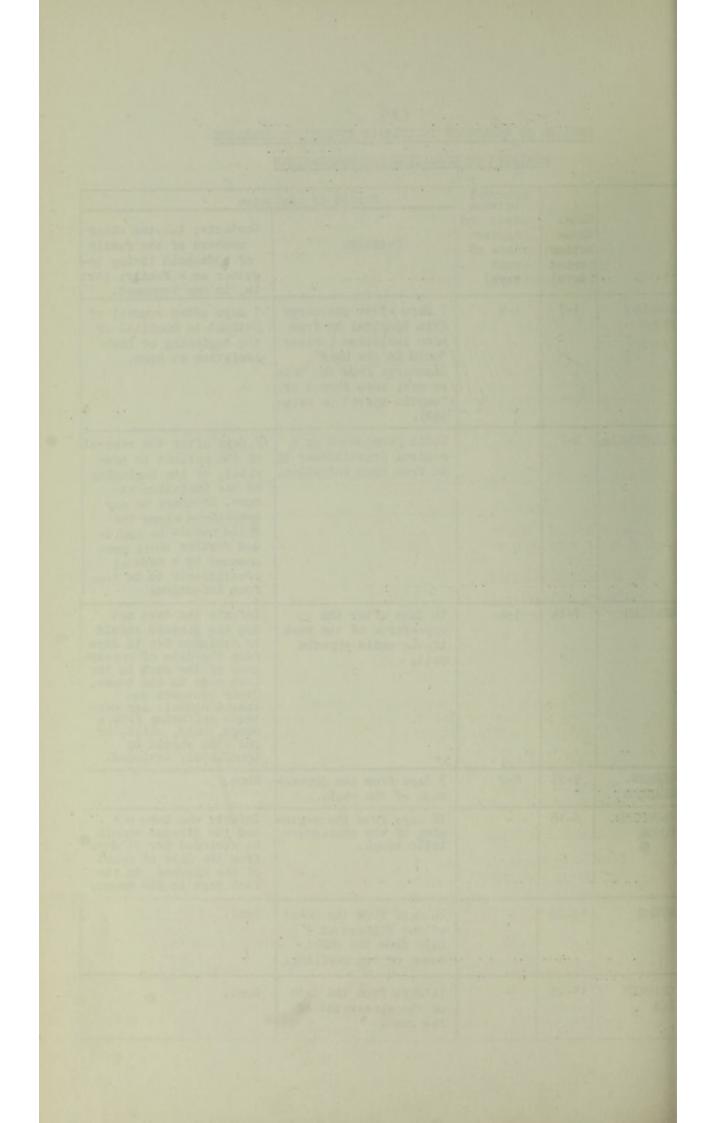
It is gratifying to note that the County Council agreed to the immunisation of children with combined Whooping Cough and Diphtheria antigen commencing 1st April, 1954. One is therefore hopeful that future years will show a marked reduction in the incidence of this infection.



			(9)		
PERIODS OF F	XCLUSION	IN	CERTAIN	INFECTIOUS	DISEASES

MINISTRY OF EDUCATION RECOMMENDATIONS

		Interval between	Period of excl	usion
	Usual Incu- bation period (days)	onset and appear- rance of rash (days)	Patients	Contacts, i.e.the other members of the family or household living to- gether as a family, that is, in one tenement.
SCARLET FEVER	1-7	1-2	7 days after discharge from hospital or from home isolation (unless "cold in the head", discharge from the nose or ear, sore throat or "septic spots" be pres- ent).	7 days after removal of patient to hospital or the beginning of his isolation at home.
DIPHTHERIA	2-7		Until pronounced by a medical practitioner to be free from infection.	7 days after the removal of the patient to hos- pital, or the beginning of his isolation at home. If there be any suspicious signs the child should be exclu- ded further unvil pro- nounced by a medical practitioner to be issee from infection.
MEASLES	7-14	3-4	14 days after the appearance of the rash if the child appears well.	Infants who have not had the disease should be excluded for 14 days from the date of appear- ance of the rash in the last case in the house. Other contacts can attend school. Any con- tacts suffering from a cough, cold, chill, or red eyes should be immediately excluded.
GERMAN MEASLES	5-21	0-2	7 days from the appear- ance of the rash.	None.
WHOOP ING COUGH	6-18	-	28 days from the begin- ning of the character- istic cough.	Infants who have not had the disease should be excluded for 21 days from the date of enset of the disease in the last case in the house,
MUMPS	12-28	-	14 days from the onset of the disease or 7 days from the subsi- dence of the swelling.	None.
CHICKEN POX	11-21	-	14 days from the date of the appearance of the rash.	None.



INFLUENZA

During December and continuing into February, 1955, there was increased absoluteeism due to illness in schools both national and private.

The cases occurring in December were characterised by a short, sharp febrile attack lasting about two days with fairly rapid recovery. In February, 1955, the illness was more lengthy and many cases were complicated by ear and lung infections; convalescence was generally of longer duration.

However, bloods taken by me during December and February and submitted for virus identification revealed Influenza B in both series.

All General Practitioners in the Borough were notified of this prevalence.

DIFHTHERIA IMMUNISATION

The continuing percentage increase of children immunised under 5 years is noted with satisfaction although not complacency.

There are still 30% remaining at risk and this Department is perpetually stressing the necessity for full protection from this dread disease.

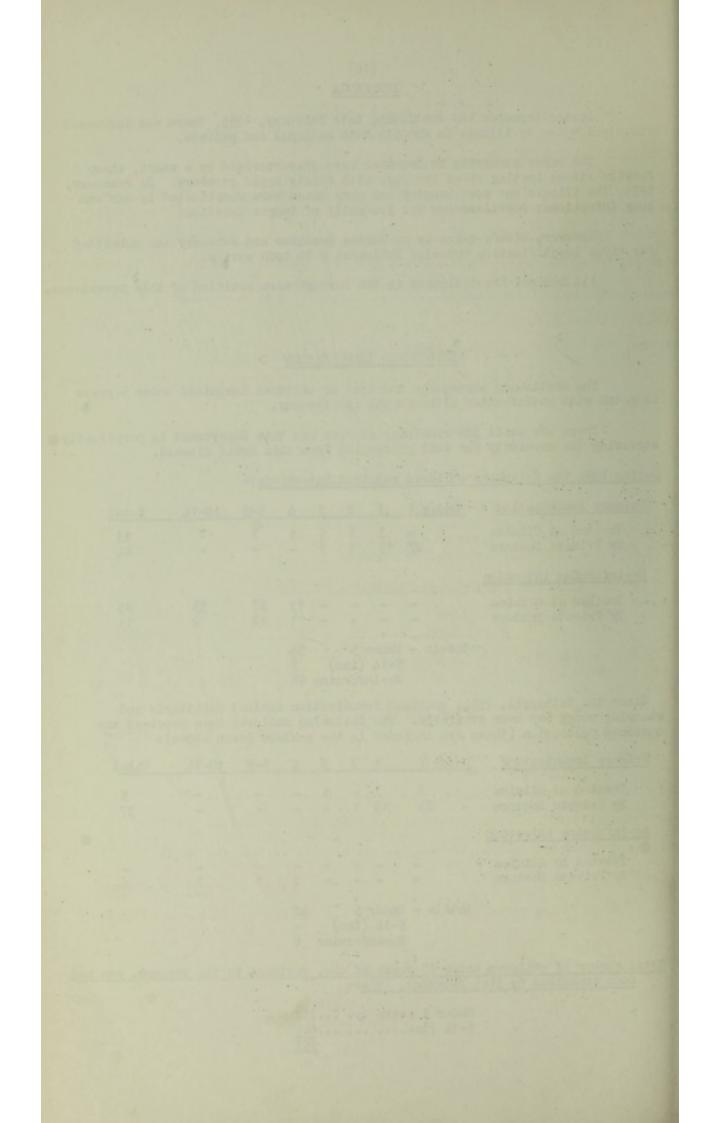
During 1954 the following children received injections :-

Primary Immunisation	Under 1	1	2	3	4	5-9	10-14	Total
Treated at Clinics By Private Doctors	4 27	3 15	1 1	1 1	1 -	3-	-	13 44
Re-inforcing injection								
Treated at Clinics By Private Doctors	:	-	-	-	13 1	37 12	33 2	83 15
		Under 5-14 Re-ir	(ind		54 3 98			

Since the 1st April, 1954, combined immunisation against diphtheria and whooping cough has been available. The following children have received the combined protection (these are included in the numbers given above):

Primary Immunisation	Under 1	1	2	3	4	5-9	10-14	Total
Treated at Clinics By Private Doctors	2 23	2	-	1	-	-	-	5 37
Re-inforcing injection	2	13		-	-	-	-	37
Treated by Clinics By Private Doctors	-	-	-	-	-2	- 3	-	- 6
		Under 5-14 Re-int	(inc)		42	,		0

Total number of children under 15 years of age, resident in the Borough, who had been immunised by 31st December, 1954:-



(11) <u>DIFH THERIA IMMUNISATION</u> (Continued)

Comparative figures for the past three years :-

	1952	1953	1954
Number immunised under 5 years		257	252
Child population (under 5)	382	369	360
Fercentage of child population immunised (under 5)	69.11%	69.64%	70.00%
Number immunised 5-14 (inclusive)	597	642	649
Child population 5-14 (inclusive)	649	672	680
Percentage of child population immunised (5-14)	91.98%	95.53%	95.44%

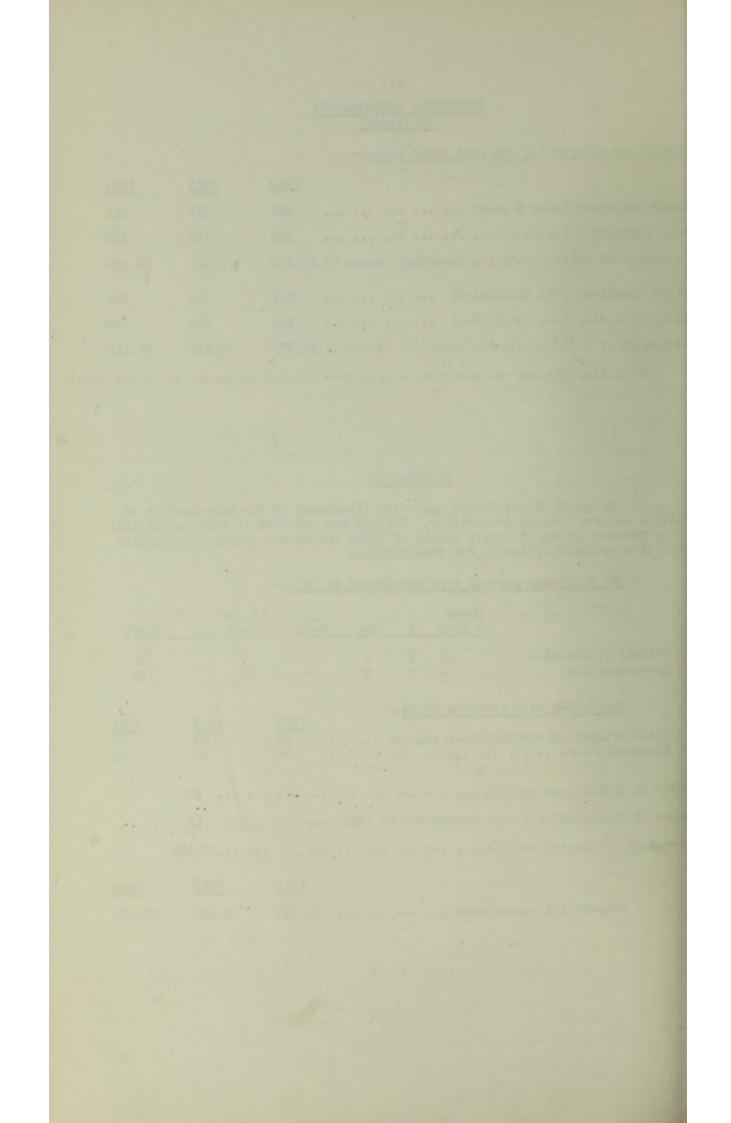
(Population figures are estimated - Registrar General is unable to supply them).

VACCINATION

The speed of air travel makes the likelihood of the introduction of smallpox an ever present possibility. Parents are exhorted to make use of this safety measure during the early months of their children's lives, and adequate facilities are made available for this purpose.

The following persons were vaccinated in 1954 :-

	Under 1 Year	1	2-4	5-14	15 or over	Total
Primary vaccination Re-vaccination	45 -	2 1	2 1	2 -	3 22	514 214
Comparison with pro Total primary vaccination Re-vaccinations	ns			<u>195</u> 53		<u>1954</u> 54 24
Number of babies born in 1954 Number of babies under 1 year Percentage vaccinated in 1954	vaccina	ted	in 1954		45	6
Comparative percent	ages			<u>195</u>		<u>1954</u> 55.55%



GENERAL PROVISI	ON OF HEALTH SER	VICES FOR T	HE BOROUCH	
(A) PROVIDED BY THE EAST SUS OF THE COUNTY MEDICAL OF	EX COUNTY COUNC	IL UNLER TH	E AEGIS	
*(i) Ambulance Service				
	<u>1951</u>	1952	<u>1953</u>	1954
Cases	546	627	805	815
Mileage	13,626	14,208	16,959	17,662

The number of cases of illness removed to hospital shows an increase over the years with consequent increase in mileage. This has necessitated the employment of a full-time driver who is also designated as Transport Officer. Two ambulances are in daily use; one being manned entirely by volunteers but this is becoming more difficult as the time expended is in excess of a second fully employed driver and if the service is to continue its present exemplary record of answering all calls on time it will be necessary to employ a second full-time driver, with the voluntary element filling in during off-duty time.

- (ii) Care of Expectant and Nursing Mothers and Children under School Age.
- (iii) Contraceptive Advice.

Subject to the limitation that advice is only given where pregnancy or childbirth is liable to be injurious to the health of the mother, arrangements are made for contraceptive advice to be given to married women at a clinic conducted by Hastings Corporation.

- (iv) District Nurses (Midwives) and Health Visitors.
- (v) Home Help Service.
- (vi) Hospital Car Service.

The Hospital Car Service in this county is provided entirely by the joint organisation of the British Red Cross Society and the St.John Ambulance Brigade. The Area Transport Office for the Borough of Rye is at 8, Endwell Road, Bexhillon-Sea (Telephone: Bexhill 152).

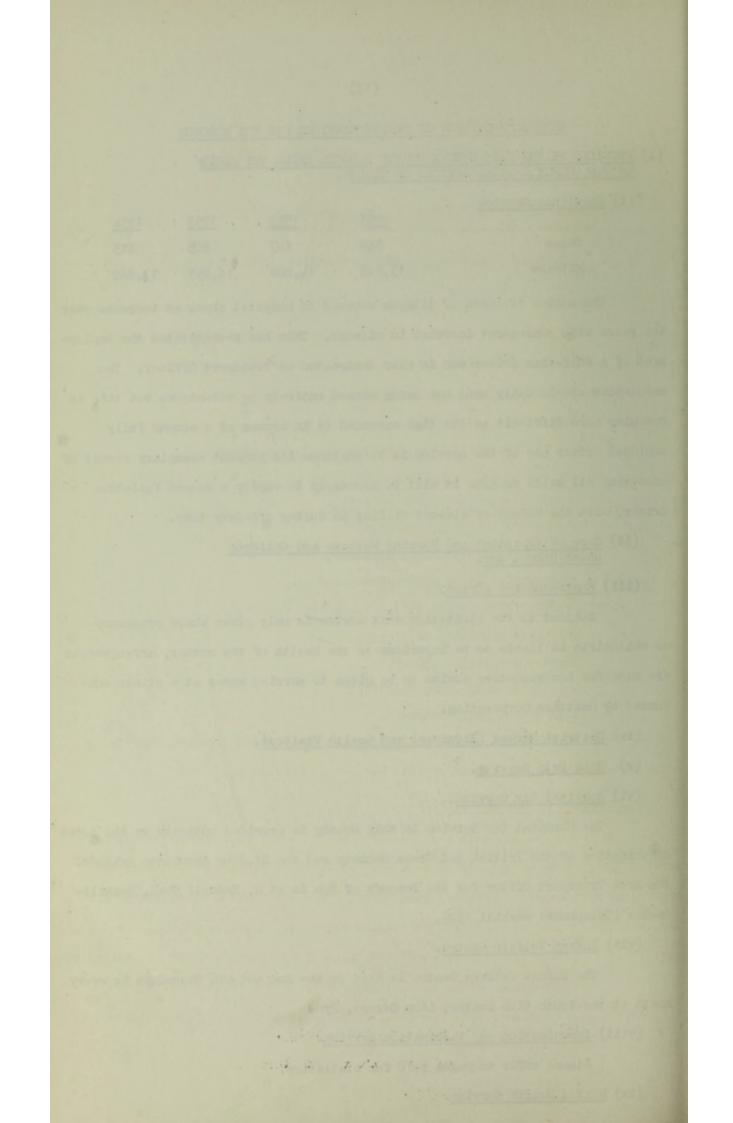
(vii) Infant Welfare Centre.

The Infant Welfare Centre is held on the 2nd and 4th Thursdays in every month at the Youth Club Centre, Lion Street, Rye.

* (viii) Immunisation and Vaccination Service.

Please refer to pages 9-10 for statistics.

(ix) Mental Health Service.



(x) Registration of Nursing Homes.

There are no registered Nursing Homes in the Borough of Rye.

(xi) School Dental Service.

(xii) <u>School Medical Service (*Routine medical examinations</u> including the assessment of handicapped pupils).

* Delegated duties to the District Medical Officer of Health.

(B) HOSPITALS

The following are the main hospitals providing accommodation and treatment for residents in the Borough of Rye :-

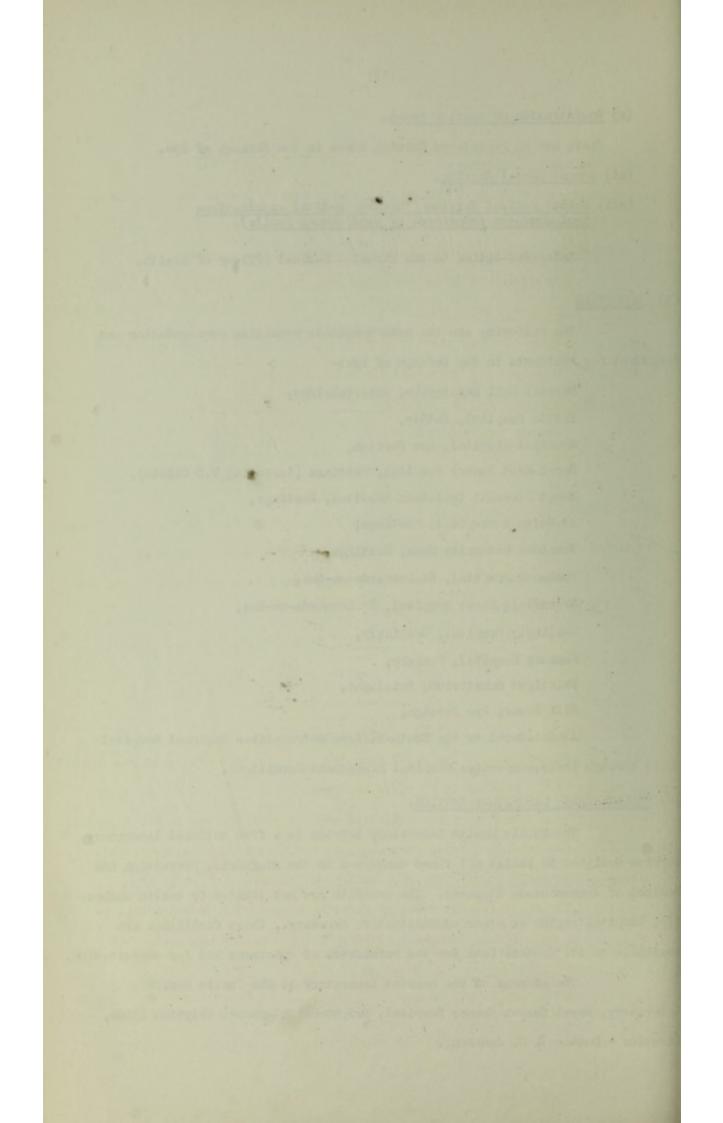
Darvell Hall Sanatorium, Robertsbridge, Battle Hospital, Pattle, Memorial Hospital, Rye Foreign, Royal East Sussex Hospital, Hastings (including V.D Clinic), Mount Pleasant Isolation Hospital, Hastings, St.Helen's Hospital, Hastings, Fernbank Maternity Home, Hastings, Buchanan Hospital, St.Leonards-on-Sea, Eversfield Chest Hospital, St.Leonards-on-Sea, Hellingly Hospital, Hellingly, Pembury Hospital, Pembury, Fairlight Sanatorium, Fairlight, Hill House, Rye Foreign.

Administered by the South-Eastern Metropolitan Regional Hospital Board through their respective Hospital Management Committees.

(C) PUBLIC HEALTH LABORATORY SERVICE.

The Public Health Laboratory Service is a free national laboratory service designed to assist all those concerned in the diagnosis, prevention and control of communicable diseases. The benefits are not limited by health authority, hospital region or other administrative boundary. These facilities are available to all doctors both for the submission of specimens and for consultation.

The address of the nearest laboratory is The Public Health Laboratory, Royal Sussex County Hospital, Brighton (Telephone: Brighton 23506, Director - Doctor J. E. Jameson).



(1) NATIONAL ASSISTANCE ACT, 1948.

(a) Section 47. Removal to Suitable Premises of Persons in Need of Care and Attention.

Fortunately it was not found necessary to invoke these provisions during the year under review.

(b) Section 50. Burial or Cremation of the Dead.

No action was necessary under this Section.

(E) HOME PHYSIOTHERAPY SERVICE.

This voluntary service is much appreciated both by patients and doctors, and well deserves increased financial support.

(F) NATIONAL SOCIETY FOR THE PREVENTION OF CRUELTY TO CHILDREN.

Liaison has been maintained.

ACCIDENTS IN THE HOME .

During the last 10 years 57,413 people have died as a result of home accidents. 10,000 of this number occurred in children under 5 years of age.

From 1940 - 1949 over 60,000 people died from accidents in the home compared with 48,000 from road accidents.

The fatal home accidents in England and Wales were as follows :-

 1949
 4,904

 1950
 5,146

 1951
 5,434

 1952
 5,240

 1953
 5,895

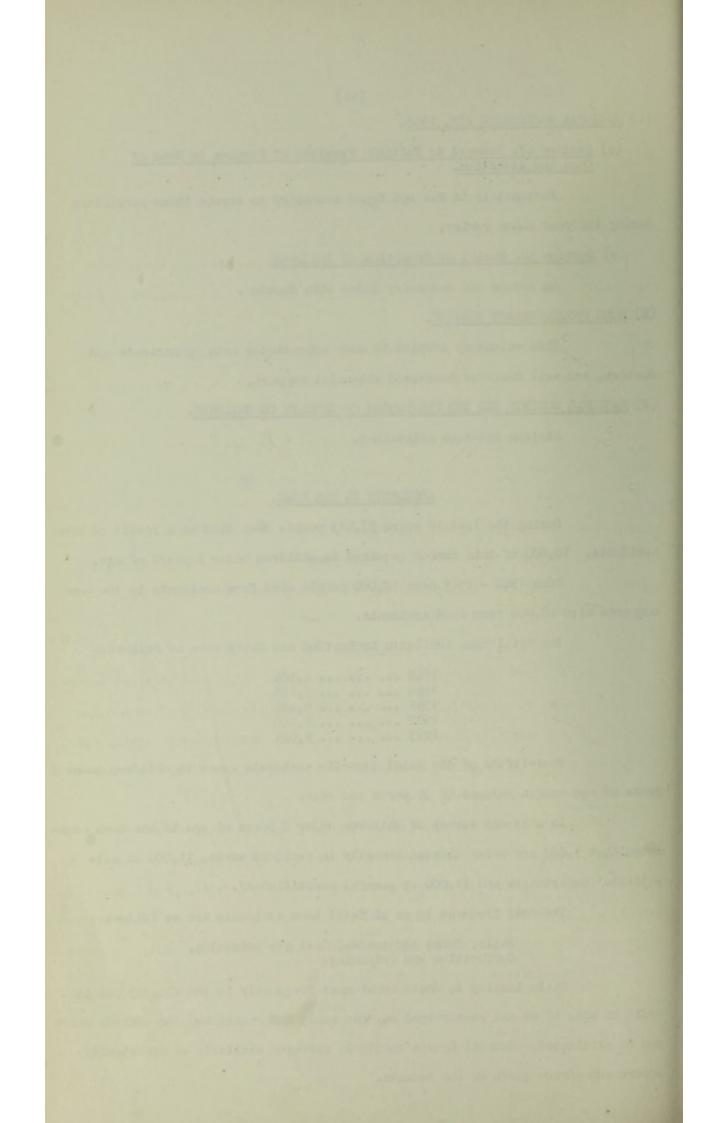
Four-fifths of the fatal domestic accidents occur in children under 5 years of age and in persons of 65 years and over.

In a recent survey of children under 2 years of age it has been estimated that 3,000 are being treated annually in accident wards, 11,000 in outpatients' departments and 21,000 by general practitioners.

The most frequent types of fatal home accidents are as follows :-

Falls, Burns and scalds, Coal gas poisoning, Suffocation and Poisoning.

Falls leading to death occur most frequently in the elderly and it would be wise if we all re-surveyed our own homes and considered the hazards which can be eliminated. Council houses should be surveyed similarly as opportunity occurs and advice given to the tenants.



(15) ACCIDENTS IN THE HOME (Cont)

Many scalds are due to pan handles projecting over the sides of stoves and to teapots and cups of tea being placed precariously on edges of tables just within reach of small children.

Too easily turned gas taps on stoves and fires which are badly sited give rise to coal gas poisoning, this one easily preventible factor accounts for 10% of all accidents in the home.

The huge drug bill of the National Health Service bears witness to the vast amount of medicaments which are dispersed throughout the population and so the familiar sugar-coated and possibly brightly coloured pill obtained at frequent intervals is thoughtlessly left lying about where young children are tempted to sample them, quite often with fatal results.

Official visitors to Council houses should be aware of these possibilities and point out the dangers of such practices.

The Council did circulate a special poster warning of this possibility and these were exhibited in doctors' waiting rooms, chemists' shops, etc.

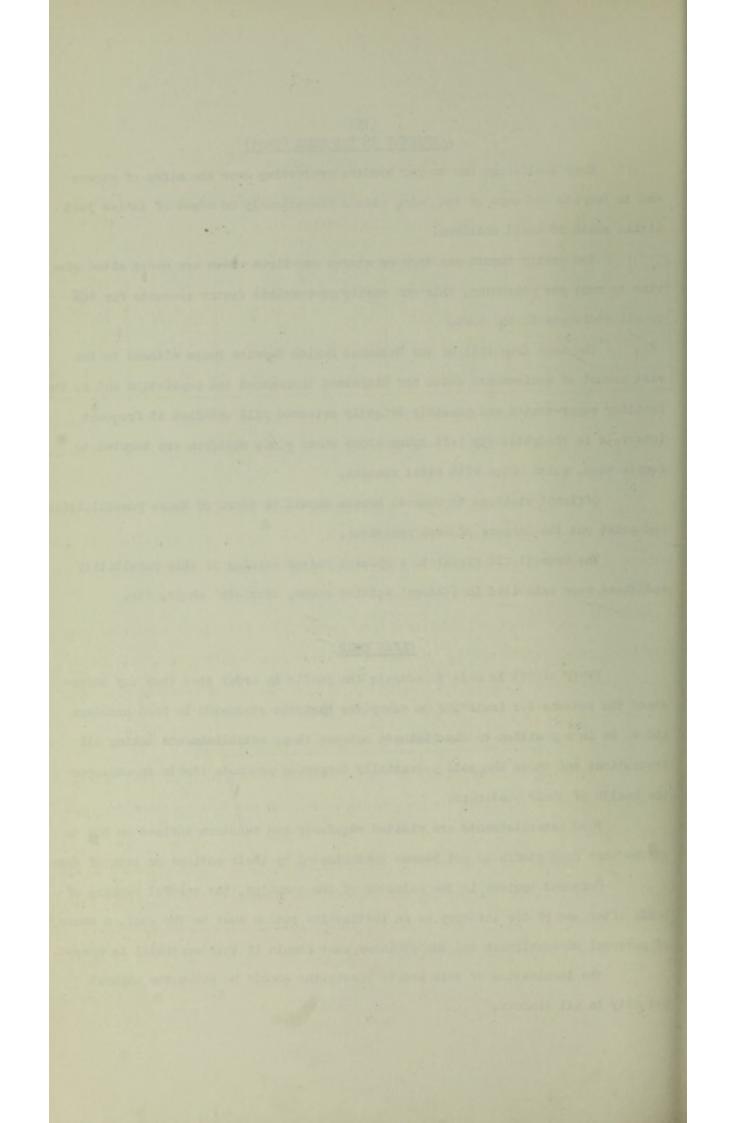
CLEAN FOOD

Every effort is made to educate the public in order that they may understand the reasons for insisting on exemplary hygienic standards in food handlers and so be in a position to discriminate between those establishments taking all precautions and those who sell potentially dangerous products liable to endanger the health of their customers.

Food establishments are visited regularly and handlers advised on how to ensure that food stuffs do not become contaminated by their actions or lack of care.

Personal hygiene is the mainstay of the campaign, the careful washing of hands after use of the lavatory as an instinctive action must be the goal, a sense of personal uncleanliness and unworthiness must remain if this essential is missed.

The inculcation of this simple discipline should be given the highest priority in all schools.



MILK PRODUCTION AND PRODUCERS

The following is a comparative estimate of the percentage of different types of milk produced in the surrounding district :-

	1949	1950	1951	1952	1953	1954
T. T. milk	20%	29.3%	35.3%	41.0%	47.5%	54.7%
Accredited milk	10%	5.4%	8.7%	5.1%	3.7%	-
Undesignated	70/-	65.3%	55.9%	53.8%	48.8%	45.3%

It will be observed that the description "accredited milk" ceased to apply in October and milks of this type are therefore included under the heading "undesignated".

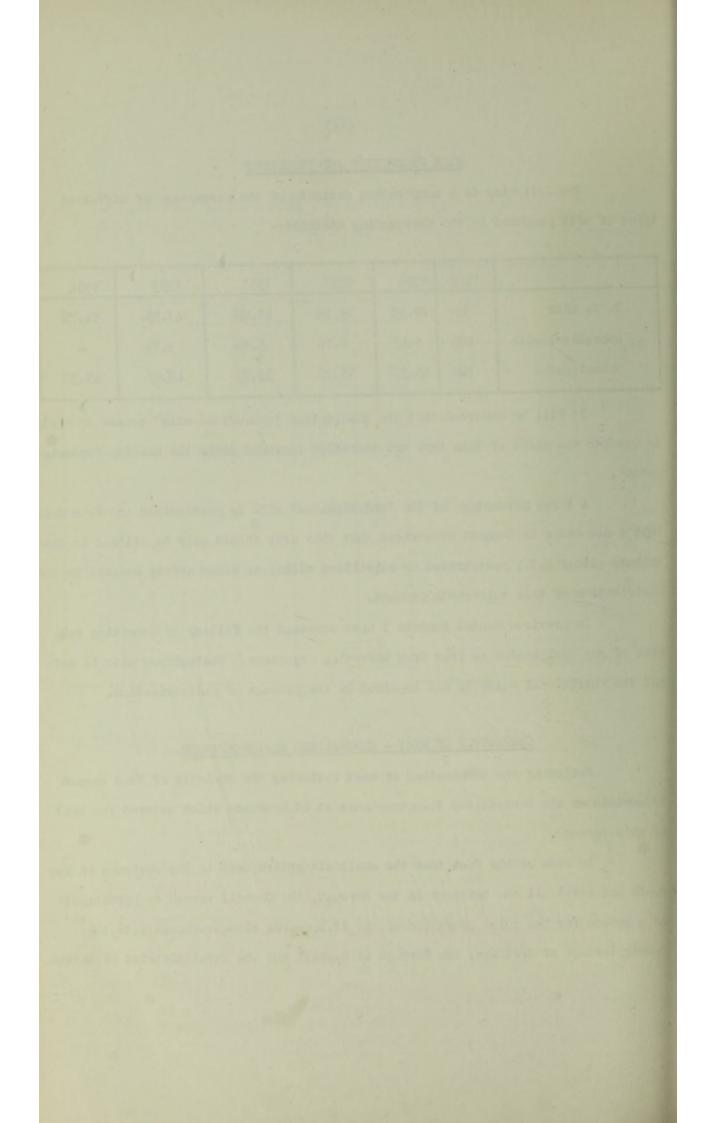
A large percentage of the "undesignated" milk is pasteurised and from March 1955 a new Order in Council prescribed that this area should only be allowed to distribute either T.T., pasteurised or sterilised milks; an added safety measure in the distribution of this vulnerable product.

In previous Annual Reports I have stressed the fallacy of accepting raw milk of any designation as free from infecting organisms. Pasteurised milk is safe and the nutritional value is not impaired by the process of pasteurisation.

INSPECTION OF MEAT - CENTRALISED SLAUGHTERHOUSE.

Following the termination of meat rationing the Ministry of Food ceased to administer the Centralised Slaughterhouse at St.Leonards which catered for most of this Borough.

In view of the fact that the small slaughterhouses in the environs of Rye could not serve all the butchers in the Borough, the Council agreed to participate in a scheme for the joint operation of the St.Leonards slaughterhouse with the County Borough of Hastings, the Borough of Bexhill and the Rural District of Battle.



INDUSTRIES

The numbers employed in the main industries in the Borough are given below. Working conditions are generally good and the employers have been co-operative. There were no outworkers.

		1953			1954	
	Male	Female	Total	Male	Female	Total
Aerated Water Manufacturers	6	4	10	3	4	7
Bakeries	16	20	36	12	25	37
Bodding Makers	3	3	6	4	5	9
Builders	94	2	96	84	2	86
Corn Chandlers	20	1	21	21	1	22
Dyers and Cleaners	7	4	11	6	7	13
Engineering Works	120	15	135	148	14	162
Furniture Removers	13	1	14	11	1	12
Laundries	10	50	60	12	51	63
Pottery Works	4	5	9	3	8	11
Printing Works	12	6	18	10	6	16
Sawmills	9	2	11	20	3	23
Ship Repairing	5	-	5	5	-	5
Wastepaper Sorters	4	1	5	5	1	6

A comparison is made with the previous year :-

It is interesting to note the increase in employment in engineering works, an added outlet for the employment of the youth of the Borough.

Shipping.

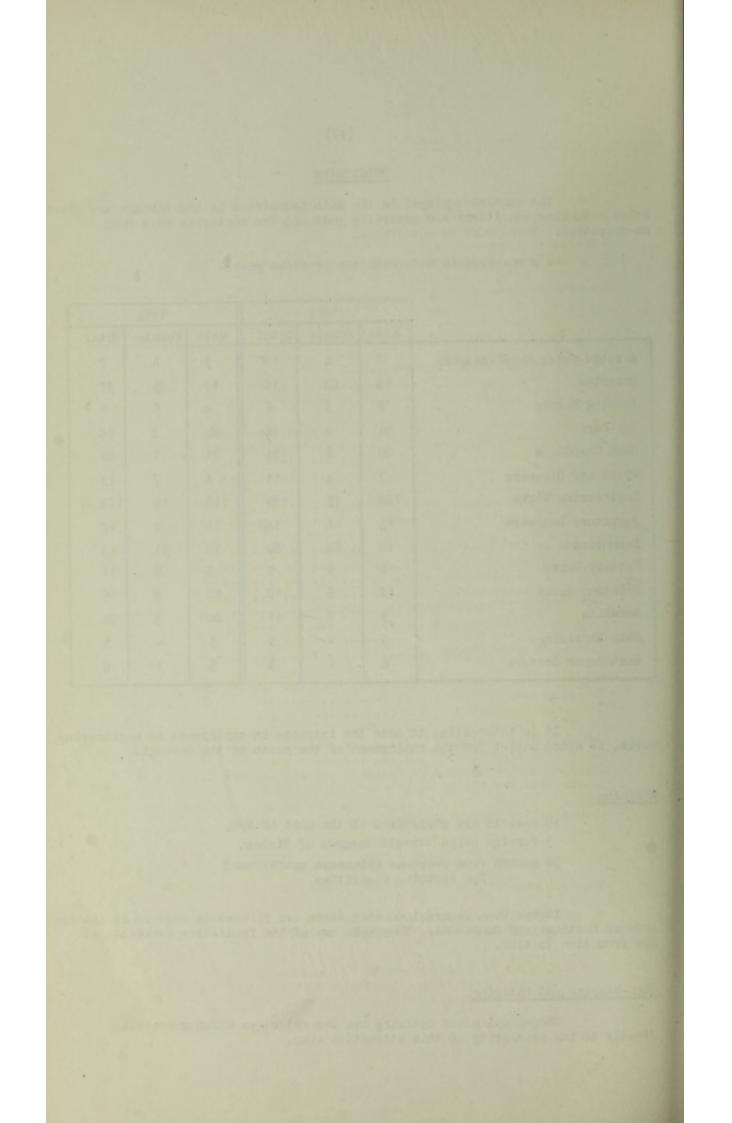
18 vessels are registered at the port of Rye.

- 3 foreign ships brought cargoes of Timber.
- 30 yachts from overseas (pleasure craft) used Rye berthing facilities.

It has been ascertained that there are 95 vessels engaged in fishing between Hastings and Dungeness. They make use of the facilities available at Rye from time to time.

Shop-keeping and Catering.

Shop-keeping and catering are two mainstays which contribute greatly to the prosperity of this attractive Town.



SECTION II

The Chief Sanitary Inspector reports :-

The following table gives a general summary of the visits and work carried out by the Sanitary Inspector during the year 1954:-

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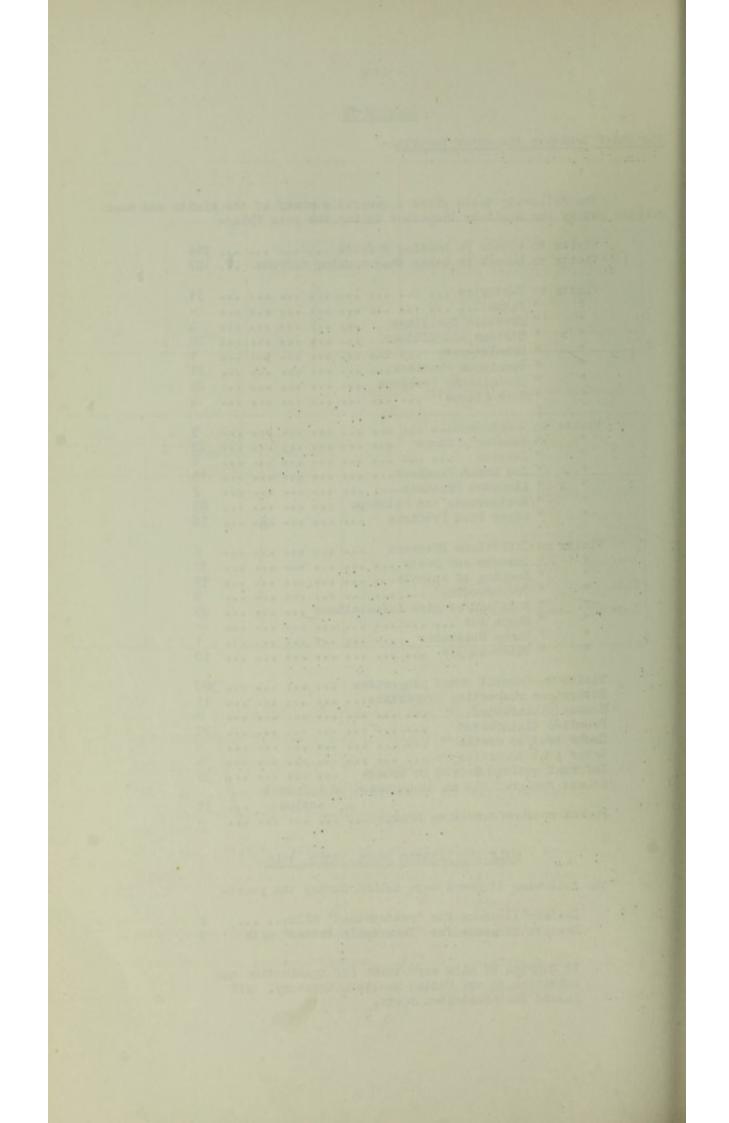
Visits Visits	
Visits "	to Factories
	" Moveshle Ducilians
"	" Streams and ditches
"	" Upholsterers
	"Verminous Premises
	" Unwholesome Premises
n	" Work places 4
	to Bakehouses 9
	" Butcher's Shops
"	"Dairies
	" Ice Cream Premises 10
	" Licensed Premises
	" Restaurants and Kitchens
"	" Other Food Premises
Visits	re Infectious Diseases 6
"	" Insects and pests
"	" Keeping of animals 19
"	" Overcrowding
"	" Rats and/or mice infestations
	" Shops Act
"	" Smoke Nuisances 1
	" Water supply
Visits	to Council among another
Intervi	ews respecting properties
Houses (disinfected 2
Premises	e disinfected
	est to drains
Water to	est to drains
Informal	I notices served re houses
Houses :	rendered fit in consequence of informal
	action 31
- or mark 1	lottes served re houses

MILK AND DAIRIES REGULATIONS, 1949

The following licences were issued during the year :-

Dealers' licences for "pasteurised" milk..... 2 Dealers' licences for "Tuberculin tested" milk 2

12 Samples of milk were taken for examination and submitted to the Public Health Laboratory. All passed the prescribed tests.



FACTORIES ACT, 1937.

1. Inspections.

	Number	Number of		
Premises	on Register	Inspec- tions	Informal Notices	Occupiers Prosecuted
 Factories in which sections Factories in which sections 1,2,3,4 & 6 are to be enforced by Local Authority. Factories not included in in which a finite finit	10	10	-	-
(1) in which Sec.7 is enforced by Local Authority.	37	21	9	-

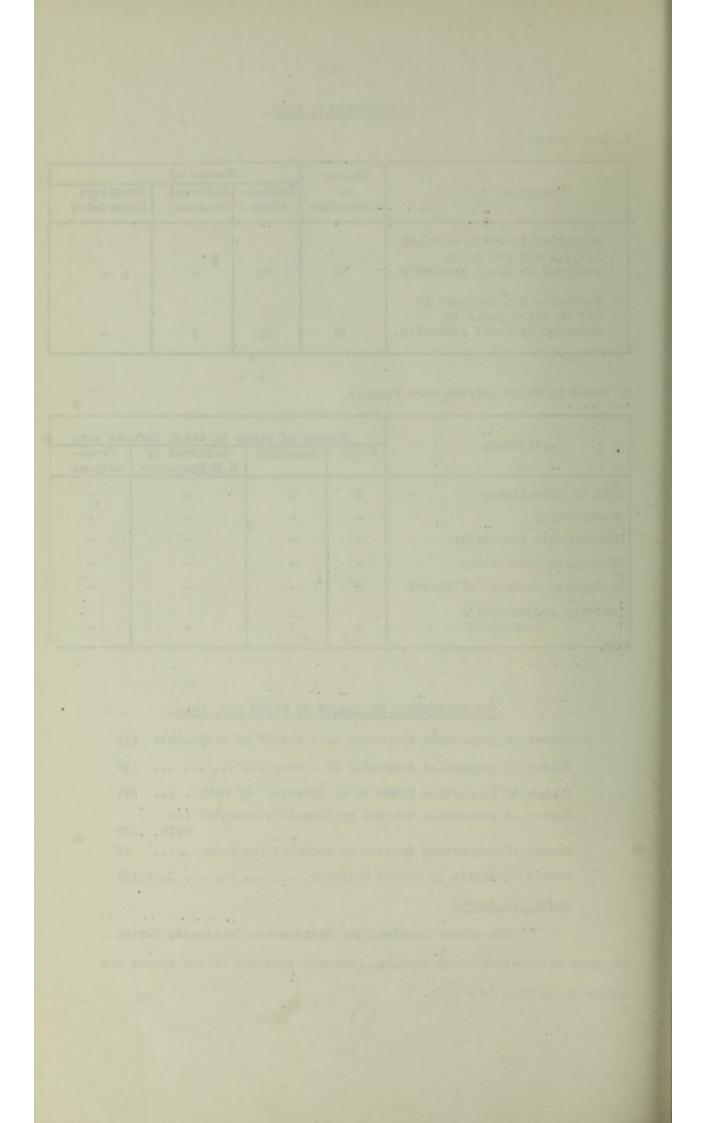
2. Cases in which defects were found :-

Particulars	Number of cases in which defects were				
	Found	Remedied	Referred by H.M.Inspector	Prose-	
Want of Cleanliness	2	2	-	-	
Overcrowding	-	-		-	
Unreasonable temperature	-	-		-	
Inadequate Ventilation	-		-		
Inadequate drainage of floors	-	-	-	- 11 -	
Sanitary Accommodation (offences)	9	7	-	-	

THE PREVENTION OF DAMAGE BY FESTS ACT, 1949.

Number of properties inspected as a result of comp	laints	139
Number of properties inspected by survey		138
Number of properties found to be infested by rats		261
Number of properties treated by Council's operator	for rats	229
Number of properties treated by occupier for rats		32
Number of visits by Rodent Operator	1,	197
Sewer Treatment.		

The sewers received two Maintenance Treatments during the year with satisfactory results. Several sections of the sewers now appear to be free from rats.



FOOD AND DRUGS ACT, 1938.

ICE CREAM.

1.

There are 19 premises registered under this Act for the storage and sale of ice cream. The bulk of ice cream sold from these premises is prepacked. There are no manufacturers of Ice Cream within the Borough.

The hygienic standard of the ice cream purveyors in the Borough is good.

INSPECTION OF MEAT AND OTHER FOODS.

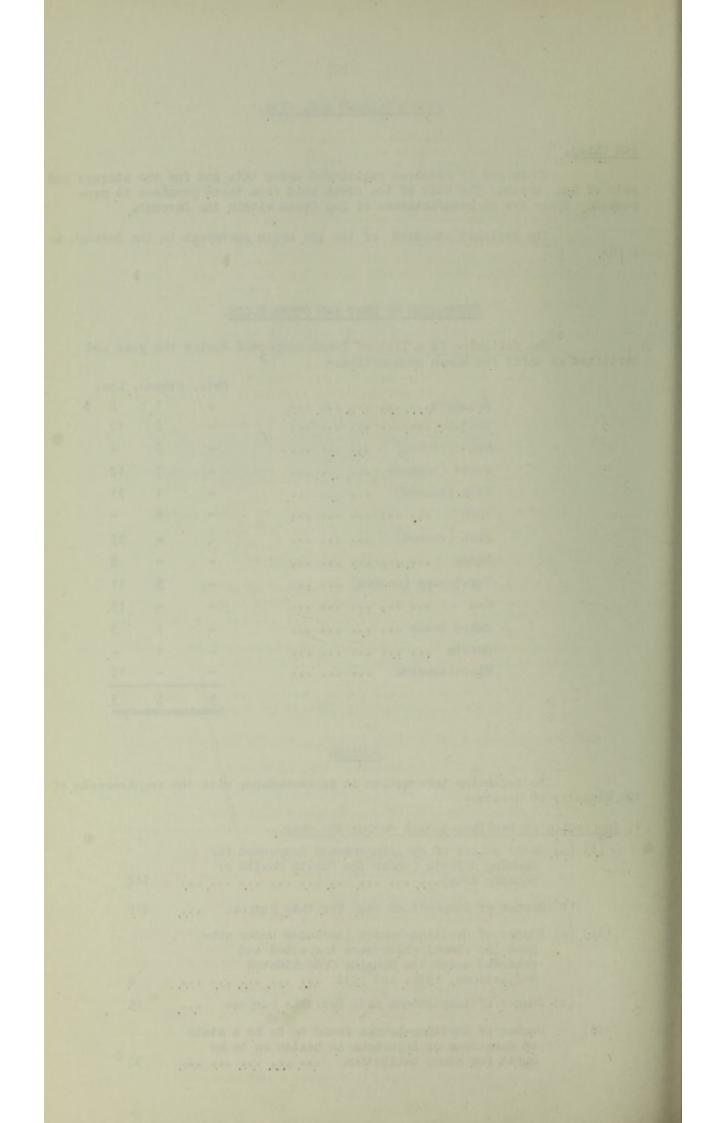
The following is a list of foods inspected during the year and certified as unfit for human consumption:-

	Cwts.	Stones.	Lbs.
Sausages	-	1	6
Meat	-	8	12
Meat (cenned)	-	8	-
Fruit (canned)	-	7	12
Milk (canned)	-	1	11
Fish	-	6	-
Fish (canned)	-	-	13
Bacon	-	-	8
Vegetables (canned)	-	5	11
Jam	-	-	13
Baked beans	-	1	3
Sweets	-	1	-
Miscellaneous	-	-	12
	5	5	3
			-

HOUSING

The following information is in accordance with the requirements of the Ministry of Health:-

Inspe	ctio	n of Dwelling-houses during the year.	
(i)	(a)	Total number of dwelling-houses inspected for housing defects (under the Public Health or Housing Acts)	110
	(b)	Number of inspections made for this purpose	219
(ii)	(a)	Number of dwelling-houses (included under sub- head (i) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925, and 1932	6
	(b)	Number of inspections made for this purpose	15
(111)		Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	30



HOUSING (Continued)

- 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 31

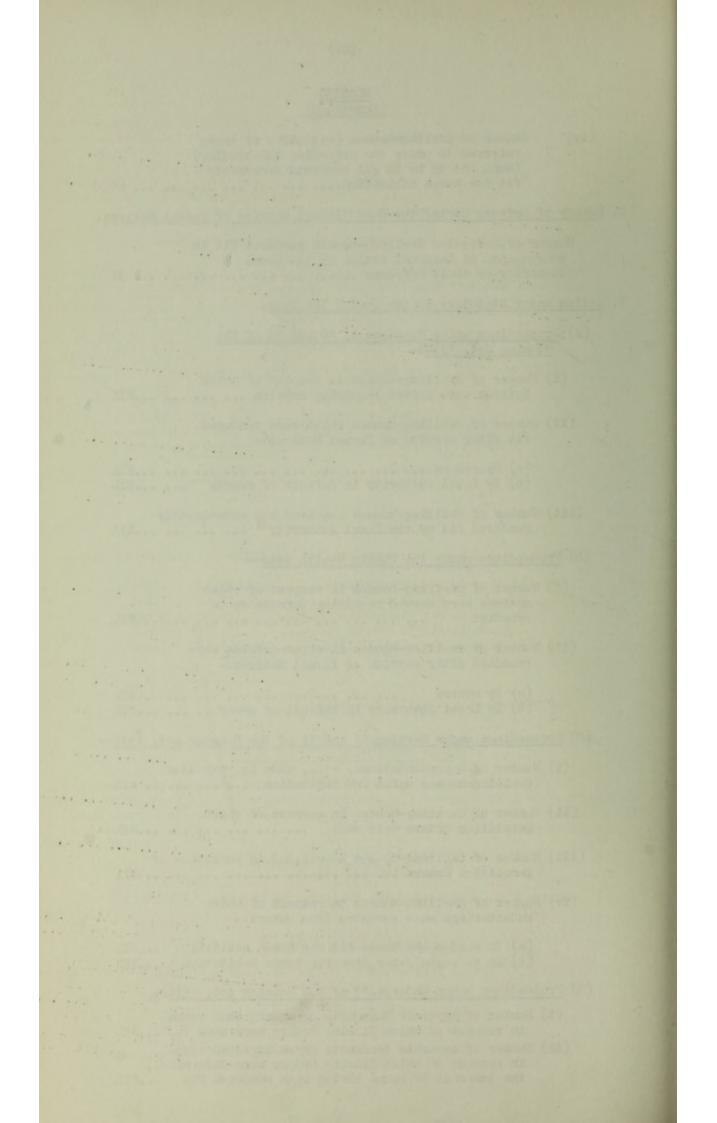
- 3. Action under Statutory Fowers during the Year.
 - (A) <u>Froceedings under Sections 9, 10 and 16 of the</u> <u>Housing Act, 1936</u>:-

 - (ii) Number of dwelling-houses which were rendered fit after service of formal Notices:-

 - (B) Proceedings under the Public Health Acts :-

 - (ii) Number of dwelling-houses in which defects were remedied after service of formal Notices:-
 - (a) By owners
 (b) By Local Authority in default of owner.....NIL
 - (C) Proceedings under Sections 11 and 13 of the Housing Act, 1936 :-
 - - (iv) Number of dwelling-houses in respect of which undertakings were accepted from owners:-
 - (a) To render the house fit for human habitation ...NIL
 (b) As to usage other than for human habitation ...NIL
 - (D) Proceedings under Section 12 of the Housing Act, 1936 :-
 - (i) Number of separate tenements or underground rooms in respect of which Closing Orders were madeNIL
 - (ii) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or romms having been rendered fit ...NIL

(21)



WATER SUFPLY

Routine samples are taken for Bacteriological examination once a month and for chemical analysis once a quarter. Other samples are taken as required.

During 1954, 30 Bacteriological samples (18 chlorinated and 12 unchlorinated) and 4 chemical samples (2 chlorinated and 2 unchlorinated) were taken. All the samples proved to be satisfactory. Samples of water taken after chlorination at all times proved satisfactory.

The consumption of water during the year was as follows :-

This represents a reduction of 956,000 gallons.

The distribution of the water consumed was as follows :-

Borough of Rye. Hastings C.B (Rye Harbour) Battle R.D.C (Playden) Standpipe	64,049,000 gall 3,322,000 gall 3,976,000 gall 113,000 gall	lons lons
	71,460,000	

DRAINAGE AND SEVERAGE

The automatic sewage ejectors lifted the following amounts of sewage :-

Station B. Station C. Station D.	Cadborough Marsh Winchelsea Road New Winchelsea Road King's Avenue	1,025,725 gallons 18,811,500 gallons 1,528,800 gallons 2,373,055 gallons
Station E.	Mason Road	15,093,624 gallons
		38,831,704

An increase of 4,604,637 gallons.

REFUSE COLLECTION AND DISPOSAL

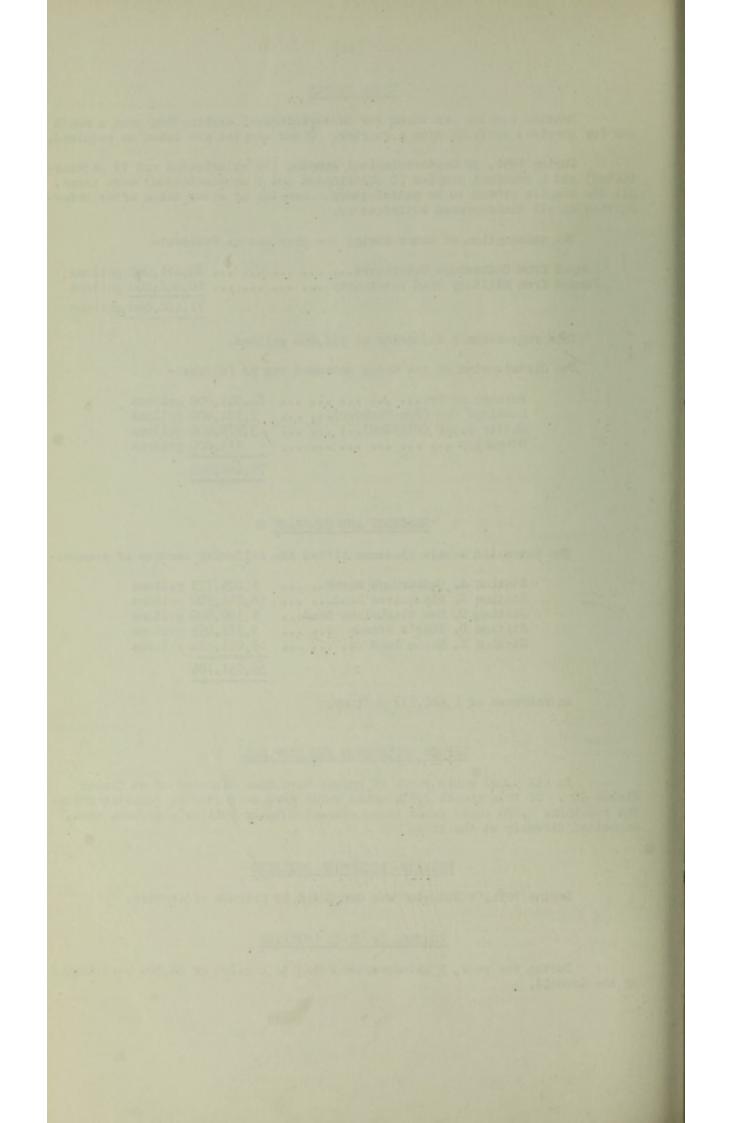
In all 5,802 cubic yards of refuse have been disposed of at Cember Fields Tip. Of this amount 3,594 cubic yards were collected as domestic refuse the remaining 2,208 cubic yards being accounted for by builder's refuse, etc., deposited directly at the tip.

FRIVATE ENTERPRISE BUILDING

During 1954, 1 Bungalow was completed by private enterprise.

CONTROL OF CIVIL BUILDING

During the year, 3 licences amounting to a value of £6,800 were issued by the Council.



(23)

SECTION III

COUNCIL HOUSING

The Town Clerk, who is responsible for lettings of Council Houses, has supplied the following information :-

ACCOMMODATION under the letting control of the Council at the 31st December, 1954:-

Assisted Schemes - Pre-	115
assisted Schemes - Post	flats 227
Expired Leases pre-1911	93
Requisitioned houses an	9
Temporary hutments	24
	ings - 468

Applicants on Council's Housing List at 31st December, 1954:-

ARREARS OF HENT

Year ending			al Rep lecti		Arrears	Percentage	
31st March,	1953	£22,421	15.	6	£20. 13. 6	0.092	
31st March,	1954	£24,202.	6.	8	£41. 13. 8	0.172	
31st March,	1955	£24,452.	6.	3	£28. 4.3	0.115	

Having provided for the relinquishment of requisitioned premises, rehousing of occupants of Nissen Hutments becomes the next urgent task of the Council's Housing Committee and will absorb a full year's building quota based on the present Ministerial allowance.

At the same time, action with regard to unfit houses becomes increasing imperative.

Of the houses in most urgent need of attention, a number are owned by the Corporation and incapable of being rendered fit except at prohibitive cost. Closure must, of course, depend on the Council's building quota permitting the provision of alternative accommodation.

Meanwhile, private owners can hardly be enforced to undertake remedial measures which the Council do not, as yet, fully apply to houses under their own letting control.

