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BOROUGH OF RYE



ANNUAL REPORT

of the

Medical Officer of Health

for the Year 1955

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 of the Borough of Rye.

I have the honour to present the Annual Report of the Medical Officer of Health for the year 1955.

The statistics reveal that the health of the Borough compares favourably with the rest of England and Wales.

This Borough is enjoying the benefit of its vigorous immunisation campaign against diphtheria and I am happy to record that there have not been any cases of this dread disease during the past eleven years.

It is satisfactory to record that twenty-one new Council houses were completed during the year and that further development of the Tilling Green Estate is envisaged.

Mr. R. C. Green (Chief Sanitary Inspector) and Mr. D. T. Rees (Additional Sanitary Inspector) have been assiduous in their duties and make a worthwhile contribution to the well-being of this community.

The Chief Sanitary Inspector 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, he has supplied the information in Section III relative to the letting of Council houses.

I wish to thank you for your encouragement and help during the past year.

I have the honour to be, Mr.Mayor, Miss Warren and Gentlemen,

M. I. SILVERTON

Medical Officer of Health.

The Watch Oak, BATTLE, Sussex.

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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.

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

	1953	1954	1955
Area of Borough in acres	1,021	1,021	1,021
Population (Registrar General's estimate for mid-year)	4,570	4,600	4,570
Rateable value	£46,284	£46,544	£46,617
Number of inhabited houses	1,545	1,549	1,569
Number of rateable premises	1,910	1,911	1,938
Sum represented by a Penny Rate	£179	£180	£183

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D.T. HERB, Cort.R.B.J.I., M.S.I.I.

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SECTION I

BIRTHS AND BIRTH RATES

Live Births	Male	Female	Total
Legitimate Illegitimate	22 	30 <u>30</u>	52
Stillbirths			
Legitimate	1	2	3

	Borough of Rye	England and Wales
Live birth rate per 1,000 home population	11.3	15.0
Corrected birth rate	11.6	-
Stillbirth rate per 1,000 births (live and still)	54.5	23.1
Stillbirth rate per 1,000 home population	0.65	0.35

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	A M	LE	FEM	ALE	
Year	Legitimate	Illegitimate	Legitimate	Illegitimate	Total
1948	40	5	38	1	84
1949	35	2	31	1	69
1950	32	2	42	3	79
1951	39	5	58	0	102
1952	37	0	35	0	72
1953	35	2	37	1	75
1954	34	0	45	2	81
1955	22	0	30	0	52

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Deaths

Year	Male	Female	Total
1948	23	33	56
1949	33	33	66
1950	21	38	59
1951	20	31	51
1952	29	33	62
195 3	37	29	66
1954	29	37	66
1955	30	26	56

Death Rates:

	Borough of Rye	England and Wales
Death rate per 1,000 of resident population	12.25	11.7
Corrected death rate	9.67	-
Deaths of infants under 1 year	2	16,613
Death rate of infants under 1 year per 1,000 live births	38.4	24.9
Maternal mortality rate per 1,000 live and still births	18.1	0.64

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 9.67 which compares with 11.7 for England and Wales.

DEATH RATES FROM SPECIFIC CAUSES PER 1,000 POPULATION

	Porough of Rye	England and Wales
Fuberculosis (all kinds)	Nil	0.15
Influenza	Nil	0.07
Acute poliomyelitis	Nil	0.01
Pneumonia Coronary disease and angina	0.65	0.49
pectoris	1.94	1.59

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JETAILED.	CAUSES	OF	DEATH

Causes of Death	Male	Female	Total
Syphilitic disease	2	1	3
Malignant and lymphatic neoplasms	4	3	7
Leukaemia and aleukemia	0	1	1
Vascular lesions of nervous system	3	5	8
Coronary disease, angina	7	2	9
Hypertension with heart disease	1	1	2
Other heart disease	7	5	12
Other circulatory diseases	2	2	4
Pneumonia	1	2	3
Bronchitis	1	0	1
Fregnancy, Childbirth, abortion	0	1	+
Other defined and ill-defined diseases	1	3.	4
Motor vehicle accidents	1	0	1
	30	26	56

MAIN CAUSES OF LEATH

	1951	1953	1954	1955
 (i) Diseases of the heart and circulatory system *(Coronary disease and angina) 	28(54.9%) 7(13.7%)	26(39.3%) 4 (6.0%)	26(39 . 3%) 7(10 . 6%)	27(48.2%) 9(16.0%)
(ii) Vascular lesions of the nervous system	4 (7.8%)	5 (7.5%)	6 (9.0%)	8(14.25)
<pre>(iii) Malignant neoplasms (cancer) (Cancer of lung and bronchus)</pre>	7(13.7%) NIL	12(18.1%) NIL	13(19.6%) 1 (1.5%)	7(12.5%) 1 (1.7%)
(iv) Respiratory diseases (excluding tuberculosis)	3 (5.8%)	4 (6.0%)	6 (9.0%)	4 (7.1%)

* Coronary disease and angina - Research has not revealed a definite cause but it would appear that excess weight and mental stress, particularly in the professional and business executive classes, are important contributory factors.

DEATHS - 65 YEARS OF AGE AND OVER.

	Bor	ough of Ry	e	London *			
	1953	1954	1955	1953	1954	1955	
Total Deaths	66	66	56	36,636	34,469	37,877	
No.of deaths 65 years and over	47	47	37	25,821	23,563	25,615	
Percentage of total deaths	71.2	71.2	66.0	66.8	68.3	67.6	

England and Wales not available.

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		TOTAL	(OULOULI)							
	Fu	lmona			Non-pulmonary cases			Total cases (all forms)		
	м	F	Total	X	2	Tetal	M	P	Total	
. No.on Register at 1st January, 1955	7	7	14	1	1	2	8	8	16	
2. Cases previously removed and re- notified in 1955	-	-	-	-	-	-	-	-	-	
. Primary notifica- tions received in 1955	3	-	3	-	-	-	3	-	3	
. Cases moved into area as transfers	1	1	2	-	-	-	1	1	2	
Totals	11	8	19	1	1	2	12	9	21	
 *Cases removed from Register in 1955 	2	2	4		-	-	2	2	4	

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 6. No. on Register at 31st December, 1955
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* ANALYSIS OF REMOVALS IN 1955 (See para. 5 in above table)

Stept provide the state		onary ses		Non-pulmonary cases			nses rms)
	M	F	М	F	М	F	Total
Left the Borough	1	1	-		1	1	2
Cured	-	1	-	-	-	1	1
Re-diagnosed - not tuberculosis	1		-		1	-	1
Totals	2	2	-		2	2	4

TABULATED LIST IN AGE GROUPS OF NEW CASES NOTIFIED DURING THE CURRENT YEAR.

	l		es (Prima: ications)	сy
Лge	Pulm	onary F	Non-pu M	lmonary F
0 - 2	-	-	-	-
3 - 5	-	-	-	-
6 - 10	-	-	-	-
11 - 15	-	-	-	-
16 - 25	-	-	-	-
26 - 45	-	-	-	-
46 - 60	2	-	-	-
61 & over	1	-	-	-
Totals	3	-	-	-

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MASS RADIOGRAPHY UNIT

The Mass Radiography Unit visited the Borough of Rye from 1st July to 7th July, 1955, and the analysis of results obtained is appended.

It is satisfactory to note that no cases of active pulmonary tuberculosis were discovered.

However, when one considers the numbers who attended in relation to a population of well over 4,000 one ceases to be complacent having regard to the fact that the Unit operated for several days at times known to be convenient to the majority of workers. Publicity by posters at suitable vantage points and notices in the press giving full details of the arrangements were given well in advance of the opening day.

The procedure does not involve stripping and attendance in working clothes is quite acceptable. Having handed in a simple form with mame, address and name of private doctor all that remains is to proceed in single file, pausing momentarily before a screen, the whole routine being completed in under one minute.

One marvels at the apathy displayed by the adult population when this potent preventive measure against future ill-health is brought to their very doorsteps and so few take advantage.

Other conditions in the chest can be discovered which are amenable to early treatment.

It is well known that there is a predominance of retired, aged persons in this area, many of whom may feel that it is rather pointless to "bother" at their age. They too have an obligation to attend for X-ray because so often it has been found that a grandparent or elderly friend has been the unwitting cause of disseminating tuberculosis within the family group or circle of friends. Reference preceding Table giving ages of new cases.

The treatment of the early symptomless case in any age group is the most important factor in preventing the spread of pulmonary tuberculosis.

	Male	Female	Total
Number of persons X-rayed	377	369	746
Number recalled for Large Films	38	40	78
Number found to have Abnormal Large Films	26	18	44

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MASS RADIOGRAPHY UNIT (Continued)

Analysis of Abnormal Large Films:	Male	Female	Total
(a) Active pulmonary tuberculosis	-	-	-
(b) Inactive pulmonary tuberculosis	11	8	19
(c) Malignant disease	-	-	-
(d) Other diseases of lung or pleura	12	3	15
(e) Cardio-Vascular diseases	3	2	5

INCIDENCE OF INFECTIOUS DISEASES

Comparative Statistics for the years 1950-1955

	1950	1951	1952	1953	1954	1955
Scarlet Fever	13	10	22	2	3	7
Measles	-	116	8	156	-	74
Pneumonia	3	12	12	10	11	12
Erysipelas	2	3	1	2	1	3
Whooping cough	58	54	1	26	5	66
Poliomyelitis	2	2	16	-	-	-
Meningococcal infection	-	-	1	-	-	-

1st January - 31st December.

Poliomyelitis.

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

Measles.

The usual rise occurred in the year under review and it is likely that 1956 will show an appreciably lower incidence. There were no complications of note and no admissions to hospital.

Scarlet fever.

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

Increased incidence but fortunately no deaths from this distressing and potentially disabling condition which is particularly severe in the age

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INCIDENCE OF INFECTIOUS DISEASES (Continued)

Whooping Cough (Continued).

group under one year, and indeed up to 5 years. One hopes that the Whooping cough vaccine which is now offered to babies at 3 - 4 months in combination with protection against diphtheria will lead to the control of this haressing infection; just as surely as diphtheria has been kept at bay by protective immunisation.

Dysentery.

Food Poisoning Outbreaks in 1955

Total :	numb	per of	00	tbre	aks	•••	 ••••	Nil
Number	of	cases,	•				 	Nil
Number	of	deaths	3				 	Nil

Influenza.

In contrast to last year's experience Influenza Virus A was identified as against Virus B. The clinical features generally in this district were however not dissimilar from those experienced in the 1954 attack.

SEASONAL INCIDENCE OF INFECTIOUS DISEASES DURING 1955

	Jan	Feb	Mar	Apl	May	Jun	July	Aug	Şep	Oct	Nov	Dec	TOTALS
Scarlet fever	1	-	2	-	2	1	-	1	-	-	-	-	7
Measles	-	1	-	-	1	-	7	36	24	1	2	2	74
Pneumonia	3	-	1	2	2	-	-	1	-	-	2	1	12
Erysipelas	-	-	-		-	-	-	-	1	-	2	-	3
Whooping cough	6	2	9	6	7	26	7	3	-	-	-	-	66
TOTALS	10	3	12	8	12	27	14	41	25	1	6	3	162

CASES OF INFECTIOUS DISEASES IN AGE GROUPS

	Scarlet fever	kieasles	Pneu- monia	Erysi- pelas	Whooping Cough	TOTALS
Under 1 year	-	1	-	-	3	4
1 - 2 years	-	18	-	-	5	23
3 - 4 years	-	16	-	-	24	40
5 - 9 years	6	37	2	-	31	76
10 - 14 years	1	1	2	-	2	6
15 - 24 years	-	-	-	-	-	-
25 - 44 years	-	-	3	-	1	4
45 - 64 years	-	1	2	3	-	6
65 and over	-	-	3	-	-	3
TOTALS	7	74	12	3	66	162

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FERIODS OF EXCLUSION IN CERTAIN INFECTIOUS DISEASES

MINISTRY OF EDUCATION RECOMMENDATIONS

	and the second second			
		Interval between	Period of e	exclusion
	Usual Incubation period (days)	onset and appearance of rash (days)	Patients	Contacts, i.e. the other members of the family or household living together as a family, that is, in one tenement.
SCARLET FEVER AND STREPTOCOC CAL SORE THROAT	1-7	1-2	Exclude from school for 3 weeks. Not allowed back if discharge from the nose or ear, sore throat or "septic spots" be present.	7 days after removal of patient to hos- pital or the begin- ning of his isola- tion 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 hospital or the beginning of his isolation at home. If there be any suspicious signs the child should be excluded further until pronounced by a medical practit- ioner to be free from infection.
TASLES	7-14	3-4	10 days after the appearance of the rash if the child appears well.	Infants under 5 years who have not had the disease should be ex- cluded for 14 days from the date of appearance of the rash in the last case in the house. Other contacts can attend school. Any contacts suffering from a cough, cold, chill or red eyes should be immediately ex- cluded.
ERMAN MEASLES	5-21	0-2	7 days from the appearance of the rash.	None.
HOOPING OOUGH	6-18	-	28 days from the beginning of the characteristic cough.	Infants under 7 years who have not had the disease should be excluded for 21 days from the date of onset of the disease in the last case in the house.
UMPS	12-28	-	7 days from the subsidence of the swelling.	None.
HICKEN POX	11-21	-	14 days from the date of the appearance of the rash.	None.

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During 1955 the following children received injections:

				Total
1	4	12	1	18
43	19	1	-	63
-	12	56	60	128
-	4	10	3	17
	43 	43 19 - 12 - 4	$\begin{array}{rrrrrrrrrrrrrrrrrrrrrrrrrrrrrrrrrrrr$	43 19 1 - - 12 56 60

The following children have received combined protection against diphtheria and whooping cough (these are included in the numbers given above):

Primary Immunisation	Under <u>1 yr</u> .	1 - 4	5-9	10 - 14	Total
Treated at clinics	1	4	-	-	5
By Private Doctors	43	19	1	-	5 63
Re-inforcing Injections.					
Treated at clinics	-	-	-	-	-
By Private Doctors	-	4	7	2	13
Totala -	- Under 5 5-14 (inc) Re-inforcin		1		

Total number of children under 15 years of age, resident in the Borough, who had been immunise by 31st December, 1955:-

> Under 5 years ... 245 5 - 14 (inc) 681 926

Comparative figures for the past three years :-

1953	1954	1955
257	252	245
369	360	346
69.64%	70.00%	70.80%
642	649	681
672	680	698
95.53%	95.44%	97.56%
	257 369 69.64% 642 672	257 252 369 360 69.64% 70.00% 642 649 672 680

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

(11)

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Continued)

Comparative figures for the past three years (Continued) :-

It is generally accepted that immunisations given more than five years previously have largely lost their effect. The state of immunity of a child population at any given time is therefore more realistically given as the numbers immunised (primary or booster) within the previous five years. This figure is known as the Immunity Index.

	Under 1 yr.	1 - 4	5 - 14	Total
Immunity Index expressed as a percentage of the child population	36.36%	73.145	75.35%	73.85%

Diphtheria Immunisation is pursued with the utmost vigour and it is only by never "letting up" on an opportunity to point the necessity for continued protection from this erstwhile killing and disabling disease that these figures are achieved.

In Diphtheria Immunisation we have a proven life saving measure without reaction, yet parents dare to ignore the possible consequences of inaction.

The report of the Chief Medical Officer brings out in sharp contrast public reaction and clamour for a safe immunisation procedure against poliomyelitis; in 1954 there were 1,300 odd cases of poliomyelitis associated with paralysis and 134 deaths in a total population of 44,000,000, compared with 18,500 cases of diphtheria and 722 deaths as recently as 1945.

One can only hope that the safe vaccine now perfected against poliomyelitis will give as solid an immunity.

VACCINATION AGAINST SMALLPOX

Some parents are failing in their duty to insist on this protective measure for their babies.

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 sefety measure during the early months of their children's lives, and adequate facilities in each parish are made available for this purpose.

The following persons were vaccinated in 1955 :-

	Under				15 or	
	1 yr.	1	2 - 4	5 - 14	over	Total
Primary vaccination	44	-	3	2	1	50
Re-vaccination	-	-	2	6	20	28

Of the above numbers, 2 persons were vaccinated and 18 received re-vaccination before going abroad.

Comparison with previous years :-

	1953	1954	1955
Total primary vaccinations	63	54	50
Re-vaccinations	20	24	28

(12)



(13)

VACCINATION AGAINST SMALLPOX

Comparison with previous years (Continued) :-

Co

Number of babies born in 1955 52 Number of babies under 1 year vaccinated in 1955 ... 44 Percentage vaccinated in 1955 ... 84.61%

	1953	<u>1954</u>	<u>1955</u>
mparative percentages	 70.66%	55.55%	84.61%

GENERAL PROVISION OF HEALTH SERVICES FOR THE BOROUGH

(A) FROVIDED BY THE EAST SUSSEX COUNTY COUNCIL UNDER THE AEGIS OF THE COUNTY MEDICAL OFFICER OF HEALTH.

* (i) Ambulance Service	<u>1953</u>	<u>1954</u>	<u>1955</u>
Cases	805	815	805
Mileage	16,959	17,662	18,947

The increased mileage and the strain imposed on the one full-time driver and the few volunteers available necessitated the employment of a second full-time driver/attendant.

The Volunteers make a fine contribution to this first class service but unfortunately they are not always able to fill in during off duty time and the two full-time drivers are working many more hours than can be expected. The appointment of a third full-time driver is under consideration.

- (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 by the joint organisation of the British Red Cross Society and the St.John Ambulance Brigade. The Area Transport Office for this district is at 8, Endwell Road, Bexhill-on-Sea (Telephone: Bexhill 152).

/(vii) Infant Welfare

GENERAL PROVISION OF HEALTH SERVICES FOR THE BOROUGH (Continued)

(vii) Infant Welfare Centres.

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 11, 12 and 13.

- (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 Hospital, Robertsbridge, Battle Hospital, Battle, 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.



GENERAL PROVISION OF HEALTH SERVICES FOR THE BOROUGH (Continued)

(C) FUELIC 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.

Gemma globulin, prepared from pooled plasma from normal healthy adults by the Lister Institute for the Ministry of Health, is distributed to doctors in England and Wales through laboratories of the Public Health Laboratory Service. Requests for supplies should be made to the director of the mearest constituent or associated laboratory of the Service. So far as supplies allow, it is issued for the protection of susceptible contacts of measles and rubella as shown below:-

Disease		Available for	Usual dosage Prevention
Measles	(i)	Control of hospital and institutional outbreaks.	3 years and over - 750 mg.
	(ii)	Persons suffering from intercurrent illness or living in a poor environ- ment for whom an attack of measles would be dangerous.	1 - 2 years - 500 mg. Under 1 year - 250 mg. Attenuation
	(111)	Children under 3 years of age.	250 mg.
Rubella		Women exposed to infec- tion in the first four months of pregnancy.	750 mg.

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

- (D) NATIONAL ASSISTANCE ACT, 1948.
 - (i) Section 47: Removal to Suitable Premises of Fersons in Need of Care and Attention.

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

(ii) Section 50: Burial or Cremation of the Dead.

No action was necessary under this Section.

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(C) TWEED TRUE LANDELS MADE OF THE CO.

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GENERAL FROVISION OF HEALTH SERVICES FOR THE BOROUGH (Continued)

(E) HOME PHYSIOTHERAPY SERVICE.

This service is generally much appreciated.

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

Lisison has been maintained.

ACCIDENTS IN THE HOME

Fatal home accidents (all ages) for England and Wales were as follows :-

1953	1954	<u>1955</u>
5,895	6,617	(not available)

890 children under 5 years of age died in 1954 from accidents in the home.

594 died from suffocation, mainly in babies under one year.

132 died from burns and scalds. A recent survey of a sample of 500 houses with young children revealed that only 54% had fireguards, thus the ignition of a nightdress is quite a common cause of fatality.

39 died from poisoning, the familiar sugar-coated, brightly coloured pill, so easily obtained since the advent of the National Health Service, and so thoughtlessly left lying about in places easily accessible to young children, is to be deplored.

35 died from falls, many of which could have been prevented by parents themselves reviewing the hazards for young children within their own homes and immediate environment.

90 died from miscellaneous causes too long and varied to recapitulate here but mostly preventable with a little thought and imagination by parents and others.

The Housing Committee have much to exercise them in the course of their duties but I feel that this is a facet of Council tenant education which they might consider worthwhile implementing.

CLEAN FOOD

The Sanitary Inspectors continue to make the personal approach to food handlers in whatever sphere of the catering industry they may be employed.

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(Continued)

The following salient points are discussed with special regard to individual difficulties:-

- (a) <u>Storage of vulnerable foodstuffs</u> with protection from insects, rodents, domestic animals, dust, etc.
- (b) <u>Exposure for sale</u> with safeguards for keeping quality; from contamination due to insects and droplet infection conveyed by coughs, sneezes, etc.
- (c) <u>Handling of the product</u> stressing personal hygiene. The prime factors of importance in this connection being meticulous hand-washing after use of the lavatory, covering of sores on fingers with impermeable plasters, and the "no touch" technique wherever possible.

Customers are in a strong position to enforce good hygiene if they would note transgressions and cease to patronise ill-kept establishments with untutored staff.

This presupposes that the customer is sufficiently well informed to know when conditions are in this parlous state. This can only come to pass by vigorous health education from the earliest age, including individual training and teaching in school, and in my view, such knowledge is as important for future welfare as the three "Rs" in the school curriculum.

MILK PRODUCTION

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

Level of the states	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 milk	70%	65.3%	55.9%	53.8%	48.8%	45.3%
Cong	l barable fig	ures for	1955 are	unobtaina	ble.	-



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The following collers polars and discussed with special regard to

- a) <u>Strange of submarting to intertants</u> with protection from inter
- (b) <u>Brotheirs for anis</u> with nefequence for beauting quality; from the souther the south and the sector and traplet infection convergence for any sector.
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MILK PRODUCTION (continued)

The percentages of designated and non-designated farms in the surrounding district are as follows:-

63.27 (286 farms) produce T.T. milk, and

36.73 (166 farms) produce non-designated milk.

From March 1955 an Order in Council prescribed that this area would be allowed to retail only raw T.T., pasteurised or sterilised milks.

This Order is welcomed as an added safety measure in the distribution of so vulnerable a product.

The gradual but continuous increase of both heat treated milk and T.T. herds over the past 34 years have contributed greatly to the virtual elimination of bovine tuberculosis as a cause of death.

This is strikingly illustrated by the numbers of deaths from abdominal tuberculosis in children under 5 years recorded as 1,107 in 1921 and one in 1954, the major proportion of these deaths in the past being most likely to be due to bovine tuberculosis.

The great strides made in the production of T.T. milk in this District alone is exemplified in the table and it is known that a large proportion of the undesignated milk was pasteurised although actual figures are not available.

I have repeatedly stressed in my Annual Reports that T.T. raw milk is not wholly safe and may be a vehicle for transmitting diseases other than Tuberculosis. Pasteurised milk is safe and the nutritional value is not impaired by the process of pasteurisation.

(18)



INDUSTRIES

		1954		1955		
	Male	Female	Total	Male	Female	Total
Aerated Water Manufacturers	3	4	7	4	4	8
Bakeries	12	25	37	16	22	38
Bedding Makers	4	5	9	4	3	7
Builders	84	2	86	82	2	84
Corn Chandlers	21	1	22	23	1	24
Engineering Works	148	14	162	142	13	155
Furniture Removers	11.	1	12	12	1	13
Laundries	12	51	63	13	56	69
Pottery Works	3	8	11	6	8	14
Printing Works	10	6	16	10	6	16
Sawmills	20	3	23	7	2	9
Ship Repairing	5	-	5	5	-	5
Wastepaper Sorters	5	1	6	4	1	5

The numbers employed within the Borough are not significantly different from last year.

Shop-keeping and Catering.

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

Shipping.

- 18 vessels are registered at the port of Rye.
 - 2 foreign ships brought cargoes of timber.
- 20 yachts from overseas (pleasure craft) used Rye berthing facilities.

It has been ascertained that there are 96 vessels engaged in fishing between Hastings and Dungeness. They make use of the facilities available at Rye from time to time.

SECTION II

The Chief Sanitary Inspector reports :-

The following table gives a general summary of the visits and work carried out by the Sanitary Inspectorsduring the year 1955:-

Visits to Factories27""Farms10""Moveable Dwellings5""Streams and ditches35""Upholsterers-"Verminous Premises15""Unwholesome Premises49""Vork Places12
"Butcher's Shops 27 "Dairies 8 "Ice Cream Premises
Visits Infectious Diseases 12 " "Insects and Pests 41 " "Keeping of Animals 12 " "Overcrowding 13 " "Rats and/or mice infestatios 20 " "Shops Act - " Smoke Nuisances 6 " Water Supply 22
Visits to Council owned properties

ICE CREAM

There are 17 premises registered under Section 16 of the Food and Drugs Act, 1955 for the sale of ice cream. All ice cream retailed from these premises is manufactured by firms with a nation wide trade and sold pre-packed.

There are no manufacturers of ice cream within the Borough.

FACTORIES ACT, 1937

1. Inspections.

	Number	Number of				
Premises	on Register	Inspec- tions	Informal Notices	Occupiers Prosecuted		
1. Factories in which sections 1,2,3,4 & 6 are to be enforced by Local Authority	9	14	2	-		
2. Factories not included in (1) in which Sec.7 is enforced by Local Authority	40	30	12	-		

2. Cases in which defects were found :-

	Numbe	er of cases	in which defec	ts were
Particulars	Found	Remedied	Referred by H.M.Inspector	Prose- cutions
Want of Cleanliness	2	2	-	-
Overcrowding	-	-	-	-
Unreasonable temperature	-	-	-	-
Inadequate ventilation	-	-	-	-
Inadequate drainage of floors	-	-		-
Sanitary Accommodation (offences)	10	10	2	

THE PREVENTION OF DAMAGE BY FESTS ACT, 1949

Number	of	properties inspected as a result of complaints	130
Number	of	properties inspected by survey	124
Number	of	properties found to be infested by rats	149
Number	of	properties treated by Council's operator for rats and mice	168
Number	of	properties treated by occupier for rats	• 9
Number	of	visits by Rodent Operator	710

The part-time rodent operator employed has been actively engaged in the eradication of rats and mice and I am pleased to note that during the year under review the rat population has shown a marked decrease.

Two treatments of the sewers were carried out during the year and again several sections of the sewerage system were found to be free of rats.



EXAMINATION 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.
Fresh meat	3	-	12
Offal	-	3	4
Fish (fresh)	-	6	7
Sausages	1	-	8
Ba con	-	4	1
Ham	-	2	3
Canned Fruit	-	8	4
Canned Meat	-	12	5
Canned Milk	-	3	9
Canned Vegetables	-	7	12
Canned Fish	-	2	1
Cereals	-	3	10
Miscellaneous	-	2	12
	11	2	4

FOOD PREMISES.

Routine visits to all types of food premises revealed that many structural improvements must be carried out in order to obtain a satisfactory standard. It is regretted that many food shops have no means of constant hot water for hand washing. However, in view of the new food hygiene legislation, the year 1956 should be regarded as one of progress in all types of food premises.

MILK & DAIRIES REGULATIONS.

The following licences were issued during the year:-

Dealers Licences for "Pasteurised" milk ... 2 Dealers Licences for "Tuberculin Tested" milk... 2

10 samples were taken for laboratory examination. All passed the prescribed tests.

The Borough of Rye is included in the Milk (Special Designations) (Specified Areas) Order, 1955, which is now in force. This Order requires the compulsory use of special designations for all retail sales of milk within the Borough.



HOUSING

of	T the Mir	he following information is in accordance with the requirement nistry of Health:-
1.	Inspec	tion of Dwelling-houses during the year.
	(i)	 (a) Total number of dwelling-houses inspected for housing defects (under the Public Health or Housing Acts)
		(b) Number of inspections made for this purpose
	(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
		(b) Number of inspections made for this purpose
	(iii)	Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation
	(iv)	Number of dwelling-houses (exclusive of those referred to under the pre- ceding sub-heading) found not to be in all respects reasonably fit for human habitation
2.	Remedy	of Defects during the Year without Service of Formal Notices.
	in	er of defective dwelling-houses rendered fit consequence of informal action by the Local hority or their officers
3.	Action	under Statutory Powers during the Year.
		Proceedings under Sections 9, 10 & 16 of the lousing Act, 1936:-
	(1	i) Number of dwelling-houses in respect of which Notices were served requiring repairs NIL
	(1:	i) Number of dwelling-houses which were rendered fit after service of formal Notices:-
		 (a) By owners
	(111	i) Number of dwelling-houses acquired and subsequently rendered fit by the Local Authority
	(B)]	Proceedings under the Public Health Acts :-
	(;	i) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied

(ii) Number of dwelling-houses in which defects were remedied after service of formal Notices:-



(Continued)

 (a) By owners
(C) <u>Proceedings under Section 11 and 13 of the</u> <u>Housing Act, 1936</u> :-
 (i) Number of Representations, etc., made in respect of dwelling-houses unfit for habitation
(ii) Number of dwelling-houses in respect of which Demolition Orders were made NIL
(iii) Number of dwelling houses demolished in pursuance of Demolition Orders NIL
(iv) Number of dwelling houses in respect of which undertakings were accepted from owners:-
(a) To render the house fit for human habitation
(b) As to usage other than for human habitation 2
(D) Proceedings under Section 12 of the Housing Act, 1936 :-
(i) Number of separate tenements or under-

- ground rooms in respect of which Closing Orders were made NIL
- (ii) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or rooms having been rendered fit NIL

This most difficult problem takes up much time of the Inspector. Owing to the low rent yield from this type of property and the high cost of repairs, it is not possible for the owners of houses which are controlled by the Rents Restrictions Acts to keep these houses other than wind and weather-proof. It therefore becomes unreasonable for a Sanitary Inspector to ask for other than the most urgent type of maintenance work as long as this state of affairs continues; properties will deteriorate until the only course of action left is demolition. Marked reluctance of owners is shown to bring their properties up to such a state of repair and decoration as would warrant increased rents under the Housing Act, 1954.

During the year the two undermentioned houses were condemned as unfit for human habitation and the occupants rehoused by the Council:-

- (a) No.6, Ailsworth Lanc. The Council accepted in accordance with Section 11 of the Housing Act, 1936, an undertaking from the owner not to relet for human habitation.
- (b) No.81, Winchelsea Road. The Council served a Closing Order under Section 10 of the Local Government (Miscellaneous Provisions) Act, 1954.

(24)



WATER SUPPLY

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

During 1955, 33 Bacteriological samples (20 chlorinated and 13 unchlorinated) and 5 chemical samples (3 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 :-

Pumped from Cadborough Waterworks... 63,834,000 gallons Pumped from Military Road Waterworks ... <u>14,035,200</u> gallons 77,869,200

This represents an increase of 6,409,200 gallons.

The distribution of the water consumed was as follows :-

Borough of Rye		69,567,500 gallons
Hastings C.B (Rye Harbour)		4,213,000 gallons
Battle R.D.C (Playden)		3,950,000 gallons
Standpipe	•••	<u>138,700</u> gallons
		77,869,200

DRAINAGE AND SEWERAGE

The automatic sewage ejectors lifted the following amounts of sewage:

			Cadborough Mars		853,650	gallons
			Winchelsea Road		20,293,350	gallons
S	tation	C.	New Winchelsea	Road	3,608,075	gallons
S	tation	D.	King's Avenue		2,734,165	gallons
S	tation	E.	Mason Road		12,673,206	gallons
					40,162,446	

An increase of 1,330,742 gallons.

REFUSE COLLECTION AND DISPOSAL.

In all 5,535 cubic yards of refuse have been disposed of at Camber Fields Tip. Of this amount 3,994 cubic yards were collected as domestic refuse, the remaining 1,541 cubic yards being accounted for by builders' refuse, etc., deposited directly at the tip.

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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, 1955:-

Assisted Schemes - Pre-war houses ... 115 Assisted Schemes - Post-war houses & flats ... 248 Expired Leases pre-1914 houses... 89 Requisitioned houses and flats... 1 Temporary hutments... 24 Total dwellings - 477

Applicants on Council's Housing List at 31st December, 1955 :-

Operative ... 63 Deferred ... 72 135

ARREARS OF RENT

Year ending	Total Rent Collectible	Arrears	Percentage
31st March, 1954	£24,202. 6. 8	£41. 13. 8	0.172
31st March, 1955	\$24,452. 6. 3	£28. 4.3	0.115
31st March, 1956	\$25,164.14. 4	£25. 13. 0	0.102

A fair amount of material progress was made during the year.

Relinquishment of all requisitioned premises was completed shortly after the end of the year.

Unfit houses owned by the Corporation received special attention and nine dwellings were closed. Site development now in active preparation, should lead to further closures and also the complete vacating of Nissen hutments.

The erection of twenty-one dwellings was completed during the year and, by careful attention to transfers, resulted in thirty-five family units securing improved accommodation.



