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Borough of Slough



ANNUAL REPORT

of the

Medical Officer of Health

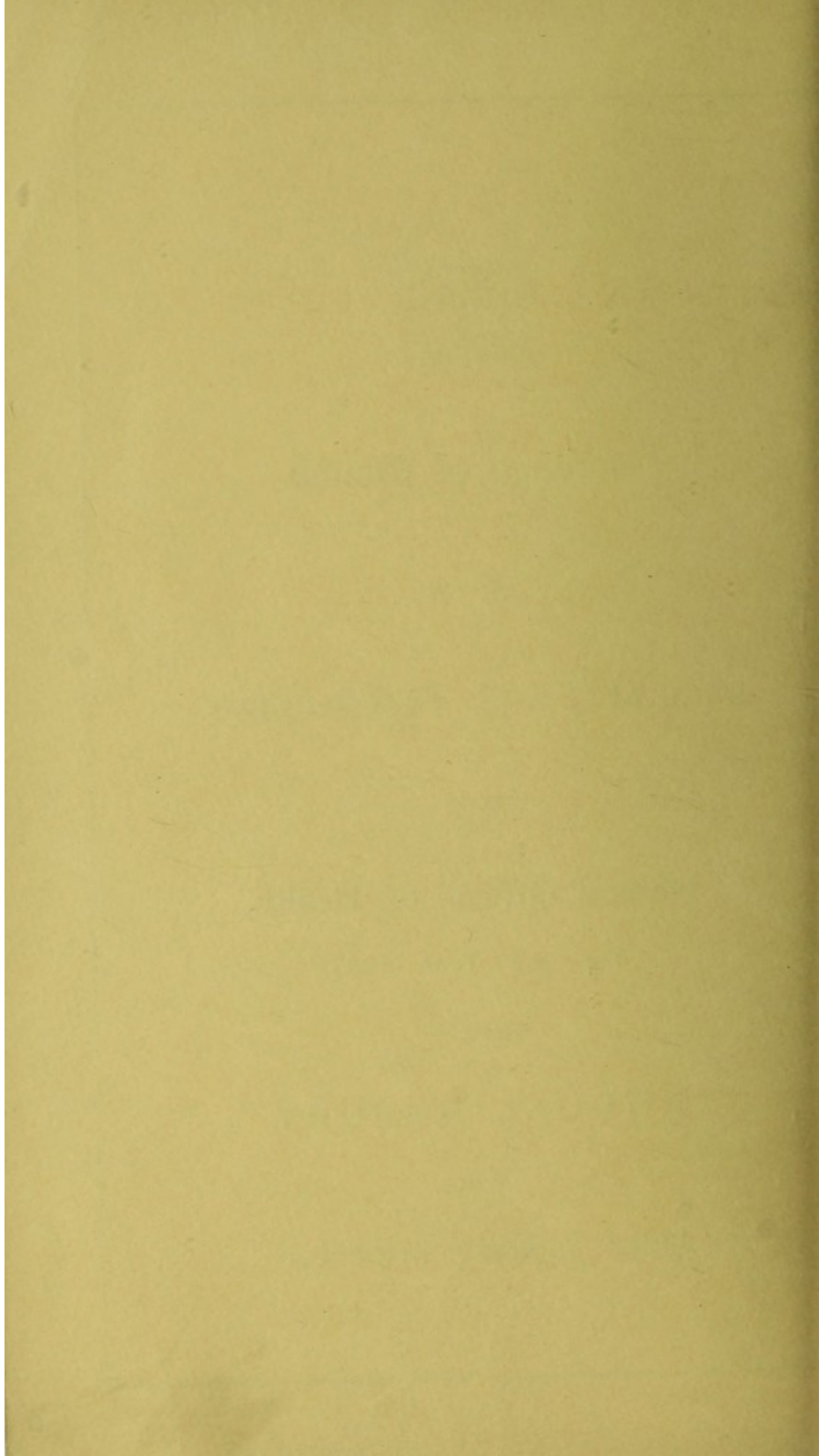
For the Year 1953

including the

ANNUAL REPORT

of the

Chief Sanitary Inspector



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25/11/52

BOROUGH OF SLOUGH

HEALTH AND SANITATION COMMITTEE

January to May, 1953.

Chairman :

COUNCILLOR F. S. G. ROOM, J.P., C.C.

Vice-Chairman :

COUNCILLOR F. WARWICK.

ALDERMAN P. LIGHTFOOT, J.P. (Deputy Mayor) (ex-officio).	COUNCILLOR W. H. JENNINGS, J.P. Mayor) (ex-officio).
ALDERMAN MRS. M. J. MORGAN.	COUNCILLOR MRS. D. M. MITCHELL.
COUNCILLOR F. C. BOWYER.	COUNCILLOR H. OLDING.
COUNCILLOR L. R. CHAMBERS.	COUNCILLOR J. G. RICHARDS.
COUNCILLOR E. L. CLARKE.	COUNCILLOR A. SIMPSON.
COUNCILLOR MRS. J. M. B. GIBSON.	COUNCILLOR W. S. STOVES.

May to December, 1953.

Chairman :

COUNCILLOR F. S. G. ROOM, J.P., C.C.

Vice-Chairman :

COUNCILLOR W. S. STOVES (resigned 10.9.53).
COUNCILLOR A. SIMPSON (from 13.10.53).

ALDERMAN REG. C. ABBOTT, J.P. (Mayor) (ex-officio).	COUNCILLOR MRS. J. M. B. GIBSON.
ALDERMAN J. MANNING Deputy Mayor) (ex-officio).	COUNCILLOR MRS. D. M. MITCHELL
ALDERMAN MRS. M. J. MORGAN.	COUNCILLOR A. SIMPSON (Appointed Vice-Chairman from 13.10.53).
ALDERMAN A. E. WARD, C.A.	COUNCILLOR J. H. SMITH.
COUNCILLOR F. C. BOWYER.	COUNCILLOR F. WARWICK.
COUNCILLOR MRS. N. B. DENMAN.	COUNCILLOR R. T. CRAWSHAW (from 10.11.53).

Public Health Department Staff

Medical Officer of Health :

MACDONALD A. CHARRETT, M.R.C.S., L.R.C.P., D.P.H.

Chief Sanitary Inspector :

LESLIE A. STROUD, D.P.A., F.R.SAN.I., F.S.I.A. (1. 3. 4. 5).

Deputy Chief Sanitary Inspector :

J. SAGAR, D.P.A., M.S.I.A. (2. 3. 4. 5).

District Sanitary Inspectors :

L. HAGUE, M.S.I.A. (2. 3).

I. D. PRESTON, A.R.SAN.I. (2. 3).

J. A. QUIGG, M.S.I.A. (2. 3. 6. 7). (Died 11.12.53.)

R. B. C. SMITH, A.R.SAN.I., M.S.I.A. (2. 3).

B. C. UPTON, A.R.SAN.I., M.S.I.A. (2. 3).

District Sanitary Inspector (Junior) :

T. P. JARRETT (2).

Pest Control Officer :

J. H. HYATT.

Secretary/Senior Clerk :

MISS M. L. LEWIS.

Laboratory Technician/Mortuary Assistant :

C. G. WOOD.

Public Analyst :

ERIC VOELCKER, A.R.C.S., F.I.C.,
Stuart House, 1, Tudor Street, London, E.C.4.

KEY TO QUALIFICATIONS.

1. Certificate of Royal Sanitary Institute as Sanitary Inspector.
2. Certificate of Royal Sanitary Institute and Sanitary Inspectors' Joint Board as Sanitary Inspector.
3. Certificate of Royal Sanitary Institute as Inspector of Meat and Other Foods.
4. Certificate of Royal Sanitary Institute as Smoke Inspector.
5. Certificate of Royal Sanitary Institute in Sanitary Science as applied to Building and Public Works.
6. Certificate of Royal Sanitary Institute in Food Hygiene.
7. Certificate of Royal Sanitary Association of Scotland as Inspector of Meat and Other Foods.

HEALTH DEPARTMENT,
"GLENHARTIE,"
15, BATH ROAD,
SLOUGH.

*To His Worship the Mayor, Aldermen and Councillors
of the Borough of Slough.*

MR. MAYOR, LADIES AND GENTLEMEN,

I have pleasure in presenting to you my fifth Annual Report for the year 1953.

My first duty is to record, with regret, the death on 11th December, 1953, of Mr. J. A. Quigg, one of the District Sanitary Inspectors, after a short illness. Mr. Quigg is missed not only by his colleagues in the Department but also by many people outside the sphere of the Council's activities where his unbounden energy made him a very popular figure.

Looking at the year from the point of view of general activity in the town the emphasis lay once again upon preparation—preparation for the day when the improved sewage facilities would allow more widespread building, preparation for the day when the London County Council would send the first inhabitants to the new Langley Estate and preparation for the day when the Borough Council's great new housing programme would begin to show some relief to those on the housing list. The close of the year saw all these preparations at a stage when each was likely to be realised in the near future.

So far as vital statistics are concerned 1953 was a record year. The birth rate which had fallen continuously since 1947 except for a pause in the decline in 1951, dropped still further in 1953 and reached the lowest figure ever recorded. There were other low records during the year, however, in which pride can be taken—the still-birth rate of 16.55 per 1,000 total births (0.24 per 1,000 population) and the infant mortality rate of 23.13 per 1,000 live births are the lowest recorded in this town and the death rate at 7.68 per 1,000 population is the lowest but one ever found—1942 with a crude death rate of 7.2 still holds the record.

A number of what might be called the conventional infectious diseases showed an increase during the year. Scarlet fever produced 215 cases, the highest so far known, puerperal pyrexia was high, and pneumonia proved to be troublesome. On the whole, however, the diseases were mild in their nature and no deaths are recorded from any notified case.

Against that rather gloomy cloud can be set the silver lining of poliomyelitis and tuberculosis. The number of cases of polio—seven—is smaller than has been experienced since 1949 and for that we must be thankful. While it is unfortunately true that there is no sure preventive measure against this disease the probable methods of spread are becoming clearer and stricter methods of hygiene in contacts of cases may mitigate against the spread.

The story of tuberculosis presents the brightest picture for many a long year. So far as the number of notifications is concerned we have only to go back to 1946 to find a lower figure but at that time notification was

less complete than it is today. The fact that notifications have fallen for two successive years, the latter a year of Mass Radiography is, I think, a sign of real hope that the disease is coming under control and is of much greater significance than the phenomenal decrease in the death rate from pulmonary tuberculosis which is now hardly one-sixth of that found seven years ago.

Heart disease and cancer were still the most frequent causes of death, but while the former had increased and in 1953 caused over 35% of all deaths, cancer decreased quite considerably. Vascular lesions of the nervous system in third place and pneumonia and bronchitis, fourth, maintained their usual places, but whereas other diseases of the circulatory system and accidents were still equal fifth tuberculosis disappeared from the list for the first time and its place was taken by suicides, of which there were no less than eleven cases during the year. I have tried, in the body of the report, to introduce a novel feature in the presentation of statistics, by giving the loss of working years caused by the commonest causes of death—the relative importance of suicide, accidents and, still, tuberculosis is thereby emphasised.

There were no major legislative changes relating to public health during the year, but the Public Health (Infectious Diseases) Regulations, 1953, do allow more adequate measures to be taken more quickly where food poisoning is concerned.

In the Chief Sanitary Inspector's section of the report a reference to the probability of slum clearance in the comparatively near future is worthy of note. The opportunity to provide good houses throughout the Borough will be most welcome.

Another reference worth noting relates to food hygiene. Mr. Stroud points out that members of the public have the power, by making complaints where necessary, to improve the standard of hygiene in every premises where food is sold. The average person hates making a fuss or scene but a legitimate complaint to the management with subsequent remedy of the defect may save fellow-citizens from discomfort, illness and perhaps even from death.

I wish to thank the Health and Sanitation Committee and the Council for their support and assistance during the year, and to Councillor F. S. G. Room, J.P., C.C., the Chairman of the Health and Sanitation Committee, would like to express a special word of appreciation.

To the staff of the Health Department I wish to record my thanks for their continued loyal support throughout the year.

I am, Mr. Mayor, Ladies and Gentlemen,

Your obedient servant,

MACDONALD A. CHARRETT,

Medical Officer of Health

SEPTEMBER, 1954.

ANNUAL REPORT FOR 1953

SUMMARY OF STATISTICS

GENERAL STATISTICS.

Area	6,276 acres
Population : Registrar-General's Estimate for mid-1953	66,950
Number of dwelling houses, including flats, at 31st March, 1954 (according to rate books)	17,888
Rateable value as at 31st March, 1954	£626,410
Estimated Product of Penny Rate, 1954/1955	£2,560

EXTRACTS FROM VITAL STATISTICS FOR THE YEAR 1953.

Live Births :	<i>Males</i>	<i>Females</i>	<i>Total</i>
Legitimate	441	448	889
Illegitimate	31	31	62
Total	<hr/> 472	<hr/> 479	<hr/> 951
Crude Birth Rate (per 1,000 population)	=	14.20	
Corrected Birth Rate (allowing for sex and age of the population)	=	12.64	
(Comparability factor— 0.89.)			

Still-Births :	<i>Males</i>	<i>Females</i>	<i>Total</i>
Legitimate	9	7	16
Illegitimate	-	-	-
Total	<hr/> 9	<hr/> 7	<hr/> 16
Still-birth rate per 1,000 total births	=	16.55	
Still-birth rate per 1,000 population	=	0.24	

Deaths :	<i>Males</i>	<i>Females</i>	<i>Total</i>
	265	249	514
Crude Death Rate (per 1,000 population)	=	7.68	
Corrected Death Rate (allowing for sex and age of the population)	=	9.29	
(Comparability figure—1.21.)			
National Death Rate—11.4 per 1,000 population.			
Ratio of Local Death Rate to National Rate—0.81.			

Infant Mortality (Deaths of Infants under 1 year of age).

Deaths :	<i>Males</i>	<i>Females</i>	<i>Total</i>
Legitimate	12	5	17
Illegitimate	4	1	5
Total	<hr/> 16	<hr/> 6	<hr/> 22
Rate for all infants per 1,000 live births	=	23.13	
National Rate per 1,000 live births	=	26.8	

Neo-natal Mortality (Deaths of Infants under 4 weeks of age).

Deaths :	Males	Females	Total
Legitimate	8	3	11
Illegitimate	2	-	2
Total	10	3	13

Rate for all infants under 28 days of age
per 1,000 live births = 13.67

Death Rates per 1,000 population :

Pulmonary Tuberculosis	0.09
All forms of Tuberculosis	0.09
Cancer	1.19

Other Deaths :

	Males	Females	Total
Cancer	39	41	80
Whooping Cough	-	-	-
Measles	1	-	1
Tuberculosis—Pulmonary	5	1	6
Non-Pulmonary	-	-	-

I. STATISTICS AND SOCIAL CONDITIONS OF THE BOROUGH.

NATURAL AND SOCIAL CONDITIONS.

The year began with a mainly dry but rather cold month, which went out with a strong gale and unprecedented floods along the East Coast and Thames Estuary, and then followed snowstorms and cold weather until the middle of February, when it became exceptionally mild. March was a still month and there were frequent morning fogs with temperatures slightly below the average.

April was mainly unsettled, while May was generally warm and sunny, but thunderstorms occurred frequently during the latter half of the month and these continued into June, making it a rather cool and dull month. July became rather unsettled after a reasonably good start, but August was brighter than usual and even if no drier than the average was at least fair and warm for the first half of the month. September was a mixed month with average air temperatures and rainfall, but more than the usual amount of sunshine; gales occurred towards the end of the month but died out fairly rapidly and October was notably less windy than usual. The remainder of the year was unusually mild and dry but sunshine was below the average and there was a good deal of fog both in November and December.

1953 can, I think, be looked upon as a year of final preparation for the expansion which is very shortly to occur. Any persons who may have had doubts as to the intention of the London County Council to build houses on the Langley estate had them finally dispelled during the year and the speed with which final preparations of the site and the initial stages of building itself took place must have astonished many. One new school—junior one—on the new estate appeared, from a distance, to be near completion, but much work still remains to be done inside and it will not be ready for occupation until September, 1954.

Neither has the Slough Borough Council been idle. The Priory Estate, at Burnham, consisting of 566 houses, was virtually completed during 1953 and there was, as the result, a slight temporary easing of the housing situation but no real diminution of the housing list can really be expected until the large-scale completion of houses on the Wexham estate has been accomplished. In addition to the last-mentioned estate which will consist, in the first place, of 792 houses and on which work is already well under way, 564 houses are to be erected for the Borough Council on the new London County Council Housing estates; 314 at Langley and approximately 250 at Farnham Royal.

The small estate at Haymill, consisting of 128 houses, which is already under construction, is one which causes much satisfaction. It is true that the number of houses is small but the site was made available by the demolition of ex-army huts which had served as temporary housing accommodation since the war. This is the first "camp" to be demolished and as the others in the town will, as soon as possible, be treated likewise it does seem as if these blots will disappear from our midst in a reasonably short period of time.

Now that plans for new housing in the town can be put into operation, it looks as if in another three or four years Slough's housing problems will

virtually have ceased to exist, particularly as there is fortunately, no very, great problem of slum clearance to be carried out.

The number of houses completed in 1953 was 262 as compared with 183 in 1952, 72 in 1951 and 114 in 1950.

The sewage works extensions which have featured so largely in the reports for the last few years are now rapidly nearing completion and it was possible to relax some of the restrictions on building which had existed for a number of years. This relaxation, together with the greater availability of building licenses led to an increase in private enterprise construction.

On the whole a feeling of sober optimism prevails throughout the town but it must be remembered that increased population means a greater number of persons seeking and needing work. It has been felt in some quarters that many of the newcomers will continue to work in London. Whether this will or will not be so, only time will tell, but opportunities must be provided locally for those wishing to work near their homes.

I believe that towns can, in some ways, be compared with other living organisms; they either grow or decay, and although "Planning" can, to some extent, control the pattern of the growth it cannot supply but may destroy the vital energy which is needed in a healthy community.

VITAL STATISTICS.

BIRTHS.

After allowing for inward and outward transfers, the Registrar-General credited the Borough with 951 live births in 1953: 472 were males and 479 females.

The crude birth rate was 14.20 per 1,000 of the population and this was 0.83 per 1,000 less than that of 1952 (15.03). When the crude birth rate has been multiplied by the comparability figure of 0.89 the corrected rate of 12.64 is obtained. This figure allows for the sex and age distribution of the local population and the rate can be compared with the National rate or with any local rate with which the appropriate comparability figure has been used. The corrected birth rate for Slough (12.64) when compared with that for England and Wales as a whole (15.5) gives a ratio of 0.81:1. In the table below are given the birth rates for the Borough and the ratio to the National rate since 1949.

Year	Corrected Birth Rate, Slough	Birth Rate, England & Wales	Ratio Slough : England & Wales
1949	15.84	16.9	0.94 : 1
1950	13.79	15.9	0.87 : 1
1951	13.62	15.5	0.88 : 1
1952	13.38	15.3	0.88 : 1
1953	12.64	15.5	0.81 : 1

It will thus be seen that the birth rate has continued to fall, and this year to fall very considerably. In previous years the local trend has followed the National one but while there was a rise of 0.2 births per 1,000 of the population in England and Wales as a whole the rate in Slough fell by nearly 1 per 1,000.

I cannot find a lower birth rate in the records and it is perhaps significant that for some years the birth rate in the Borough has been consistently below that for the country as a whole. Causes for such events are not easy to find, but some believe that lack of good housing accommodation plays an important part; if this is so, then the next few years should show a rapid reversal of the decline in the birth rate in this town.

ILLEGITIMACY.

The number of illegitimate births showed an increase this year: 62 as compared with 44 for 1952. This means that 6.52 per cent. of births were illegitimate as compared with 4.39 in the previous year. A rise in illegitimacy is usually associated with war or major social upheavals and from the end of the last war until 1952 the illegitimate birth rate in this town had been following the downward National trend. No upheavals on a national scale took place in 1952 when, presumably, the greater proportion of the illegitimate conceptions took place and it is difficult to find any material change in social circumstances in the Borough during that period.

While too much emphasis must not be laid upon statistics based upon small numbers, a considerable increase in illegitimacy such as that found in 1953 must cause some concern.

STILL-BIRTHS.

The registered number of still-births was 16 (9 males and 7 females): one was illegitimate. This figure gives a still-birth rate of 16.55 per 1,000 total births or 0.24 per 1,000 of the population. In 1952 the figures were 16.63 and 0.27 respectively.

Once again there has not only been a decrease in the still-birth rate but a new low record has been established. The rate for the Borough was 16.55 below that for the country as a whole.

DEATHS.

After correction for transferable deaths the number assigned by the Registrar-General to the Borough was 514 (265 males and 249 females), a decrease of 57 on the total for 1952.

The crude death rate was 7.68 per 1,000 of the population compared with 8.56 for 1952. After multiplying by the comparability figure (1.21) the corrected rate was 9.29 compared with the National Rate of 11.4 and the corrected rate for Slough of 10.36 in 1952. The death rate for the 160 County Boroughs and Great Towns (including London) was 12.2 per 1,000 population.

The seven main causes of death during 1953, in numerical order, were

Heart diseases	181
Cancer	80
Vascular lesions of the nervous system	58
Pneumonia and Bronchitis	47
Accidents, all types	18
Other diseases of the circulatory system	18
Suicide	11

Heart diseases showed the only numerical increase since the previous year and, in fact, caused over 35% of all deaths. Cancer deaths which had reached the record number of 134 in 1951 giving a rate of 2.02 per 1,000 population fell only slightly to 115 (1.72 per 1,000) in 1952 but decreased very sharply to 80 deaths in 1953, a rate of 1.20 per 1,000 population. With comparatively small numbers being considered there must be fluctuations and the low rate found in 1953 is probably of no greater significance than the high rates in 1951 and 1952. It is, however, pleasant to see a rate lower than that which has been experienced for 8 years.

CAUSES OF DEATH	1952		1953	
	Males	Females	Males	Females
1. Tuberculosis, respiratory	11	3	5	1
2. Tuberculosis, other	1	1	—	—
3. Syphilitic disease	2	1	2	—
4. Diphtheria	—	—	—	—
5. Whooping Cough	—	—	—	—
6. Meningococcal infection	—	—	—	—
7. Acute poliomyelitis	—	—	—	—
8. Measles	1	—	1	—
9. Other infective and parasitic diseases	—	—	—	2
10. Malignant neoplasm, stomach	9	5	4	9
11. Malignant neoplasm, lung, bronchus	19	4	15	1
12. Malignant neoplasm, breast	—	10	—	9
13. Malignant neoplasm, uterus	—	4	—	8
14. Other malignant and lymphatic neoplasms	30	31	20	14
15. Leukaemia, aleukaemia	2	1	—	2
16. Diabetes	—	2	—	3
17. Vascular lesions of the nervous system	30	45	20	38
18. Coronary disease, angina	46	32	47	25
19. Hypertension with heart disease	3	4	2	9
20. Other heart disease	43	43	37	60
21. Other circulatory disease	5	11	7	11
22. Influenza	—	—	—	6
23. Pneumonia	6	16	8	8
24. Bronchitis	27	8	22	9
25. Other diseases of the respiratory system	6	1	5	—
26. Ulcers of stomach and duodenum	3	2	7	—
27. Gastritis, enteritis and diarrhoea	2	1	2	—
28. Nephritis and nephrosis	5	1	5	1
29. Hyperplasia of prostate	3	—	4	—
30. Pregnancy, childbirth, abortion	—	—	—	—
31. Congenital malformations	4	3	3	3
32. Other defined and ill-defined diseases	26	34	28	22
33. Motor vehicle accidents	5	—	5	—
34. All other accidents	9	2	6	7
35. Suicide	3	2	10	1
36. Homicide and operations of war	2	1	—	—
All causes	330	268	265	249

SEX AND AGE DISTRIBUTION OF DEATHS. 1953,

The following table shows the age and sex distribution of all deaths attributed to the Borough during 1953 by local Registrars. The figures include all deaths which actually occurred during 1953 even although, in some cases, notification of their occurrence may not have been received until well on into 1954.

For this reason, the figures in the table vary a little from those given by the Registrar-General which are based upon returns received by him only during the period under review as he finds it impractical to carry statistical data into the following year. The local figures are, therefore, more accurate but the difference is not large enough to cause any significant statistical change.

Ages at Death, in Years :				Males	Females	Total
Under 1				16	6	22
1—				6	1	7
10—				5	-	5
25—				17	9	26
45—				87	48	135
65—				34	24	58
				— 165	— 88	— 253
70—				28	35	63
75—				28	42	70
80—				29	39	68
85—				9	30	39
90—				3	9	12
95 and over				-	6	6
				— 97	— 161	— 258
				262	249	511

From this table it will be seen that 258 (50.5%) of deaths were in persons over the age of 70 years and 316 (61.8%) occurred in persons over the age of 65 and who are said to have completed their span of normal working life.

Although these statistics relating to deaths tell us the number of deaths from each cause they really only tell part of a story. How far, for instance, do the various causes of deaths have an influence on the economics of family and community life? Dr. Linley Hensell (Commissioner of Public Health for Western Australia (tried to find out whether in his State, the causes of the greatest number of deaths did, in fact, cause the greatest economic disturbance. His method was to find the number of useful working years lost by each cause assuming that the working life ended at 65 years of age. Deaths occurring under the age of 10 years were omitted because the effect of neo-natal and infant deaths would obscure the picture.

If this principle is applied to Slough, using only male deaths during the actual years of working life, some interesting results occur. Instead of the table above recording the seven most common causes of death we now have :—

Cause	No. of cases	Loss of working years	Average loss of working years per case
1. Heart diseases	30	271	9.0
2. Cancer	19	229	12.0
3. Suicide	6	157	26.2
4. Accidents, all types	6	147	24.5
5. Tuberculosis, all forms	5	72	14.4
6. Other circulatory diseases	3	58	19.3
7. Vascular lesions of nervous system	8	58	7.25

Heart diseases and cancer still take pride of place as the first two causes because of the greater number of cases, but suicides, which are last in the other table, rise to third place, not because of the number of cases, but because each person who takes his own life loses, on an average, no less than 26.2 years of useful working life. The importance of accidents too, is well emphasised, no less than 24½ years being lost for each fatal accident.

While vascular lesions of the nervous system and other circulatory diseases still occur in this table, they are relegated to the bottom two places but tuberculosis has taken fifth place, displacing pneumonia and bronchitis altogether. These two diseases do, however, tend to occur most frequently at the extremes of life and there were a number of deaths in children under the age of fifteen years which were not taken into consideration in this table.

These figures do not, of course, even now tell a complete story because we do not know the length of incapacitating illness before death except in the case of fatal accidents, but this method of presenting death returns does serve to emphasise the need for greater efforts in the prevention of accidents and also to warn us against complacency about tuberculosis where the number of deaths has fallen so dramatically during the past few years.

MATERNAL MORTALITY.

No deaths were attributed directly to pregnancy or childbearing during 1953.

INFANT MORTALITY.

After correction for inward and outward transfers there were 2 deaths (16 males and 6 females) of infants under 1 year of age. This number is three less than in 1952 and the rate of 23.13 per 1,000 live births which this represents is 1.8 lower than in the previous year (24.93) and is the lowest infant mortality rate ever recorded in this town.

This, of course, must in itself cause satisfaction but even within the figure is a matter which causes concern. It can be said in general that illegitimate babies have, for one reason or another, less chance of survival than those born in wedlock. With the small numbers involved in compiling statistics for this town fluctuations from chance are inevitable but where only 17 legitimate infants died out of 889 born (19.12 per thousand) no less than 5 illegitimate infants died out of 62 born (80.64 per thousand).

The table overleaf divides the deaths of infants under one year of age into causes and periods of less than one year. It shows deaths in varying periods up to 28 days (neo-natal period) and also in further varying periods up to 1 year.

During 1953 few children died immediately after childbirth (four as against nine in 1952) but six deaths occurred between the fourth and sixth months. As mentioned in my last report, the infant morbidity survey which was carried out on babies born in 1952 had associated with it a thorough investigation into the causes of deaths of infants for the years 1951, 1952 and 1953. From the detailed reports available 19 were classified as inevitable, i.e. so far as can be judged, lack of medical care and/or delay in instituting medical care and attention did not affect the issue; there were three cases, however, where there was the possibility that the available medical facilities were not used early enough or not used effectively. In none of those cases was there the slightest suggestion of neglect and to make such a classification is perhaps to be wise after the event. Such enquiries do serve a very valuable purpose, however, as they keep every one concerned very much on their toes and the evidence discovered may lead to a more appropriate line of action in later similar cases.

NEO-NATAL MORTALITY.

Of the 22 infants who died in the first year of life, 13 (or 59%) died in the neo-natal period; this is equivalent to a neo-natal mortality rate of 13.67 per 1,000 live births. In 1952 the rate was 17.95 and 72% of deaths in the first year of life occurred before babies had reached the age of 28 days.

If this neo-natal period is further sub-divided it is seen that out of the thirteen deaths occurring in the first month no less than ten occurred in the first week of life: and those ten constitute nearly half of all the deaths occurring in the first year.

Causes of Death of all Infants under one year of age.

Cause of Death	Under 1 day	1-2 days	3-5 days	6-7 days	Total under 1 week	1-2 weeks	3-4 weeks	Total under 1 month	1-2 months	3-5 months	6-8 months	9-12 months	Total under 1 year
Prematurity	3	-	2	1	6	1	-	7	-	-	-	-	7
Congenital abnormalities	-	1	-	-	1	2	-	3	2	1	-	-	6
Birth Injury	1	-	1	-	2	-	-	2	-	-	-	-	2
Pneumonia	-	-	-	-	-	-	-	-	-	2	-	-	2
Atelectasis	-	-	1	-	1	-	-	1	-	-	-	-	1
Asphyxia	-	-	-	-	-	-	-	-	-	1	-	-	1
Intestinal obstruction	-	-	-	-	-	-	-	-	-	1	-	-	1
Gastro-enteritis	-	-	-	-	-	-	-	-	-	1	-	-	1
Other Diseases	-	-	-	-	-	-	-	-	-	-	1	-	1
Total	4	1	4	1	10	3	-	13	2	6	1	-	22

INQUESTS.

Twenty-eight inquests were held upon residents of the Borough during 1953; eight less than in 1952. The causes of death as recorded by the Registrars of Births and Deaths, are set out in the following table.

Causes of Death :	Males	Females	Total
Natural Causes	1	-	1
Accidents :—			
Falls	4	4	8
Road accidents	4	-	4
Drowning	-	1	1
Carbon monoxide poisoning	1	-	1
Inhalation of vomited stomach contents	1	1	2
Fall from train	1	-	1
Suicide :—			
Coal gas poisoning	4	-	4
Drowning	1	1	2
Hanging	1	-	1
Strangulation	2	-	2
Barbiturate poisoning	1	-	1
	21	7	28

POPULATION

The Registrar-General's estimate of the population of the Borough at the end of June, 1953, was 66,950, a net gain of 220 over the estimated population on June 30th, 1952.

The natural increase (births less deaths) was 437 and it will therefore be seen that there was a net emigration from the town during the year of 217.

From the table below it will be seen that the population has remained very constant since 1948 :—

1944	61,250	1949	66,610
1945	60,220	1950	66,340
1946	63,040	1951	66,439 (Census)
1947	64,240	1952	66,730
1948	66,060	1953	66,950

During the past few years there has been constant talk of the expanding population of Slough, and it has been assumed by most people that the arrival of the new L.C.C. Housing Estate at Langley would rapidly provide the necessary inhabitants to push the population over the 70,000 mark.

One great factor has, however, been forgotten in these thoughts. As rapidly as the London County Council add to the Borough's population so the Borough will deplete its own population by placing housing applicants upon its new Housing estate at Wexham Farm which is in the Eton Rural District.

As the population to be housed on the L.C.C. Langley estate is to be greater than that on the Borough's Wexham estate there will eventually be a net gain to the Borough, but from the rate of building it seems likely that no substantial increase in population can be expected for some time

So far as the Wexham Estate is concerned the houses will belong to the Borough Council, the sewers will run into the Borough's sewers, water supplies are from the Borough wells, most of the inhabitants will work and shop in the Borough, their children will go to school in Slough, and yet, should there be an outbreak of food poisoning or poliomyelitis the notifications will go to the Medical Officer of Health of the neighbouring authority and he will be responsible for conducting the necessary investigations and taking the necessary action.

I am sure there will be no disharmony between the officers of the local authorities concerned but to have officers of two authorities responsible for investigating affairs on opposite sides of busy streets does lead to difficulties and possibly delay.

II. GENERAL HEALTH SERVICES.

Cleansing and Disinfestation.

Disinfestation of bedding and personal effects have continued at the disinfector supplied by steam from the Chalvey Pumping Station. The number of operations has continued to be very small.

Disposal of Refuse.

No changes in the system of refuse disposal occurred during 1953. The destructor at Chalvey was supplemented by a small amount of controlled tipping on low-lying land near the Datchet Road.

Kitchen Waste.

The Borough Council continued to operate a scheme for collecting kitchen waste by employing a contractor.

Sewage Disposal.

The final outline of the new sewage works became clearer as the year progressed and work on the extensions continued. It was possible, towards the end of the year, to allow a partial relaxation on building restrictions in some parts of the Borough.

Water.

No adverse reports were made upon water samples taken during the year from any of the three water undertakings which supply the Borough.

The only soft water supply in the district comes from the deep boreholes owned by the Slough Estates Ltd. and the water continued to be up to the usual standard of excellency. Apart from about 70 dwelling houses this supply is used exclusively by factories and canteens on the Slough Trading Estate.

The Burnham, Dorney and Hitcham Waterworks Co. Ltd., which supplies water to the western part of the Borough, showed no change in the source of supply or treatment of the water during 1953. 32 samples were submitted for chemical and bacteriological analysis during the year and all proved satisfactory. 329 additional houses were supplied during the year and these were almost entirely accounted for by the Slough Corporation's new housing estate at Burnham Priory.

So far as the water supplied by the Slough Corporation is concerned samples were taken weekly for analysis in the Town Hall Laboratory and an independent analyst tested samples each quarter. No new extensions were made during 1953; almost 15,000 houses with an estimated population of nearly 60,000 persons within and without the Borough were served.

The results of a typical chemical analysis is as follows :—

(Values are given in parts per million)

Appearance	Clear and bright
Colour, Turbidity and Odour	Nil
Reaction	pH 7.3
Free Carbon Dioxide	17
Electric Conductivity at 20°C	650
Total solids	435
Chlorine present as Chloride	38
Alkalinity as Calcium Carbonate	235
Hardness : Total	310
Temporary	235
Permanent	75
Nitrogen as Nitrates	3.6
Nitrogen as Nitrites	less than 0.01
Free Ammonia	0.014
Albuminoid Ammonia	0.033
Oxygen absorbed in 4 hours at 27°C.	0.35
Metals : Iron	0.03
Other metals	Absent.
Fluorine	0.8

The report of the independent analyst on this water was :—

“ This sample is clear and bright in appearance, neutral in reaction and free from metals apart from a negligible trace of iron. The water is very hard in character but not excessively so and it contains no excess of salinity or mineral constituents in solution. It is of satisfactory organic quality.

From the aspect of the chemical analysis these results are indicative of a pure and wholesome water suitable for public supply purposes.”

Pet Animals Act, 1951.

All pet shops in the Borough were inspected regularly throughout the year.

The Veterinary Surgeon appointed by the Council reported that all premises were satisfactory.

National Assistance Act, 1948—Section 47.

No action was necessary under this Section during 1953.

Clean Food Campaign.

I reported last year that improvement of conditions in establishments dealing with food in this town was being dealt with by initial inspection, advice, more inspections and further advice as necessary.

This method is not, of course, spectacular, but the improvements which are attained are much more likely to be permanent than are those obtained by campaigns culminating by way of a climax in special clean food weeks. It is frequently found that the sudden improvements of such campaigns can only be maintained by an undue proportion of the available time of the health Department staff being allocated to this particular activity; while this may not be counted a bad thing by some people a slight deterioration in a very small minority of premises is almost inevitable from time to time and this surely is worse than aiming for, and attaining, a steady improvement.

In the Chief Sanitary Inspector's section of the report will be found details of the work which was done in 1953 and from it will be seen that while the main efforts have been aimed towards improvements in trades and premises which had not received attention in 1952, there has been a continuous watch kept upon those premises already dealt with and a marked improvement has been noted.

The Public Health (Infectious Diseases) Regulations, 1953.

These regulations substitute a wider definition of food poisoning for that given under the previous regulations of 1927 and also amplify the precautionary measures which are now related to typhoid and paratyphoid fevers or other salmonella infections, dysentery and staphylococcal infection likely to cause food poisoning.

Whereas the preventive measures could previously be taken only against sufferers from one of these diseases they can now be taken against carriers and in either case not only can they be prevented from continuing employment involving the handling of food but also from entering such employment.

The local authority is enabled by the Regulations to authorise the medical officer of health to serve notices in emergency to prevent the spread of these diseases and this the Slough Borough Council has done. Any such emergency action must, of course, be reported to the authority at the earliest possible opportunity.

Heating Appliances (Fireguards) Regulations, 1953.

The Heating Appliances (Fireguards) Act was passed in 1952 and its main purpose was to prohibit the sale or letting of unguarded electric fires, gas fires or oil heaters so as to prevent many of the tragedies which occur particularly in childhood and old age from fires which are not protected.

Such an Act cannot be enforced from the moment it passes through Parliament as time has to be allowed for the manufacture of new appliances. The 1953 regulations give 1st October, 1953, as the date after which all new heating appliances must be fitted with guards; if, however, they were made before that date they may be sold or let unguarded until the end of September, 1954. The regulations also lay down standards for the construction and fitting of the guards.

STAFF MEDICAL EXAMINATIONS.

Although many people vaguely realise that there must inevitably be changes in the staffs of local authorities very few probably know that the turnover is quite considerable over the period of a year.

Each new officer entering the service of the Slough Borough Council the local services of the Bucks County Council, a Teacher's Training College or commencing teaching in a County School for the first time is subject to a full medical examination. Servants of the Slough Borough Council are also given an opportunity at certain specified times of entering the Superannuation Scheme and then need a medical examination.

The medical examination is a very full one and needs between twenty and thirty minutes for completion; in addition, those coming into close and continuous contact with children are subjected to an X-ray examination of the chest.

During 1953 no less than 138 officers and servants of the local authorities were examined :—

Slough Borough Council	30
Bucks County Council	60
Teachers' Training College	17
Teaching for first time	9
Servants entering Superannuation Scheme	22

LABORATORY.

During the year 1,319 examinations were undertaken in the Laboratory, an increase of 20 upon the previous year.

A detailed analysis of the examinations undertaken is shown below :—

	<i>Positive</i>	<i>Negative</i>
Swabs for Diphtheria Bacilli	—	46
Swabs for Haemolytic Streptococci	—	32
Swabs for Vincent's Angina	—	5
Sputa for Tubercle Bacilli	—	7
Urine for routine examination	117	
Faeces for organisms of Coli/Typhoid group	—	24
Blood Counts	39	
Blood Films	2	

	<i>Satisfactory</i>	<i>Un-satisfactory</i>
Milk samples :—		
(a) Phosphatase test	187	—
(b) Methylene blue test	204	1
(c) Coliform test	63	16
(d) Turbidity test	7	—
(e) Chemical tests for fats, solids and water	319	10

Water samples :—

(a) Drinking water	41	6
(b) Swimming pool water	37	—

Ice cream samples :—

Grade I	148
Grade II	1
Grade III	4
Grade IV	3

If bacteria are present in ice-cream, and the ice-cream is mixed with a solution of methylene blue and left under certain specified conditions, the colour will disappear from the solution, the time taken depending upon the number of bacteria originally present. The time for this reaction to take place is noted and the ice-cream sample is then placed into one of four Grades. In general it may be said that Grades I and II are satisfactory while Grades III and IV are unsatisfactory, but the Health Department can never be satisfied unless all samples fall into Grade I all the time.

Although sampling continues throughout the year, particular attention is paid to ice-cream during the summer months when air temperatures are higher. This is because bacteria multiply more rapidly in higher temperatures and strict standards of hygiene are more necessary although it is more difficult at this time for manufacturers to keep their samples in the higher grades.

The efforts made by the Sanitary Inspectors to keep ice-cream factories under constant supervision have been well repaid as it will be seen from the table below that almost 95% of samples came within Grade I during 1953. The astonishing improvement since 1950 is well-shown by the table and as one slight error by one factory can mean that several samples fall below Grade I while investigations involving repeated samples and testing of the plant are being carried out it will be seen that the manufacturing premises in the town now show a very high standard of hygiene.

	Number of samples				Percentage of samples			
	1950	1951	1952	1953	1950	1951	1952	1953
Grade I	55	153	103	148	43.7	76.9	83.7	94.9
Grade II	50	21	6	1	39.7	10.6	4.9	0.6
Grade III	14	15	7	4	11.1	7.5	5.7	2.6
Grade IV	7	10	7	3	5.5	5.0	5.7	1.9

BOROUGH MORTUARY.

Ninety post-mortem examinations were carried out during 1953 compared with 91 in 1952, 62 in 1951 and 85 in 1950.

I reported last year that certain improvements to the equipment were carried out during the year in order to maintain the facilities at the standard required by the pathologists who have to undertake the post-mortem examinations.

No further improvements were necessary during 1953 but it is obvious that the resources of the building were being stretched to full capacity upon frequent occasions during the year.

As the population of the area continues to grow it will probably not be long before serious consideration has to be given to increasing the mortuary facilities of the district though best how this should be done is a matter which needs careful thought and consideration.

HOME HELPS SERVICE

The Home Helps Service which is provided by the Bucks County Council and run by a Home Help Organiser under the direction of the Medical Officer of Health as Area Medical Officer for South Bucks, continued its work during 1953 and the number of calls upon its resources was almost exactly the same as in the previous year.

Details of the service are as follows :—

No. of Home Helps as at :	31.12.52.	31.12.53.
(a) Full-time	Nil	Nil
(b) Part-time	34	31
No. of cases who received help during :	1952.	1953.
(a) Acute sick	74	64
(b) Chronic sick	237	251
(c) Tuberculous	22	11
(d) Maternity	40	39
Total	373	365

III PREVALENCE OF INFECTIOUS DISEASES.

Notifiable Diseases during 1953

Showing cases notified during 1953. Numbers admitted to Hospital and Deaths. Also notifications for years 1942-1952

	Cases Notified 1953	Cases admitted to Hospital 1953	Deaths 1953	Population in thousands											
				66	66	66	66	66	66	66	66	66	66	66	66
				1952	1951	1950	1949	1948	1947	1946	1945	1944	1943	1942	1942
				Total cases notified during											
Smallpox	-	-	-	117	33	54	33	66	44	77	113	151	120	63	
Scarlet Fever	215	20	-	-	-	-	-	6	7	16	8	30	23	5	
Diphtheria	-	-	-	-	-	-	1	-	-	-	-	-	-	-	
Enteric Fever	-	-	-	-	6	5	9	8	12	17	6	10	9	10	
Puerperal Pyrexia	24	23	-	26	44	32	14	20	27	22	28	33	34	27	
Pneumonia	64	11	16	33	12	14	15	14	20	24	9	7	22	5	
Erysipelas	17	-	-	14	2	-	-	1	-	-	-	2	2	2	
Ophthalmia Neonatorum	1	-	-	-	1,681	76	416	748	168	859	826	29	995	179	
Measles	526	2	-	778	226	98	118	328	171	280	92	146	164	36	
Whooping Cough	143	-	-	101	2	-	1	4	7	1	6	5	5	8	
Meningococcal Infection	-	-	-	-	7	7	3	9	5	1	2	-	-	2	
Acute Poliomyelitis : Paralytic	5	4	-	11	7	8	-	-	-	-	-	-	-	-	
Non-paralytic	2	2	-	9	7	1	-	-	-	-	-	-	-	-	
Acute Encephalitis : Infective	-	-	-	-	1	1	-	-	-	-	-	-	-	-	
Post-infectious	-	-	-	1	1	-	-	-	-	-	-	-	-	-	
Dysentery	6	-	-	3	2	3	-	-	-	2	-	-	-	-	
Food Poisoning	6	-	-	3	-	-	-	-	-	-	-	-	-	-	
Malaria (contracted abroad)	1	-	-	1	-	1	-	-	-	-	-	-	-	-	

Showing Monthly Incidence of Notifiable Infectious Diseases.

TABLE II.

	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
Measles	93	162	78	41	37	10	63	29	3	4	6	-
Whooping Cough	2	3	4	11	12	17	15	35	22	7	13	2
Tuberculosis: Pulmonary	2	2	6	6	5	15	3	-	6	4	3	3
Non-Pulmonary	-	-	-	-	-	-	2	-	2	-	-	-
Scarlet Fever	26	36	26	18	31	22	16	-	4	6	21	9
Erysipelas	1	1	4	2	2	1	1	2	2	1	-	-
Acute Poliomyelitis: Paralytic	-	-	1	2	-	2	-	-	-	-	-	-
Non-Paralytic	-	1	-	-	-	-	-	-	1	-	-	-
Pneumonia	5	29	5	5	1	1	1	3	-	4	4	6
Puerperal Pyrexia	1	4	-	2	5	1	4	3	1	2	-	1
Dysentery	-	6	-	-	-	-	-	-	-	-	-	-
Food Poisoning	-	-	-	-	-	-	-	-	2	-	4	-
Malaria (contracted abroad)	-	-	-	-	-	-	-	-	-	1	-	-
Ophthalmia Neonatorum	-	-	-	-	-	-	-	-	1	-	-	-

showing incidence in Wards of Borough

TABLE III.

	Burnham North	Burnham South	Central North	Central South	Chalvey	Farnham North	Farnham South	Langley	Stoke North	Stoke South	Upton
Measles	27	16	48	28	100	40	34	116	50	46	21
Whooping Cough	29	5	22	12	19	10	10	17	10	3	6
Tuberculosis : Pulmonary	5	6	6	2	5	10	4	3	10	3	1
Non-Pulmonary	1	-	-	-	-	-	-	2	-	-	1
Scarlet Fever	20	17	27	12	18	33	21	22	22	9	14
Erysipelas	-	2	1	5	3	1	1	2	-	-	2
Acute Poliomyelitis : Paralytic	1	-	1	1	-	-	-	2	-	-	-
Non-Paralytic	-	1	-	-	-	-	-	-	1	-	-
Pneumonia	3	7	8	5	6	2	6	11	5	4	7
Puerperal Pyrexia	-	1	-	-	-	-	-	-	-	-	23
Dysentery	-	6	-	-	-	-	-	-	-	-	-
Food Poisoning	-	-	-	2	-	-	-	-	4	-	-
Malaria (contracted abroad)	-	-	-	-	-	1	-	-	-	-	-
Ophthalmia Neonatorum	-	-	-	-	-	-	-	-	-	1	-

DIPHTHERIA.

Once again a nil return can be placed against this disease for the fifth time running.

Although the disease has, however, suffered a major defeat by the immunisation campaign it has not ceased to exist and if the appropriate precautions are not continued diphtheria can once again get the upper hand and take its toll of health and life.

The safety of children from this disease depends upon the great majority being immunised against it, first of all in infancy, then at five years when they first come into contact with large numbers of other children and immunity has partly waned, and once again at 10 years of age. Unfortunately the number of parents who take active steps to have their children immunised does depend, to some extent, upon fear of the disease and as the memory of the suffering of children dies with time so does it become more difficult to immunise a satisfactory proportion of children.

With the advent of the mixed Whooping Cough/Diphtheria Vaccine, however, children can be given protection against Whooping Cough at the same time as they receive their inoculations against diphtheria and although the protection given against the former is not so certain as the latter, the prospect of relief is very acceptable to parents who still remember and still see the distressing signs and symptoms of whooping cough.

826 children were given an initial protection against Diphtheria in 1953 as compared with 762 in 1952 and out of these no less than 669 were given the combined Diphtheria/Pertussis Vaccine; 1,212 children also received renewal or "booster" doses against Diphtheria.

There were, therefore, 64 more children given primary inoculations and 52 more "renewals" as compared with 1952.

WHOOPING COUGH.

Whooping Cough was notified during each month of the year but while there were no signs of a real outbreak most of the cases occurred in August, when 35 notifications were received. The total number of cases notified during the year was 143 and although this was 42 more than in 1952 it was lower than the average for the past ten years.

Indications showed that the disease continued, on the whole, to be mild and that immunised children were less severely attacked than unimmunised ones. The demand for protection against Whooping Cough rose again in 1953 and the number immunised against this disease was 669 as compared with 585 in 1952 and 508 in 1951.

SCARLET FEVER.

I can find no record of more than 215 cases of Scarlet Fever having occurred in this Borough in one year: this was the number notified in 1953. Once again there was no real signs of a true outbreak of this disease and while only August was apparently free from this trouble the largest incidence occurred during the spring and early summer months.

The disease continued to be mild and there were no deaths. Twenty cases were transferred to hospital but these were, in the main, admitted because of difficulties in nursing at home rather than because of the severity of the condition.

Strict precautions are, of course, taken when contacts are in occupation where there is a great risk of conveying the disease to others, e.g. nurse

midwives and food handlers, but otherwise the restrictions placed upon contacts are less rigid than was formerly the case because the germs causing Scarlet Fever can also cause other conditions which are not notifiable and may exist in the throats of otherwise healthy persons. To insist upon strict quarantine and segregation would be illogical and economically unsound.

ERYSIPELAS.

This disease is caused by the same germ as that which gives rise to Scarlet Fever and it might be expected that the incidence of erysipelas would also be considerably higher than usual. Although the seventeen cases recorded in 1953 was three more than in the previous year and was slightly above the average there was no real sign at any time of the year of a threat of a serious increase in the disease. No cases needed admission to hospital and there were no deaths from this cause.

PNEUMONIA.

There were 64 cases of Acute Primary and Influenzal Pneumonia notified during 1953 and of these 29 occurred during the month of February while the remainder were fairly evenly spread over the first and last quarters of the year.

The number of notifications was much higher than usual and this is perhaps rather surprising in a year when there was virtually no influenza. However, the paragraph on the weather conditions prevailing during February, when most of the cases occurred, does show that the first part of the month was cold with gales and snowstorms and there may be some connection between the weather and the high incidence of pneumonia in the early part of the year.

MEASLES.

The biennial outbreak of measles had started in 1952 and although the main peak of the outbreak occurred in November, 1952, a secondary peak occurred in February, 1953, and the number of cases then declined fairly slowly until the disease had virtually died out in this area after August. Out of the 526 cases which occurred during the year only two were admitted to hospital.

PUERPERAL PYREXIA.

There were 24 cases notified during 1953 compared with 26 in 1952.

Comparison can only be made with one previous year as the regulations requiring milder cases of Puerperal Pyrexia to be notified only came into operation in August, 1951, and were therefore only in operation during one previous complete year—1952.

In the table it will be seen that 23 out of the 24 cases are recorded as occurring in the Upton Ward and this is because nearly all cases of Puerperal Pyrexia occurring in the Borough are treated at Upton Hospital.

ACUTE POLIOMYELITIS (Infantile Paralysis).

Only seven cases of poliomyelitis were notified in the Borough in 1953 compared with 20 cases in 1952, 14 in 1951 and 15 in 1950. Of the seven cases five were females and two were males; five cases, three females and two males, were paralytic and two were non-paralytic.

The cases were fairly evenly distributed throughout the year and the various wards of the Borough and it was not possible to find any connection between the cases.

The number of cases notified in England and Wales as a whole was roughly the same as in 1952 and it is impossible to say why Slough was lucky in 1953 and not in the previous year. More information about the method of spread of the disease is gradually becoming available and it is hoped that sufficient will be known in the next few years to be able to limit the spread of the disease even if, as appears very unlikely at present, a vaccine which can prevent the illness does not become available.

Ages	Paralytic		Non-Paralytic		Total	
	Males	Females	Males	Females	Males	Females
0—	1	-	—	-	1	-
5—	-	1	—	-	-	1
15—	1	-	—	1	1	1
25—	-	1	—	-	-	1
35—	-	1	—	-	-	1
45—50	-	-	—	1	-	1
TOTAL	2	3	—	2	2	5

FOOD POISONING.

Only two small "incidents" of food poisoning were notified during the year.

In the first "incident" the eldest and youngest members of a family (aged 69 and 3 years) were taken ill with vomiting and diarrhoea. In the enquiry which followed notification suspicion fell upon a Yorkshire pudding which had been made with duck egg and eaten by all the family some forty-eight hours before. Samples of faeces were, therefore, taken from all members of the family and it was found that of the remaining three members, only the breadwinner failed to show *Salm. typhi-murium* in his stools.

As he was a chef and, therefore, very actively engaged in food-handling a very pretty problem of public health was posed. The family was, fortunately, very co-operative and intelligent and it was decided to rely upon good hygiene with health education and to allow the chef to remain at work, faecal samples being taken every other day. This policy proved very successful and although even with the help of the family doctor all members of the family were not clear from infections for some eight weeks, the head of the family never showed signs of infection and no further cases were reported.

This incident shows, I think, very clearly, that with good co-operation of all members of a family infection can be prevented from spreading and even those engaged in food-handling can continue at work under certain circumstances.

The other "incident" was also confined to one family. All the family had eaten a meal in which was included a Shepherd's pie made from meat which had originally been cooked some two days earlier. The onset of diarrhoea and vomiting was sudden and severe and occurred within a few hours of the meal in all members of the family. Toxin poisoning was therefore, suspected and coagulase positive *staphylococcus aureus* was grown both from the pie and from samples of vomit. I think there is no doubt that this was the cause of the poisoning and that the infection had been transmitted accidentally to the meat by some member of the family who subsequently caused all to suffer.

VACCINATION AGAINST SMALLPOX.

The number of primary vaccinations against Smallpox was almost exactly the same as in 1952; 465 as against 460. These two years show a considerable increase, however, upon 1951 when only 343 primary vaccinations were carried out. 348 of the 465 primary vaccinations were in children under the age of 1 year.

The number of re-vaccinations fell steeply once again; from 171 in 1952 to 101 in 1953. In 1951 there had been 205 persons revaccinated. The reasons for such considerable variations are not easy to find but the absence of outbreaks of smallpox in this country undoubtedly influences the desire for vaccination. The laws of many countries require immigrants to carry current certificates of vaccination and the number of revaccinations carried out must vary to some extent with the number of persons emigrating or travelling overseas. That this number is considerable is known as the Medical Officer of Health must sign each International Certificate of Vaccination to the effect that the signature of the doctor carrying out the vaccination is authentic.

TUBERCULOSIS.

(a) Survey by Mass X-Ray Unit.

The Mass X-Ray Unit No. 5A of the North-West Metropolitan Regional Hospital Board carried out another Mass X-Ray Survey in Slough starting in April, almost exactly two years after the original survey of 1951. Once again the demand for chest X-rays was so great that the unit had to make an extended visit but owing to previous engagements it was not possible to fit in the additional fortnight required until November.

In 1951 the unit stayed for a total of three months and X-rayed 19,614 persons, but in 1953 the work of the unit was speeded up to such an extent that 18,125 chest X-rays were taken in two months, miniature films at an average of 500 examinations each day being done on $4\frac{1}{2}$ or 5 days each week instead of on 3 days as in 1951.

By far the greatest number, no less than 15,049 out of 18,125 asking for chest X-rays, came as members of organised groups, the proportion of men being rather higher than in 1951. From these groups 23 cases of pulmonary tuberculosis were discovered giving a rate of 1.5 cases per 1,000 examined compared with 29 cases and a rate of 1.8 in 1951.

The general public were given an opportunity of attending over the whole of the initial period of 6 weeks by means of appointments which could be made at various booking centres scattered throughout the Borough. The response was, perhaps, rather disappointing as only 3,076 members of the public were X-rayed compared with more than 3,900 in 1951. However, out of 3,000 examined six cases of pulmonary tuberculosis were discovered.

The grand total number of active and presumed active cases of pulmonary tuberculosis discovered was 29. The number of cases per 1,000 examined, 1.6, was exactly the same as in 1951.

From the fact that the proportion of active cases was almost exactly the same as in 1951 the importance of biennial surveys is again emphasised, and in addition to this the great need for periodic inspections of those between the ages of 15 and 44 is shown. Out of the 29 cases discovered 10 had been examined previously by the unit in 1951 and eight of these were between the ages of 15 and 35. The great majority, however, showed signs of old tuberculosis which had become active again.

**Table
A.**

GRAND TOTALS		
Year of Survey	1951	1953
No. X-rayed	19,614	18,125
No. Cases	32	29
No. of cases per 1,000 examined	1.6	1.6

**Table
B.**

ANALYSIS OF ACTIVE CASES

No. of persons previously X-rayed in 1951	7,519	No. of persons not previously X-rayed in 1951	10,606
No. Cases	10	No. Cases	19
Per thousand	1.3	Per thousand	1.8

Table

ACTIVE CASES BY AGES—BOTH SURVEYS

C.

15—24		25—34		35—44		45—59		60 and over	
M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
3	2	9	2	4	2	5	1	1	-

In addition to tuberculosis there were, of course, a number of other abnormal chest conditions discovered and where necessary patients were referred to their own doctors for advice and treatment.

I sincerely hope it will be possible for the Mass X-ray Unit to visit Slough regularly as not only is an opportunity given for discovering hitherto unsuspected cases of tuberculosis but good conditions are supplied for encouraging further X-rays of old cases and contacts thereby adding to the measures by which spread of the disease can be checked.

(b) New Cases.

In my report for 1952 I made the following remarks :—

“It is indeed pleasing to find a reduction in the number of cases reported. I would hesitate to say, however, that there had been a change in the trend of notification, as it must be remembered that a Mass X-ray Unit visited the town in 1951 and there is little doubt that some cases which would have remained unsuspected were found during that survey.

Should 1953¹ which is a year for a Mass X-ray Unit visit again show decrease in notification there will indeed be some cause for optimism.”

The 1953 figures do show, indeed, the cause for optimism which mentioned in the above paragraphs as the number of new cases of pulmonary tuberculosis notified dropped from 71 in 1952 to 55 in 1953 and non pulmonary notifications also fell, from 9 to 4. This fall occurred in spite of the visit of the Mass X-ray Unit which, as mentioned above, discovered 29 cases which needed notification.

Year	1946	1947	1948	1949	1950	1951	1952	1953
Population	63,040	64,240	66,060	66,610	66,340	66,439	66,730	66,950
	P. N.P.	P. N.P.	P. N.P.	P. N.P.	P. N.P.	P. N.P.	P. N.P.	P. N.P.
Cases notified	46	58	76	71	79	88	71	55
	25	5	10	11	16	13	9	4
Notification per 1,000 of population	0.73	0.90	1.15	1.07	1.19	1.32	1.06	0.82
	0.39	0.08	0.25	0.17	0.24	0.19	0.13	0.06

Although "notification" has now reached a higher level of accuracy than ever before there must still, of course, be some people who have active lung tuberculosis without knowing it and for this reason it is impossible to be sure that the apparent rapid fall in the incidence of tuberculosis can be expected to continue, or even, perhaps, to be as real as it seems, but it does seem as if, at last, tuberculosis is on the decline in this town.

As remarked in previous years, however, it is expected that the incidence of tuberculosis will be very high among the newcomers on the L.C.C. estates at Langley and Farnham Royal and the overall picture of tuberculosis in the area may become somewhat confused for that reason. It may be possible to keep some clarity by the separation of statistics locally.

The Chest Clinic at Windsor is still working to its full capacity and the North-West Metropolitan Regional Hospital Board has agreed to build a new Chest Clinic in the grounds of Upton Hospital.

It is expected that the building will be commenced, if not completed, in 1954.

The next table shows the sex and age incidence of primary notifications in 1953. It is interesting to see that there is a fairly even spread of disease in males between the ages of 15 and 55 while female cases occur almost entirely between 15 and 35.

Age in years	Pulmonary		Non-Pulmonary	
	Males	Females	Males	Females
0—	-	1	-	-
1—	-	-	-	-
5—	2	-	-	1
15—	11	4	-	1
25—	5	8	-	2
35—	7	3	-	-
45—	7	1	-	-
55—	5	-	-	-
65 and over	-	1	-	-
Total	37	18	-	4

(c) Notification Register.

The number of cases remaining on the Notification Register on 31 December, 1953, was as follows :—

Pulmonary			Non-Pulmonary		
Males	Females	Total	Males	Females	Total
367	282	649	44	52	96

It will be realised that this is the total number of cases on the register at the end of 1953. It includes not only those who were notified for the first time as suffering from tuberculosis while living in the Borough, but also those who, already suffering from the disease, have come from elsewhere to live in the town.

Conversely, of course, those who were originally notified in Slough and have now left are no longer on the register here but will be on the register of the Medical Officer of Health of the district to which they have gone.

(d) **Non-Pulmonary Tuberculosis.**

Tuberculosis can affect many part of the body apart from the lungs.

Four new cases of non-pulmonary tuberculosis were notified during the year and the disease occurred in the following sites :—

	<i>Males</i>	<i>Females</i>
Glands	-	2
Skin	-	1
Fallopian tubes.....	-	1
	—	—
	Nil	4
	—	—

(e) **B.C.G. Vaccination.**

The trials which are being carried out by the Medical Research Council in Slough and other selected places throughout the country to discover the exact part which B.C.G. vaccination has to play in the prevention of tuberculosis continued during 1953.

The doctor in charge of the trials reported that those who have been taking part responded extremely well in attending for follow-up examinations. I know that the follow-up rate has been over 90% and it speaks very highly of a proportion of the young people of Slough who were given B.C.G. as school leavers and have been attending follow-up examinations from industry, shops, offices, etc., over a period of two years.

The results of the M.R.C. trials are expected to be published either next year or in 1955.

(f) **Deaths from Tuberculosis.**

The deaths from tuberculosis during 1952 totalled only six and all of these were due to the pulmonary form of the disease.

This gives a death rate per thousand of the population of 0.09 from pulmonary and from all forms of tuberculosis.

While the death rate from tuberculosis has been falling quite steadily for a number of years the rate for 1953 is really remarkable. The numbers on which the rates are based, however, are only small and one or two extra or fewer deaths can mean quite a change in the death rate so that while I think it justified to say that everything points towards a continuation of the decrease of tuberculosis death rates, it would be wrong necessarily to expect that the rate recorded for 1954 will be lower.

There is no doubt that the new drugs such as Streptomycin, Para-amino-salicylic acid (P.A.S.) and Isoniazid have brought about a remarkable decrease in the death rate from tuberculosis and for this there is much to be thankful and now that there appears to be hope for further reduction in new cases perhaps the day when tuberculosis will be under control is not far distant.

Death from tuberculosis occurred in only one person not previously notified as suffering from the disease. In this case the information came in the inward transferable death slip some 2½—3 months later.

Year	Population	Pulmonary.		Non-Pulmonary.		Pulmonary Death rate per 1,000 population
		Males	Females	Males	Females	
1940	60,670	11	15	2	3	0.43
1941	65,350	14	18	4	6	0.49
1942	64,420	11	13	3	2	0.37
1943	62,960	19	13	1	-	0.51
1944	61,250	18	14	4	1	0.52
1945	60,220	14	12	5	1	0.43
1946	63,040	16	17	2	1	0.52
1947	64,240	17	10	2	4	0.42
1948	66,060	17	12	2	2	0.44
1949	66,610	13	9	-	-	0.33
1950	66,340	10	3	1	2	0.19
1951	66,439	10	6	1	-	0.24
1952	66,730	11	3	1	1	0.21
1953	66,950	5	1	-	-	0.09

IV. MATERNITY AND CHILD WELFARE.

MATERNITY AND CHILD WELFARE CENTRES.

All the Maternity and Child Welfare Centres, of which there are five in the Borough, continued to function during the year, and as there were no changes of centres or of the times of sessions there is little need for me to print a list in this report.

The welfare centre in Burnham Village, just outside the Borough boundary has, however, become much busier during the year owing to the population which has moved to the new Borough Housing Estate at Burnham Priory.

"Toddlers' clinics which have been held regularly, although more infrequently than "infant" centres, have continued to be popular and are held at the following times.

<i>Centre.</i>	<i>Location.</i>	<i>Sessions.</i>
Cippenham.	Central Hall, Bower Way.	5th Friday at 2 p.m.
Slough Health Centre.	Burlington Road.	1st Thursday at 2 p.m.
St. Michael's.	Slough Community Centre Farnham Road.	2nd Wednesday, Mar., June, Sep Dec., at 2 p.m.
Wexham Road.	Wexham Road Community Centre.	5th Friday at 2 p.m.

A doctor is in attendance at each of these clinics and in order to make sure that the doctor has time to make a comprehensive survey of the children in conjunction with the mother, an appointment system is in force. The appointments or invitations are normally issued by the Health Visitor, and the response has been found to be very good; if any mother feels that she would like to attend any of the clinics with her toddler she may always ask the Health Visitor for an appointment.

DIPHTHERIA IMMUNISATION CLINICS.

Although no changes were made in the immunisation clinics during 1953 some changes have occurred by the time this report is printed and so a list of present clinics is given below.

A special clinic was held at Langley once a month, but the numbers attending did not really justify, of late, the special attendance of a doctor. It was decided, therefore, to hold the immunisation clinic in conjunction with the normal infant welfare centre as is done in all other centres in the town with the exception of Cippenham, where a special immunisation session is still held.

<i>Centre</i>	<i>Sessions</i>
Cippenham	1st Thursday, 10.30 a.m.
Langley	2nd Tuesday, 2 p.m.
Slough Health Centre	Mondays, 2.30 p.m. and Thursdays, 9.30 a.m.
St. Michael's	1st Monday, 2 p.m.
Wexham Road	2nd Friday, 2 p.m.

ANTE-NATAL AND POST-NATAL CLINICS.

Location	Ante-Natal Clinic	Post-Natal Clinic
Upton Hospital	Mondays, 10.30 a.m. (first bookings) Mondays, 2.30 p.m. Thursdays, 2.30 p.m.	Fridays, 2.30 p.m.
Canadian Red Cross Memorial Hospital Out-Patient Dept. (Hut behind Community Centre, Farnham Road.)	Mondays, 10 a.m. (first bookings)	Mondays, 11 a.m.

In addition to these clinics there is a Midwives' Ante-Natal Clinic held at the Health Centre, Burlington Road, for those cases whose confinements are to take place at home. In these cases, post-natal care is undertaken by the family doctor.

ANTE-NATAL BLOOD TESTS.

Routine examinations of the blood of expectant mothers has continued with the kind assistance of the Pathologist at the Canadian Red Cross Memorial Hospital, Taplow. The incompatibility which sometimes arises owing to differences in the Rhesus factor of the father's and mother's blood cannot be altered, but steps can be taken to minimise this effect and the success of these measures has been shown by the great reduction in infant deaths from this cause.

SCHOOL CLINICS.

These clinics are part of the School Health Service and are available to all children of school age attending County schools and also to those attending Nursery Schools. All clinics are held at the Burlington Road Health Centre. A Minor Ailments Clinic is held every morning by Health visitors and a doctor is in attendance on Thursday mornings. Visits to the Dentists or Eye Specialists are arranged by appointment.

A Diphtheria Immunisation Clinic is held on Thursday mornings at 9.30 a.m.

The Child Guidance Clinic which was started in 1952 continued to function in 1953 and as it was possible to obtain all the essential staff to enable the team to function effectively the work carried out was even more satisfactory than it had been in the previous year.

MARRIED WOMEN'S ADVISORY CLINIC

Community Centre, Farnham Road	.....	.....	Wednesdays, 2—4 p.m.
(Entrance—Buckingham Avenue)			
Health Centre, Burlington Road	.....	.....	Fridays, 2.30—4 p.m.

DAY NURSERY.

There is now one day nursery in the town and it is run by the Health Department of the Bucks County Council. Children from 0 to 3 years are cared for at the premises at—

Penn Road, Manor Park, Slough.

Applications for admission should be made to the Area Medical Officer, "Glenhartie," 15, Bath Road, Slough.

RESIDENTIAL NURSERY.

The Children's Committee of the Bucks County Council is responsible for residential children's homes and although there are other homes situated throughout the county, the only home in Slough is at "Brookside," Sal Hill. Applications for admission to a children's home should be made direct to the Children's Officer, 22, Silver Street, Aylesbury. Accommodation is restricted and although every effort is made to admit urgent cases there can be no guarantee that a child can be admitted to any particular nursery.

V. HOSPITAL SERVICES.

The Borough of Slough is served by the following hospitals and maternity homes, the majority of which are situated outside the Borough.

General Hospitals.

Upton Hospital, Albert Street, Slough
King Edward VII Hospital, Windsor
Canadian Red Cross Memorial Hospital, Taplow.
Old Windsor Hospital, Old Windsor.
Iver, Denham and Langley Cottage Hospital, Iver.

Infectious Diseases Hospitals.

Maidenhead Isolation Hospital.
St. John's Hospital, Uxbridge.

Venereal Diseases.

The nearest treatment centres are :—
King Edward VII Hospital, Windsor.
Royal Berkshire Hospital, Reading.
Hillingdon Hospital, Hillingdon.

Tuberculosis.

(i) *Chest Clinic.* The Chest Clinic is at the Kipling Memorial Building, Alma Road, Windsor, with a subsidiary clinic at Upton Hospital, Slough. All arrangements are made by the Chest Physician who is available at the Windsor Clinic (Tel. No. Windsor 2033).

(ii) *Sanatorium.* All admissions arranged by the Chest Physician, Chest Clinic, Kipling Memorial Building, Alma Road, Windsor.

Maternity Accommodation.

Upton Hospital, Albert Street, Slough.
Canadian Red Cross Memorial Hospital, Taplow.
Colinswood Nursing Home, Farnham Common.
Old Windsor Hospital, Old Windsor.
Princess Christian Maternity Home, Windsor.

If the patient's own doctor thinks that admission should be made on medical grounds, the patient is referred to the nearest ante-natal clinic, but if admission is sought on domiciliary or social grounds application is made through the Area Medical Officer, who makes his recommendations to the Hospital Management Committee following a report on home circumstances by a Health Visitor.

Part III Accommodation.

Aged Persons	—	Sick	.....	Upton Hospital.
		Non-Sick	.....	Upton Towers.

ANNUAL REPORT of THE CHIEF SANITARY INSPECTOR.

For the Year 1953.

Section A — General Administration.
 Section B — Housing.
 Section C — Supervision of Food Supplies.
 Section D — Factories, Workplaces and Shops
 Section E — General Sanitation.
 Section F — Pest Infestation Control
 Section G — Miscellaneous.

SECTION A.

GENERAL ADMINISTRATION.

TABLE No. 1.

Summary :

Total Inspections	16,832
Complaints received and investigated	1,004
Preliminary Notices Served	425
Secondary Notices Served	92
Statutory Notices Served	28
Letters Received	3,320
Letters Despatched	1,359
Interviews with Property Owners, Agents and Builders	1,568

TABLE No. 2.

Analysis of Inspection Work performed by the District Sanitary Inspectors.

Housing	3,17
Inspection of Meat and Other Foods	96
Premises at which Food is Prepared, Stored and Sold	1,89
Dairies	14
Factories and Workplaces	95
Shops	83
General Sanitation	6,06
Pest Infestation Control (including visits by the Pest Control Officer)	3,90
Building Licensing	4

TABLE No. 3.

Premises at which Improvements were effected :

Dwelling-houses (rendered habitable)	22
Premises used for Preparation and Sale of Food	12
Factories and Workplaces	2
Shops	2
Drainage (reconstruction, repair, etc.)	40
Portable dustbins provided	1

New Legislation.

The principal new legislation during the year with which the Sanitary Inspector is concerned, was the introduction of the following :—

- (a) Local Government (Miscellaneous Provisions) Act, 1953, which provides for the making of Closing Orders in lieu of Demolition Orders, in respect of dwelling-houses when it is expedient for a local authority to take such a course for the preservation of adjoining buildings.
- (b) Slaughter of Animals (Pigs) Act, 1953, which, when it comes into operation in 1954, will provide for the compulsory stunning of pigs slaughtered outside slaughterhouses.
- (c) Merchandise Marks Act, 1953, which amends the Act of 1887 in relation to false trade description of goods.
- (d) Orders made under the Defence (Sale of Food) Regulations, 1943, which provide for food standards in relation to Ice Cream, Preserves and Soft Drinks.
- (e) Cream and Use of Milk (Revocation) Order, 1953, which removed restrictions on the manufacture and sale of cream and permitted the use of liquid cow's milk in the preparation or manufacture of certain specified articles of food.

In addition to the above-mentioned legislation, an outstanding feature of the year so far as Sanitary Inspectors are concerned, was the publication of the Report of the Working Party on the Recruitment, Training and Qualification of Sanitary Inspectors. The Working Party under the Chairmanship of Sir John Maude, K.C.B., K.B.E., was set up by the Minister of Health, whose decision upon the Report is now awaited with interest.

SECTION B.

HOUSING.

Obsolescent Houses.

As mentioned in previous Reports, there are some 300 dwelling-houses within the Borough awaiting action under the demolition and clearance provisions of the Housing Acts, 1936 to 1949, the condition of which becomes more dilapidated with passing years. With the passage through Parliament of the Housing Repairs and Rents Bill, it is anticipated that the preparation of a comprehensive programme for dealing with this matter within a limited period, is imminent.

It will, of course, be appreciated that this action will increase the demand for housing accommodation in the district as in many cases applications for Council houses will not have been made for families who will be displaced.

In the meantime, action is being taken to ensure that these houses are kept in a weatherproof condition by the execution of such first-aid repairs as may be necessary.

In addition to the above-mentioned houses, there are also a number of sub-standard houses, which have a life estimated not to exceed twenty years, and once the initial problem of clearance has been dealt with, these premises will gradually rank for consideration.

Demolition Orders.

(Proceedings under Section 11 of the Housing Act, 1936, as amended.)

As an emergency measure, Demolition Orders were made in respect of the under-mentioned pair of semi-detached three-storied houses which had become dangerous to the occupiers. Alternative accommodation was provided by the Corporation for the displaced families of one of the houses. These premises had not been demolished at the end of the year :—

Nos. 36 and 38, Chalvey Park, Slough.

Closing Orders and Undertakings by Owners.

The total number of premises in respect of which Closing Orders under Section 12 of the Housing Act, 1936, as amended, or Section 10 of the Local Government (Miscellaneous Provisions) Act, 1953, are in operation, are as follows :—

Entire premises	1
Parts of premises, including underground rooms	15

The following number of premises are subject to undertakings by owners not to use the premises for human habitation :—

Entire premises	5
Parts of premises, including underground rooms	7

Repair and Improvement of Housing Accommodation.

During the year the district sanitary inspectors surveyed and examined some 865 dwelling-houses, following which it was necessary to make 1,853 re-inspections for the purpose of ensuring that unfit houses were repaired to a reasonably satisfactory standard. There were 156 complaints received by the Department from members of the public, relating to the dilapidation of houses and 407 preliminary written and verbal notices were served and in only 34 cases was it subsequently found necessary to serve statutory notices.

As a result of action by the Department, some 222 houses were rendered fit for habitation.

Difficulties facing property owners with regard to repairs are frequently met with, but it is anticipated that the provisions of the proposed Housing Repairs and Rents Act will reduce these difficulties by enabling landlords to maintain their properties to a reasonable standard, thereby largely preventing irreparable dilapidation.

There were no grants made for the improvement of housing accommodation, in pursuance of the Housing Act, 1949, although a number of enquiries were received.

Repair of Properties in Default of Owners.

The under-mentioned works amounting to £400. 10s. 2d. were carried out by the Corporation upon the failure of property owners to comply with the requirements of statutory notices in pursuance of the Public Health and Housing Acts. The expenses incurred in executing these works are recoverable.

<i>Property</i>	<i>Works Executed</i>	<i>Cost.</i>
		£ s. d.
21, Chalvey Road West.	Housing Act, 1936. Section 9.	76 1 5
111, Stoke Road.	" " " " "	99 2 0
27, Station Road, Cippenham	" " " " "	17 17 0
54, High Street, Chalvey.	Housing Act, 1936. Section 9 and Slough Corporation Act, 1949, Section 77.	213 12 9
11, Darvill's Lane	Public Health Act, 1936. Section 75.	17 0

Overcrowding.

The actual degree of overcrowding within the Borough at the present time is not known, but the post-war programme of the Council for the erection of new houses has been the means of remedying several cases of gross overcrowding of dwelling-houses, and there is every reason to believe that the position is improving. Only fifteen complaints of overcrowding of houses were received.

Under the provisions of the Housing Act, 1936, it is necessary to reckon living rooms as sleeping rooms and often one finds that houses occupied by families living under extremely congested conditions are not overcrowded within the meaning of the Act.

When the provision of new houses in the district reaches some degree of finality, and the programme for the clearance and demolition of unfit houses has been dealt with, it will probably be considered opportune to make an overcrowding survey of the Borough.

There were no applications received for licences under Section 61 of the Housing Act, 1936, to permit temporary overcrowding.

"Permitted numbers" of dwelling-houses were from time to time applied upon request to property owners and agents and upon searches being made of the Land Charges Register.

Council Housing Estates.

(a) Housing Allocation.

Eighty-nine applications for Council houses were investigated for the purpose of making recommendation to the Tenancy and Arrears Committee for the award of points in relation to insanitary or sub-standard accommodation under the Housing Points Scheme. On a number of occasions similar information was obtained at the request of other local authorities in cases where their applicants resided within the Borough of Slough. Close co-operation is maintained with the Housing Section of the Corporation in matters relating to rehousing, including the reviewing of changed circumstances of applicants.

(b) Council Housing Estates.

The following inspections of houses situated at Council housing estates were carried out by the Department:—

(i)	Exchanges and transfers of tenancy	36
(ii)	Overcrowding	28
(iii)	Keeping of poultry	19
(iv)	Infestation by vermin	46
(v)	Rodent infestation (officers)	332
	(rodent operators)	693
(vi)	Infestation by wasps, flies, ants, etc.	57
(vii)	Follow-up and miscellaneous visits	383

(c) *Temporary Camp Hutments.*

So far as the Department was concerned, no outstanding difficulties occurred in connection with the several ex-army camps within the Borough, now used as temporary housing accommodation for some 260 families, although complaints received from tenants made a substantial amount of inspection necessary.

Moveable Dwellings.

Apart from holiday makers, those who occupied moveable dwellings a decade ago did so mainly from choice. Nowadays the caravan has become a substitute for a permanent home and throughout the country their increased numbers are directly proportionate to the scarcity of traditional housing accommodation.

In the year 1943, four licences were issued, whereas at the end of the year under review a total of 78 moveable dwellings had been licensed by the Council under the Public Health Act, 1936.

In addition to the twelve-monthly licensing under the Public Health Act, 1936, the siting of moveable dwellings requires the consent of the Council under the Town and Country Planning Act, 1947. Although there is a good measure of co-operation between the Department and the officer of the Area Planning Authority, the public health and planning aspects of moveable dwellings are different and the two governing statutes are difficult to co-ordinate, and quite often the result is as embarrassing for the Council as it is frustrating to the applicant.

During the year the Borough Council refused to grant licences for three caravans on land off Upton Court Road and as a result an appeal was heard in respect of one of them at the Slough Petty Sessional Court, where the Council's decision was upheld. Subsequently the three caravans were removed from the site.

Constant observation was necessary to ensure that all camping sites were maintained in a satisfactory condition and also to prevent unauthorised land being used by moveable dwellings. In this connection 742 visits were made by the district sanitary inspectors.

Rent Restrictions Certificates.

There were no applications received for certificates relating to the condition of repair of dwelling-houses, in pursuance of the Rent and Mortgage Interest Restrictions Acts, 1920-1939.

Information re Local Land Charges.

Requests for information as to outstanding statutory notices, or Orders made in respect of dwelling-houses, were supplied upon request for official search of the Land Charges Register, in respect of 940 properties.

Disinfestation of Verminous Premises.

There was an increase over recent years in the number of complaints relating to the infestation of dwelling-houses by vermin, some 74 notifications being received. Extermination treatment was carried out by the Department in respect of 26 houses, of which 7 were Council properties including the treatment of bedding, etc., at the steam disinfection station. No recurrence of infestation was reported.

The homes of certain prospective Council house tenants were also examined for the presence of vermin.

SECTION C.

SUPERVISION OF FOOD SUPPLIES.

The importance to the community of the degree of thoroughness with which duties arising under this heading are carried out, cannot be over-estimated. They cover a wide range and include the inspection of meat and other foods, as to their fitness for human consumption, the bacteriological and other examinations of milk and ice-cream, the control of compositional standards and quality of foods and drugs, and the protection of the purchaser against false trade descriptions and advertisements relating to food.

These duties also embrace the inspection of premises of all kinds at which food is manufactured, prepared, stored or sold, for the purpose of ensuring that the highest standards of hygiene are observed not only in relation to the premises themselves, but also the food handlers employed thereat, and finally, but by no means the least important, the vehicles used for the transportation and distribution of food.

This section of public health work demands much time and thought and the activities of the Department are summarised under the following sub-headings :—

Hygiene of Food Premises and Food Handling.

The cause of clean food has again been stressed during the year, when 3,245 visits were made to premises used for the sale, storage, manufacture or preparation of foodstuffs intended for human consumption.

In the main there is little doubt that the standard of cleanliness of these premises is maintained at a reasonably high level and it is pleasing to be able to report that much has been achieved without recourse to legal proceedings. There is, however, room for improvement in some respects.

Towards a satisfactory and clean food goal there are two independent main avenues of approach. The one may be described as official control, that is, the business of the Sanitary Inspector, and here it would appear that the answer lies in the frequent routine inspection of premises and equipment including the direct approach to the food handler. The other is the purchaser, who can make a considerable contribution by refusing to tolerate conditions of cleanliness or habit which leave something to be desired. Examples are the licking or wetting of fingers before using wrapping paper; handling food by hand when other equipment is or should be available. There are many opportunities for the customer to make his or her own observation as to whether or not food is carelessly handled or unreasonably exposed to contamination. There is ample evidence that the public are becoming more hygiene conscious and it is satisfying to be able to report an increasing degree of co-operation between members of the public and the Department on matters concerned with clean food.

During the year the trade-by-trade food hygiene survey of food premises was continued. A comprehensive survey of all fish shops was undertaken and towards the end of the year retail grocery premises began to receive the Department's special attention.

In making these detailed surveys, our endeavour is to raise the standard of food hygiene above that which can be legally enforced. This is not always an easy matter. In many other spheres of his work the Sanitary Inspector can fall back on the strict requirements of the law, but in food

hygiene he attempts to get the best conditions possible and this can only be achieved by a tactful approach and invitation for co-operation.

As the survey of each particular trade is completed, the premises are classified into categories A, B and C. At the end of 1953, the classification of the trades so far surveyed was as follows :—

Category*	Catering Establishments	Butchers Shops	Fish Shops
A	31	30	5
B	31	15	17
C	6	2	5
Total	68	47	27

*A. Those establishments at which the premises, methods practised and the personnel are found to be well above the minimum statutory and byelaw requirements, and where encouragement to maintain or even to improve upon the present standard can be given to advantage.

B. Establishments at which the hygienic conditions only comply with the minimum statutory and byelaw requirements, but with efforts on an advisory basis a higher standard will no doubt be obtained.

C. Those premises at which conditions are found to leave much to be desired and to fall below statutory and byelaw requirements. In these cases considerable effort and continual attention by the district sanitary inspectors will be necessary for some time to come.

In general fish shop premises and equipment were found to be well maintained. The majority of our fish supplies are still transported from the wholesaler at the ports to the retailer in wooden boxes. The wooden box is absorbent, difficult to clean and generally unsatisfactory. They are gradually being replaced by the more hygienic metal boxes, but the process is very slow.

There exists within the fish trade some opposition towards the closed shop front and in the local shops with open fronts, proprietors were not too ready to alter these long standing and traditional arrangements. There have been, however, numerous interviews and discussions with the traders concerned on this point, resulting in a good measure of success. Members of the Health and Sanitation Committee have already stated that they favour the closed shop front for all food premises.

The surveys we are making are proving of value not only by securing improvements in buildings and equipment, but also in providing an occasion for health education. Every opportunity is taken to stress upon managers and staff the importance of cleanliness in food handling and we feel that it is resulting in a better appreciation of food hygiene principles.

The majority of food traders in the town continue to display the notice seeking the co-operation of the public to keep dogs out of their premises. Unfortunately, however, some of these notices have found their way to somewhat inconspicuous places rather than in the shop window or on the

door. Nevertheless, it is true to say that traders and the public have co-operated in this respect.

It is anticipated that the new Food and Drugs Act and the regulations to be made thereunder will give more powers to the Local Authority, including the compulsory registration of certain types of food premises as was recommended in the Report of the Catering Trades Working Party in 1951.

Following the importance and wide public interest in clean food, the Council of the Royal Sanitary Institute have instituted a Standing Committee on the Hygiene of Food and Food Equipment which incorporates the principal interested bodies. Its purpose includes the correlation, development and co-ordination of work on food hygiene with special reference to the formulation of functional specifications related thereto. Such action by the Institute is opportune in view of the Government Bill to amend the Food & Drugs Acts, 1938 to 1950. Your Chief Sanitary Inspector has been appointed a member of this Committee and the Chairman of its sub-committee set up to consider the Hygiene of retail food premises.

The accompanying diagram shows in detailed outline the scheme of inspection which is being followed in the Borough Council's Clean Food Campaign.

FOOD HYGIENE INSPECTION.

(SHOPS — STALLS — VEHICLES)

CATERING ESTABLISHMENTS (Cafes, snack bars, Public houses, industrial canteens, etc.)											Butchers	Fishmongers	Grocers	Milk & Dairy Products. Ice-Cream. confectionery	Bread and Cake Con- fectionery	Fruit and Greengrocers	Food manufacturer	Sugar confectionery	General Stores			
Condition of Premises			Equipment and Utensils			Protection against contamination of food			Pests		Personnel		Refuse									
Shop	Eating Room	Preparation Room	Stock Room	Food Store	Design	Condition	Washing up	Insects	Rodents	Control methods.	Handling	Display	Adequate covering	Animals	Rooms used in common with living accommodation	Habits.	Protective clothing	Reporting illness	Education Facilities for taking meals	Bones	Pig swill	Paper, etc.
	Internal Surfaces	Drainage	Ventilation	Temperature	Lighting	Natural.	Artificial	Sanitary Accommodation	Washing facilities													
										Walls	Ceilings	Floors										

Clean Food Byelaws.

Since the coming into operation in August 1950, there has been no occasion to institute legal proceedings under these Byelaws, and it may be said that their provisions are well observed.

Milk and Dairies.

The milk supply of the Borough and the surrounding area is to a great extent centralised at three pasteurising establishments, in respect of which licences are granted by the Corporation in pursuance of the Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949 and 1950.

An Order made by the Ministry of Food under the Food and Drugs (Milk, Dairies and Artificial Cream) Act, 1950, declared the area of "Reading and District," comprising several local authority districts including the Borough of Slough, a "Specified Area" for the sale of milk by retail, with effect from 2nd December, 1953. The Order requires that all milk retailed must conform to the requirements of the Milk (Special Designation) Orders, relating to both raw and heat-treated milks.

For some years your officers have sought to discourage the sale of loose milk by retail delivery or in small general and other shops. They have similarly discouraged the bottling of milk at small, inadequately equipped and otherwise unsuitable dairies. This has resulted in most small retailers receiving milk ready-bottled at the wholesale dairies, with the risk of contamination thereby reduced to a minimum. In view of the milk supply of the Borough being already sold under special designations, the Order relating to Specification of Areas has not made any change of procedure necessary among our retailers.

Fifty persons were registered by the Corporation as Distributors of Milk and nine premises as Dairies at December, 1953. During the year the district sanitary inspectors made 142 inspections of dairies and these premises were found to be maintained in a satisfactory condition.

I am pleased to report that very few instances of the misuse of milk bottles, inefficiently cleansed bottles, or of foreign bodies in milk, have come to the notice of the Department.

It is the aim of the Department to maintain a milk supply of the highest hygienic standard of quality and I am grateful to our milk traders whose co-operation in this campaign has made the achievement possible.

Sixty licences were issued in pursuance of the Milk (Special Designation) Orders, as follows:—

Dealer's (Pasteuriser's) Licences	3
Dealer's Tuberculin Tested Milk Licences	9
Dealer's Pasteurised Milk Licences	9
Dealer's Sterilised Milk Licences	34
Supplementary Licences	5

Bacteriological Examination of Milk.

A constant and important feature of our activities is the control of the milk supplies of the Borough by means of frequent sampling, both at registered dairies from which milk is distributed and also in the course of retail sale.

It is an asset which cannot be too highly valued to have a laboratory at hand in the Department at which routine milk and other samples can be

examined. During the year 211 samples of milk were submitted for examination for bacteriological quality and efficiency of heat-treatment and it is worthy of particular note that only one sample of pasteurised milk failed to comply with the prescribed conditions of licensing. The results are detailed in Table No. 4. A number of milk bottle rinses were also examined bacteriologically.

As in previous years, monthly returns were made to the Ministry of Food, Milk Division, upon samples of milk procured from our three licensed pasteurisation plants, one of which operates on the "high-temperature short-time" process, and two on the "holder" process.

TABLE No. 4.

Bacteriological Examination of Milk.

Classification	Number of Samples Tested	Number of Samples	
		Passed	Failed
Pasteurised Milk	116	115	1
Tuberculin-Tested (Pasteurised) Milk	78	78	-
Tuberculin-Tested Milk	9	9	-
Sterilised Milk	7	7	-
Non-designated, raw Milk	1	1	-

Manufacture, Storage and Sale of Ice-Cream.

Only six registered premises are now used for the manufacture of ice-cream, which, like milk has, for economic reasons, tended to become concentrated in large-scale manufacture and distribution. In one instance the 'complete cold-mix' method was carried out.

One hundred and forty-nine premises have been registered for the sale of ice-cream, including 17 applications approved by the Borough Council during the year. In addition, ice-cream is now sold at most restaurants, etc., cinemas and canteens, which premises are not subject to registration by the Local authority.

Although, to some extent, the demand for ice-cream is seasonal, careful attention is given to the conditions under which it is manufactured, stored and sold, all the year round, and 260 visits to registered and other premises were made by your officers for the purpose of ensuring compliance with the Ice Cream (Heat Treatment) Regulations, 1937-1952, the maintenance of a good standard of hygiene, and for procuring samples for examination.

This has produced encouraging results for with improved conditions of premises and methods, it is unusual to receive adverse reports upon samples of ice-cream. Of 156 samples procured for bacteriological examination for advisory purposes, including samples from restaurants, cafes and snack-bars, all but 7 samples complied with the conditions recommended by the Ministry of Health, and were graded as satisfactory. This is a further improvement on the results of previous years. The majority of shops now sell ice-cream pre-packed, thereby eliminating the risk of contamination after wholesale distribution.

Whenever adverse reports upon samples were received, special follow-up visits were made by the district sanitary inspectors and the causes of such results have most frequently been found to be inadequate cleansing or inefficient sterilisation.

Special attention is given to itinerant vendors of ice-cream, including those entering the Borough from outside districts, but it is not too easy a matter, owing to the irregularity of such visits. Generally, the vehicles and tricycles of itinerant vendors have been found to be in a cleanly condition.

It is pleasing to record the restoration in June, 1953, of the statutory minimum standard of fat-content for ice-cream of 5 per cent. Of 24 informal samples examined in the Department laboratory, only one sample was found to be below the legal limit, and the average fat-content of these samples was 9.3 per cent.

Preparation or Manufacture of Preserved Foods.

At the close of the year there were 55 premises registered under Section 14 of the Food and Drugs Act, 1938, for use for the preparation or manufacture of sausages or potted, pressed, pickled or preserved food intended for sale, which processes include the cooking of meat and fish.

The premises have been regularly inspected, 318 visits having been made by the district sanitary inspectors who found conditions to be generally satisfactory. Samples of food products were also submitted for examination from time to time.

Bakehouses.

Bakehouses under the supervision of your officers include those premises registered as factories and also the smaller bakehouses operated by individual persons or families. There are no basement bakehouses within the Borough.

Premises on Register	12
Inspections by District Sanitary Inspectors	60
Notices served re Contraventions	3

Food and Drugs (Compositional standard and quality).

During the year under review the Corporation "sampling officers" procured some 601 samples of foods and drugs, representing 9.0 samples per thousand of the estimated population based upon the Registrar-General's figure of 66,950 for 1953, as compared with 487 samples during the previous year.

Of these samples, 233 were submitted to the Public Analyst, Mr. Eric Belcker, A.R.C.S., F.I.C., and the following informal samples were tested in our Department laboratory:—

Milk	322 samples
Spirits	22 "
Ice-Cream	24 "

As in previous years, samples of milk were procured periodically upon every at establishments within the Borough, of the Windsor Group Hospital Management Committee.

The average chemical quality of the milk samples examined was fat 3.8% and solids-not-fat 8.93%, which is well above the minimum presumptive legal standard.

Following the revocation of the Ministry of Food Order which controlled the composition of sausages, twenty-three samples of this commodity were procured for analysis and in all cases were found to be well above the minimum standards provided by the Order.

Table No. 5 sets out particulars of the articles of foods and drugs submitted for analysis, of which the Public Analyst reported adversely upon 9 samples, or 3.8% of the samples submitted to him, as compared with 4.3% in 1952; 3.6% in 1951 and 2.4% in 1950.

The institution of summary proceedings was only found to be necessary in one instance. Particulars of the administrative action taken in respect of those samples which were the subject of adverse analytical reports are set out in Table No. 6.

Preservatives and Colouring Matter.

Ninety-nine samples of foods were examined by the Public Analyst for the presence of prohibited preservative and colouring matter. All the samples were found to be satisfactory in this respect.

Labels and Advertisements.

A particularly interesting and important activity of the Department has been that of keeping a close watch upon the character of the labels of various pre-packed foods and also of advertisements for food appearing in newspapers and periodicals.

Since the introduction of the Defence Sale of Food Regulations, 1943, and the Labelling of Food Orders, a considerable improvement has taken place, insofar as "highly exaggerated" or "over-optimistic" statements on food labels and in advertisements, obviously intended to falsely describe the food or otherwise mislead the purchaser as to its nature, substance and quality and in particular, its nutritional or dietary value, do not now appear in so obvious a form as previously.

During the past year, the labels of all foods manufactured in the Borough were carefully checked with the certificates of analysis of those articles, but in no instance was a contravention of the relevant statutory provisions found.

In scrutinizing advertisements for food which appeared in daily newspapers and popular weekly publications, it was observed that there was a tendency for certain firms to make claims of vitamin, mineral and tonic properties of their products without complying with the provisions of the Labelling Order, 1953. The Order requires that if any claim is made to such properties, then detailed information in specified form, including quantity in international units, must be given.

TABLE No. 5.

Summary of Food and Drugs Samples Submitted to the Public Analyst

	Procured		Adulterated	
	Formal	Informal	Formal	Informal
FOODS :				
Almonds, ground	1			
Apple jelly	1			
Arrowroot	1			
Baking powder	1			
Beans in tomato sauce		1		
Beer		24		
Bread (containing foreign matter)		1		1
Butter	2			
Cake, flour, sugar sweetened	1			
Cereal, baby food	1			
Cheese	3			
Cheese, processed	4			
Chewing gum		1		
Christmas pudding	1			
Coconut, desiccated	1			
Cod roe spread, smoked	1			
Coffee	3			
Coffee bits	1			
Crab, dressed	1			
Cream, fresh	2			
Custard powder	2			
Dried milk, National		1		
Dripping	5			
Easter eggs, chocolate	2			
Fat, cooking	2	1		
Flavour, vanilla	1			
Foam crystals	1			
Food colour, artificial	1			
Food drink	1	2		
Fountain sherbert	1			
Fruit pudding, apple	1			
Fruit salad	1			
Gelatine	1			
Gravy powder	1			
Honey	1	1		
Jam	3	1		
Jelly	1			
Lemon cheese		1		
Lemon quenchers	1			
Lemonade powder	2			
Liver extract	1			
Margarine	2			
Margarine, cake		2		
Marmalade	2	1		
Meringue powder, mock cream &	1			

TABLE No. 5 (contd.)

Summary of Food and Drugs Samples Submitted to the Public Analyst

	Procured		Adulterated	
	Formal	Informal	Formal	Informal
Milk	14	3	5	3
Minced meat	3			
Nutmeg, ground	1			
Pears in syrup		1		
Pease pudding	1			
Pepper flavoured condiment	1			
Pepper, white	1			
Pineapple jelly with grated pineapple	1			
Popcorn		1		
Pork pie	1			
Pudding mixtures, various	2	1		
Rice	2	1		
Sauce	1			
Sauce powder, rum flavoured	1			
Sausages, beef	14			
Sausages, pork	9			
Semolina	1			
Soup, tomato	1			
Spaghetti		1		
Spice, mixed	2			
Squash, grapefruit, and orange & apple	2			
Steak, stewed	1			
Stuffing, herbal	2			
Suet, beef	1			
Suet, shredded beef	1			
Sugar confectionery	18	17		
Tea	3			
Vinegar	6			
Welsh rarebit	1			
DRUGS:				
Aspirin tablets, compound	1	1		
Bicarbonate of soda	2			
Boracic Powder	2			
Borax	1			
Codein Linctus	1			
Cough Linctus	2			
Compound tablets of codein	1			
Cream of Tartar	1			
Creosoted Syrup	1			
Mentholated Balsam	1			
Mentholated Bronchial Pastilles	1			
Nerve tonic	1			
Supavite capsules	1			

TABLE No. 5 (contd.)

Summary of Food and Drugs Samples Submitted to the Public Analyst				
DRUGS :	Procured		Adulterated	
	Formal	Informal	Formal	Informal
Vitamin C Rose hip & orange with extra				
Glucose	1			
Vitamin & mineral tablets.....	2			
Yeast tablets	1			
TOTAL FOODS :	150	62	5	4
TOTAL DRUGS :	20	1	-	-
TOTAL FOOD AND DRUGS :	170	63	5	4

In addition to the above-mentioned samples, 22 unofficial samples of spirits, 24 unofficial samples of ice-cream and 322 unofficial samples of milk were tested informally, of which 37 samples of milk were found to be sub-standard.

TABLE No. 6.

Food and Drugs Samples Reported not to be Genuine			
Sample No.	Food	Adulteration	Action Taken
—	Bread	Foreign matter due to grease.	Attention of manufacturer drawn to matter.
251 (Formal)	Milk	Deficient in fat 40.0%	Follow-up samples at farm showed this sample to be sub-standard but genuine. Warning letter sent to farmer.
332 (Informal)	Milk	Added water 8.6 per cent.	Summary proceedings instituted against producer. Case dismissed.
335 (Informal)	Milk	„ „ 23.7 „ „	
341 (Formal)	Milk	„ „ 4.7 „ „	
342 (Formal)	Milk	„ „ 5.6 „ „	
343 (Formal)	Milk	„ „ 3.7 „ „	
344 (Formal)	Milk	„ „ 12.4 „ „	Follow - up samples were satisfactory.
347 (Informal)	Milk	Added water 2.8 per cent.	

Pharmacy and Medicines Act, 1941.

No contraventions were observed.

Merchandise Marks Acts, 1887-1953.

A careful watch was kept upon all imported foods which are subject to Orders made under the Act of 1926, and generally of all foods which might be liable to a false trade description. No contraventions were observed.

Foreign Bodies in Foodstuffs.

As in previous years, several complaints were received regarding the presence of extraneous matter in food sold by retail, and there appears to be an increasing public awareness of the necessity of reporting such cases to the Department.

All complaints were fully investigated, but owing either to the lack of sufficient evidence, the unwillingness of the complainant to appear in a court of summary jurisdiction, or the minor character of the matter, no proceedings were instituted.

The Inspection of Meat and Other Foods.

It is with satisfaction that I am again able to report that one hundred per cent. inspection was carried out of the 12,444 animals slaughtered for human consumption at the Cippenham Lodge Farm slaughterhouse, including the slaughtering of approximately 300 casualty animals, some 695 visits being made for that purpose, including attendance outside normal working hours. The inspection of meat is carried out by those officers of the Department who possess the qualification of the Royal Sanitary Institute for Inspectors of Meat and Other Foods.

I am pleased to record the co-operation of the Ministry of Food officials and Slaughtering Contractor with your officers in their efforts to secure that the preparation of meat is carried out under hygienic conditions. To a great extent this has been achieved, despite the structural drawbacks of the premises. It is hoped, however, that the siting of an Abattoir to serve the Slough area, will not be unduly delayed.

Some 19 $\frac{3}{4}$ tons of meat were condemned as unfit for human consumption (see Tables Nos. 7 and 8) and was disposed of by the Ministry of Food.

No horses were slaughtered for human consumption, but there is one shop within the Borough used exclusively for the retail sale of horseflesh.

Two hundred and seventy-one visits for the purpose of examination of foods, other than butcher's meat were made at retail shops, warehouses and factories, when some 6 $\frac{3}{4}$ tons of food were condemned as unfit for human consumption and destroyed by the Department (see Table No. 9).

Nine hundred and sixty-five condemnation certificates were issued to the Ministry of Food and food traders, in respect of unsound meat and other foods.

Meat Transport.

The vehicles used for the delivery of meat to retail butchers in this district have been found to be kept in a generally clean condition, but vehicles of improved construction, such as will permit the hanging during transport of all meat and offals, is urgently needed. Following representations by the Department, as mentioned in my last Annual Report, the maintenance in a cleanly condition of the protective clothing worn by the men engaged in meat delivery, has improved.

TABLE No. 7.

Carcases Inspected and Condemned.					
	Cattle Ex. Cows	Cows	Sheep & Lambs	Pigs	Calves
No. of animals slaughtered and inspected	2,023	450	7,543	1,518	910
Disease except tuberculosis :					
Whole carcasses condemned	3	4	3	29	2
Carcasses of which some part or organ was condemned	509	131	302	103	4
% of No. inspected affected with disease other than tuberculosis	25.3	30.0	4.0	8.7	0.7
Tuberculosis :					
Whole carcasses condemned	8	15	-	-	4
Carcasses of which some part or organ was condemned	175	102	-	41	4
% of No. inspected affected with tuberculosis	9.0	26.0	-	2.6	0.9

TABLE No. 8.

Weights of Condemned Meat						
	Tuberculosis			Other Diseases		
	cwts.	qrs.	lbs.	cwts.	qrs.	lbs.
Carcases	114	1	7	87	1	6
Parts of Carcasses or Organs	71	3	7	122	1	2
TOTALS	186	0	14	209	2	8
TOTAL WEIGHT : 19 tons 15 cwts. 2 qrs. 22 lbs.						

TABLE No. 9.

Weights of Canned and Other Foods Condemned as Unfit for Human Consumption lbs.				
Canned Food	Preserved	Fish	Bacon	Imported Meat
11,536	115	330	3	618
Fruit	Cereals	Eggs (No.)	Cheese	Misc.
1,200	40	—	86	1,295
TOTAL WEIGHT: 6 tons 15 cwts. 3 qrs. 19 lbs.				

Slaughter of Animals Acts, 1933 and 1951.

The statutory provisions relating to the humane slaughtering of animals and the licensing of slaughtermen, have been well observed and no infringements were reported. The captive-bolt type of humane killer is used for the stunning of all animals at the Ministry of Food slaughterhouse.

Eleven licences were renewed and two new licences granted to enable the holders to slaughter animals for food.

SECTION D.

FACTORIES, WORKPLACES AND SHOPS.

Factories.

With the concentration of industry at the Slough Trading Estate, the supervision of factories is a matter of some importance for the Health Department deals with all matters which under the Factories Acts, 1937 and 1948, are the responsibility of the District Council, with the exception of the provision of means of escape in case of fire, which is dealt with by the Borough Engineer.

Routine inspection of 496 factories within the Borough was regularly carried out, the visits made and results achieved by your officers being set out in Tables 10 and 11, which have been prepared in accordance with Section 128 of the Factories Act, 1937.

Several complaints of noise nuisances arising from industry were investigated, but in no instance was the nuisance considered to be a matter in which effective action could be taken under the provisions of the Slough Corporation Act, 1949.

Much useful work was achieved at food manufactories and factories provided with canteens, as these premises are inspected not only for the purpose of enforcing the Factories Acts, 1937 and 1948, but also under the Food & Drugs Act, 1938, and in an advisory capacity in relation to the application of food hygiene.

TABLE No. 10.
Inspection of Factories.

Premises (1)	Number on Register (2)	Number of		
		Inspections (3)	Written Notices (4)	Occupiers Prosecuted (5)
(i) Factories in which Sections 1, 2, 3, 4 & 6 are to be enforced by the Local Authority.	35	136	12	Nil
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority.	461	586	56	Nil
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers premises).	Nil	Nil	Nil	Nil
TOTAL :	496	722	68	Nil

TABLE No. 11.

Improvements Effected at Factories.

Particulars (1)	Number of cases in which defects were found				No. of cases in which prosecutions were instituted (6)
	Fnd. (2)	Remedied (3)	Referred		
			To H.M. Inspector (4)	By H.M. Inspector (5)	
Want of cleanliness (S.1)	7	2	-	-	-
Overcrowding (S.2)	-	-	-	-	-
Unreasonable temperature (S.3)	1	-	-	3	-
Inadequate ventilation (S.4)	-	-	-	-	-
Ineffective drainage of floors (S.6)	-	-	-	-	-
Sanitary conveniences (S.7)					
(a) insufficient	10	2	-	-	-
(b) unsuitable or defective	54	44	-	2	-
(c) not separate for sexes	1	1	-	-	-
Other offences against Act (not including offences relating to Outworkers).....	-	-	-	-	-
TOTAL	73	49	-	5	-

These figures include contraventions carried forward from previous reports.

Homework.

It is the responsibility of occupiers of factories from which out-workers are employed in certain specified classes of work, to make returns in the prescribed form to the District Council, twice yearly in February and August.

Outworkers lists received during the year showed that homework is carried out at 58 premises within the Borough. Nineteen lists in respect of 81 outworkers were sent to other local authorities and lists were received from 6 authorities.

Outworkers premises were regularly inspected by the district sanitary inspectors and in all cases it was found that work was carried out under satisfactory conditions.

Drinking Water Supply.

One request was received for approval by the Council of a factory drinking water supply.

Shops Act, 1950, and Young Persons Employment Act, 1938.

The provisions of the above-mentioned Acts were found to be generally well observed. The following inspections were made, improvements effected and special observations taken as to the temperature of shops :—

(a) *Inspections :*

Arrangements for the health and comfort of shop workers	455
Conditions of employment	234
Hours of employment of young persons	54
Hours of closing	138
Sunday trading	54

(b) *Improvements Effected at Shops :*

Provision of additional sanitary accommodation	1
Provision of washing facilities	12
Means of lighting or heating improved	8
Contraventions remedied—Employment of Young Persons	1

(c) *Special Observations as to the Temperature of Shops :*

Further to my report of the work carried out in 1952 for the purpose of securing a reasonable temperature in all parts of shops in which persons are employed, these investigations were followed up and continued during 1953. Several premises at which improved means of heating had been installed were carefully watched to confirm the effectiveness of the measures taken and other premises were inspected and made to comply with the requirements of the Shops Act, 1950, in relation to temperature.

Workplaces.

As far as was found possible, workplaces, including offices, were inspected from time to time. Fifty-four inspections were carried out during the year.

Places of Entertainment.

Ten inspections were made of buildings used for the purpose of public entertainment.

SECTION E.

GENERAL SANITATION.

Atmospheric Pollution and Smoke Abatement.

The cleanliness of the atmosphere is a subject which demands the closest attention of your officers.

In the main, Slough factories make use of electricity in lieu of steam. Several factories have steam raising plant which is equipped with appliances for indicating and preventing the emission of smoke. Nevertheless, occasional excessive emissions of smoke do occur and receive the Department's immediate attention.

During the year, 18 complaints were received concerning smoke and associated problems. As a result 239 smoke observations were made and in addition 111 special visits of investigation were paid to the factories where executives, engineers and stokers were interviewed.

Both your Chief and Deputy Chief Officers, who hold the special qualification of the Royal Sanitary Institute as smoke inspectors, personally tend to special problems of smoke emission which arise from time to time.

During the year the Government appointed an advisory Committee to enquire and report on Air Pollution (Beaver Committee). This Committee have already published an interim report in which they stress the need for replacing and modifying existing equipment and education and training in these matters.

With the important exception of how to deal with the emission of sulphur oxides the solution to the industrial smoke problems are known. There remains, however, the evil of domestic smoke over which there is at present no legislative control and therefore which presents a far more difficult problem. Towards a solution of the domestic smoke problem are increased use of gas and electricity and smokeless fuels, but there is little incentive for their use at the moment, for, whereas most of the necessary appliances are subject to purchase tax, the available supplies of solid smokeless fuels are very limited and more costly than other kinds of fuel.

As constituent members of the National Smoke Abatement Society and the Home Counties Smoke Abatement Advisory Committee, the Corporation continue to show interest in this important, although often neglected, aspect of the Public Health. Your Vice-Chairman and my Deputy attended the Annual Conference of the former organisation which in 1952 was held at Glasgow, and your Chief Sanitary Inspector continues as a member of the Executive Committees of both bodies. During the year the Royal Sanitary Institute organised an exhibition on Smoke Abatement, which was visited by your officers.

Offensive Trades.

The only offensive trades scheduled under the Public Health Act, 1936, which operated under the annual consent of the Corporation, were a soap boiler and a rag and bone dealer. The premises were subject to frequent inspection and were found to be well maintained. No complaint of nuisance was received.

There are no special Orders applicable to the Borough declaring other offensive trades.

House Drainage.

A total of 619 visits were made for the purpose of investigating some 134 complaints by members of the public concerning the defective condition of drains and sanitary fittings and in supervising remedial works in progress.

At 12 premises, drainage systems were re-constructed and at 38 premises other sanitary improvements were effected. A number of hydraulic and smoke tests were applied to drainage systems. The cesspool of one house was abolished and the drainage system was connected to the public sewer.

Water Supply.

At the end of the year there were only 7 houses at which the public water supply was not installed. In the case of 4 of these houses, which are situated in a somewhat isolated position, negotiations were well in hand for the laying of a water service pipe from the nearest water-main, a distance of some 450 yards, towards which work the Corporation agreed to make contribution of fifty per cent. of the expenses incurred.

Eighty-seven visits were made in connection with water supplies and the following samples of water were procured :—

Domestic water samples	.....	.....	.....	14
Swimming bath water samples	.....	.....	.....	42

Rag Flock and Other Filling Materials Act, 1951.

In pursuance of the above Act and Regulations made thereunder, six premises are registered for the use in bedding and upholstery manufacture of specified filling materials. One premises is licensed annually for the storage of rag flock. All premises were found to be maintained in a satisfactory condition.

SECTION F.

PEST INFESTATION CONTROL.

Under the Prevention of Damage by Pests Act, 1949, the Council are charged with the carrying out of pest infestation control work. The Pest Infestation Section of the Department, consisting of a pest control officer and five rodent operators, has discharged the various duties under the following headings :—

- (a) Private dwellings—(free service).
- (b) Industrial and business premises—(short-term treatment—re-chargeable).
- (c) Industrial and business premises—(Annual Agreement Scheme).
- (d) Sewer treatment.
- (e) Local authority premises.
- (f) Destruction of pests other than rodents—(re-chargeable).

A Government grant-in-aid of 50 per cent. of approved expenditure upon rodent control is made in respect of the treatment of private dwellings, sewers and local authority properties, subject to an efficient control service being maintained by the local authority.

Rodent Control.

Prompt notification by occupiers is essential for successful rodent control measures. During the year the Department received 398 notifications of infestation by rats and 81 in respect of mice. In 1944 there were only sixty-eight such notifications. This does not indicate that during the last nine years infestations of rats and mice have increased, but that the public in general have appreciated the value of notification. As a result of these notifications and other work of investigation, 3,846 visits were made by the district sanitary inspectors and the pest control officer, in addition to the work of the rodent operators, summarised in Table No. 14.

No "reservoir" or "major" infestations are known to exist within the borough, and in some areas of the town a decrease in infestation is apparent. To improve or indeed to maintain this position calls for the utmost vigilance.

In the main the Department practises those methods of treatment which are recommended by the Ministry of Agriculture and Fisheries. Your officers are in close touch with the Ministry on matters of research and control measures and advantage is taken of the refresher courses for rodent operators which are held from time to time.

No formal action under the Prevention of Damage by Pests Act, 1949, was necessary during the year.

Treatment of Sewers.

As required by the Ministry of Agriculture & Fisheries, pest baiting and treatment of sewers were carried out twice during the year. This is considered an important aspect of rodent control, as the relationship between infestation of sewers and premises can be readily appreciated.

As will be seen by reference to Table No. 14, out of a total of 550 sewer manholes examined, it was necessary to lay only 35 poison baits, indicating that the degree of infestation in the town's sewers is very slight.

Workable Area Committee for Rodent Control.

The Council were represented at the several meetings during the year of the above Committee which comprises the districts of adjoining local authorities in South Bucks and East Berks, and which facilitates discussion amongst its constituent members.

Annual Agreement Scheme.

Table No. 13 shows the increased popularity of this scheme since it was first introduced in 1949. Considerable effort has been made to encourage industrial concerns to participate in the scheme and it is now considered that any great increase is unlikely in the immediate future. Quite a number of concerns are under contract with commercial firms specialising in rodent treatment work and a number of premises which are branches of multiple firms are serviced by their own specialist personnel.

Nevertheless, the Council's scheme meets the requirements of industrial and business firms, particularly where food is handled, manufactured or stored, including industrial canteens.

In addition to actual treatment for rodents, the scheme provides for periodic visits to ensure that premises remain free of infestation.

It is pleasing to be able to report that the scheme continues to be self-supporting.

TABLE No. 13.

Annual Agreement Scheme			
Year	No. of Agreements	No. of separate Premises involved	Total Sum £
1949/50	55	77	754
1950/51	92	131	1,054
1951/52	120	151	1,463
1952/53	130	163	1,488
1953/54	132	160	1,531

Other Pests.

Treatment for the eradication of pests and insects other than rodents was also carried out as follows :—

Wasps nests	28
Beetles	25
Flies	4
Other insects	22

TABLE No. 14.
RODENT INFESTATION CONTROL (RODENT OPERATORS).

	Private Dwellings	Business Premises		Sewer Treatment (Manholes)	Refuse Destructor, Tips, Dumps, etc.	Parks, Hedges, Ditches, etc.	Other Council Properties	TOTALS
		Annual Agreement Scheme	Short Term Action					
1. Premises at which investigation was made.....	1,125	169	47	550	6	12	16	1,925
2. Premises treated by the Corporation	892	160	47	550	6	7	7	1,669
3. Pre-Baits Laid	6,411	23,555	335	550	738	560	305	32,454
4. Poison Baits Laid	3,735	16,475	309	35	476	345	161	21,536
5. Poison Baits Taken	1,804	5,837	247	10	302	306	112	8,618
6. No. of Visits Made	4,343	6,263	139	763	148	373	325	12,354

SECTION G.

MISCELLANEOUS.

Building Licensing.

Licences permitting the execution of building work (other than the erection of new houses) has been dealt with by the Department since 1945, when this emergency measure was introduced and became a local authority responsibility.

With the increasing of the financial limits of control, from time to time this work has now virtually ceased. During the past nine years I have issued some 4,400 Building Licences together with certificates of essentiality and authorisations to acquire controlled building material to the value of over £200,000.

Petroleum (Regulation) Acts, 1928-1936.

During the year the Borough Council gave consideration to the desirability of reviewing the conditions attached to licences permitting the storage of petroleum spirit, when it was decided to adopt the conditions of licensing contained in Appendix "J" of the Home Office Report of November, 1951.

As a result of this decision, approved detailed plans of premises and storage installations are now required to form part of all licences granted and the position of the Local Authority has been strengthened in its onerous task of administering the Petroleum (Regulation) Acts, 1928-1936.

Arrangements have been made for the examination of all electric equipment associated with petroleum service pumps by the Southern Electricity Board on behalf of the Corporation during the next licensing period.

Petroleum storage within the Borough may be classified within the following categories :—

(a) Bulk storage.

- (i) distribution depots.
- (ii) industrial bulk storage.
- (iii) filling stations.

(b) Can storage for retail or wholesale distribution.

At the end of the year there were 157 licences in operation for the storage of 513,417 gallons of petroleum spirit and mixtures and 2 licences for the storage of some 9,720 lbs. of carbide of calcium. Some 706 inspections were made and 127 contraventions remedied.

The continued co-operation of the Buckinghamshire Fire Brigade, Fire Prevention Department, and assistance given in the many problems which arise, is particularly appreciated.

Registries of Female Domestic Servants.

No change in the register has taken place since my last report. The Byelaws made by the Corporation have been well observed and no contraventions were recorded.

Registration of Dealers in Old Metal and Marine Stores.

The register of scrap metal dealers is kept by the Department. No contraventions were observed.

Heating Appliances (Fireguards) Act, 1952.

During the year, Regulations were issued to implement the above-mentioned Act, and the Sanitary Inspectors of the Department have been appointed by the Borough Council as officers for the purposes of the Act. No contraventions were observed.

