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Contributors

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ST. ALBANS CITY
AND
ST ALBANS RURAL DISTRICT COUNCIL



ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

JAMES C. SLEIGH, M.B., Ch.B., D.P.H.

AND

THE SENIOR SANITARY INSPECTOR

ST. ALBANS RURAL DISTRICT COUNCIL

DAVID J. GRAHAM, M.S.I.A., M.R.San.I.

FOR THE YEAR

1952

ST. ALBANS:

PRINTED BY H. A. RICHARDSON, LTD., 5 HIGH STREET

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Councillor A. C. Brooks
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JAMES C. SLEIGH, M.B., Ch.B., D.P.H.
Medical Officer of Health.

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Chief Sanitary Inspector.
Inspector of Meat and Other Foods.

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Inspector of Meat and Other Foods.

F. H. A. BURTON, M.S.I.A., M.R.San.I.,
Sanitary Inspector.
Inspector of Meat and Other Foods.

C. W. McHUGO, F.R.I.C.,
Public Analyst (Part-time).

MISS P. M. CURRY,
Secretary. (Resigned August 1952.)

MISS I. V. YOUNG,
Clerk.

R. H. FOX,
Sanitary Assistant.

ST. ALBANS RURAL DISTRICT COUNCIL : *Staff.*

DAVID J. GRAHAM, M.S.I.A., M.R.San.I.,
Senior Sanitary Inspector.
Cleansing Superintendent.

W. A. BEERE, M.S.I.A., M.R.San.I.,
Sanitary Inspector.

A. G. PAINE,
Chief Clerk.

MISS M. WARD,
Assistant Clerk.

ARTHUR HOWE,
Cleansing Foreman.

Health Department,
15, Hatfield Road,
St. Albans.

*To the Mayor, Aldermen and Councillors of the City of St.
Albans and the Chairman and Councillors of the St. Albans
Rural District Council.*

MR. MAYOR, MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have the honour to present my report on the health of the City of St. Albans and the St. Albans Rural District for 1952.

Generally speaking, I am pleased to report that the health of the City and Rural District remained at a high level throughout the year. Details of the various diseases notified and deaths are in the statistical section of the report.

I think it might be a matter of interest to compare the statistics with those of fifty years ago, and I have found that statistics are available from the report of the Medical Officer of Health for the City of St. Albans for 1902. The population was then 16,600, roughly one-third of the present population. The death rate and birth rate are, of course, comparable, but the actual numbers, of which I have given several for 1902, should be multiplied by three to give a reasonable comparison with those for 1952.

Dealing with these in more detail, we find that the number of deaths from Cancer in 1902 was 14, as compared with, for the City only, 99 in 1952. Multiplying fourteen by three as a comparative figure gives 42, so that it would not be unfair to say that the death rate from Cancer has doubled in the last fifty years. On the other hand there were in 1902, 24 deaths from Tuberculosis, as compared with 5 in 1952, the true proportion being 72 to five, which shows the tremendous improvement in our control of this disease. The same applies to Pneumonia and Bronchitis, 1902 :—42 as compared with 1952 :—48.

The total death rate, on the other hand, is practically the same, 10.9 as against 10.6 per 1,000, whilst the birth rate, 21.4 in 1902 has fallen considerably to 16.5. It is of interest, however, to note that the percentage of illegitimate births in 1902 was just under 3%, whereas in 1952 it was 5%. I think the most striking figure of all, however, is the Infant Mortality rate—67.4 in 1902 (but for 1901, 135.4) compared with our present rate of 27.1.

Dr. Morrison's report for 1902 shows that it was, comparatively speaking, a very healthy year, the only outstanding feature being an outbreak of smallpox, amounting to 26 cases with six deaths. He notes that there were no deaths from Infantile Diarrhoea, a very unusual state of affairs for that period. There were, however, 5 cases notified of Diphtheria, of which 3 died. You will appreciate that that is very different from what we have today.

I think it can be safely said, therefore, that the general level of public health has improved very markedly indeed over the last half century.

The method of allocating beds in the St. Albans City Hospital for maternity cases set forth in my report for 1951 continues, and, I believe, is working very satisfactorily.

To you, Mr. Mayor, Mr. Chairman, Ladies and Gentlemen, I wish to record my sincere thanks for the consideration and help you have at all times shown to me, and to my staff I wish to record my sincere thanks for their able and conscientious performance of their duties.

I am also deeply indebted to the chief clerk, secretary and staff in the Divisional Health Office for their assistance in preparation of the statistics for this report and for the many extra duties carried out by them during the year, which were actually outside their Divisional Health Office duties.

I have the honour to be,

Your obedient servant,

J. C. SLEIGH,

Medical Officer of Health.

Section A.**STATISTICS AND SOCIAL CONDITIONS OF THE AREA.**

	St. Albans City	St. Albans R.D.C.
Registrar General's estimate of resident population ...	44,700	29,010
Area (in acres) ...	5,129	32,084
Number of inhabited houses on the Rate Books :—		
Dwelling Houses ...	12,741	6,751
Shops with living accommodation ...	572	84
Licensed Premises with living accommodation ...	88	64
TOTAL ...	13,401	6,899
Rateable Value ...	£438,105	£188,070

Extracts from Vital Statistics.

	St. Albans City			St. Albans R.D.C.		
	M	F	Total	M	F	Total
Live Births—Legitimate ...	340	364	704	182	172	354
Illegitimate ...	17	18	35	6	12	18
Birth Rate per 1,000 of the estimated population ...		16.5			12.8	
Stillbirths ...		9			6	
Deaths ...	223	253	476	98	117	215
Death Rate per 1,000 of the estimated resident population		10.6			7.4	

**Deaths from Pregnancy,
Child Birth, Abortion.**

Deaths	Rate per 1,000 (Total live and Stillbirths)	Deaths	Rate per 1,000 (Total live and Stillbirths)
1	1.3	1	2.6

Death of Infants under 1 Year of age.

	M	F	Total	M	F	Total
Legitimate ...	13	7	20	1	2	3
Illegitimate ...	—	—	—	—	—	—
Death Rate of Infants under 1 year of age. All infants per 1,000 live births ...		27.1			8.1	
Combined Rate ...			20.7			
Neonatal Death Rate ...		13.5			5.4	

The following Table gives the Death, Birth and infant Mortality Rates since 1947.

Year	DEATH RATE		BIRTH RATE		INFANT MORTALITY RATE	
	St. Albans City	St. Albans R.D.C.	St. Albans City	St. Albans R.D.C.	St. Albans City	St. Albans R.D.C.
1947	12.6	9.2	17.9	16.5	33.0	54.0
1948	10.2	6.98	17.2	14.54	19.2	18.1
1949	11.5	8.2	18.2	14.8	13.1	22.2
1950	11.3	7.7	16.3	13.2	33.3	22.5
1951	12.0	7.7	16.4	13.3	27.6	29.1
1952	10.6	6.8	16.5	12.8	27.1	8.1
1902	10.9		21.4		67.4	
1901	13.0		21.6		135.4	

Causes of Death.

CAUSE OF DEATH	St. Albans City		St. Albans R.D.C.		St. Albans City 1902
	M	F	M	F	
1 Tuberculosis, respiratory ...	3	1	—	2	12
2 Tuberculosis, other ...	—	1	1	—	12
3 Syphilitic diseases ...	2	2	—	—	—
4 Diphtheria ...	—	—	—	—	3
5 Whooping Cough ...	—	1	—	—	2
6 Meningococcal infections ...	—	—	—	—	—
7 Acute Poliomyelitis ...	—	—	—	—	—
8 Measles ...	—	—	—	—	—
9 Other infective and parasitic diseases ...	1	1	1	—	—
10 Malignant neoplasm, stomach ...	8	6	5	1	—
11 Malignant neoplasm, lung, bronchus ...	15	2	4	—	—
12 Malignant neoplasm, breast ...	—	18	—	6	137 Cancer 14
13 Malignant neoplasm, uterus ...	—	1	—	4	—
14 Other malignant and lymphatic neoplasms ...	26	23	11	7	—
15 Leukaemia, aleukaemia ...	1	3	1	1	—
16 Diabetes ...	1	4	—	2	—
17 Vascular lesions of nervous system ...	21	49	4	29	—
18 Coronary disease, angina ...	28	24	17	9	—
19 Hypertension ...	8	10	5	3	200 Heart Disease 28
20 Other heart disease ...	20	42	9	25	—
21 Other circulatory disease ...	8	6	5	6	—
22 Influenza ...	1	3	—	—	2
23 Pneumonia ...	14	11	4	—	—
24 Bronchitis ...	16	7	8	3	42
25 Other diseases of respiratory system ...	5	3	3	2	—
26 Ulcer of Stomach and duodenum ...	4	1	4	—	—
27 Gastritis, enteritis and diarrhoea ...	5	2	—	1	—
28 Nephritis and nephrosis ...	1	5	—	—	—
29 Hyperplasia of prostate ...	4	—	2	—	—
30 Pregnancy, childbirth, abortion ...	—	1	—	1	—
31 Congenital malformations ...	2	—	3	1	—
32 Other defined and ill-defined diseases ...	14	17	5	12	—
33 Motor vehicle accidents ...	9	4	1	1	—
34 All other accidents ...	3	5	3	1	6
35 Suicide ...	3	—	2	—	—
36 Homicide and operations of war ...	—	—	—	—	—
TOTALS	223	253	98	117	181

Population : (1952) 44,700. (1902) 16,600.

Birth-rates, Death-rates, Analysis of Mortality, Maternal Mortality and Case-rates for Certain Infectious Diseases in the Year 1952. Provisional figures based on Quarterly Returns.

	England and Wales	160 County Boroughs and Great Towns (including London)	160 Smaller Towns (Resident Population 25,000-50,000 at 1951 Census)	London Administrative County
Births				
	Rates per 1,000 Home Population			
Live births ...	15.3	16.9	15.5	17.6
Still births ...	0.35	0.43	0.36	0.34
	22.6 (a)	24.6 (a)	23.0 (a)	19.2 (a)
Deaths				
All Causes ...	11.3	12.1	11.2	12.6
Typhoid & paratyphoid ...	0.00	0.00	0.00	—
Whooping cough ...	0.00	0.00	0.00	0.00
Diphtheria ...	0.00	0.00	0.00	0.00
Tuberculosis ...	0.24	0.28	0.22	0.31
Influenza ...	0.04	0.04	0.04	0.05
Smallpox ...	0.00	—	—	—
Acute poliomyelitis (including polio-encephalitis) ...	0.01	0.01	0.00	0.01
Pneumonia ...	0.47	0.52	0.43	0.58
Notifications (Corrected)				
Typhoid fever ...	0.00	0.00	0.00	0.00
Paratyphoid fever ...	0.02	0.02	0.03	0.01
Meningococcal infection ...	0.03	0.03	0.03	0.02
Scarlet fever ...	1.53	1.75	1.58	1.56
Whooping cough ...	2.61	2.74	2.57	1.66
Diphtheria ...	0.01	0.01	0.03	0.01
Erysipelas ...	0.14	0.15	0.12	0.14
Smallpox ...	0.00	0.00	0.00	—
Measles ...	8.86	10.11	8.49	9.23
Pneumonia ...	0.72	0.80	0.62	0.57
Acute Poliomyelitis (including polio-encephalitis) ...	0.06	0.06	0.06	0.06
Paralytic ...	0.03	0.03	0.02	0.03
Non-paralytic ...	0.13	0.16	0.11	0.18
Food poisoning ...	17.87 (a)	23.94 (a)	10.22 (a)	30.77 (a)
Puerperal pyrexia ...				
Deaths				
	Rates per 1,000 Live Births			
All causes under 1 year of age ...	27.6 (b)	31.2	25.8	23.8
Enteritis and diarrhoea under 2 years of age ...	1.1	1.3	0.5	0.7

Maternal Mortality in England and Wales.

Intermediate List No. and cause	Number of Deaths	Rates per 1,000 Total (Live & Still) Births	Rates per million women aged 15-44
A115 Sepsis of pregnancy, childbirth and the puerperium ...	61	0.09	
A116 { Abortion with toxæmia ...	13	0.02	1
Other toxæmias of pregnancy and the puerperium ...	147	0.21	
A117 Haemorrhage of pregnancy and childbirth ...	59	0.09	
A118 Abortion without mention of sepsis or toxæmia ...	31	0.04	3
A119 Abortion with sepsis ...	47	0.07	5
A120 Other complications of pregnancy, childbirth and the puerperium ...	138	0.20	

(a) Per 1,000 Total (Live and Still) Births.

(b) Per 1,000 related live births.

ANALYSIS OF INFANT MORTALITY. (Combined figures for two authorities)

Cause of Death.	AGE AT DEATH									
	Under 1 week	1 and under 2 weeks	2 and under 3 weeks	3 and under 4 weeks	Total under 1 month	1 and under 3 months	3 and under 6 months	6 and under 9 months	9 and under 12 months	Total under 1 year
Prematurity	6	—	—	—	6	—	—	—	—	6
Gastro Enteritis	—	—	—	—	—	—	—	2	—	2
Pneumonia	—	—	—	—	—	—	1	1	—	2
Congenital Malformations	5	1	—	—	6	2	1	—	—	9
Marasmus	—	—	—	—	—	—	—	—	—	—
T.B, Meningitis	—	—	—	—	—	—	—	—	—	—
Whooping Cough	—	—	—	—	—	—	1	—	—	1
Other Infectious Diseases	—	—	—	—	—	—	—	—	—	—
Other Causes	1	—	—	—	1	2	—	—	—	3
All Causes	12	1	—	—	13	4	3	3	—	23

It will be noted that there are two outstanding causes of death—Cancer and Heart Disease.

Now Cancer is a disease affecting chiefly those over 40 and death is rare under the age of 50. Fifty years ago the average age at death was just about 50. Obviously if the numbers surviving to a greater age increase and the average age at death is now just under 70, many more people will be affected by a disease affecting those over 50 and rare below that age. This undoubtedly accounts for some of the increase in deaths from Cancer over the last few decades but it is by no means all. X-Rays and other diagnostic aids ensure that a far bigger proportion of Cancer cases are diagnosed and the true cause of death given than was the case fifty years ago. Still allowing for both these factors Cancer seems to be increasing and so far in spite of all the research which has been done we seem to have made very little progress in either prevention or treatment, though Cancer of certain sites, e.g. lip, once common, are seldom seen now.

The apparently rising incidence of Heart Disease is different. True, the steady increase in expectation of life will cause more people to die of "Heart Disease" but in reality it is very doubtful if "Heart Disease" is a true label. Life must end sometime and in the aged the true cause of death, but unfortunately one not recognised by the Registrar General is "Old Age" or "Worn Out."

Unfortunately, there were two maternal deaths, one in the City and one in the Rural District. All such cases are investigated closely by the County Nursing Officer and myself, and our reports submitted to the consultant Gynaecologist for the County. The purpose of the enquiry is not to allocate blame, if there is any, but to try to improve the service in every way possible.

A rather curious feature of the vital statistics is the comparatively high birth rates and death rates in the City compared with the Rural District. Generally speaking a high birth rate applies in an area where the average age of the population is low with, of course, a low death rate, but both rates are markedly lower in the Rural District than in the City. I can give no satisfactory explanation.

The combined infant mortality rate, 20.7 compares favourably with previous years. I prefer the combined rate, as it spreads the rate over a considerably greater number than the rate applicable to the two areas. Actually, St. Albans was 27.1 per 1,000 live births, whilst the Rural District was only 8.1.

The combined figures represent a total of 23 deaths of children under the age of one year, and it will be noticed from the table on page 9 that by far the greatest causes of such deaths were prematurity and congenital malformations. These are very intractable conditions to deal with, and, of course, represent causes in operation before the birth of the child. There is some suggestion, but it is no more than a suggestion as yet, that congenital malformations have some connection with German Measles in the mother, if she gets it during pregnancy. The evidence is so far weak, and it will take several years before we can point to a definite conclusion in this matter.

Section B.**GENERAL PROVISIONS OF THE HEALTH SERVICES
FOR THE AREA.****Welfare Centres and Clinics.****Bricket Wood.—The Social Club, Oak Avenue.**

- Infant Welfare - 2nd and 4th Tuesdays 2—4 p.m.
 (Dr. attends 2nd.)
 Minor Ailments treated between 8.30 and 9 a.m. at Nurse's Cottage.
 Mount Pleasant Lane. (Telephone Garston 2183.)

Colney Heath.—The Pavilion.

- Infant Welfare - 1st and 3rd Tuesdays 2.30—4 p.m.
 Minor Ailments treated in children's own homes or at local school.

Harpenden.—Memorial Hospital (Harpenden 3696).

- Ante-Natal - - Mondays 2—4 p.m.
 Orthopaedic - - Saturdays a.m. (Once monthly surgeon attends).

40, Luton Road (Harpenden 40).

- Ophthalmic - - 1st and 3rd Tuesdays 9.30 a.m.—12 noon.
 Minor Ailments - Wednesdays 9 a.m.—1 p.m. (Dr. attends).
 Speech Therapy - Thursdays 9.30 a.m.—12.30 p.m.
 Infant Welfare - 1st and 3rd Wednesdays 1.45—4.30 p.m.

Batford J.M.I. School, Pickford Hill.

- Infant Welfare - 2nd and 4th Wednesdays 1.45—4.30 p.m.

London Colney.—Primary School, King's Head Lane.

- Minor Ailments - Fridays 9.30 a.m.—12 noon.
 (Dr. attends 2nd and 4th).
 Infant Welfare - Thursdays 1.45—4.30 p.m.

Redbourn.—Congregational Hall.

- Infant Welfare - 2nd and 4th Tuesdays 2.30—4.30 p.m.
 Minor Ailments treated 8.15—8.30 a.m. and 6.15—6.45 p.m. at nurse's
 residence, 18 Bettespol Meadows. (Telephone Redbourn 251.)

St. Albans.—The Village Hall, Park Street.

- Infant Welfare - 2nd and 4th Mondays 1.30—4 p.m.

St. Luke's Hall, Camp Road.

- Infant Weighing - 2nd and 4th Fridays 2—4 p.m.

Mandeville School.

- Infant Welfare - 1st and 3rd Thursdays.

Wellington Court, Bricket Road (St. Albans 5002 and 4926).

- Immunisation - - Mondays 9 a.m.—12 noon.
and
Minor Ailments - Doctor attends 9.30 a.m.
- Dental - - - - Mondays, Tuesdays, Wednesdays, Thursdays and
Fridays, 9.30 a.m.—12.30 p.m.
Saturdays, 9.30 a.m.—12 noon.
Mondays, Tuesdays, Wednesdays, Thursdays and
Fridays, 2—5 p.m.
- Orthoptic - - - - Mondays 9 a.m.—12 noon as required.
Tuesday and Fridays 9 a.m.—12 noon.
Thursdays and Fridays 2—4.30 p.m.
- Ophthalmic - - - - Tuesday 10 a.m.—12 noon.
Mondays and Tuesdays 1.30—3.30 p.m.
- Speech - - - - Mondays, Tuesdays, Thursdays and Fridays
9.30 a.m.—12.30 p.m.
Mondays, Tuesdays and Thursdays 1.30—4.30
p.m.
- Ante-Natal - - - - Wednesdays 9.30—11.30 a.m.
- Infant Welfare - Tuesdays, Wednesdays and Fridays 1.30—4 p.m.
Doctor attends Wednesdays and Fridays.
Foods issued Tuesdays and Fridays.

Bricket House, Bricket Road (St. Albans 5431).

- Orthopaedic - - Mondays, Wednesdays and Fridays all day.
Surgeon attends 3rd Wednesday p.m. and 2nd
Friday p.m.

Osterhills Hospital, Normandy Road (St. Albans 2211).

- V.D. (Women) - Tuesdays 5—7 p.m. and Fridays 2—4 p.m.
V.D. (Men) - - Wednesdays 2—4 p.m. and Fridays 5—7 p.m.
Post-Natal - - - Wednesdays 11 a.m.
Chest Clinic - - Tuesdays 10.30 a.m. (children).
Mondays 2 p.m. (St. Albans patients).

Hill End Hospital (St. Albans 5555).

- Child Guidance - Mondays to Fridays a.m. and p.m.

Sandridge—The Parish Hall.

- Infant Weighing - 2nd and 4th Tuesdays 2.30—3.30 p.m.
Minor Ailments treated between 4 and 5 p.m. at nurse's residence,
2 Reynold's Crescent (St. Albans 4985), or in children's own homes
if necessary.

Shenley.

- Minor Ailments treated at school.

Wheathampstead.—Mead Hall, East Lane.

- Talks to Mothers - 1st Friday 3 p.m.
Infant Welfare - 2nd and 4th Fridays 2.30—4 p.m.
Dr. attends 3 p.m. on 2nd and 4th Fridays.
Ante-Natal - - - 4th Fridays (combined with above).
Minor Ailments treated 8.30—9 a.m. at nurse's residence Inez
Cottage, Luton Road (Wheathampstead 3123).

National Health Service Act.

The Divisional Administration of the Health Services administered by the Local Health Authority, the County Council, continues to work very smoothly and an increasing amount of detailed administration is being passed out to Divisional Health Offices from Hertford. I need only mention the Home Help Service, Ambulance Service and supervision of County Council Cars.

The records available in the Divisional Health Office on Local Health Authority work are of the greatest value to me in my Local Sanitary Authority (Medical Officer of Health) work especially in what is my most difficult job, assessing medical points for housing applications.

It will be noticed that the calls on the Ambulance Service are again up. Every endeavour is made to check abuse of this service but there would appear to be at least an equally strong case for imposing a charge for the use of an ambulance as there is for the imposition of a charge for prescriptions, etc., which has come into force.

I do not suggest the full cost being recovered but a charge of say 50% above what it would cost for the journey by bus and train, would I feel sure considerably lower the demands made on this service.

Every ambulance journey exceeding 50 miles outwards has to be sanctioned by me as Divisional Medical Officer, and I can assure you that the case is investigated very carefully indeed before consent is given. Some of the requests appear to me to be ridiculous. I have had one request for an ambulance to Largs, about twenty miles from Glasgow, and another to Edinburgh, in both cases during very wintry weather. I cannot conceive that such a journey is in the interest of the patient, and I was able in both cases to arrange for an ambulance to take the patient to Kings Cross Station, where a sleeping berth was booked to Glasgow or Edinburgh, and for them to be met by an ambulance and taken to their home. This certainly would appear to be a much safer procedure than to send an ambulance all the way with the risks inherent in such a journey by road with snow on the ground. It also, of course, saved a considerable sum of money, apart from the absence of the ambulance for at least two days in each case.

Ambulance Service.

I am indebted to Divisional Officer R. Hughes for the following information:—

Districts of St. Albans and Harpenden.

Year Ending 31st December, 1952.

Although it may seem a commonplace, it is once again to be reported that the figures for the past year show a substantial increase over the previous years. No increase in establishment of vehicles or men has been made, but it is clearly evident that the Service is under such continuous pressure that if the present tendency remains without alleviation, even more serious difficulties will be encountered. To this end, an increase of 2 ambulance drivers/attendants has been approved by the County Ambulance sub-Committee in principle and if and when this has been ratified, recruitment of these men and the appropriate vehicle will go forward.

The Committee are reminded that the Ambulance Brigade are entirely in the hands of the general practitioners, hospitals, and Clinic Physicians as regards the demands made. Close liaison already exists between the Brigade and these persons to ensure that the utmost economy in transport demands is exercised, but with the best will in the world, cases of abuse still occur. It behoves everyone concerned to ensure that these demands are kept to a minimum consistent with the legitimate requirements of sick persons.

The Radio Scheme reported last year continues to be of inestimable benefit in maintaining efficiency and general availability and instances can be quoted of the arrival of an ambulance within one minute of the call being given and prompt mobilization of ambulances at multiple casualty incidents has resulted in a number of congratulatory comments from doctors and members of the public.

It will be of interest to state that in the County since the introduction of Radio, ambulances have been redirected whilst in transit on 4,016 occasions, 211 to emergencies. These diversions saved 52,627 miles and 1,722 hours running time. Miles per patient have been reduced from 10.25 to 8.95 and patients per journey have been increased from 1.82 to 2.36. This represents a considerable financial saving.

Summary of Calls

	Accident	Sudden Illness	Removals	Maternity	Total
1951	468	208	8,195	383	9,254
1952	472	194	10,421	419	11,606
Increases and Decreases over 1951 ...	+ 4	- 14	+2,226	+36	+ 2,252

Hospitals.

I am indebted to F. Stanford, Esq., Secretary, Mid-Herts Group Hospital Management Committee, for the following information :—

The allocation of beds is as follows :—

	St. Albans City Hospital Normandy Road	St. Albans City Hospital Mid Herts Wing
General	82	91*
Chronic Sick	84	
Fever	18	
Sick Children	25	14
Tuberculosis	30	
Maternity	22	
Others	6	
TOTAL	267	105

* This figure includes provision for new Section 4 and Section 5 beds, i.e. 4 beds in single rooms, Section 5 (full cost), and 6 beds in double rooms, Section 4 (Amenity).

I have been elected a member of the St. Albans Medical Advisory Committee of the Mid-Herts Group Hospital Management Committee.

Considerable difficulty has been experienced in getting cases of infectious disease into hospitals. Many of the infectious disease beds which existed prior to 1948 have been taken over for other cases (Tuberculosis and general medical). In the present circumstances I fully approve of such beds being used whilst they are not required for infectious diseases, but I consider that some means must be found for the urgent provision of not one or two beds extra, but a whole ward, if and when an epidemic occurs. I am certainly not in favour of the admission of all cases of infectious disease to hospital, this is quite unnecessary and will not make any difference to the size of the epidemic, but I do maintain that any case sufficiently ill to require hospital treatment must be admitted, and those few cases such as residents in hotels, boarding houses, or living in accommodation closely connected with food shops, especially dairies, where the risk of the spread of infection is obviously greater, require hospital treatment.

Now, in order to make beds available for such cases in the event of an epidemic, someone must be in a position to clear a suitable ward for their reception, and that someone must be able to act quickly. Epidemics, unfortunately, do not await the calling of a Committee Meeting.

School Medical Service.

This service continues to work very smoothly due largely to the help and co-operation received from Head Teachers. I have been very impressed by the interest taken by parents and in about 75% of the Examinations one of the parents has been present.

During the year we commenced calling in the parents of children who were up for special or re-examination. I was a little nervous of this procedure that it might slow up the work of inspection and that I might not get the programme of school medical inspections through in time. In practice, this has not happened and the attendance of parents has been very good.

My reasons for taking this step were that in ordinary routine examinations where parents have always been invited to attend, it is about 3—1 against our finding anything the matter with the child, but in a special inspection or re-examination there is, or there has been, always something the matter with the child. It appeared, therefore, that it was more necessary for the attendance of parents at such inspections than for ordinary routine ones.

Milk and Meals in Schools.

These are of a very high standard and a well worth while investment. Washing facilities appear adequate in most cases and food preparation rooms and kitchens clean, though space is often limited.

Environmental Hygiene.

One cannot stress too strongly the rather primitive sanitary facilities existing in many of the older schools, cold water only, old-fashioned basins and no towels is not conducive to cleanliness on a winter's morning. All schools, but especially infants, should have hot and cold taps, soap and towels whether paper or roller. The W.C. accommodation in many cases is antiquated, damp and dark and in need of repair, renewal and redecoration. They are often situated in the furthest corner of the playground.

Health Visiting.

There are 17 nurses doing health visiting in the St. Albans Division of Hertfordshire. They are employed for the visiting of persons in their homes for the purpose of giving advice as to the care of young children, old persons, persons suffering from illness and expectant or nursing mothers, and as to the measures necessary to prevent the spread of infection.

Nursing Homes and Old Peoples Homes.

There are 5 Registered Nursing Homes in this area and 7 Registered Old Peoples Homes. All are regularly inspected.

Section C.**SANITARY CIRCUMSTANCES OF THE AREA.****Water Supplies.**

See Chief Sanitary Inspector's report.

Drainage and Sewerage.

See Chief Sanitary Inspector's report.

Pigbins.

These, alas, are still with us in the City. Many complaints are received—usually asking that a bin be removed to some other site.

One comment I would make, however, is the excellent quality and design of the bins now in use. These are slightly conical and have a plain, not fluted sides: in fact shaped like a child's seaside sand pail, which as we all know, empties wet contents cleanly and entirely. I would strongly recommend bins of this nature to all householders. The ease of emptying will obviate much banging and bumping in emptying and hence they will last much longer.

Swimming Baths.

The public swimming baths in the area—one in the City and two in the Rural District—have at all times been well maintained. Continuous filtration and chlorination is carried out at all three and the bacteriological results which are checked frequently throughout the summer, have proved very satisfactory.

Public Baths.

These have been going now for over a year and undoubtedly provide a much needed service. I have always emphasized that this service is a Public Health service and cannot be expected to be financially self-supporting but the increasing numbers using the baths suggest that the gap between income and expenditure will decrease but it will, I am sure, never close. To put up the charges would, I feel sure, increase, not decrease, the gap.

Mortuary.

The following bodies were removed to the mortuary:—

Adult—Males	...	...	...	...	46
Females	...	...	...	...	26
Children—Males	...	...	...	...	5
Females	...	...	...	...	2
Number of Post Mortems	...	...	...	...	79

General Nutrition.

Poor nutrition is rare and often is the result of fussing parents indulging in food fads. Underweight children often are of small birth weight or have small parents.

Diphtheria Immunisation.

This goes very well, chiefly from the efforts of the Health Visitors. Continual vigilance is needed at Medical Inspections to detect the all too frequent missing of Booster doses. Private schools seem to be a vacuum as regards these and I would welcome any action to maintain good immunity in these places, particularly the boarding schools where an outbreak may be alarming.

Skin Diseases.

One is struck by the small numbers seen. In many cases Impetigo is probably taken to the Private Doctor rather than to Clinics.

Nursing in the Home.

The District Nursing Sisters are available for all cases of domiciliary nursing which includes Midwifery and General Nursing and in all cases where there is illness in the home where a request is made personally or at the request of the doctor in attendance.

Home Help Service.

This service is administered by the Herts County Council and provides domestic help for households where such help is required owing to the presence of any person who is ill, lying-in, an expectant mother, mentally defective, aged or a child not over school age, within the meaning of the Education Act, 1944.

The Organiser, who is a member of the Divisional Health Department Staff, receives requests from doctors, health visitors, midwives, hospital almoners and welfare organisations. No one is denied help on financial grounds and every case can be assessed according to the family income.

In the St. Albans Division of the Hertfordshire County Council 389 persons availed themselves of this service.

Day Nurseries.

The number of Day Nurseries was reduced from two to one at the end of 1952. The County Council laid down very stringent conditions for the admission of children to such nurseries and the number of those who complied with these conditions fully justified the closing of the Elms Day Nursery. In fact, Fleetville, with accommodation for 80 children has, at the moment, only 36 on the register.

Section D.**HOUSING**

Rehousing is still the greatest problem confronting the two Councils. Both use a points scheme and in addition all certificates from medical practitioners requesting priority for any of their patients are submitted to me as Medical Officer of Health. I have the power to allocate additional points on medical grounds without disclosing my reasons for doing so. In extreme cases I also have the power of giving absolute priority but this power I am very unwilling to use as, of course, if this power were abused it would ruin the whole points scheme with which I am completely in favour.

The duty thus imposed on me is a very difficult one and I have no doubt that on occasions I shall make mistakes but I can assure both Councils that I shall do my utmost to make their housing scheme work as fairly as is humanly possible, bearing in mind the very large and urgent demand for houses.

Points are allotted independently of me for such conditions as overcrowding. I therefore never give points for conditions which already attract points under the housing points scheme.

CARAVANS. Public Health Act, 1936, Section 269.

The caravan problem is becoming increasingly difficult especially in St. Albans Rural District. With the continued housing shortage more people are trying to solve their housing problem by the purchase of a caravan and many such caravans are certainly better than living in an overcrowded houses or houses which ought to be demolished.

But a caravan suitable for a married couple without children becomes a bit of a problem when in due course the children arrive. Then there is an urgent application for a Council House. So local authorities are naturally a bit chary in allowing many caravans in their area.

GYPSIES.

The problem of accommodating these people on caravan sites is particularly difficult, and I feel the eventual solution must be the provision of suitable sites with proper drainage and water facilities by the Local Authority, but in this instance I am inclined to think that the proper Local Authority is the County Council. If any one, either the City or the Rural District, provides such sites, they will, I am afraid, attract the gypsies from other Local Sanitary Authorities in the County, whereas if such sites are provided by the County, it will be fairer to all Local Sanitary Authorities inside the County boundary.

Section E.**INSPECTION AND SUPERVISION OF FOOD****Food Poisoning Outbreaks.**

Total No. of Outbreaks	Number of Cases	Number of Deaths	Organisms or Other Agents Responsible with Number of Outbreaks of Each	Foods Involved with Number of Outbreaks of Each
—	8	—	Salmonella Organisms (6) Staphylococci (2)	Not Known 4 Pork Luncheon Meat 2 Meat Pies 2

Section F.**PREVALENCE OF AND CONTROL OVER INFECTIOUS AND OTHER DISEASES****Notifiable Diseases (other than Tuberculosis) during 1952.**

	St. Albans		City		St. Albans R.D.C.	
	Notified		Deaths		Notified	
	1952	1902	1952	1902		
Diphtheria	—	5	—	3	—	—
Scarlet Fever	89	52	—	3	49	—
Pneumonia	19	—	—	—	11	—
Puerperal Pyrexia	—	2	—	—	2	—
Erysipelas	12	9	—	—	4	—
Encephalitis Lethargica	—	—	—	—	—	—
Poliomyelitis	1	—	—	—	4	—
Ophthalmia Neonatorum	—	—	—	—	—	—
Malaria	—	—	—	—	—	—
Typhoid and Paratyphoid	—	2	—	—	—	—
Meningococcal Meningitis	2	—	—	—	1	—
Dysentery	—	—	—	—	8	—
Measles	244	—	—	—	71	—
Whooping Cough	189	—	—	2	29	—
Infective Hepatitis	19	—	—	—	12	—
Food Poisoning	5	—	—	—	3	—
Smallpox	—	26	—	6	—	—
Chicken Pox	—	9	—	—	—	—

The infectious diseases notified during the year were comparatively low in number, and it was especially pleasing to find only five cases—one in the City and four in the Rural District—of Poliomyelitis, with no deaths.

It is also pleasing to find no notification of Diphtheria.

The population of the City in 1902 was only 16,600, just over one-third of that for 1952, so that for comparative purposes the figures for 1902 should be multiplied by 3.

Smallpox.

There were no cases during 1952.

Vaccination.

The following figures relate to the St. Albans Division of the Herts. County Council. No separate figures are available for St. Albans City and Rural District, but the figures give a general idea of the number of persons who are being vaccinated in the St. Albans area.

Number of Persons Vaccinated (or re-vaccinated) during 1952.

Age at 31st December	Under 1	1	2—4	5—14	15 or over	Total
Number vaccinated ...	713	27	22	36	78	876
Number re-vaccinated ...	—	—	2	22	210	234
Number of Cases specially reported during period (age groups as above) ...	...	...	...	...	...	Nil.
Number of births registered for the St. Albans Division						1,616
Primary vaccination rate per 100 births ...						54.2

The primary vaccination rate of 54.2% is definitely very good, bearing in mind that vaccination is now entirely voluntary. Certain people have raised objections to vaccination and there is a very slight risk in primary vaccination over the age of about two years, but below that age, this risk is definitely negligible.

Now later on the child may wish to go abroad, or there may be other reasons making vaccination compulsory. If he or she has been vaccinated in infancy, the risks in re-vaccination are quite negligible, but they are not altogether negligible if the primary vaccination has to be done in adult life. It is important, therefore, for every child to be vaccinated preferably at the age of 3—4 months, when the risk is at an absolute minimum.

Diphtheria.

There were no cases notified during 1952.

Immunisation against Diphtheria.

Immunisation is carried out by private practitioners and Assistant County Medical Officers. No separate figures are available for St. Albans City or Rural District, but the following figures which relate to the St. Albans Division of the Herts. County Council which comprises St. Albans City, St. Albans R.D.C.,

Harpenden U.D.C. and Elstree R.D.C., obtained from the Divisional Health Office will be of interest.

Number of Children who completed a Full Course for Primary Immunisation in the Authorities' Area (including temporary Residents) in 1952.

Total Number of Children who were given a secondary or reinforcing injection (i.e. subsequent to complete full course).

Age at date of Final Injection		Total	
Under 5	5—14		
1,105	31	1,136	826
Births for the same area	...	...	1,616
Primary Immunisation Rate per 100 births	...	...	70.3

Tuberculosis.

Cases on Register at 31st December, 1952.

	PULMONARY		NON-PULMONARY		Total
	Male	Female	Male	Female	
St. Albans City ...	147(179)	86 (74)	24 (30)	16 (26)	273 (309)
St. Albans R.D.C.	97 (96)	84 (86)	18 (23)	20 (25)	219 (230)
TOTALS ...	244(275)	170(160)	42 (53)	36 (51)	492 (539)

Figures at 31.12.51 are in brackets.

Whooping Cough and Measles.

On the 16th March, 1953, the County Council Scheme under Section 26 of the National Health Service Act 1946 was extended to cover protection against Whooping Cough.

As it is obviously wise to immunise children as soon as possible because by far the greatest danger occurs in the first year, it has been decided that as far as Infant Welfare Centres in this Division are concerned, immunisation is to be restricted at present to children between the ages of four months and one year.

The response so far has been good.

I think it might be profitable for me to set down the recommended periods for all immunisation procedure, including vaccination. They are as follows:

Primary vaccination against Smallpox at 3 months of age.

First injection against Whooping Cough at 4 months of age; second injection at 5 months and third at 6 months.

First Diphtheria Immunisation injection at 6 months. This may be done at the same time, but with a different syringe and in a different site, as the last Whooping Cough injection. So far, I am unable to recommend a combined Whooping Cough-Diphtheria immunisation vaccine.

Second Diphtheria immunisation injection at 12 months.

Both Diphtheria Immunisation doses should be 0.5cc A.P.T.

**ST. ALBANS RURAL DISTRICT COUNCIL.
REPORT OF THE SENIOR SANITARY INSPECTOR.**

Council Offices,
43 Upper Lattimore Road,
St. Albans,
May, 1953.

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have much pleasure in presenting my report for the year 1952.

Water Supplies.

The water supplies of the area continue to receive close attention and a total of 76 samples were sent to the Public Health Service Laboratory at Luton for bacteriological examination.

The laying of the water main in Lye Lane, St. Stephen's, was completed early in the year.

Of the 6,792 permanent dwellings in the district 6,387 or 94.04 per cent are supplied from waterworks. Of the 6,387 supplied from waterworks 6,089 or 95.33 per cent are supplied from water mains direct to the houses and the remaining 4.67 per cent by means of standpipes. The supplies are constant in every case and there is no evidence of liability to plumbo-solvent action.

List of Water Suppliers operating in the St. Albans Rural District and number of dwellings supplied by each.

SUPPLIER	Number of Dwellings Supplied		Totals
	DIRECT TO THE HOUSES	BY MEANS OF STAND-PIPES	
St. Albans Rural District Council :—			
Redbourn Undertaking	878	28	906
Tyttenhanger Green Main (Water drawn from Hill End Hospital Supply)	36	14	50
St. Albans Waterworks Company	3136	68	3204
Harpenden Water Company	960	124	1084
The Barnet District Water Company	415	19	434
The Colne Valley Water Company	265	45	310
Borough of Hemel Hempstead	33	—	33
Rickmansworth and Uxbridge Valley Water Company	36	—	36
Hill End Hospital and Cell Barnes Colony Estate	119	—	119
Napsbury Hospital Estates	49	—	49
Harperbury Hospital Estate	35	—	35
Gorhambury Estate and adjacent Crown Property (Plant operated by Crown Commissioners)	69	—	69
Childwickbury Estate, St. Albans	58	—	58
TOTALS	6089	298	6387

WATER SUPPLIES

Details of dwellings in each Parish supplied from Waterworks.

PARISH	Water Undertakers supplying in Parish	Number of dwellings supplied		Total No. of dwellings in Parish supplied from Waterworks	Total No. of dwellings in each Parish (excluding temporary buildings)
		Direct to the Houses	By means of Standpipes		
Sandridge ...	St. Albans Waterworks Company ...	525	55	595	670
Wheathampstead	Harpenden Water Company ...	14	1		
	Harpenden Water Company ...	856	118		
Harpenden Rural	Childwickbury Estate Supply ...	1		975	1051
	Harpenden Water Company ...	90	5		
Redbourn ...	St. Albans Rural District Council ...	5		100	115
	St. Albans Rural District Council ...	873	28		
	Gorhambury Estate Supply (Crown) ...	25			
	Borough of Hemel Hempstead ...	10		944	985
St. Michael's Rural	Childwickbury Estate Supply ...	8			
	Borough of Hemel Hempstead ...	23			
	St. Albans Waterworks Company ...	34			
	Childwickbury Estate Supply ...	49		167	229
St. Stephen's ...	Gorhambury Estate Supply (Crown) ...	44			
	Rickmansworth and Uxbridge Valley Co. ...	17			
	The Colne Valley Water Company ...	214	39		
	St. Albans Waterworks Company ...	1234	13		
London Colney	Rickmansworth and Uxbridge Valley Co. ...	19		1535	1573
	Harperbury Hospital Estate Supply ...	16			
	St. Albans Waterworks Company ...	1207			
	The Colne Valley Water Company ...	51	6		
	Harperbury Hospital Estate Supply ...	19		1351	1363
	Napsbury Hospital Estate Supply ...	49			
Colney Heath ...	Hill End Hospital Supply ...	19			
	Tytenhanger Green Main (Water drawn from Hill End Hospital supply) ...	36	14		
	St. Albans Waterworks Company ...	136		720	806
	The Barnet District Water Company ...	415	19		
	Hill End Hospital Supply ...	100			

SWIMMING BATHS

There are two swimming baths not under the Council's management which are open to the public and in respect of which a charge is made for admission. Under an arrangement between the Education Authority and the Proprietors they are used extensively by the schools. At each the system of continuous circulation and purification of the water is operated. Close supervision was exercised throughout the season and a total of 43 samples of the waters were sent to the Public Health Service Laboratory at Luton for bacteriological examination.

By agreement with the manager a swimming pool which is maintained in connection with a private recreation club and used by a considerable number of members was sampled regularly throughout the summer.

HOUSING

Under Section 11 of the Housing Act, 1936, as amended by Section 1 of the Housing Act, 1949, demolition orders were made in respect of seven houses. In the case of two other houses the owner gave an undertaking that he would within a specified period carry out such works as would render the houses fit for human habitation. Of the seven houses in respect of which demolition orders were made three were demolished during the year and a further ten houses which had been the subject of demolition orders made prior to 1952 also were demolished. On the 31st December the following ten houses which are the subjects of demolition or clearance orders were being used under licence for human habitation :—

- 28 High Street, Sandridge.
- 30 High Street, Sandridge.
- 32 High Street, Sandridge.
- 56 High Street, Sandridge.
- 58 High Street, Sandridge.
- Cottage adjoining Barton House, Brewhouse Hill, Wheathampstead, occupied by Mr. Hyett.
- Two Timber Cottages at Lower Gustard Wood, Wheathampstead, occupied by Mr. John and Mr. Coates.
- 13 Hemel Hempstead Road, Redbourn.
- 9 Park Lane, Colney Heath.

In four of these cases the houses are no longer fit for human habitation and it is proposed to withdraw the licences as soon as alternative accommodation can be arranged.

I am indebted to Miss C. I. Sharpe, the Council's Housing and Welfare Officer for the following Housing Statistics:—

ST. ALBANS RURAL DISTRICT COUNCIL

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ANALYSIS SHOWING HOUSING PROGRESS FROM
JANUARY 1ST TO DECEMBER 31ST, 1952.

NUMBER OF PROPERTIES UNDER THE CONTROL OF
THE COUNCIL AT 31ST DECEMBER, 1952.

Parish	Pre-War Houses	Post- War Houses	Req. and acquired Temporary Hutments	Total	New Houses completed in 1952	No. of properties vacated in 1952 other than by transfer	No. of families re-housed in 1952	Families re-housed from Req. Property and Temporary Hutments
LONDON COLNEY	100	308	3	411	113	1	53	—
REDBOURN	128	120	—	248	8	5	16	1
ST. STEPHEN'S	34	74	1	109	—	—	18	—
COLNEY HEATH	108	40	3	151	20	—	28	2
SANDRIDGE	54	76	1	131	—	3	17	—
WHEATHAMPSTEAD	90	113	6	209	14	2	17	1
ST. MICHAEL'S	16	—	—	16	—	—	2	9
HARPENDEN RURAL	—	—	—	—	—	—	2	—
CITY AREA	—	—	3	3	—	—	—	—
TOTALS	530	731	17	1278	155	11	153	13

NUISANCES

One hundred and thirty-two complaints of alleged nuisances were received and of these 93 were satisfactorily dealt with by informal action leaving 39 outstanding at the end of the year.

Notices under Section 93 of the Public Health Act 1936 were served in six cases. In five of these the nuisances were abated within the required periods. In the remaining case it was found necessary to take Court proceedings and the Court fined the defendant £3 and made an Order requiring him to comply with the Abatement Notice within 28 days.

REPLACEMENT OF PAIL CLOSETS BY WATER CLOSETS

During the year 54 pail closets were replaced by water closets. The Council continued their policy of making contributions under Section 47 of the Public Health Act 1936 towards the expenses reasonably incurred in the execution of the necessary works.

RODENT CONTROL

	Local Authority	Type of Property Dwelling Houses	Agri- cultural	All Other	Totals
Total number of properties in Local Authority's District	5	6914 (inc.)	230	222	7371
Number of properties inspected by the Local Authority during 1952 as a result of (a) notification, (b) survey or otherwise (b)	—	287	—	16	303
Number of properties inspected (See Section II) which were found to be infested by rats	—	—	—	—	—
Number of infested properties (see Sections III and IV) treated by the Local Authority ...	5	379	38	25	447
	5	379	—	8	392

Close liaison was maintained with the Pest Control Officer of the Hertfordshire Agricultural Executive Committee with respect to any infestation on agricultural lands and in co-operation with him we were able to ensure that all necessary control measures were put in hand.

MOVEABLE DWELLINGS

Table showing the number of Moveable Dwellings in the District at December, 1952 other than Moveable Dwellings on Common Lands, the number of Sites used by them and the Services available thereat.

Parish	Total number of occupied moveable dwellings stationed in the district at December 1952	Number of sites on which these moveable dwellings are stationed	Maximum number of occupied moveable dwellings on any one site	Number of sites with main drainage	Number of sites where foul drainage is disposed of in cesspools	Number of sites provided with water-closet sanitation	Number of sites served by a mains water supply
LONDON COLNEY	28	7	20	1	Nil	1	7
ST. STEPHEN'S	96	45	14	1	2	3	43
ST. MICHAEL'S	1	1	1	Nil	Nil	Nil	Nil
REDBOURN	21	8	12	3	3	4	7
HARPENDEN RURAL	Nil	Nil	Nil	Nil	Nil	Nil	Nil
WHEATHAMPSTEAD	22	11	3	2	1	3	8
SANDRIDGE	2	2	1	Nil	Nil	Nil	2
COLNEY HEATH	34	15	12	Nil	3	2	10
TOTAL	204	89	—	7	9	13	77

Sewerage and Sewage Disposal.

The work on the important sewerage scheme to serve the Parish of St. Stephen's proceeded throughout the year and the progress so far made has given a further measure of relief in the work of cesspool cleansing. The small scheme for sewerage the Rose Walk locality in the Parish of Sandridge was commenced in April and completed in September.

A scheme of sewerage for the Parish of Colney Heath has been prepared and approved and a starting date is awaited. A scheme is being prepared for that part of the Parish of London Colney which lies south of the River Colne. A scheme to serve the more built-up part of Kinsbourne Green in the Parish of Harpenden Rural has been submitted for approval and there are good prospects that it will be put in hand during 1953.

Registrations under Section 14—Food and Drugs Act 1938.

Fifty-one premises are used in connection with the manufacture or sale of ice cream and preserved food, etc. Of these, forty-three are registered for the sale of ice cream and two are registered for both the manufacture and sale of ice cream.

Other Food Preparing Premises.

In the district there are seven bakehouses, four fish-frying premises and nineteen cafes. Of the nineteen cafes nine cater in the main for road transport workers.

MILK

The following tables give details of current registrations under the Milk and Dairies Regulations, 1949 and of licences granted under the Milk (Special Designation) (Raw Milk) Regulations, 1949 and the Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949.

MILK AND DAIRIES REGULATIONS, 1949.

Dairy Premises other than Dairy Farms.	Persons carrying on the trade of Milk Distributors elsewhere than at or from a Dairy Farm.		
	From shops in the St. Albans Rural District.	From premises within the St. Albans Rural District not being shop premises.	From Premises outside the St. Albans Rural Dis- trict.
10	5	5	8

**THE MILK (SPECIAL DESIGNATION) (RAW MILK)
REGULATIONS, 1949.**

Dealers' licences authorising the use of the Special Designation "Tuberculin Tested."	Supplementary licences authoris- ing the use of the Special Designa- tion "Tuberculin Tested."	Dealers' licences authorising the use of the Special Designation "Accredited."	Supplementary licences authoris- ing the use of the Special Designa- tion "Accredited."
1	9	1	Nil

**THE MILK (SPECIAL DESIGNATION) (PASTEURISED AND
STERILISED MILK) REGULATIONS, 1949.**

Dealers' licences authorising the use of the Special Designation "Pasteurised."	Supplementary licences authoris- ing the use of the Special Designa- tion "Pasteurised."	Dealers' licences authorising the use of the Special Designation "Sterilised."	Supplementary licences authoris- ing the use of the Special Designa- tion "Sterilised."
3	10	6	4

Sampling for the Detection of the Tubercle Bacillus.

The following is an extract from the report of the County Medical Officer of Health in respect of the years 1950 and 1951:

"The Biological Milk Sampling Scheme as described in my Annual Report for 1949 has been continued on the same lines. It is believed that our Scheme is perhaps more comprehensive and better documented than is usual, and it has been suggested that it might be useful and interesting if we could put on record the results which we have accumulated within the last five years. These will be found in the following table:—

TABLE 26.
RESULT OF MILK SAMPLES TAKEN FOR T.B. EXAMINATION.

Year	Total No. of Com- pleted Tests *	Non-designated			Accredited			Tuberculin Tested		
		Neg.	Pos.	%	Neg.	Pos.	%	Neg.	Pos.	%
1947	280	132	9	6.38	131	8	5.76	—	—	—
1948	823	559	14	2.44	234	16	6.4	—	—	—
1949	765	462	13	2.74	164	12	6.81	113	1	0.88
1950	1161	513	23	4.41	167	11	6.18	447	—	—
1951	1224	442	16	3.49	173	10	5.46	567	3	0.53

* This figure does not represent the total number of samples taken as in some cases guinea-pigs died prematurely before a result could be obtained.

RESULT OF MILK SAMPLES TAKEN FOR T.B. EXAMINATION.

As a result of these positive samples the following animals were removed from farms under the Tuberculosis Order, 1938, or sent for slaughter during the period between the taking of the sample and the Veterinary inquiry :—

- 1947 Twelve cattle slaughtered. In addition in six more cases there was evidence that suspicious animals had been removed from the various positive herds and sold to the Knacker for slaughter.
- 1948 Eleven tuberculous animals were taken for slaughter from accredited herds and nine from non-designated herds.
- 1949 Fifteen tuberculous cattle were slaughtered during the year while in ten cases suspicious animals were removed from the herds and sold for slaughter.
- 1950 Eight cattle were slaughtered from accredited herds and fifteen from non-designated herds while in five cases suspicious animals were removed from positive herds and sent for slaughter.
- 1951 Six cattle were slaughtered from accredited herds and fourteen from non-designated herds. Fifteen suspicious animals were removed from positive herds and sent for slaughter.

It should be noticed that there was a positive result in 1949 from a tuberculin tested herd. The animal in question was found as a result of our biological scheme. The herd had previously been inspected by the veterinary officer and the cow had not re-acted to the tuberculin test. The offending animal was quickly found by clinical examination when the positive sample was reported. It is, of course, rare to find an animal excreting tubercle in a tuberculin tested herd and the incident is recorded to show that such sampling is of value. The three positive samples from tuberculin tested herds in 1951 failed to bring to light the excreting animals and subsequent tests all proved negative.

The practice of taking biological samples at the farms where the milk is produced has been continued. This simplifies the work of tracing infected animals at the farm and it has been found from experience that where biological samples are taken at retail dairies, there is always doubt as to the origin of the milk, especially at dairies where the milk is bulked.

The three-cornered liaison scheme which exists between the Divisional Veterinary Officer, the District Medical Officer and the County Medical Officer, has been successfully continued. Positive samples are immediately reported to both the District Medical Officer and the Divisional Veterinary Officer, the former for his powers for stopping or diverting the milk for pasteurisation and the latter for the subsequent herd investigation and removal of infected animals under the Tuberculosis Order, 1938. The fact that the County Council carries out this biological sampling is advantageous because a steady flow of samples to the various laboratories used can be maintained. The Divisional Veterinary Officer operates over a number of counties and it is easier for the County Health Department to keep in touch with him than would be the case for the thirty-four individual district councils. In sampling at county level we now get over a thousand samples a year from which we can, after analysis, deduce something, whereas individual district councils sampling on their own accord would have so few results that they would be unlikely to get any worthwhile statistics. The district councils lose nothing by the present system because, as has been shown, the results of our samples are made known to them and we believe all in fact welcome the Scheme."

FACTORIES ACTS 1937 and 1948

1. Inspections for purposes of provisions as to health.

35

Premises (1)	Number on Register (2)	Inspections (3)	Written Notices (4)	Occupiers prosecuted (5)
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	10	15	2	Nil
(ii) Factories not included in (1) in which Section 7 is enforced by the Local Authority	68	56	8	Nil
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding outworkers' premises)	8 *	—	—	Nil

* The eight "other premises" include six Council Sites upon which building operations or civil engineering works were in progress and these were under the regular and close supervision of the Council's Officers.

2. Cases in which defects were found.

Particulars (1)	Number of cases in which defects were found				Number of cases in which prosecutions were instituted (6)
	Found (2)	Remedied (4)	Referred to H.M. Inspector (4)	By H.M. Inspector (5)	
Want of cleanliness (S.1.)	3	2	—	—	—
Overcrowding (S.2.)	—	—	—	—	—
Unreasonable Temperature (S.3.)	—	—	—	—	—
Inadequate Ventilation (S.4.)	1	—	—	—	—
Ineffective drainage of floor (S.6.)	—	—	—	—	—
Sanitary conveniences (S.7.)					
(a) insufficient	3	1	—	—	—
(b) unsuitable or defective	3	2	—	—	—
(c) not separate for sexes	—	—	—	—	—
Other offences against the Act (not including offences relating to outwork)	—	—	—	—	—
TOTAL	10	5	—	—	—

MEAT INSPECTION

During the year 16,582 animals were slaughtered by the Ministry of Food at the Government Slaughterhouse, Sandridge. Details are as follows :—

Carcases Inspected	Cattle excluding					Pigs
	Cows	Cows	Calves	Sheep		
	3,850	823	1,708	8,270		1,931

CONDEMNATIONS

	Carcases and all Offal thereof	Qtrs. of Beef	Heads	Lights	Livers	Liver Trim- mings (lbs.)	Plucks	Misc. pieces of Beef, Mutton and Pork
Beasts ...	33	14	276	420	895	3,115	—	—
Calves ...	4	—	—	—	1	—	1	1,763
Sheep ...	5	—	—	61	429	108	12	lbs.
Pigs ...	17	—	48	—	34	—	14	

I am grateful to Mr. R. E. C. Goddard, Chief Sanitary Inspector, City of St. Albans, and his staff for their co-operation in this onerous duty.

PUBLIC CLEANSING

Public cleansing is carried out by direct labour. The work includes refuse collection, nightsoil collection and cesspool emptying.

Refuse Collection and Disposal.

Realizing the urgent need to achieve and maintain a once-weekly collection of household refuse the organization was reviewed and it was considered that this aim could best be met by acquiring a larger capacity vehicle. Accordingly the Council placed an order with Messrs. Dennis Bros. Ltd. for the supply of a 25 cubic-yard "Paxit Major" mechanically operated rear loader powered by a Perkins P.6 Diesel engine. This vehicle was delivered on the 15th September and put into service at once. Its introduction entailed a substantial re-arrangement of the collection rounds.

By operating the "Paxit Major" vehicle and three side-loading vehicles our target of a once-weekly collection was reached without undue difficulty and by the end of the year complaints from the public were virtually eliminated.

All household refuse is disposed of by tipping. Manual labour only had been employed in keeping the tips under control but it had been realised for some time that owing to the steadily increasing volume of refuse it was not possible to fully observe the precautions recommended by the Ministry of Health (now the Ministry of Housing and Local Government) for the prevention of nuisances. Accordingly it was decided to acquire some mechanical aid and so an order was placed with Messrs. E. Boydell & Co. Ltd. for the supply of a Muir-Hill Loader fitted with dozer blade attachment and powered by a Diesel engine. This machine was delivered on 9th October and has proved adequate for our particular needs.

Salvage.

Owing to the limited demand and the low prices payable the salvage of waste paper was discontinued in October.

The following salvage was disposed of during the year ended 31st December, 1952.

	Tons	cwts.	qtrs.	lbs.	£	s.	d.
Waste Paper	16	6	3	—	88	18	8

Nightsoil Collection.

A once-weekly collection is made wherever the service is required.

Because of the progress achieved in the replacement of pail closets by water closets the volume of work in connection with nightsoil collection had so diminished that a point was reached at which it was no longer necessary to maintain a vehicle for this service alone and so nightsoil emptying equipment was fitted to one of our existing Dennis Cesspool Emptiers and since August 11th the work has been carried out during normal daylight working hours with a driver-loader and one mate. The job is completed in two days and the men engaged on it are paid a plus rate of 1/- per hour in respect of the hours engaged thereon. The Bedford vehicle formerly used on night soil collection has been equipped and fitted as a breakdown vehicle and is proving a most valuable adjunct to our fleet.

Pails are cleansed at 434 dwellings. This figure shows a reduction of 47 or 9.77 per cent compared with the figure at 31st December, 1951. Details are as follows:—

PARISH	Number	
	Dwelling Houses	Caravans
St. Stephen's Rural	96	2
London Colney	30	1
Colney Heath	173	7
Sandridge	32	—
Wheathampstead	68	—
Harpenden Rural	4	—
Redbourn	19	—
St. Michael's	2	—
	<hr/> 424	<hr/> 10

Cesspool Emptying and the Disposal of Cesspool Contents.

A fleet of five Dennis Cesspool Emptiers is being operated, four being in constant use and one held as a spare machine and to cover periods of exceptional demands on the service.

The development of sewerage schemes in the area has made it possible for all cesspool contents to be discharged into sewers or at sewage disposal works.

As will be noted from the statistical table the number of cesspools which were being cleansed at the 31st December, 1952 shows a reduction of 53 or 3.51 per cent on the number at 31st December, 1951. This reduction was made possible through the completion during the year of the Rose Walk sewer in the Parish of Sandridge and of a further section of the sewerage scheme in the Parish of St. Stephen's.

Statistics Respecting Cesspools in the District which are Cleansed by the Council (as at 31st December 1952)

PARISH (1)	Number Cleansed on Request (2)	Number Cleansed at regular intervals (3)	Totals (the figures in brackets indicate the numbers at 31st December, 1952). (4)	Cesspools already included in Column 4 but in respect of which a charge is made for cleansing because they are within 100 feet of a Sewer or for other reasons. (5)
St. Stephen's	875	8	883 (928)	14
London Colney	22	6	28 (29)	4
Colney Heath	187	7	194 (200)	2
Sandridge	31	—	31 (34)	8
Wheathampstead	133	3	136 (141)	9
Harpenden Rural	40	—	40 (41)	1
Redbourn	62	—	62 (56)	4
St. Michael's	82	—	82 (80)	—
TOTALS	1432	24	1456 (1509)	42

Hertfordshire County Council Act, 1935, Section 26.

Under Consents granted by the Hertfordshire County Council and the St. Albans Rural District Council four sites in the Rural District are used for the disposal of refuse collected outside the Rural District as follows :—

Land on the south side of Codicote Road, Wheathampstead known as Black Bridge Tip and which is owned and controlled by Messrs. Inns & Company of London.

A disused gravel pit at Broad Colney in the Parish of London Colney which is owned and controlled by Messrs. Inns & Company of London.

A gravel pit at Smallford Lane, Smallford, in the Parish of Colney Heath and which is owned and controlled by the St. Albans Sand & Gravel Company.

A gravel pit in Colney Heath Lane in the Parish of Colney Heath, owned and controlled by St. Albans Sand & Gravel Company.

I am,

Your obedient servant,

DAVID J. GRAHAM,

Senior Sanitary Inspector.



