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ST. ALBANS CITY COUNCIL





# ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH JAMES C. SLEIGH, M.B., Ch.B., D.P.H.

AND

CHIEF PUBLIC HEALTH INSPECTOR

R. E. C. GODDARD, F.A.P.H.I., M.R.S.H.

FOR THE YEAR

ST. ALBANS: PRINTED BY H. A. RICHARDSON, LTD.



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### PUBLIC HEALTH COMMITTEE

### ST. ALBANS CITY

Councillor L. F. GERRARD (Chairman)
Alderman A. BLOTT, J.P.
Councillor E. M. B. BONE
Councillor J. H. BRETT
Councillor T. BURNS
Councillor J. FARRELLY
Councillor I. A. PARRY (Vice-Chairman)
Councillor E. T. SPEAR
Councillor L. H. WEBBER

### PUBLIC HEALTH OFFICERS

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

Medical Officer of Health

R. E. C. GODDARD, F.A.P.H.I., M.R.S.H.,

Chief Public Health Inspector

L. A. CROFT, M.A.P.H.I., M.R.S.H.,

Deputy Chief Public Health Inspector

### **Health Inspectors**

J. CABOURNE, M.A.P.H.I. (Resigned 2nd August)
B. W. GOODE, M.A.P.H.I.
F. W. P. HARMSWORTH, M.A.P.H.I. (Commenced 1st December)
C. W. McHugo, F.R.I.C.,

Public Analyst

MRS. K. F. JAMES,

Secretary

### Clerks

MISS B. MUNT (Resigned 3rd September)
MISS B. PRECHNER (Commenced 24th October)

R. H. Fox
Public Health Assistant

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 1960. As this will be the last opportunity I shall have of presenting, at any rate, a full report, I have added some comments, under the various headings, in regard to 1961 up to the 1st August.

I have now been a Medical Officer of Health for 30 years, in various parts of the country, and I feel very definitely that the time has come for a review of the Services provided under the Health Authority both at Government level and Local Government level. Some Services were started, and started for very good reasons, but these reasons have to a large extent disappeared and I would suggest that the time has come for a very careful re-appraisal of what Services are necessary and also what new Services should be provided. There is not an unlimited amount of money, or personnel, available for the Health Service and it would appear to be essential that this limited money and personnel should be used to the best advantage.

The shortage of personnel is particularly marked in the Nursing Services, especially midwives. Nurses can now obtain many other posts involving more or less fixed hours and easier conditions of work, e.g. factory nurses. Whether these are more essential than domiciliary nursing and especially midwifery, must be open to question. Midwives are having a very difficult time just now; the birth rate has gone up but the supply of midwives has not increased and they are all very hard pressed both in hospital and in the district.

In considering this question I would suggest that the Council should consider—"Would you provide such and such a Service, which is in existence now, if it was not in existence?" That is, is this particular Service essential? It is often very much easier to start a Service than to stop it; to stop any Service will certainly be opposed by at least some interested parties, but the Services cannot increase indefinitely without some pruning of redundancy, accord-

ing to the change of circumstances which has occurred during the last 30 years.

The treatment of maternity cases in hospital is causing very considerable worry. Ideally confinement is not a disease and should be dealt with in the patient's home. In the old days, before the invention of penicillin, there was undoubtedly considerably increased risk of puerperal fever in hospitals, then with the invention of penicillin, this practically ceased. Unfortunately Nature has a habit of hitting back. Penicillin and the other anti-biotics do hit most of the germs which cause puerperal fever but unfortunately it does not hit them all and, with the marked use of anti-biotics in hospitals, the remaining comparatively few germs have increased very markedly and these are unaffected by anti-biotics. We have now come to the stage when infection in hospital is causing us very serious worry and though not nearly so bad as it was before the penicillin era, there can be no reasonable doubt that where the home conditions are good and there are no medical reasons for hospital delivery, it is much better for the patient to have her baby at home.

There has been a considerable difficulty in dealing with caravans on unlicensed sites, in particular on Colney Heath Common. The legal position is very involved and it is by no means clear what powers the Council have in dealing with this. Caravanners may be divided into two main classes: (1) Genuine gypsies, who on the whole have proved to be very co-operative and quite willing to pay a reasonable site fee for their caravans, provided water and sewerage is made available. (2) The others: who vary tremendously from, what one might call the travelling holiday caravan, who are usually quite co-operative, to the vagrant, collecting anything they can lay their hands on for sale, such as scrap metal. These have proved to be very difficult. Their ideas of sanitation are crude in the extreme, and they are very inclined to use any convenient bush or stream for toilet purposes. This can give rise to a very serious Public Health problem, affecting not only those living in the caravans but, because of the danger of fly-borne disease, the immediate neighbourhood. I believe that the only satisfactory method of dealing with this problem is for properly laid-out sites, complete with water and some form of sewage disposal, be placed by the County Council, not the local District Councils, at such points as would appear to be necessary. Practically speaking, all local councils are inclined to the view that these people should be pushed out of their territory, but this does not solve the problem for the County or the country as a whole. If the County will undertake this, by no means easy task, local District Councils must be prepared to accept such caravan sites in their area, as the County Council may decide.

The general health of the district remained good and was remarkably free from epidemic disease, but in the early part of 1961 a very heavy, but mild, epidemic of measles took place, as was expected on the two year cycle.

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		Albans .D.C.
Registrar General's estimate Area (in acres) Number of inhabited houses				49,180 5,129		37,090 32,084
Dwelling Houses Shops with living accom Licensed Premises with	 nmodati	on accomi	 modation	15,099 311 75		9,422 87 59
Rateable Value	older old		TOTAL	15,485 £949,380	£49	9,568 91,318
Extracts from Vital Stati	stics					
	St.	Albans	City	St. All	bans I	R.D.C.
	M.		Total	M.	F.	Total
Live Births—						
Legitimate	469	433	902	318	308	626
Illegitimate	24	25	49	12	16	28
Birth Rate per 1.000 of the						
estimated population .			19.34			17.63
Stillbirths	9	8	17	5	6	11
Deaths Death Rate per 1,000 of the estimated resident	260	273	533	229	232	461
population			10.84			12.43

### **Birth and Death Rates**

Obviously the birth rate in any community will be affected by the percentage of women of child-bearing age and marital status in that community, compared with the average of the country as a whole.

Especially or even more so, a community with a high proportion of elderly people must have a higher death rate than one with few old people and many young ones.

In order to make comparisons between the rates in different areas and the country as a whole, the Registrar General has supplied "Comparability Factors" to be applied to these two rates so that comparisons can be made.

Applying these two factors to the City and R.D.C. gives the following results:—

	Crude Birth Rate	Comparable Birth Rate	Crude Death Rate	Comparable Death Rate
City	 19.34	18.57	10.84	10.95
City R.D.C.	 17.63	18.34	12.43	8.58

### Deaths from Pregnancy, Child Birth, Abortion

St. Albans City

Deaths

Rate per 1,000
(Total-live and Stillbirths)

St. Albans R.D.C.

Deaths

Rate per 1,000
(Total live and Stillbirths)

### Deaths of Infants under one year of age

		St. Albans City			St. Albans R.D.C		
		M	F	Total	M.	F.	Total
Legitimate		5	8	13	9	6	15
Illegitimate		-	-	-	-	-	-
Death Rate of Infa under 1 year of a All infants per 1,0	ge.						
live births				13.67			22.94
Combined Rate				17.	45		
Neonatal Death Rate				11.57			9.17

The following table gives the Death, Birth and Infant Mortality Rates since 1947:—

	DEATH	RATE	BIRTH	I RATE	INFANT MORTALITY RATE		
Year	St. Albans	St. Albans					
	City	R.D.C.	City	R.D.C.	City	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	
1953	11.52	18.05	15.60	14.46	29.87	28.64	
1954	10.83	17.74	15.43	14.48	18.54	16.59	
1955	10.32	19.10	15.93	15.16	15.23	15.28	
1956	10.99	19.31	16.31	14.43	15.77	19.78	
1957	10.87	16.00	15.48	15.31	15.03	17.79	
1958	10.51	13.63	16.90	17.29	22.25	18.46	
1959	11.45	12.08	17.62	17.76	16.34	23.51	
1960	10.84	12.43	19.34	17.63	13.67	22.94	
1902	10.9		21.4		67.4		
1901	13.0		21.6		135.4		

Car	uses of Death		1,000	BIGST'S.		
			lbans	St. A		
		M.	F.	M.	F.	
1.	Tuberculosis, respiratory	_	1	1	-	
2.	Tuberculosis, other	-	-	-	-	
	Syphilitic disease	1	-	1	-	
	Diphtheria	1000	ndeg cone	nu zhoni	05.70	
5.	Whooping Cough Meningococcal infections			_		
	Acute Poliomyelitis	_	_	_	_	
	Measles	_	_	-	-	
9.	Other infective and parasitic					
	diseases	_	-	_	2	
	Malignant neoplasm, stomach .	5	3	9	1)	
11.	Malignant neoplasm, lung,	24	4	13	1	Cancer
12	bronchus Malignant neoplasm, breast	24	10	13	4}	168
	Malignant neoplasm, uterus		3	100	2	100
	Other malignant and lymphatic				107	
	neoplasms	20	27	22	12	
	Leukaemia, alukaemia	-	2 3	5	1)	
16.	Diabetes	2	3	2	1	
17.	Vascular lesions of nervous sys-	27	-	16	24	
10	company diseases appine	37 49	61	16 37	34 26 )	Heart
	Coronary disease, angina Hypertension	3	11	3	6	Disease
	Other heart disease	25	41	25	43	300
	Other circulatory disease	12	9	8	23	
22.	Influenza	1	_	_	1	
	Pneumonia	15	8	27	34	
	Bronchitis	19	16	9	6	
25.	Other diseases of respiratory		,	5	1	
26	Ulcer of stomach and duodenum	5	1	5	i	
	Gastritis and enteritis, diarrhoea	1	1	0	1	
	Nephritis and nephrosis	3	i	4		
	Hyperplasia of prostate	7		5	-	
	Pregnancy, childbirth and abor-					
	tion	_	-	-	-	
	Congenital malformations	3	1	3	4	
32.	Other defined and ill-defined diseases	13	28	20	21	
33	Mater militale contidents	6	20	8	1	
	All other accidents	6	7	5	5	
	Suicide	3	3	1	1	
	Homicide and operations of war	-	-	-	15-11	
	81 COL 1677 IS	-				0501
	TOTALS	260	273	229	232 }	994
		BEST	0 7 120	SET IN	-	

Once again, the greatest single cause of death was, excluding heart disease, cancer. "Heart Disease" was chiefly a normal termination of life in old age—something which is inevitable, and most of the 300 cases would be more reasonably classified as "Old Age".

There has been considerable agitation for further propaganda and education in regard to Cancer, especially trying to get people to come early. Unfortunately we are not yet in a position to say that even the earliest case of Cancer can be cured and personally I am not keen on propaganda which is not entirely truthful. If we could say that "If you will come up early we will cure you", I should be all in favour of carrying out this propaganda, but unfortunately this is not the case.

Vital Statistics, 1960 - England and Wales

Provisional figures based on Quarterly Returns of Registrar General.

-	_	_	-	_	-	200
B	т	D	т	ч	т	C
- 13		к	•	ъ	4	•
-	-	-		•	-	•

BIKIHS		
Live Births (per 1,000 total population)		 17.1
Stillbirths (per 1,000 total live and stillbirths)		 19.7
DEATHS		
All Causes (per 1 000 total population)		11.5
Infant.		 11.5
Infants under 1 year (per 1,000 related live births)		 21.7
Maternal Mortality (per 1,000 total live and stillbirths	\	
Name of the state	,	 0.39
Neonatal Death Rate (per 1,000 related live births)		 15.6

This table is included to enable comparisons to be made between local rates and national rates, but in dealing with the relatively low numbers from which local rates are calculated, one must be very cautious about drawing conclusions.

Number of Deaths and Death Rate from

**Tuberculosis and Cancer, 1960** 

The provisional numbers of deaths and death rate per million population for England and Wales during the year 1960 are as follows:—

Iollows:—	Males	NUMBI Females	ER	RATE Males Females Persons			
Respiratory Tuberculosis	2,332		3,094	106	emales I	ersons 68	
Other Tuberculosis	1-60	172	332	7	7	7	
Cancer of lung and							
bronchus	18,876	3,116	21,992	855	132	481	
Other cancer	33,882	42,817	76,699	1,535	1,808	1,676	

Average Age at Death Harpenden U.D.C		St. A	lbans .B.	St. Al		St. Albans Health Division (Excluding Elstree R.D.)		
	М.	F.	M.	F.	M.	F.	M.	F.
All De							1	
1953	69.05	68.10	63.41	69.09	62.89	70.05	63.95	69.39
1960	64.66	71.21	67.24	71.32	62.86	70.90	65.08	71.14
infants year of		ns of						
1953	72.73	69.92	66.58	71.39	64.74	71.40	66.62	71.20
1960	69.06	74.95	68.59	73.52	65.44	72.71	67.42	73.38

(Combined figures for two authorities)

	100				15 0		Dis		1000	1 8	art L	There
10	30 10 10 10 10 10 10 10 10 10 10 10 10 10	Total under 1 year	10		1	15	67		100	67	00	28
		9 and under 12 months	Five s	1 3		2	1			1	1	60
1		6 and under9 months	les l	177	lan.	2			!	1	-	2
		3 and under 6 months			1	1	1			-		60
,	AGE AT DEATH	1 and under 3 months				1					2	8
	AGE	Total under 1 month	ıo	1	-	6	Polos Inno		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	63	11	17
		3 and under 4 weeks	3 .ens									
,	700	2 and under 3 weeks	1 201	-	-					1111	O TO	1
		1 and under 2 weeks				2						5
		Under 1 week	4			7	81	13		67	1	14
	100		;	:	:	:	:	:			-:	:
		to an inter	TA IS							والما		
		ath		:	1	:	-	-	:		:	
	201	f_De		:	:	ations		:	:			3:
		Cause of Death			•	form	1000				199	100
		Ca	ty	teriti	6	Ma Ma	:	:	Whooping Cough	Difficult Labour	ises	::
	14.1	72.73	Prematurity	ro En	Pneumonia	enita	tion		oping	sult I	r Cau	All Causes
			Prem	Gastro Enteritis	Pneu	Congenital Malformations	Infection	T.B.	Who	Diffic	Other Causes	All
												-

It will be noticed that of the 28 deaths under one year of age, 15 were due to congenital conditions, 14 of them living less than one week. Several of the 15 lived only a matter of minutes. Some 30 years ago the chief cause of death under one was marasmus but over the last few years this has ceased.

### Section B

### GENERAL PROVISIONS OF THE HEALTH SERVICES FOR THE AREA

### Welfare Centres and Clinics

Bricket Wood-The Scout Hut, Black Boy Wood

Infant Welfare ... 2nd and 4th Tuesdays 2-4 p.m.

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. (Surgeon attends once monthly.)

40 Luton Road (Harpenden 40)

Ophthalmic ... Mondays, 10 a.m.-12 noon.

(By appointment.)

Minor Ailments ... 2nd Wednesday in month 9 a.m.-12 noon

(Dr. attends).

Speech Therapy ... Tuesdays, 9.30-12 noon; 2-4 p.m.

(By appointment.)

Infant Welfare ... 1st and 3rd Wednesdays, 1.45-4.30 p.m.

Dental ... Tuesdays, 10.30 a.m.-12 noon.

Thursdays 10.30 a.m.-12 noon; 2-4 p.m. Fridays, 10.30 a.m.-12 noon; 2-4 p.m.

(By appointment.)

Batford J.M.I. School, Pickford Hill

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

London Colney-Primary School, Alexander Road

Speech Therapy ... Mondays and Wednesdays, 9.30 a.m.-12 noon.

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

(Dr. attends 1st and 3rd.)

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 Bettespool Meadows (Redbourn

251).

St. Albans-Village Hall, Park Street

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

Mandeville J.M.I. School

Infant Welfare ... 1st and 3rd Thursdays, 2-4 p.m.

Margaret Wix Health Annexe-High Oaks (St. Albans 56994)

Infant Welfare ... Wednesdays, 1.30-4 p.m. (Dr. attends 1st and 3rd.)

Speech Therapy ... Wednesdays, 9.30 a.m.-12.30 p.m.

Dental ... Monday a.m. and p.m. (weekly).\*

Friday a.m. and p.m. (weekly).\*

\*By appointment,

### Wellington Court, Bricket Road (St. Albans 50421/2)

Immunisation and

Minor Ailments Mondays, 9 a.m.-12 noon. (Dr. attends 9.30 a.m.)

Monday, Tuesday, Wednesday, Thursday and Dental

Friday, 9.30 a.m.-12.30 p.m.
Saturdays, 9.30 a.m.-12 noon (alternate).
Monday, Tuesday, Wednesday, Thursday and

Friday, 2-5 p.m.

Thursday and Friday, 9 a.m.-12 noon; 2-4.30 Orthoptic

p.m.

Tuesday and Friday, 10 a.m.-12 noon. Ophthalmic

Monday, Wednesday and Thursday, 9.30 a.m.-Speech

12.30 p.m.

Monday, Wednesday and Thursday, 1.30-4.30

p.m.

Ante-Natal ... Wednesday, 2-4 p.m.

Infant Welfare Tuesday and Friday, 1.30-4 p.m.

(Dr. attends Friday.)

Foods issued Tuesday and Friday.

### Bricket House, Bricket Road (St. Albans 55431)

Orthopaedic

Monday, Wednesday, Friday, all day. Surgeon attends 3rd Wednesday and 2nd Friday,

p.m.

### Osterhills Hospital, Normandy Road (St. Albans 52211)

V.D. (Women) Tuesday, 5-7 p.m.; Friday, 2-4 p.m.

V.D. (Men) Tuesday, 5-7 p.m.; Friday, 10 a.m.-12 noon.

Post-Natal ... Wednesday, 11 a.m.

Tuesday, 10.30 a.m. (children). Chest Clinic

Monday, 2 p.m. (St. Albans patients).

### Hill End Hospital (St. Albans 55555)

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.

### Shenley

Minor Ailments treated at school.

### Wheathampstead—Mead Hall, East Lane

Infant Welfare 2nd and 4th Fridays, 2.30-4 p.m.

(Dr. attends 3 p.m.)

Minor Ailments treated 8.30-9 a.m. at nurse's residence, 5 Brewhouse Hill (Wheathampstead 3123).

The original plan for the provision of Health Centres in and near the City is approaching fruition. The new Health Centre at Mandeville school should be opened about Christmas, 1961. Skyswood about Easter, 1962, and Cunningham Hill about July, 1962. This will give, along with the new Health Centre to be built as part of the new Civic Centre, a very good cover for the County Health Services in the City and its immediate surroundings.

It is difficult to estimate, especially with the freeze in expenditure, when the Civic Centre clinic will be opened but I hope within two or three years. When the new clinic is built Wellington Court will be demolished and on the site thereof will be erected a new Day Nursery. This is certainly the most suitable site that could possibly be found for a Day Nursery and will at last solve the problem of dispensing with the present Day Nursery at Fleetville I would like to record my thanks to the City Council for their consideration in allowing us to continue the use of Fleetville for so long.

### **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.

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.

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.

### **Ambulance Service**

I am grateful to Divisional Officer Gunnett for the following report:—

During the year 1960 the directly provided Ambulance Services at St. Albans and Harpenden carried 29,568 patients and covered 163,691 miles but their area of responsibility includes not only the City and greater part of the rural District but some part of the Hemel Hempstead Rural District (The Markyate area). The Hospital Car Service were also employed, being very useful and helpful in relieving the Brigade of many runs to London Hospitals.

The work of converting the Ambulances and sitting vehicles from petrol to diesel propulsion has progressed during the year, showing a great saving on fuel consumption. One new Ambulance, designed for diesel fuel has been delivered. As Daimler no longer make ambulances the Brigade is experimenting with a Dennis dual-purpose model which can act as an emergency appliance for recumbent patients but may be quickly adapted to a 10-seater sitting vehicle. So far this experiment is working well.

### Hospitals

I am indebted to Mr. E. J. Burgess, Secretary, Mid-Herts Group Hospital Management Committee, for the following information:—

The allocation of beds is as follows:

location of	ocus is	as 101	iows.		St.	Albans City Hospital
Surgical				 		60
Medical				 		83
Orthopaedic				 		44
Paediatric				 		40
Geriatric				 		78
Maternity				 		23
Gynaecologi	cal			 		26
Recovery W				 		12
Infectious I		S		 		18
Private Win	g—					
Section	5 Bed			 		4
Section	4 Bed	S		 		6
				Total		394
In-patient I	Dischar	ges		 		7,282
Total Out-p	atient	Attenda	ances	 		48,325
Casualty			4	 		22,313
X-Ray Dep	artmen	t Total	Units			56,896
Physiothera				 		31,660
						The state of the s

### 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.

The innovation of calling parents up when their children are re-examined following a defect found at a previous examination has proved to be very valuable and is, I believe, thoroughly appreciated by the parents. The attendance of parents at such examinations is very good indeed. It was considered that this might overload the School Medical Officers, in that it would possibly take more time to deal with each individual case, but in practice we find

that by calling the parents we do not have to call the children so often, and this fully balances the apparent disadvantage.

Medical inspections in schools undoubtedly cause considerable interruption in the normal life of the school and I would like to record my sincere thanks to Head Teachers for their co-operation in this. In two schools in the area, one in Boreham Wood and one in St. Albans, we tried the experiment of holding the medical inspections just before the opening of the schools after Christmas and after Easter, to try and obviate disturbance to the school routine. We were rather worried as to whether attendances would be satisfactory if we did the school medical examinations before the opening of the school, but found that the attendances were just about the same as if we had done them during the school term; there are always some absentees, due to sickness, etc., but the percentage was not noticeably increased.

### 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.

### Health Visiting

There are 21 health visitors 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 People's Homes

There are four Registered Nursing Homes in this area, and nine Registered Old People's Homes. All are regularly inspected.

### Section C

### SANITARY CIRCUMSTANCES OF THE AREA

### **Water Supplies**

See Public Health Inspector's Report.

### **Drainage and Sewerage**

See Public Health Inspector's Report.

### **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 ten years and undoubtedly provide a much-needed service. I have always emphasised 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 f

he following bodies were rea	moved to	the mo	ortuary		
Adult—Males	Partie Line	20100	1		74
Females				5	32
Children—Males					4
Females					2
Number of Post Mortems					104

Agreement in principle has been arrived at with the Management Committee of St. Albans Hospital, that when the new Civic Centre gets so far as to require the demolition of the present mortuary, the Hospital will provide mortuary facilities not only for their patients but for the district as well. A contribution towards the cost will be made by the Council.

### **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.

### 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 and 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 Office staff, receives requests from doctors, health visitors, midwives, hospital almoners and welfare organisations, but these requests must be backed up by a medical or a nurse's certificate. No one is denied help on financial grounds and every case can be assessed according to the family income.

The service is proving extremely popular. So much so, in fact, that we are unable to provide all the home help that is desired because we cannot get sufficient numbers of Home Helps. This is particularly difficult in the period Christmas—Easter when, of course, illness is at its height and one must remember that illness affects Home Helps as well as other members of the community.

### 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 reason 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

### Section E

### INSPECTION AND SUPERVISION OF FOOD

### **Food Poisoning Outbreaks**

The following food poisoning outbreaks and isolated cases were reported:—

ST. ALBANS CITY

ST. ALBANS R.D.C.

1 Single case (Typhi-Murium)

1 Single case (Butantan)

2 Single cases (Untyped)

### Section F

## PREVALENCE OF AND CONTROL OVER INFECTIOUS AND OTHER DISEASES

### Notifiable Diseases (other than Tuberculosis) during 1960

			St. Alba	ans City	St. Alban	s R.D.C.
			Notified	Deaths	Notified	Deaths
Scarlet Fever			18	-	35	-
Whooping Cough			87	1111-41111	35	100000
Measles			85	1100-	93	100
Pneumonia			13	_	1000	_
Erysipelas			1	-	5	_
Food Poisoning			3	-	1	_
Infective Hepatitis			8	-	2	noi-
Puerperal Pyrexia			4	_	-	111 -
Meningococcal Inf	ection		DMETOR	_	_	_
Poliomyelitis (Para			_	_	1	_
Poliomyelitis (Non		tic)	70 120 <del>20</del> 210	501-4118	di di Calanda	001
Dysentery			31	_	25	The state of
Acute Encephalitis			10 5411 - 010	-	A CANADA	No. of Contract of
Ophthalmia Neona		1	1 1	THE PERSON	TO TEST CON	1000
L	-	200				

### **Poliomyelitis**

There was one case of poliomyelitis, paralytic. The infection, undoubtedly in this case, arose outside the area as the case had just moved in from abroad.

Poliomyelitis vaccination is now available to all up to the age of 40 and the response to open sessions has been very good, embarrassingly so on one occasion when 650 turned up on a Saturday morning.

Research is going on all over the world on two different lines:
(1) To produce a combined vaccine (diphtheria, whooping cough, tetanus and poliomyelitis). The difficulty I foresee in this is that whooping cough vaccination should be done very early, about two to three months, whereas poliomyelitis vaccination is not effective under the age of seven months. (2) A living virus but attenuated so that it is harmless, has been extensively used in America, Russia

and, under close control, in this country. So far the difficulty, in this country at any rate, has been that although the virus is harmless to the person it is given to, sometimes it becomes virulent on passing through that person and can give rise to cases of definite poliomyelitis in others, but this difficulty appears to be on the way to solution. One possible advantage in vaccination by this form is that it is given by mouth and not with a syringe.

The principle of living, non-virulent vaccines is very old, vaccination against smallpox is one, but of course it is absolutely necessary to be sure that there is no risk of provoking the real

disease.

### Winter Sickness

Winter sickness continued off and on during the year. A considerable outbreak occurred on the children going back to school or entering school for the first time in September. It was by no means confined to the old type of school such as Bernards Heath, but was very marked at Windermere and Margaret Wix Infant.

Swabbing results of nose and throat were the same as reported in my last report, that is where the swabs were taken within 48 hours of the onset of sickness, the nose swabs were positive for staphylococcus. We therefore arranged that all children in two classes of one school would be swabbed in the first day or two of the Spring Term, 1961. We would then compare the swabs with cases of winter sickness which developed within the first few weeks. Unfortunately, or possibly fortunately according to the point of view, there were no cases of winter sickness in January, 1961, so this experiment proved to be of no avail. However, in early May of 1961 a few cases occurred in Bernards Heath school and we were able to get swabs from them and, with the very kind co-operation of the parents, samples of blood and faeces for examination for virus. Blood and swabs of faeces have proved to be negative for virus but the numbers involved were very small.

On the whole, therefore, I am still inclined to the view that the most probable cause of winter sickness is infection by some group of staphylococci, though this of course cannot be considered in any way proved yet. In order to clarify the position a little I append a statement of the symptoms which we consider to be diagnostic of winter sickness.

- 1. Lethargy and/or irritability for a day or two days before:
- Feeling of chilliness immediately preceding and during:
- 3. Sudden vomiting and/or diarrhoea. Happens at night in <sup>2</sup>/<sub>3</sub> of cases.
- During whole period a silvery pallor (yellowish behind ears and sometimes over temples) is most noticeable.

- 5. Pains in stomach and/or abdomen precede, accompany and often follow the attack of vomiting/diarrhoea. Distension of stomach area and abdomen is noticeable in most cases. Much "wind".
- Yellow motions, dark urine\* noted in most cases.
   \*Difficult to check with older children.
- 7. Phlegm and colourless slime is typically brought up in vomiting. Sometimes noted in motions.
- 8. Lethargy and irritability continue for as long as a month after attack in some cases.
- 9. Repeat attack (if at all) within 21 days.

### **Tuberculosis**

### CASES ON REGISTER AT 31st DECEMBER, 1960

	PULM	IONARY	NON-PU	LMONARY	
	Male	Female	Male	Female	Total
St. Albans City	244 (229)	141 (133)	16 (19)	18 (18)	419 (399)
St. Albans R.D	164 (162)	126 (127)	11 (11)	15 (16)	316 (316)
TOTALS		267 (260)		33 (34)	735 (715)
	Figures at	31.12.59 are	in bracket	s.	

The increases are, I believe, due to more intensive search for cases, e.g., Mass Radiography, and the better co-operation of other Local Authorities in notifying to us their cases moving into our district. I do not think the disease is, in fact, increasing.

Smallpox

There were no cases during 1960.

### Vaccination

The following figures obtained from the Divisional Health Office relate to the St. Albans Division, which comprises St. Albans City, St. Albans R.D.C., Harpenden U.D.C. and Elstree R.D.C.

### NUMBER OF PERSONS VACCINATED (OR RE-VACCINATED) DURING 1960

		Age	es at 31s	st Decen	nber	
	Under 1	1	2-4	5-14	15 and	Total
					over	
Number vaccinated	1,642	81	44	50	56	1,873
Number re-vaccinated	_	-	6	25	124	155
Number of cases specially	reported of	during 1	period (	age gro	ups as	
above)						Nil
Number of births registere	d for the S	St. Alba	ns Divi	sion		2,461
Primary vaccination rate p	er 100 birt	hs				76.13

Of the total number of primary vaccinations (1,873), 808 were done at County Council Clinics.

The primary vaccination rate of 76.1 per 100 births is down on

last year (81.4).

I strongly advocate vaccination before the age of 1 year when the risks involved are negligible. Many people in later life find

they must be vaccinated either to travel abroad or take up some employment where vaccination is insisted upon. The risks in vaccination in later years are much greater, except when the

primary vaccination has been done in infancy.

The great increase in air travel has also increased the risk of smallpox being brought into the country, as a case may be infected in say, Egypt or India, and be here before the onset of the disease, whereas previously, by surface transport, the time involved in the journey ensured that the disease became apparent before landing in the United Kingdom.

Diphtheria

There were no cases reported in 1960.

Immunisation against Diphtheria

The following figures obtained from the Divisional Health Office relate to the St. Albans Division, which comprises St. Albans City, St. Albans R.D.C., Harpenden U.D.C. and Elstree R.D.C.

Number of children who completed a full course for Primary Immunisation in the Authorities' Area injection (i.e., subsequent to a com-(including temporary residents) in plete full course):— 1960:-

Total number of children who were given a secondary or re-inforcing

Age at date of final injection:

Under 5 5-15 Total 118 2,426 1538 2,308

Number of births registered for the same area ... 2,461 98.58 Primary immunisation rate per 100 births

The numbers shown above include 1,590 children who received primary combined Whooping Cough-Diphtheria immunisation injections and 460 children who received reinforcing combined injections.

Whooping Cough

The following figures obtained from the Divisional Health Office relate to the St. Albans Division, which comprises St. Albans City, St. Albans R.D.C., Harpenden U.D.C. and Elstree R.D.C.

Number of children who completed a full course of Primary Immunisation in the Authorities' Area (including temporary residents) in 1960:-

Age at date of final injection:

Under 5 5-15 Total 52 2.124 2.176

These figures include 1,590 children who received a primary immunisation with a combined Whooping Cough-Diphtheria vaccine.

Several cases of Whooping Cough have occurred in children who have been immunised, but all such cases have been very mild indeed. We do not claim that whooping cough immunisation prevents whooping cough to anything like the extent that diphtheria immunisation prevents diphtheria, but it will prevent altogether the disease in most cases and, in others, turn what is a very long, distressing and sometimes fatal disease into what could fairly be called a "Minor Ailment".

It is very pleasing to be able to report that the percentage of children immunised against whooping cough and diphtheria is so high. In fact they may be slightly higher in that Harpenden figures, for instance, show over a 100% of babies born were immunised. This is obviously impossible and arises in that the postal address of many children immunised in Harpenden is given as Harpenden, but who in fact reside outside Harpenden Urban District.

### **Programme of Protective Inoculations**

The following programme of inoculations has been recommended:—

Age 2-6 months	Visit 1 2 3	Vaccine Triple (diphtheria, tetanus, pertussis) Smallpox some time during the first 5 years	Inj. 1 2 3	Interval 4 weeks or more 4 weeks or more
7-10 months	4 5	Poliomyelitis	4 5	4 weeks or more
15-18 months School entry	6	Triple (diphtheria, tetanus, pertussis) Poliomyelitis* Diphtheria and tetanus	6 7 8	Same visit
8-9 years	8	Diphtheria and tetanus Smallpox (re-vaccination)	9	Same visit
10-15 years	9	B.C.G.	10	STREET, SELLING

<sup>\*</sup> There is no doubt that a fourth dose of poliomyelitis vaccine will be necessary, but the exact timing of this dose has not yet been decided.

We are now using a combined vaccine giving protection against whooping cough, diphtheria and tetanus. Tetanus is a very, very rare disease but unfortunately it is almost essential for any doctor in hospital dealing with accident cases to give anti-tetanic serum (not vaccine, it takes too long to act) in all cases where there are wounds. Now if this patient has had other sera the giving of anti-tetanic serum can cause very serious trouble, in fact it has caused death due to Anaphylaxis. Now if the patient has been immunised against tetanus by vaccine it is definitely unnecessary to give anti-tetanic serum but it is most important, therefore, that all patients who have

had vaccination against tetanus should carry on them at all times, the card showing when this was done. The patient may not be conscious when he arrives in hospital and cannot tell the doctor that he is immunised against tetanus and in any case his history is not always reliable. It has even been seriously suggested, and there is something in it, that all patients who have received tetanus vaccination should have the letter T tattooed on the buttock.

### **Poliomyelitis Vaccine**

The only contraindications considered to be valid at present are the same as those applying to the other types of immunising procedures, viz., acute or intercurrent illness, poor or indifferent general health, acute constitutional disturbance, etc. If a child is to have tonsils or adenoids removed and is also due for the vaccine, it should be given at least two weeks before the operation if possible, in the hope that the child may develop some immunity.

In April 1961, the Ministry of Health announced on the wireless and in the Daily Papers, that it was advisable for all children, aged from 5 to 11, to have a 4th injection of poliomyelitis vaccine. No prior intimation was sent out to Health Authorities and the first day after the Minister's announcement we received many enquiries regarding this and had no official knowledge of it. Personally, I did not happen to hear the B.B.C. announcement on the 6 o'clock news, nor did I see the announcement in the papers until the afternoon.

A vaccine is being developed which is taken by mouth and is apparently very effective. It has been used on a very large scale in the United States of America and Russia and to a limited extent in this country, but only so far where an epidemic of poliomyelitis has broken out. Work on this vaccine has been going on for several years but until recently we were doubtful whether the vaccine, after being swallowed, would not through passage through the host become virulent. Unlike the Salk vaccine it is a living vaccine but so attenuated that does not produce actual cases of poliomyelitis.

The possibility of being able to combine poliomyelitis vaccine with the present triple vaccine against diphtheria, whooping cough and tetanus is under careful consideration. The difficulty will probably be in timing; it is very essential that the whooping cough vaccine should be given as early as possible, best before the age of 3 months, but poliomyelitis vaccine is generally rather ineffective before the age of 6 months.

### **B.C.G.** Vaccine

If this vaccine is to be—or has been—given to a young child contact, there should be no immunising injections within six weeks before or after the B.C.G. vaccine.

# APPENDIX FACTORIES ACTS, 1937 to 1959

### ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH IN RESPECT OF THE YEAR 1960 FOR THE CITY OF ST. ALBANS

### IN THE COUNTY OF HERTFORDSHIRE

Prescribed Particulars on the Administration of the Factories Act, 1937

### PART I OF THE ACT

1. INSPECTIONS for purposes of provisions as to health (including inspections made by Public Health Inspectors):—

		Number			
	Premises	on	N	umber of	
		Register	Inspections	Written	Occupiers prosecuted
(i)	Factories in which Sec. tions 1, 2, 3, 4 and 6 are to be enforced by Local				
	Authorities	240	168	6	
(ii)	Factories not included in (i) in which Section 7 is enforced by the Local				
	Authority	THE THEFT	or domina	OV- II	d not od
(iii)	Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers'				
	premises)	36	21	-	
	TOTAL	276	189	6	1114

### 2. Cases in which DEFECTS were found:-

(If defects are discovered at the premises on two, three or more separate occasions they should be reckoned as two, three or more "cases".)

Particulars	Nu	mber of case were	es in which found	defects	Number of cases in which
Turticums				rred	prosecutions
	Found	Remedied		By H.M. Inspector	were instituted
Want of cleanliness			Inspector	mspecior	
(S.1)	3	3	_	-	
Overcrowding (S.2) .	_	_	_		_
Unreasonable tem- perature (S.3)	_	-	-	1	-
Inadequate ventila- tion (S.4)	-	_	-	1 - 51	-
of floors (S.6)	-	-	-	38-1	1 1 1
Sanitary conveniences (S.7):					
(a) Insufficient	2	2	-	_	8-8
(b) Unsuitable or defective	2	2	-	Brown a	1 E-1
(c) Not separate for sexes		-	-	1	1-1
Other offences against the Act (not in- cluding offences relating to Out- work)					10 "
TOTALS	7	7			_

PART VIII OF THE ACT

# Outwork (Sections 110 and 111)

	Prosecutions	Touck of the last	1	The same of the sa		1	1	DOMAN AND MAN	200		1		1	1000	1000	-
Section 111	Notices	T I	1	1	1 8	1	1	1 0	-	1	l.		1	1	L	lu lu
	Number of instances of work in unwholesome premises	1	1	1	1	1	1	Ī	1	-m	S.S.		To Co	200	COLUMN TO A COLUMN	1
	Number of prosecutions for failure to supply lists	1	1	1	1 5	1	1	1 2	1	d L	L			I.	La La	1
Section 110	Number of cases of default in sending lists to the Council	1	1	1	1	1	-	1	1	970	nin in	abi	100	To	100	-
	Number of outworkers in August list required by Section 110 (1)(c)	1	1	1	1	-	-	1	-	10- 10-	de Co		1	A COLO	tooks How thou	-
	Nature of Work	Wearing apparel (Making, etc., Cleaning and Washing)	Household linen	Lace, lace curtains and nets	Curtains and furniture hangings	Furniture and upholstery	Electro-plate	File making	Brass and brass articles	Fur pulling	Iron and steel cables and chains	Iron and steel anchors and	grapnels	Cart gear	Locks, latches and keys	Umbreilas, etc

Acc						T E STATE OF THE S		1									1	1				
	T	1		1		1			7	1		1	1	1	1		To a series	***	1	!	2 -	THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER, THE OW
	Artificial flowers	Nets, other than wire nets	Tents	Sacks	Racquet and tennis balls	Paper bags	The making of boxes or other receptacles or parts thereof	made wholly or partially of	paper	Brush making	Pea picking	Feather sorting	Carding, etc., of buttons, etc	Stuffed toys	Basket making	Chocolate and sweetmeats	Cosaques, Christmas stockings,	etc	Textile weaving	Lampshades	TOTALS	

### REPORT OF THE CHIEF PUBLIC HEALTH INSPECTOR

To the Mayor, Aldermen and Councillors of the City of St. Albans.

Mr. Mayor, Ladies and Gentlemen,

I have the honour to present to you my twenty-second Annual Report on the work of the Department for the year 1960.

### HOUSING

During the year six families from houses in Clearance Areas and five families from individual unfit houses were rehoused.

Representations were prepared concerning Clearance Areas in Old London Road and a large number of dwelling houses were rendered fit as the result of in formal action. In only twenty-seven instances was it necessary to serve statutory notices and no legal proceedings were instituted.

### INSPECTION AND SUPERVISION OF FOOD

In the great majority of food premises within the City a high standard of hygiene is maintained and I am again very pleased to acknowledge the co-operation of traders in matters of food and food hygiene, to which a considerable amount of time is devoted by the Inspectors.

The regular sampling of "Designated Milks" in the City has continued with the usual very good results and a one hundred per cent inspection of all carcases and offal was maintained at the local slaughterhouse.

### STAFF

Mr. L. A. Croft (Deputy Chief Health Inspector), Mr. J. Cabourne and Mr. B. W. Goode (Additional Inspectors) were all successful in obtaining the Smoke Inspectors Certificate of the Royal Society of Health.

To these, and the other members of the staff, I wish to express my appreciation of the efficient and courteous manner in which they have carried out their duties. I also wish to thank the Chairman and Members of the Public Health Committee for the support received from them throughout the year.

I am,

Your obedient Servant,

R. E. C. GODDARD,

Chief Public Health Inspector.

### SANITARY INSPECTION OF THE AREA

The following is a summary of visits made during the year:— Dwelling Houses 313 291 Complaints reported to Department 315 Complaints re rats and mice Complaints re flies, ants, bed bugs, woodworm, etc. ... 33 Infectious disease and contacts ... 53 Disinfestation of verminous premises ... 33 New Council houses sprayed prior to occupation 22 57 Council houses sprayed prior to re-occupation Common lodging houses 13 Factories and workplaces 92 Cinemas and public halls 4 Rats and mice 3,336 14 Drains examined and/or tested 122 Smoke observations Tents, vans and sheds 67 Licensed premises 81 Interviews 204 Food premises (see later section) 1,151 Miscellaneous visits 556 Revisits to premises under notice (P.H. Acts) ... 789 Revisits to premises under notice (H. Acts) 307 Swimming Baths ... 10 Shop Acts 40 Public Market and food stalls ... 1,470 Pet shops ... 23 Water-cress beds ... 23 Mobile shops 25 Factory canteens ... 33 School canteens ... 15

# DEFECTS REMEDIED AND SANITARY IMPROVEMENTS CARRIED OUT

The defects and nuisances remedied or abated were 1,015 and 186 preliminary and 27 statutory notices were served in connection therewith.

In addition to these notices the abatement of insanitary conditions is effected by an interview with those directly concerned.

The following summary gives particulars of work carried out as a result of inspections:—

Damp walls				142
	pipes		AL HON	110
Defective floors, walls and ceilings				134
Defective window frames and sash co	rds			77
Drains cleared and/or repaired				98
Drains connected to sewer	dipola	1000	GODE	10
New W.C.s provided	(lug	.lvas a	NOOPOUT !	14
WC comportments repaired				32
W.C. podestale provided				20
W.C. cisterns provided or repaired		0.000	Marie .	29
Duethine provided	moin	130000	solone.	34
Offensive accumulations removed				8
Foodstore provided or repaired				7
Chimpay and stook ranginad	STATE OF THE PARTY	1019 0		17
V11		7016	Mers Int	12
Animale Nuisanges abotad			Min Ba	3
Contravantions remedied in shore				28
Contraventions remedied in food prem		South	result.	55
Miscellaneous		iii or a	Ker iii	109
Het water cumplies			inivos.	17
Wash-hand basine supplied				26
Factories	383	11/11		33
ractories				23

### DISINFECTION

Enquiries are made with regard to infectious diseases and to contacts from other infected areas.

Disinfection of rooms is carried out following cases of infectious diseases and in connection with cases of Tuberculosis and Cancer.

Forty-nine cases of infectious diseases were enquired into and four houses or rooms connected therewith fumigated. Four houses in connection with Cancer were also fumigated.

### DISINFESTATION

### 1. Eradication of Bed Bugs, etc.,

During the year, five treatments with an effective insecticide were carried out.

Of the premises treated, two were private dwellings and three were Council houses.

As a preventive measure twenty-two new Council houses were sprayed with an insecticide before occupation and fifty-seven Council houses before re-occupation.

### 2. Other Vermin-Ants, Earwigs, etc.

Seventeen houses infested with ants and sixteen houses infested with earwigs were reported to the department and treated with insecticide.

Three hundred and thirty-eight wasps nests were also destroyed by the Public Health Assistant.

# HOUSING HOUSES IN CLEARANCE AREAS AND UNFIT HOUSES ELSEWHERE

### A. HOUSES DEMOLISHED

In Clearance Areas	Houses Demolished	Displac	ed during
and religious at other contrast (	The state of the s	Persons	Families
(1) Houses unfit for human habitation	54	11	4
(2) Houses included by reason of bad arrangement, etc.	1000 - may	4	100
(3) Houses on land acquired under Section 43 (2) Housing Act 1957	_	_	_
NOT in Clearance Areas			
(4) As a result of formal or informal procedure under Sec. 17 (1) Housing Act 1957	22	olo To o	Water (61)
(5) Local Authority owned houses cer- tified unfit by Medical Officer of	most total	brid soon	mento mento
Health	S SUD-LIS DA		
(6) Houses unfit for human habitation where action has been taken under local Acts	NOTALIS	- c	_
(7) Unfit houses included in Unfitness Orders	Doralign	OW)	

B. UNFIT HOUSES CLOSED		
(8) Under Sections 16(4), 17(1) and 35 (1), Housing Act, 1957	4	13 6
(9) Under Section 17(3) and 26, Housing Act, 1957	10 11 - Date:	Jua beines aww
(10) Parts of buildings closed under Section 18, Housing Act, 1957	Adolesca Con	3 1
C. UNFIT HOUSES MADE FIT AND	HOUSES IN	WHICH
	nocolo n	· · · · · · · · · · · · · · · · · · ·
(11) After informal action by local	By Owner	By Local Authority
authority	186	od montovaca
(12) After formal notice under (a) Public Health Acts	18	Appropriate the same
(b) Sections 9 and 16, Housing Act, 1957	9	redamine - 17 77
(13) Under Section 24, Housing Act, 1957	Anstrine A. di	Healt oldered odred
D. UNFIT HOUSES IN TEMPORAR	Y USE (Hous	sing Act, 1957)
	THE RESERVE AND DESCRIPTION OF THE PERSON OF	
	ENARAGE	an elication
Position at end of Quarter	Number of Houses	Number of separate dwellings contained
	Number of Houses	Number of separate dwellings contained in column (1)
	Number of	Number of separate dwellings contained
Position at end of Quarter  (14) Retained for temporary accommodation  (a) Under Section 48	Number of Houses	Number of separate dwellings contained in column (1)
Position at end of Quarter  (14) Retained for temporary accommodation  (a) Under Section 48  (b) Under Section 17(2)  (c) Under Section 46	Number of Houses	Number of separate dwellings contained in column (1)
Position at end of Quarter  (14) Retained for temporary accommodation  (a) Under Section 48  (b) Under Section 17(2)  (c) Under Section 46  (15) Licensed for temporary occupation	Number of Houses	Number of separate dwellings contained in column (1)
Position at end of Quarter  (14) Retained for temporary accommodation  (a) Under Section 48  (b) Under Section 17(2)  (c) Under Section 46	Number of Houses	Number of separate dwellings contained in column (1)
Position at end of Quarter  (14) Retained for temporary accommodation  (a) Under Section 48  (b) Under Section 17(2)  (c) Under Section 46  (15) Licensed for temporary occupation	Number of Houses (1)	Number of separate dwellings contained in column (1)
Position at end of Quarter  (14) Retained for temporary accommodation  (a) Under Section 48  (b) Under Section 17(2)  (c) Under Section 46  (15) Licensed for temporary occupation under Sections 34 or 53	Number of Houses (1)	Number of separate dwellings contained in column (1) (2)
Position at end of Quarter  (14) Retained for temporary accommodation  (a) Under Section 48  (b) Under Section 17(2)  (c) Under Section 46  (15) Licensed for temporary occupation under Sections 34 or 53	Number of Houses (1)	Number of separate dwellings contained in column (1) (2)  Number of occupants of houses in
Position at end of Quarter  (14) Retained for temporary accommodation  (a) Under Section 48	Number of Houses  (1)  EEMENT Number of	Number of separate dwellings contained in column (1) (2)  — — — — Number of occupants of houses in column (1)
Position at end of Quarter  (14) Retained for temporary accommodation (a) Under Section 48	Number of Houses  (1)	Number of separate dwellings contained in column (1) (2)  Number of occupants of houses in
Position at end of Quarter  (14) Retained for temporary accommodation  (a) Under Section 48	Number of Houses  (1)	Number of separate dwellings contained in column (1) (2)  — — — — Number of occupants of houses in column (1)

### **COMMON LODGING HOUSES**

There are two registered Common Lodging Houses in the City and these have been well conducted.

### MOVEABLE DWELLINGS

During the year under review the City Council approved the renewal of licences in respect of the stationing of seventeen caravans, situated as single caravans or in small groups, in various parts of the City. New licences were granted under similar conditions in respect of three caravans.

The Corporation now owns three sites—one at Abbey Camp, which holds fourteen caravans, one at Folly Avenue, which holds ten caravans, and one at Drake's Drive, which holds thirty caravans.

### RODENT CONTROL

The work in connection with the destruction of rats and mice has again been carried out efficiently and the standard methods, as recommended by the Ministry, have been maintained.

The work is divided into two main sections—private and business premises—and the latter is sub-divided into casual and annual contracts.

Thirteen treatments were carried out at Local Authority properties, four hundred and one at dwelling houses and one hundred and eighty-six at other premises (including business premises).

Treatment of the soil system of sewers was carried out on two occasions and, as previously, infestation was found to be in the older part of the system.

PREVENTION OF DAMAGE BY PESTS ACT 1949

400	(5)	Agricultural	7	7	142	111	4	11	11	111
101	libe tus	(4) Totals of columns (1) (2) and (3)	17,299	315	3,053	435	126	561	55	11
PRIORITY	icultural	(3) All other (including Business	Fremises) 1,819	150	1,643 2,461	105	45	150 209	34	TTT
TYPE OF PRIORITY	Non-Agricultural	Dwelling Houses (inc. Council	Houses) 15,435	240 440	1,400	320	08	432	21	,!!
In	BIF	(1) Local Authority	45	20	141	121	burn Dunn	17	1.1	111
			1. Number of properties in Local Authority's District 2. Number of properties inspected as a result of:,	(b) Survey under the Act (c) Otherwise (e.g. when visited primarily for some	3. Total inspections carried out including re-inspections 4. Number of properties inspected (in Section 2) which were found to be infected by:	(a) Rats—Major	5. Number of infested properties (in Section 4) treated	6. Total treatments carried out including re-treatments 7. Number of notices served under Section 4 of the Act:	(b) Structural Work 8. Number of cases in which default action was taken	9. Number of "Block" control schemes carried out  10. Legal Proceedings

### PET ANIMALS ACT, 1951

This Act came into force on 1st April 1952, and the City Council adopted the recommendations of the Royal Society for the Prevention of Cruelty to Animals regarding conditions of licence.

Three licences were renewed during the year.

### SMOKE ABATEMENT

Throughout the year observations were made of factory chimneys within the City regarding excessive emission of smoke.

Managements were interviewed and advice given. Assistance was also obtained from the representatives of the Ministry of Fuel and Power.

### SWIMMING BATHS

Water at the Corporation Swimming Baths in Cottonmill Lane is obtained from the main supply of the Colne Valley Water

Company.

Regular inspections of the Bath have been carried out and twenty samples, ten from the shallow (inlet) and ten from the deep (outlet) end were taken covering the period May to September (and all proved to be satisfactory.

In addition, samples were taken during the same period from the pool at St. Albans School, St. Albans High School and Birklands School. This work is advisory and is done in co-operation with the

school authorities.

### SEWERAGE

With the exception of a few houses connected to cesspools all properties are on main drainage, the whole of the City being within the area of the West Herts Sewage Board.

### INSPECTION AND SUPERVISION OF FOOD

### **Premises**

The following table shows the visits paid to food premises during the year:—

1	ng the year:—						
	Grocery and provision	n shops					191
	Bakehouses						45
	Cooked food premise	s (includin	ng rest	auran	ts, kitc	hens	
	and cafes)						94
	Fish shops (including	fried fish	premi	ses)			43
	Dairies and milk sho	ps					165
	Slaughterhouses and	butchers'	shops				290
	Ice cream premises	1000000					51
	Licensed premises						81
	Other food premises						191

As will be seen from the foregoing, regular inspections of food premises have been carried out throughout the year. These included bakehouses, of which there are thirteen on the register, fish fryers of which there are three and hotels and public houses at five of which structural improvements, including the provision of additional lavatory accommodation, have been carried out.

A list of food condemned at these and other premises is included

in a later paragraph.

All food stalls on the Saturday market have been visited regularly and the stallholders have co-operated well in the handling and displaying of foodstuffs.

### COMPLAINTS RE FOOD

Six complaints regarding the condition of various articles of

food were received during the year.

A blackcurrant and apple pie was alleged to contain a finger nail but upon examination it was found to be a portion of dried

apple septum.

Samples of rum obtained from licensed premises following a complaint that the rum had been adulterated, were found to be fully up to fiscal strength, the general condition satisfactory and no evidence whatever of any dilution.

Afurther complaint concerned a tin of grapefruit which it was

alleged contained some yellowish-white deposit.

The deposit when submitted to an examination was found to consist of needle shaped crystals having the appearance and characteristics of a Glucoside known as Naringin, a substance which occurs naturally in Grapefruit and possesses a bitter flavour.

Following the discovery of a bee in a loaf of bread, legal proceedings were instituted against the bakers who were, however, granted an absolute discharge on payment of four guineas cost.

Legal proceedings were also instituted against a firm for selling

a pie in a mouldy condition. The case was dismissed.

A member of the Council drew attention to a national press article concerning the condition of bubble gum obtained from slot machines.

Samples of bubble gum from three similar machines in the City were submitted for bacteriological examination, but no pathogenic organisms were discovered.

### **MEAT INSPECTION**

Sixty-seven visits have been made to local slaughterhouses for the inspection and examination of carcases for human consumption, as shown in the following table.

In addition, fifty-three visits have been made to Sandridge Slaughterhouse in co-operation with St. Albans Rural District

Council and the following have been examined, viz:-

Cattle Calves Sheep Pigs 338 150 473 2,542

# CARCASES AND OFFAL INSPECTED AND CONDEMNED IN WHOLE OR IN PART

TOTAL	586	. 586		1	27	4,6		1	1	0.17		1	1	1
Pigs	346	346		1	13	3.7		1	1	0.3		1	1	1
Sheep and Lambs	103	103		1	3	2.9		1	1	1		I	1	1
Calves	34	34		1	1	T		1	1	1		1	1	1
Cattle Excluding Cows	103	103		1	11	10.6		1	1			1	1	1
The late of the la	Number killed (if known)	Number inspected	All diseases except Tuberculosis and Cysticerci	Whole carcases condemned	Carcases of which some part or organ was condemned	Percentage of the number inspected affected with disease other than tuberculosis and cysticerci	Tuberculosis only	Whole carcases condemned	Carcases of which some part or organ was condemned	Percentage of the number inspected affected with tuberculosis	Cysticercosis	Carcases of which some part of organ was condemned	Carcase submitted to treatment by refrigeration	Generalised and totally condemned

(a) Premises	ICE	CRE	AM							
Premises (including of ice cream under Section as follows:—	g ten re tion 16	of the	Food	ng the	year) forugs Ac	or the	sale			
Manufacture and Sale of ice cream							156			
Regular inspection structural alterations a	nd imp	rovem	ents ha	ive be	en carri	ed out				
The premises used by retailers are all provided with portable cabinets for storage of ice cream which is received in bulk from the manufacturers.										
(b) Bacteriological Exa			aal aw		tion of					
The results of the during the year were very Of the six samples	ry satis	factory	1.				Cam			
(c) Chemical Examina	tion			3000			.:1			
Eleven samples of analysis and the Publ										
quality and complied (Ice Cream) (Amendme	with the	e requi	rement							
				ETC						
The following pre	SERVI mises a					ration	and			
manufacture of preserv	ed food									
Sausages Meat pressing							33			
Meat pickling							11			
Meat preservation							12			
0							10			
Meat pies							2			
Sausage cooking Fish frying							1 3			
	···· IILK			FC			3			
Milk and Dairies Regu			DAIKI	LS						
Number of premi			as Da	iries a	t 31.12.	.60	4			
Number of pers	sons re	egistere	d as	Distri	butors	at				
31.12.60							44			
Milk (Special Designa Number of pers	tion) (I	Raw Nolding	Ailk) R	<b>Legula</b>	tions 19 Deale	249 ers'				
Licences auth	orising	the us	e of the	specia	al design	na-				
tion "Tuberc							8			
Milk (Special Designat Regulation 1949					lised Mi	lk)				
Number of person							-			
Dealers' (Pas Dealers' Licer	nces au	thorising	ng the	ise of	the spec	ial	2			
Designat	ion "P	asteuri	sed ")				17			
Dealers' Licer	nces au	thorisi	ng the	use of	the spec	ial				
Designat	ion "S	terilise	d "				32			

The following table shows the results of the bacteriological examination of samples of "Designated" milk during 1960. In the course of these examinations "Tuberculin Tested" milks are submitted to the Methylene Blue Test and "Pasteurised" milks to the Methylene Blue and Phosphatase Tests.

O SEL VALUE OF SA	N	o. of			Blue Te		Ph	osphat	tase Test			
Designation	Samples		Passed		Failed		Passed		Failed			
Tuberculin Tested	35	(39)	33	(33)	2 (	6)	_	(—)	- (-)			
Tuberculin Tested (Pasteurised)		(167)	116	(167)	1 (-	-)	117	(167)	- (-)			
Channel Island S. Devon (Pasteurised)	63	(66)	63	(66)	- (-	-)	63	(66)	<b>— (—)</b>			
Pasteurised	117	(170)	117	(170)	- (-	-)	117	(170)	- (-)			
TOTALS	332	(442)	329	(436)	3 (	6)	297	(403)	- (-)			

The figures in brackets refer to the corresponding results in 1959.

### FOODS AND DRUGS

Samples

During 1960 one hundred and forty-one samples were submitted to the Public Analyst (Mr. C. W. McHugo, F.R.I.C.) for chemical analysis. These included sixty-six of milk, three each of pork and beef sausages, two each of self-raising flour, dripping and "Coruba" Jamaican Rum, and one each of meat pudding (canned), baked beans with hamburgers (canned), mushrooms (canned), minced beef (canned), steak cutlets (canned), beefsteak pie, minced turkey, dressed crab, veal and ham pie, pork pie, faggots, black pudding, beef croquettes, saveloys, mock salmon cutlets, haslett, chopped pork, shredded suet, castor oil, Friars Balsam, sal volatali, camphorated oil, tincture of quinine, glycerine, eucalyptus oil, tincture of iodine, cake fruit, desiccated coconut, cochineal, cream topping, table jelly, cube sugar, Devon cream, sweet chutney pickle, ground almonds, marmalade, mincemeat, marzipan, mix-a-shake, milk shake cordial, "Squeez", vinegar, custard powder, French coffee, lemon juice, milk shake syrup, cream cheese spread, lard, butter, lime juice (diatetic), lemon squash (diatetic), orange (diatetic) grapefruit squash, non-alcholic ginger, blackcurrant flavoured cordial orange squash, lemon barley, lime juice cordial, lemon squash, peppermint cordial, lime marmalade, lime marmalade (sugar free) and W. Indian marmalade.

### WATER SUPPLIES

Quarterly samples of water from the mains supply of the Colne Valley Water Company have been submitted to the Public Analyst for bacteriological examination.

Mr. McHugo reported that the water possesses a high degree of bacteriological purity and fully complies with the requirements of a supply intended for general and public use.

The whole of the City area is served from public water mains direct to the houses with the exception of a very small number of houses in proposed Clearance Areas, where the pipes supply is by means of standpipes.

INSPECTION	OF	MEAT	AND	OTHER	FOOL	S
Lamb (Imported)						lbs.
Lambs Livers (Im					151	
Lambs Tongues (I					3	1000000
Pigs Kidneys (Imp	orte	ed)		(1965.2811	30	"
Pork (Home killed					132	"
Pork Shoulder					121	,,
Chopped Pork					40	**
Pork Brawn					13	"
Cooked Pork					70	"
Pork	•••			•••	132	,,
Ox Tongue	•••				105	"
Ox Kidneys					73	"
Jellied Veal					89	**
						*
	•••	1000000			12	**
Sausages				***	30	**
Corned Beef				****	600	"
Pork Luncheon M	leat	1		00000	215	"
Luncheon Meat	•••	100110 12170		***	162	**
Stewed Steak				***	184	,,
Ham			***		583	,,
Steak and Kidney		ding		****	20	**
Chickens (Canned)		100 000		OCT *** 010	461	
Fish				Ho		stone
Jersey Potatoes				•••		cwt.
Macaroni Shells					1,450	kgs.
Currants					7	lbs.
Prunes					84	,,
Tomato Pasta					10	
Frozen Food					154	pkts.
Frozen Eggs					14	Îbs.
Bacon					354	
Cheese					25	pkts.
Rice Pudding					26	tins
Tinned Fruit					681	,,
" Vegetables					642	,,
" Milk		117 110			64	,,
, Fish		ALC: HELDE		O THE STREET	53	
" Soup		Idila iss	1 2/10	VINE THE T	18	"
Miscellaneous			aglign	DIRECT PRO	68	-" ·
,,				1	24	pkts.
, ,	1,28				10	
	-	•••	•••		10	jars



