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BOROUGH OF



STAMFORD

# ANNUAL REPORT

of the Health of the Borough

for the year

## 1959

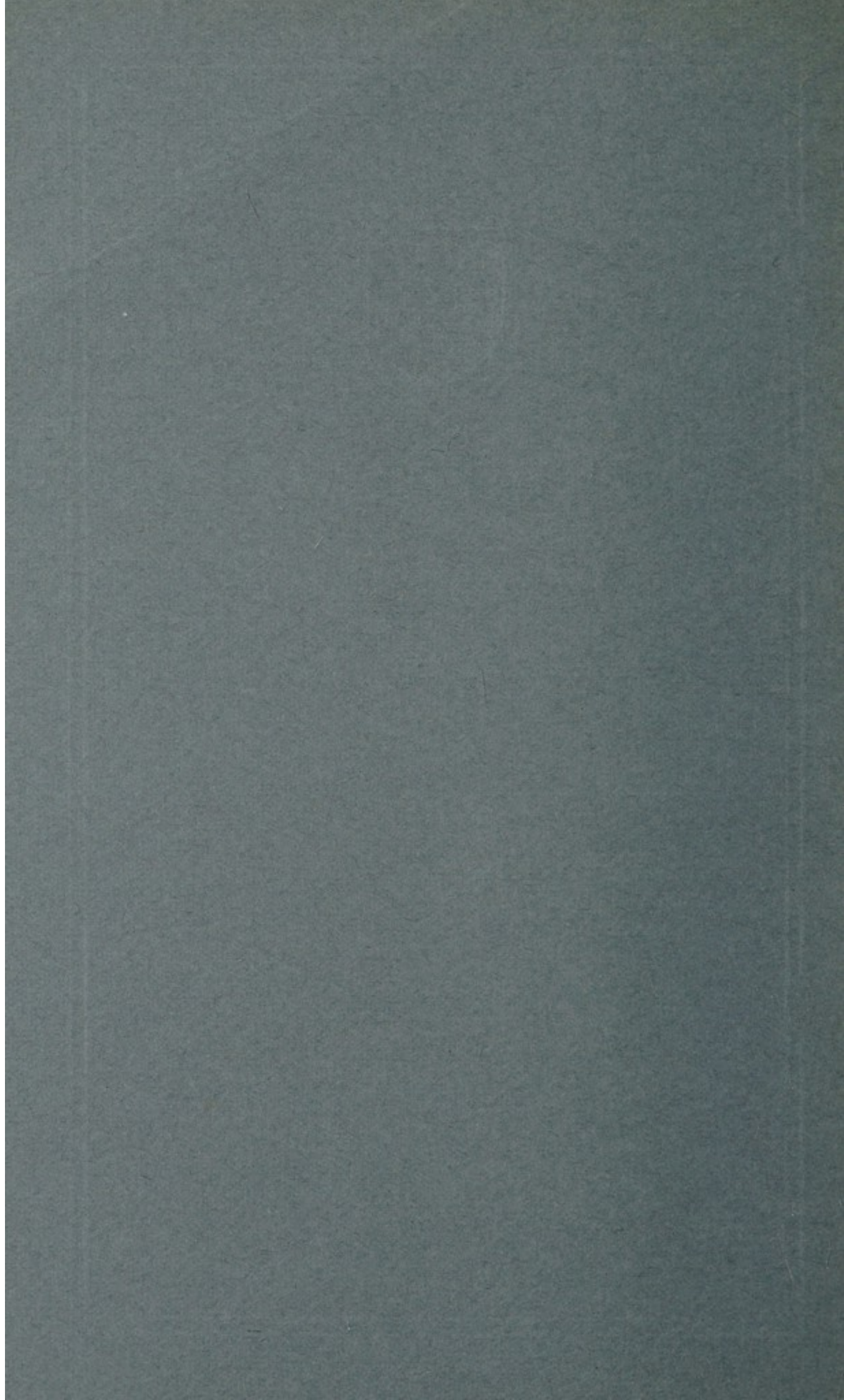


BY THE

## Medical Officer of Health

TO WHICH IS ADDED THE  
ANNUAL REPORT OF THE  
Senior Public Health  
Inspector





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## **BOROUGH OF STAMFORD**

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### **HEALTH COMMITTEE**

Councillor G. W. Gray (Chairman)  
The Mayor  
Alderman E. S. S. Bowman, O.B.E., J.P. (Vice-Chairman)  
Alderman W. J. Aughton  
Councillor Mrs. G. M. Boyfield, J.P.  
Councillor J. W. L. Whincup  
Councillor F. J. McIntosh  
Councillor B. A. Munton  
Councillor R. J. R. Seamer  
Councillor Mrs. M. I. James

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### **HOUSING AND PROPERTY COMMITTEE**

Councillor P. Bullard (Chairman)  
The Mayor  
Alderman G. C. Swanson (Vice-Chairman)  
Councillor Mrs. G. M. Boyfield, J.P.  
Councillor L. J. Connor  
Councillor A. W. P. Liddle  
Councillor B. A. Munton  
Councillor J. Frisby  
Councillor H. E. Burney  
Councillor F. H. Ladds

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### **PUBLIC HEALTH OFFICERS**

#### **Medical Officer of Health:**

H. ELLIS SMITH, M.B., B.Ch., D.P.H.,  
Town Hall, Stamford, Lincs. Tel: 2248. Ext. 14

#### **Senior Public Health Inspector:**

L. J. ROLL, A.R.S.H., Cert. S.I.B.,  
Town Hall, Stamford, Lincs. Tel.: 2248. Ext. 13

#### **Additional Public Health Inspector:**

A. R. BURT, A.R.S.H., Cert. S.I.B.,  
Town Hall, Stamford, Lincs. Tel.: 2248. Ext. 13

# BOROUGH OF STAMFORD

## ANNUAL REPORT

Town Hall,  
STAMFORD.  
May, 1960.

To the Mayor, Aldermen and Councillors of the  
Borough of Stamford.

Councillor Nichols, Ladies and Gentlemen,

I have the honour to present my sixth Annual Report on the  
Vital Statistics, Health and Living Conditions of the Borough.

### BOROUGH OF STAMFORD STATISTICS

Area	...	...	...	...	...	...	...	...	1918 acres
Population (Census 1951)	...	...	...	...	...	...	...	...	10899
Population (Registrar General's estimate 31/12/59)	...	...	...	...	...	...	...	...	11450
Rateable Value	...	...	...	...	...	...	...	...	£154,852
Product of Penny Rate	...	...	...	...	...	...	...	...	£600
Number of inhabited houses from rate book at 31/12/59	...	...	...	...	...	...	...	...	3652

#### NOTE: Birth and Death Rates:

As the age and sex distribution of the population in different areas materially affects both the Birth and Death Rates of these areas, comparability factors allowing for this are issued by the Registrar General for each Local Government Unit. These factors may be used for calculating what are termed in this Report as "Net" rates and fairer comparisons are obtained if the latter are used when comparing rates with those of any other area (when these have been similarly adjusted) or with the rates for the Country as a whole.

These factors for Births and Deaths in respect of Stamford are 1.02 and 0.63 respectively. The corresponding figure when multiplied by the Crude rate (that is, for Births or Deaths as the case may be) will give the Net Rate.

### VITAL STATISTICS

	M	F	Total
LIVE BIRTHS	101	82	183
Legitimate	99	80	179
Illegitimate	2	2	4
CRUDE live birth rate per 1,000 of estimated population	15.98		
Net live birth rate per 1,000 of estimated population	16.30		



Rate for England and Wales ... ..	16.5
Illegitimate live births per cent of total live births ... ..	2.19

	M	F	Total
STILL BIRTHS ... ..	2	1	3
Legitimate ... ..	2	1	3
Illegitimate ... ..	—	—	—
Still Birth Rate per 1,000 live and still births ... ..			16.13
Rate for England and Wales ... ..			20.7
Total Live and Still Births ... ..			186

DEATHS	M	F	Total
Number of Deaths ... ..	79	81	160
CRUDE death rate per 1,000 estimated population ... ..			13.97
NET death rate per 1,000 estimated population ... ..			8.80
Rate for England and Wales ... ..			11.6
Natural increase, i.e. Excess of births over deaths ... ..			23

#### INFANTILE MORTALITY (i.e. Deaths of Infants under 1 year of age).

	M	F	Total
Number of Deaths ... ..	3	1	4
Legitimate ... ..	3	1	4
Illegitimate ... ..	—	—	—
Infantile Mortality rate per 1,000 live births ... ..			21.86
Rate for England and Wales ... ..			22.0
Infantile Mortality rate per 1,000 legitimate births ... ..			22.34
Infantile Mortality rate per 1,000 illegitimate births ... ..			Nil

The equivalent number of deaths of infants under one year of age was 3 in 1957 and 3 in 1958.

#### NEO NATAL DEATHS

(i.e. Deaths of Infants under 4 weeks of age) ... ..	M	F	Total
	2	1	3
Neo Natal Mortality Rate ... ..			16.39

#### EARLY NEO NATAL DEATHS

(i.e. Deaths of Infants under one week) ... ..	M	F	Total
	1	1	2
Early Neo Natal Mortality Rate ... ..			10.93



## CAUSES OF DEATHS UNDER ONE YEAR OF AGE

### Under One Week

Erythroblastosis, Rhesus Incompatability	...	...	...	...	1
Cerebral Irritation, Anoxia—ante Partum Haemorrhage (Forceps Delivery)	...	...	...	...	1

### Under One Month

Asphyxia (Misadventure)	...	...	...	...	1
-------------------------	-----	-----	-----	-----	---

### Under One Year

Broncho Pneumonia—Congenital Heart Disease	...	...	...	1
--	-----	-----	-----	---

TOTAL ... 4

MATERNAL MORTALITY (i.e. Deaths due to Pregnancy, Childbirth or Abortion).

NIL.

## MARRIAGES SOLEMNISED IN THE BOROUGH OF STAMFORD

1956	...	...	...	...	85
1957	...	...	...	...	98
1958	...	...	...	...	89
1959	...	...	...	...	82

The live Birth rate at 16.30 was only fractionally lower than that for England and Wales as a whole at 16.5, which incidentally was the highest birth rate since 1949. The still birth rate for the year was 16.13 compared with the National experience of 20.7.

The Death rate in the Borough was 8.80 against the 11.6 figure for England and Wales, but this favourable comparison was only arrived at by using the comparability factor which makes a very large correction for the unfavourable composition of the Borough's population, with its over-weighting in the older age categories.

It was pleasureable however this year to find that for the first time for six years the number of births in the Borough exceeded the deaths, giving a natural increase of 23. It is to be hoped that this trend will be established for the future, as acres without population is a sterile proposition.



For the fifth year in succession the Infantile Mortality rate for England and Wales was the lowest ever previously recorded, being 22.0 per 1,000 live births, and Stamford had just the edge on this at 21.86.

Marriages were down again on the previous year and sixteen below the peak of 1957. It is regrettable that so many of our young folk leave the town in search of careers and homes elsewhere.

### INTERNATIONAL STATISTICAL CLASSIFICATION OF DISEASES, INJURIES AND CAUSE OF DEATHS

	Male Female Total		
Tuberculosis (Respiratory) ... ..	—	—	—
Tuberculosis (Other forms) ... ..	—	—	—
Syphilitic Diseases ... ..	—	—	—
Diphtheria ... ..	—	—	—
Whooping Cough ... ..	—	—	—
Meningococcal Infections ... ..	—	—	—
Acute Poliomyelitis ... ..	—	—	—
Measles ... ..	—	—	—
Other Infective and Parasitic Diseases ... ..	—	—	—
Malignant Neoplasm of Stomach ... ..	3	1	4
Malignant Neoplasm of Lung, Bronchus ... ..	7	2	9
Malignant Neoplasm of Breast ... ..	—	2	2
Malignant Neoplasm of Uterus ... ..	—	—	—
Other Malignant and Lymphatic Neoplasms ... ..	9	6	15
Leukaemia, Aleukaemia ... ..	—	—	—
Diabetes ... ..	—	1	1
Vascular Lesions of Nervous System ... ..	11	24	35
Coronary Disease, Angina ... ..	12	11	23
Hypertension with Heart Disease ... ..	5	—	5
Other Heart Diseases ... ..	7	8	15
Other Circulatory Diseases ... ..	1	2	3
Influenza ... ..	4	1	5
Pneumonia ... ..	6	8	14
Bronchitis ... ..	1	2	3
Other Diseases Respiratory System ... ..	—	—	—
Ulcer of Stomach and Duodenum ... ..	—	—	—
Gastritis, Enteritis and Diarrhoea ... ..	—	—	—
Nephritis and Nephrosis ... ..	—	1	1
Hyperplasia of Prostate ... ..	4	—	4
Pregnancy: Childbirth and Abortion ... ..	—	—	—
Congenital Malformation ... ..	—	—	—
Other Defined and ill-defined Diseases ... ..	4	6	10
Motor Vehicle Accident ... ..	2	1	3
All Other Accidents ... ..	3	4	7
Suicide ... ..	—	1	1
Homicide and Operations of War ... ..	—	—	—
Total ... ..	79	81	160



Diseases of the cardio-vascular system again head the list of the causes of death, accounting for just over a half (81) and of these 23 were due to coronary arterial disease. This is a disease largely bound up with Western civilisation and mode of living. It is not inappropriate therefore to mention the advisability for all in the fourth decade and upwards learning and practising the gentle art of relaxation for a short period of every day, to ease the tensions which modern life demands. It would make for more gracious living as well as reducing the risk of prematurely dying! Adequate exercise should also be a daily "must", as seven days' ration on Saturday and Sunday is far from the same and for none is this so important as for those who are chairbound for five days a week or more.

Thirty deaths were due to malignant new growths and of these nearly a quarter (9) were cancer of the lung. My "Lady Nicotine" is still continuing to exercise her fatal attractions in as uninhibited a manner as ever. It is very difficult to equate in telling fashion the pleasure of today to a risk twenty, thirty or more years ahead, but the toll of 125,000 deaths from this cause in the past eight years in this Country is hardly a picture which can be viewed with complacency.

The respiratory group of diseases (22) were the third most important in the causes of death classification.

## **GENERAL PROVISIONS OF HEALTH SERVICES IN THE AREA**

### **NURSING IN THE HOME.**

Under the County Council Scheme the Borough has one District Midwife.

Residence: 9 Adelaide Street, Stamford. Telephone: 3218  
and one District Nurse

Residence: Drift Road, Stamford Telephone: 3591

### **HOME HELPS**

Home Helps are provided for the town of Stamford and neighbouring villages in South Kesteven by the County Council from Headquarters at the Barn Hill Clinic, Stamford.

Application should be made to Barn Hill House, Stamford:

Monday and Wednesday afternoons 2.00—5.00 p.m.

Friday mornings 9.30—12 noon.

### **WELFARE FOODS**

Welfare Foods can be obtained from the Barn Hill Clinic at the following times:

Monday to Friday 10.00 a.m. to 12 noon.

2.00 p.m. to 4.00 p.m.

Saturday 10.00 a.m. to 12 noon.



## HEALTH VISITORS

Under the County Council Scheme two full time Health Visitors, Miss Evans and Miss Wright, are employed for work in the Borough and surrounding Rural District.

## AMBULANCE SERVICE

This service is a County Council directly controlled one. There are three ambulances and one sitting case car, with District Headquarters at Ryhall Road, Stamford.

## GENERAL HOSPITALS

Acute Medical and Surgical cases to:—

Stamford and Rutland Hospital, Stamford, of the East Anglian Regional Hospital Board.

Chronic and Long Term illnesses to:—

St. George's Hospital, Stamford.

## ISOLATION HOSPITAL

Infectious cases are admitted to the Peterborough Isolation Hospital under the Peterborough Hospital Management Committee.

Diseases of the Chest to the Chest Hospital, Bourne.

## TREATMENT CENTRES AND CLINICS

### (a) PROVIDED BY KESTEVEN COUNTY COUNCIL

#### **Child Welfare:**

Weekly Clinic — Friday 2—4 p.m., Barn Hill House, Stamford.

This is staffed by the Health Visitors and a devoted band of voluntary helpers who give so generously of their time and energies to ensure the successful social side of the work. The doctor attends on the 1st, 3rd and 5th Friday in the month. The average attendance at this has increased during the year to a record figure of 71 per session.

#### **Diphtheria Immunisation:**

Diphtheria Immunisation clinics are held at Barn Hill House, Stamford, the first Wednesday of each month, 2—4 p.m.

Numbers immunised during the year:

Pre-school age	...	...	...	...	59
School age	...	...	...	...	23
Reinforcing Dose	...	...	...	...	106
Total					188



In addition 15 children living outside the Borough were immunised. 64 children were immunised by the General Practitioners, 58 Primary and 6 Reinforcing Doses.

Help at the Barn Hill Immunisation Clinic has generously been undertaken by Mrs. Winterton and Mlle. Dauzou of the British Red Cross Society, to whom I would like to express my sincere thanks.

### **School Health Service Clinic:**

This is situated at Barn Hill House, Stamford, providing Ophthalmic, Orthopaedic, Physiotherapy and Dental Clinics.

### **(b) PROVIDED BY THE REGIONAL HOSPITAL BOARD**

#### **Tuberculosis:**

Weekly Clinics	Tuesdays from 2 p.m. Fridays from 2 p.m.
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Under Dr. G. Bernard Royce, Consulting Chest Physician, Peterborough Group of Hospitals.

#### **Venereal Disease:**

Clinics are held at the Out-Patient Department, Memorial Hospital, Peterborough, under Dr. N. A. Ross.

Mondays, Wednesdays and Thursdays	5.30—7.00 p.m.
Tuesdays	10.30—12 noon.

#### **Laboratory Facilities:**

Bacteriological investigations are provided by the Public Health Laboratory, Memorial Hospital, Peterborough, under Dr. D. H. Fulton and the service includes investigation for both the General Medical Practitioners and the Public Health Department.

### **SANITARY CIRCUMSTANCES OF THE AREA**

#### **Water:**

The water supply for the Borough is provided by the Stamford Waterworks, a private company. It is satisfactory in quantity and quality though all six sources of supply are of a very hard nature, averaging between them 37.6 parts per million of total hardness. This inevitably must have some drawbacks such as "furring" of pipes and difficulty for the housewife in obtaining a good lather.

The future of the Borough's supply is still undecided as between the advanced state of the proposals for and the overtures from the projected South Lincolnshire Water Board to the north and the more nebulous situation to the Southward.

The approximate daily consumption is 735,000 gallons, which allowing for the demand of industry, gives a domestic consumption of about 35 gallons per head per day; much the same as in former years.



The modernisation of the sewage disposal works has effected its main object in producing a good final effluent for discharge into the river Welland. Unfortunately in so doing more solid material has been left to deal with in the form of sludge and this produced a local reflection of a national problem in its drying and disposal. There were occasions aggravated by one of the hottest summers for years, when those in the neighbourhood of the works could have wished that G. K. Chesterton in his "Song of Quoddle" was right when he alleged that human olfactory perception was relatively insensitive in the words

"They haven't got no noses  
The fallen sons of Eve."

Enough to say that perception in this case was sufficient to be inconvenienced!

It is a problem which the Council are tackling and provision for a cold sludge digestion process which it is hoped will provide an efficient answer, is to be commenced as expeditiously as possible. The Sewer Survey referred to in the last Annual Report has been accepted and a new trunk main will be built by tunnelling beneath the centre of the town—a need no less pressing than the by-pass above ground! This will form the main artery of the reconstructed sewer system.

The Borough Swimming Baths are always popular and during this wonderful summer it was not surprising that all previous attendance records were broken and totalled 89,269 for the Season 1st May—19th September. The highest attendance in any one day occurred on the first Saturday in July when 2,265 were admitted. It is a cause for congratulation of the Staff that even under these peak conditions the bacteriological report was "highly satisfactory". Routine checks were kept on the chlorine content, pH for acidity and the bacteriology of the water throughout the season and these were all satisfactory.

The Swimming Baths consist of one 100 feet by 30 feet, varying in depth from 2 feet 6 inches to 6 feet 6 inches; a smaller 60 feet by 25 feet, varying in depth from 1 foot 6 inches to 4 feet 6 inches, and a paddling pool. The water required for these is around 130,000 gallons, which is obtained from the town supply. Mechanical filtration is used and breakpoint chlorination is automatically controlled. Soda Ash is added to maintain a pH of 7.6. The plant is capable of turning over the water once in four and a half hours. Both of the pools are tiled to below the water level. Rules for Health and Cleanliness are displayed for compliance and the provision of foot-sprays adds to the aesthetic and hygienic standards of the baths. In the hope of reducing the spread of verruca and athlete's foot, the wooden duckboards were removed from the dressing cubicles. The new paddling pool was a valuable acquisition and to see the joy of the children in using it amply and gratefully justified its provision.



The Borough Council maintain a Mortuary which is used by the Rutland and Stamford Hospital for all their post mortem examinations as well as serving the Coroner and the Police. In its attendant it is well served.

Eighteen Post Mortems were carried out last year and there were a total of twenty-three admissions to the Mortuary.

## PREVALENCE OF AND CONTROL OVER INFECTIOUS DISEASES

### ANALYSIS OF CASES OF INFECTIOUS DISEASES AND DEATHS THEREFROM

Notifications received during the year.

	Total Cases Notified 1959	Cases Admitted to Hospital	Total Deaths	Total Cases Notified 1958
Scarlet Fever ... ..	24	—	—	11
Food Poisoning ... ..	2	1	—	1
Dysentery	8	2	—	—
Meningococcal Infection	1	1	—	—
Puerperal Pyrexia	1	—	—	—
Measles ... ..	30	—	—	438
Whooping Cough ... ..	22	—	—	54
In addition 32 cases of Pneumonia were notified ... ..	32	—	—	14
Total	120	4	—	518

### AGE DISTRIBUTION OF THE NOTIFIED INFECTIOUS DISEASES

	Not known	Under 1 year	1—	2—	3—	4—	5—	10—	15—	20—	25—	35—	45—	55—	65 and over	Total
Scarlet Fever ... ..	—	—	1	3	2	4	12	1	—	1	—	—	—	—	—	24
Food Poisoning ... ..	—	—	—	—	—	—	1	—	1	—	—	—	—	—	—	2
Dysentery	—	—	2	—	2	—	—	—	—	—	2	1	—	1	—	8
Meningococcal Infection ... ..	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	1
Puerperal Pyrexia	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Measles ... ..	—	1	2	2	4	—	17	4	—	—	—	—	—	—	—	30
Whooping Cough ... ..	—	4	2	1	4	3	8	—	—	—	—	—	—	—	—	22
Pneumonia ... ..	—	—	2	1	—	—	4	—	—	—	3	4	7	1	10	32
Total	1	5	9	7	12	7	42	6	1	1	5	5	7	2	10	120



The incidence of notifiable infectious disease, excluding Tuberculosis, was considerably lower than in the previous year, 120 compared with 518 in 1958 and 80 in 1957. This lower figure was due to a comparative freedom from measles and whooping cough. Scarlet Fever was responsible for 24 cases. While the severity of this complaint is much less than formerly, the relaxation of the control measures of earlier times has resulted in an increased incidence, which I am persuaded is not wholly reflected by the total number of notified cases. Often it may appear so mild as to seem hardly worth notifying and in other cases is initially indistinguishable from a streptococcal sore throat, which is not a notifiable disease. These facts can create unhappy anomalies in the sphere of control.

There is a considerable case for overhauling the list of infections which are notifiable, dropping some which are of no clinical importance in this Country, e.g. Malaria, and some for which the control measures envisaged in the Regulations, have outworn their usefulness, e.g. Whooping Cough and Measles. For these might be substituted others which are more relevant to the moment, e.g. Undulant Fever, Infective Jaundice, Verruca and Athlete's Foot!

Influenza was rife in the early months of the year and its severity is amply testified to by the 32 notified cases of Pneumonia, many of which were influenzal in origin, and by 5 deaths directly attributable to this infection.

After four years of immunity there were 8 notified cases of Dysentery, all of the Sonn  type. These evidences of breakdown in domestic and personal hygiene cost the individual and the community dear.

It is good to report that there has been no case of Poliomyelitis in the Borough since 1955. Poliomyelitis Vaccination continued to meet with a gratifying demand from the mothers of young children and those of school age but those who had left school tended to ignore the invitation to avail themselves of this protection—by exercising their newly won freedom to say "No". However, it is clearly in the interest of the whole community to get a sufficient proportion protected to acquire a "herd immunity".

Fourteen years of freedom from diphtheria must not be allowed to lull the mothers of young children into an inactive complacency that it could never affect a child of theirs. Only by the continuing use of anti-diphtheria prophylactics during the first year of life can the horrifying picture of a child dying from this disease, or the painful story of a crippled heart as a result of it, be prevented from returning. In our rightful enthusiasm for the new, let us remember with gratitude the old and act accordingly.



## TUBERCULOSIS

	Deaths during 1959				New Cases during 1959			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M.	F.	M.	F.	M.	F.	M.	F.
Under 5 years	—	—	—	—	—	—	—	—
5—15 years	—	—	—	—	—	—	—	—
15—25 „	—	—	—	—	1	—	—	—
25—35 „	—	—	—	—	—	—	—	—
35—45 „	—	—	—	—	1	—	—	—
45—55 „	—	—	—	—	1	—	—	—
55—65 „	—	—	—	—	1	—	—	—
Over 65 years	—	—	—	—	—	—	—	—
Total	—	—	—	—	4	—	—	—

One new case of Pulmonary and four of non-Pulmonary Tuberculosis were notified during 1958. As the table above indicates, there were four new cases of Pulmonary and no instances of non-Pulmonary during the year under review.

Additionally, two further cases of the Pulmonary type moved into the town from other areas.

For the second year in succession there were no deaths from this cause. This is a small reflection of the National picture for whereas sixty years ago this scourge killed 60,000 annually, the figure now is under 4,000. While there has been this spectacular fall in mortality from it, there has not been an equivalent fall in the incidence of new cases, so one may truly say that the therapeutic art has been more successful accordingly than the preventive measures. It is therefore to be hoped that full advantage will be taken of the B.C.G. Vaccination Scheme for school children aged thirteen years and upward. It has proved its value in other countries and has received the full approval of the Medical Research Council in this. The transition from school to a less sheltered environment is a vulnerable period in an adolescent's life and this simple Vaccination procedure should markedly reduce this particular risk—the acquiring of active tuberculosis in an individual who has little resistance against it. Of paramount importance also is the surveillance of the known cases and their contacts at the Chest Clinic, the surgery and in their homes.

To achieve this domiciliary link a close liaison between Health Visitor and Chest Clinic is essential. I have appealed for just this for five years and there is evidence that at last it may well be achieved ere long. An all out attack is needed all along the line if the final battle is to be won.

The Council give generous priority in approved cases to those suffering from Tuberculosis and in need of re-housing.



## HOUSING

### PROVISION OF NEW HOUSES

Statistics of new houses erected in the Borough during 1959 as supplied by the Housing Department:

#### 1. BUILT BY LOCAL AUTHORITY:

Traditional Brick Houses ... ..	15
Houses in course of erection at end of year ...	6

#### 2. BUILT BY PRIVATE ENTERPRISE:

Traditional Brick Houses ... ..	37
Applicants for Council Houses as supplied by the Housing Department at December, 1959:	
Effective Housing List ... ..	90
	(plus 85 at Camp)
Tied and Service Tenants ... ..	17
Old Persons' Dwelling Applicants ... ..	38
Miscellaneous Applicants ... ..	2

The Council's Slum Clearance programme is one of 91 houses, of which 50 were included in the first five years. Up to the 31st December, 1959, 94 houses had been dealt with—13 during the year as follows:—

Undertakings 4

Closing Orders 9

The East Street/Elm Street Area having been expeditiously cleared, has been redeveloped by the erection of 15 Elderly Persons' Dwellings and these are all now happily occupied by appreciative tenants; who as a whole, realise their good fortune in being so ideally situated near to the town centre and its amenities.

Thirteen houses in Lumby's Terrace have also been completely modernised and are a fine example of what can be done for old sub-standard buildings, given an imaginative and bold approach. Again they are strategically situated in relation to the town and it is axiomatic that where building ground is so precious in the down town area that the most economical use must be made of it, as has been done in these two instances. They also show that close co-operation between the Health and Housing Committees which has been such a feature of the whole Slum Clearance programme.

The Council have been anxious for some time to do something about the temporary housing estate on Empingham Road—the former P.O.W. Camp—and the general standard of the accommodation there. It has been decided to build a sufficiency of houses on the King's Road Estate to re-house all those living on the Camp and demolish the hutments which have done little to add to the charm of the landscape, utilitarian though they may have been in their day.



Apart from this Clearance, which may be regarded as a domestic measure being within the Council's ownership, the Slum Clearance programme envisages no further Clearance Area procedures. The remaining properties to be dealt with are in the individual unfit category.

That the Council give the fullest encouragement to those who wish to bring old properties lacking in amenities but with possibilities, up to date, is evidenced by the giving of 22 improvement grants during the twelve months.

During the year a complete review of all the Almshouses within the Borough was effected. Some reluctantly have had to be closed, where there was no possibility of their being brought up to a standard commensurate with modern requirements. Others are actually in the course of conversion or are the subject of schemes for such conversion. It is a sanguine hope that in many instances it will be possible to make the internal amenities as praise-worthy as the external appearances have been in the past and so to prove that tradition may be maintained without missing modern opportunities.

The demand for Elderly Persons' accommodation remains as insistent as ever and this is shown by the fact that, excluding those on the Tied and Service Tenants' List, of the 130 on the Effective housing list, 38 require accommodation of this type—being 29 per cent! Would that a site could be found for a group of Elderly Persons' bungalows and a warden.

18 new caravan licences were granted apart from renewals, a steep increase largely resulting from the influx of migratory personnel working on the By-Pass. I have previously castigated the lack of relevant legislation to control adequately the living standards in caravans and their environment and also caravan sites. On the horizon are signs that some such help may be on the way. Meantime a working committee drawn from all the local authorities in Kesteven convened by the County Authority, has drawn up a uniform minimum code of requirements for Caravan sites, which it is hoped shall be applicable throughout the County.

The Council operates a Points Scheme for housing applicants and during the year 40 applications were received for priority rehousing on the grounds of ill-health. All of these received a personal visit from your Medical Officer and were fully investigated before a recommendation was made. I would like to thank my general practitioner colleagues for their help in this, as their observations in each instance are carefully considered in arriving at a decision.

No case of Statutory overcrowding came to light during the year.



In no case was action under the Nuisance Section of the Public Health Act necessary but this is not to say that there isn't the odd family who by improvidence and sloath sin against the minimum acceptable standards of domestic management. These cases are very intractable and present a continuing problem to the Health and Welfare Workers consequent on their lost pride in themselves, their homes and their children. Such are very exceptional as the general standards pay eloquent tribute to the modes of living, of housewifery and home management which prevail in the Borough.

## INSPECTION AND SUPERVISION OF FOOD

The Food Hygiene Regulations of 1955 continue to provide the recognised Code of Practice for all engaged in Food businesses, whether the food is intended for immediate consumption or not. It is a fact which cannot be stressed too much or too frequently that these hygiene codes are as applicable in the home as they are in the commercial sphere and lapses may bring swift retribution and disease as I have already mentioned earlier in the dysentery section of this Report. Householders who consider they can afford a television should consider carefully whether they can afford not to have a refrigerator instead—or in addition.

Market stalls are poor sites for food businesses and require constant vigilance and I include those itinerant ones which arrive with the Mid Lent Fair.

The Municipal Slaughterhouse provides an excellent service for the town and the surrounding area and can amply deal with all demands made or likely to be made upon it. It is constantly being made more efficient, as the addition of equipment such as a De-hairing machine endorses. There are no private slaughterhouses in the Borough.

The Slaughterhouse (Hygiene) Regulations of 1958 became operative on 1st January, 1959. While these asked for no improvement in the hygienic standards already operating in the Council's Slaughterhouse, nevertheless they were thoroughly welcome because Stamford's meat supplies do not come exclusively from its own Abattoir. Particularly welcome was the requirement that an undressed carcass entering the Slaughterhouse must have a Veterinary Surgeon's certificate giving the reason of slaughter, stating whether the animal was suffering from any disease liable to render the meat unfit for human consumption and giving particulars of any drugs administered which might affect the meat. The safeguards implicit in these provisions must be self evident.



The Chief Weights and Measures Inspector of the County Council, Mr. Hawley, took 43 samples under the provisions of the Food and Drugs Act, 1955. The articles sampled being:—

Cod Liver Oil capsules ...	1	Milk .....	20
Cream .....	1	Prunes .....	1
Cornflour .....	1	Preserves .....	2
Custard Powder .....	1	Salmon Spread .....	1
Honey .....	1	Sausages (pork) .....	3
Ice Cream .....	1	Steak and kidney pudding	1
Luncheon Meat .....	1	Soft drinks .....	2
Margarine .....	3	Soup (tinned) .....	1
Mock halibut .....	1	Vinegar .....	1

Mr. Hawley in his reports states:—

“An interesting variety of samples was taken in the Borough during the year, in the main with little cause for complaint.

### ICE CREAM

A locally made sample of Ice Cream contained 6.99 per cent of edible fat and 11.34 per cent of milk solids compared with statutory minima of 5 per cent of butterfat **and no other fat** and not less than  $7\frac{1}{2}$  per cent of other milk solids.

### MARGARINE

Three samples of Margarine were all found to be genuine with an average vitamin A content of 800 international units per ounce. The Food Standards (Margarine) Order stipulates not less than 760 international units per ounce.

### MILK

Nineteen samples of Milk were obtained during the year and, as in former years, the quality level was above average with figures of 4.05 per cent butterfat and 8.99 per cent other solids. This extremely satisfactory average is due to the fact that a great deal of Channel Island milk is sold in Stamford, more, I think, than anywhere else in the County (Statutory minima 3 per cent and 8.50 per cent other solids).

### PORK SAUSAGES

Three samples of pork sausages were submitted for analysis and two were entirely satisfactory with 65 per cent and 67.6 per cent of meat respectively. The third contained 55.8 per cent of meat at a price which was two or three pence below the prevailing price at the time. The maker was informed of the Council's view that pork sausage should contain not less than 65 per cent of meat unless some allowance in price is made.



## SALMON SPREAD

A sample of Salmon spread was found to be 92.5 per cent salmon and 7.5 per cent butter—an excellent recipe.

## MOCK HALIBUT

In connection with a survey which is being made on behalf of the White Fish Authority, a sample of Mock Halibut was submitted for analysis. The White Fish Authority has already prepared a list of recommended names for the sale of fresh or frozen fish by retail and, generally speaking, euphemisms like Mock Halibut and Rock Salmon are deprecated. In this case, there was no attempt to mislead by overcharging for the price of the mock halibut fillets was less than half that of genuine halibut. The intention was to get an authoritative opinion on the sample submitted, but, to a certain extent, this misfired, because the analyst, while expressing the tentative opinion that it was Rockfish, said he could not be sure unless he saw a complete fish. The matter has now been taken up direct with the White Fish Authority.

While the foregoing comments give some idea of the reasons why samples are taken, a great deal of what might be termed complementary work is also done by correspondence and by investigation of consumers' complaints. Recent much-publicised improvements in food handling and a new awareness on the part of the public that food hygiene is important to health, has made the consumer much more critical. All valid complaints are carefully investigated.

In three instances during the year, Stamford traders were cautioned as the result of investigations following complaints. In no case, however, was it thought necessary to institute legal proceedings, indeed, as will be seen from the whole of the foregoing report, there was surprisingly little cause for complaint."

I am indebted to Mr. Hawley for his assistance throughout the year and for the facts contained in this resumé.

One interesting case was the finding of a quarter inch bolt in a can of vegetables. It will be seen that a close watch is maintained on the qualitative and quantitative integrity of all food intended for human consumption.

## FOOD POISONING

There was two unrelated cases notified during the year. In each case *Salmonella Typhi-Murium* was the responsible organism. The one occurred in a Serviceman's wife and the other in a child.



This second was interesting in so far as there was some evidence that it was contracted from affected bovines on a farm where the patient had spent a week and from which he had just returned. In no instance was Food poisoning contracted within the Borough during the year.

## HEALTH EDUCATION

Never at any time has health information and propaganda had such a large platform as today. From the pages of Woman's glossy magazines and the humbler creations of Fleet Street, from television, sound radio, film-strips and the hoardings, the public are advised, seduced and even threatened along the road signposted "to Healthy Living".

In spite of this or maybe because of it, there yet remains a burning need for personal health education. There is a duty to explain how the rules for personal health and for a healthy environment, for home-safety, for safe food handling, for a balanced diet and so on apply to the individual and his or her particular circumstances. The Staffs of your own and the County Health Department endeavour to do precisely this in the course of their daily work. Additionally everyone who believes that the greatest of all human possessions is good health and that it should be safeguarded at all times, has a part to play in popularising the rules for its maintenance.

## NATIONAL ASSISTANCE ACT

It was not necessary to invoke the powers given under Section 47 of this Act, to remove compulsorily any person from their home during the year.

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A little over ten years ago saw the commencement of the Social Revolution brought about by the National Assistance and the National Health Service Acts. This sociological legislation has reached into every home in the land and brought immeasurable good in its train. Few would wish to put back the clock to the days when illness could so easily conjure up the spectre of debt and financial crisis. Then also many an elderly person quailed at the thought that one day they might have to enter the portals of a Work House—as a last resort. Even today there are some of the older generation who regard entry to Welfare accommodation as an



euphemism for the same fate and it takes very careful and prolonged explanation before they can be convinced that they are poles apart in amenities, management and as expressions of the social conscience, and devoid of the least trace of social stigma. Recollections of the old Poor Law die hardly in these proud independent folk, to whom the community owes so much for their past services to it.

The Home Help Service continues to do a wonderful work for the elderly and needy. Time after time it has come to the aid of those who but for it would have been forced into hospital or Welfare accommodation as the only possible alternative. Would there were a way of assessing what it must annually save the Regional Hospital Board and the Welfare Authority. Additionally there is no way of "costing" the priceless boon to them of allowing elderly persons to remain in their own homes, where they are so much happier surrounded by the dear familiar things.

During the year seven socio-medical cases arose. These were fully investigated in an effort to provide an answer to the human problem which they presented. One of these illustrates how even in these days with so many provisions for help available an individual case may defy a solution. An aggressive, socially unacceptable certified adult mental defective was living in the care of his married sister. This lady was herself under medical treatment requiring rest. Her daughter, suffering from a permanently crippling and progressive nerve disorder, together with her young baby were also in her mother's care. To crown matters the eight month old baby referred to had recently come out of hospital following on meningitis and his mother subsequently had a fall in the home.

To relieve the pressure of events every effort was made to get a hospital bed for the mental defective, whose name had been on the hospital waiting list from 16th March, 1954—over five years! In spite of invoking the help of the County Welfare Authority, the Regional Hospital Board, the Ministry of Health and a Member of Parliament, the Board stated they had worse cases awaiting admission and he would have to wait, as in fact he still is, while I write this report twelve months later!

Accidents in the Home continue to exact far too high a toll of injury and death. Amongst this year's causes of death appear seven attributable to accidents—these are additional to motor vehicle accidents which account for three more. Four of these seven were elderly women all of whom had died as a result of falling in their homes. Two of the three men also died as a result of home incidents.



Those who design dwellings for the elderly have a great responsibility to do all in their power to reduce the potential hazards to life and limb therein to a minimum; always bearing in mind the failing physical resources of those who will ultimately live in them. Again those who visit the elderly either socially or professionally should be on the look-out for pitfalls which might result in an accident and tactfully advise accordingly. By such attention to environmental details the toll of accidents might be drastically reduced.

During the five years I have held my present appointment it has been my constant aim and desire to integrate the personal Health and Welfare Services provided by the County Council with the environmental Health Services of the Borough. The object in doing so is that each can help the other more effectively and so achieve the maximum benefit for the individual and the community whom your Health Department serve.

I wish to express my sincere thanks to the members of the Council and especially to the Chairman and members of the Health Committee for their unfailing interest and support in all the work of the Department, which is such a stimulus and encouragement to me. I would also like to thank my close colleagues in the Health Department for their generous co-operation and assistance at all times. Also to my other colleagues on the Town Hall Staff, whose help I have continued to enjoy throughout the past twelve months, I offer a warm acknowledgment.

I am, Mr. Mayor, Ladies and Gentlemen,

Your obedient Servant,

H. ELLIS SMITH.



# FACTORIES ACTS, 1937 to 1959

## ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH FOR 1959

1. Inspections for purposes of provisions as to health (including inspections made by the Health Inspector).

	Number on Register	Number of		
		Inspection	Written Notices	Occupiers Prosecuted
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	15	17	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	78	42	—	—
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	—	—	—	—
Total	93	59	—	—

## 2. CASES IN WHICH DEFECTS WERE FOUND

	Number of cases in which defects were found				Number of cases in which prosecutions were instituted
	Found	Remedied	Referred		
			To H.M. Inspector	By H.M. Inspector	
Want of Cleanliness	—	—	—	—	—
Overcrowding	—	—	—	—	—
Unreasonable ventilation	—	—	—	—	—
Ineffective drainage of floors	—	—	—	—	—
Sanitary Conveniences:					
(a) Insufficient	—	—	—	—	—
(b) Unsuitable or de- fective	—	2	—	2	—
(c) Not separate for sexes	—	—	—	—	—
Other offences against the Act (not in- cluding offences re- lating to Outwork)	—	—	—	—	—
Total	—	2	—	2	—



## PART VIII—OUTWORK

	No. of Out- workers in August LIST re- quired by Sec. 110 (1)	No. of Cases of default sending lists to Council	No. of Prosecu- tions for failure to supply lists	No. of instances of work in unwholesome premises	Notices served	Prose- cutions
Wearing apparel (making)	1	—	—	—	—	—

### BOROUGH OF STAMFORD SENIOR PUBLIC HEALTH INSPECTOR'S ANNUAL REPORT FOR THE YEAR 1959

#### TABULAR STATEMENT OF INSPECTIONS

Meat and Foods	...	...	...	...	356
Housing and Overcrowding	...	...	...	...	177
Milk and Dairies	...	...	...	...	14
Infectious Diseases	...	...	...	...	89
Shops and Factories	...	...	...	...	59
Water Supplies	...	...	...	...	35
Rodent Control	...	...	...	...	92
Miscellaneous	...	...	...	...	101

TOTAL 923

#### NOTICES SERVED

	Issued	Complied With
Informal	23	16
Statutory	18	16

#### MEAT INSPECTION

The number of animals slaughtered at the Municipal Abattoir reached the record total of 11,191 and yet again I am glad to report the maintenance of one hundred per cent inspection. Once again thanks are due to Mr. Burt for carrying out relief duty in the absence through illness of the Manager, Mr. Hibbitt, who eventually resigned in August for health reasons and was succeeded by Mr. J. Coulson. Mr. Hibbitt rendered invaluable aid in the transition from Ministry of Food to Council control of the establishment and credit is due to him for the smoothness with which the transition took place.

The total amount of meat condemned was 14,370 lbs., a slight decline on the previous year but there is a slight increase in the percentage of animals affected with some unsound condition. Once again there was only one case of generalised tuberculosis in cattle and it is gratifying to record that no cows were slaughtered during the year.



The ready co-operation of the Slaughtering Contractor and his staff has again materially contributed to the smooth and efficient operation of the Abattoir.

TABLE 1

	CATTLE		CALVES	SHEEP	PIGS
	exclg. Cows	Cows			
No. of Animals Inspected	1185	—	2	5344	4660
TUBERCULOSIS ONLY. No. of Whole Carcases and Offals condemned...	1	—	—	—	5
No. of Carcases of which some part or organ was condemned ... ..	121	—	—	—	333
Percentage of Animals affected with T.B. ...	10.29%	—	—	—	7.25%
DISEASES OTHER THAN T.B. No. of Whole Carcases and Offals condemned...	—	—	—	2	10
No. of Carcases of which some part or organ was condemned ... ..	179	—	—	117	811
Percentage of Animals with diseases other than T.B. ... ..	15.11%	—	—	2.22%	17.61%

No case of *Cysticercus Bovis* was observed during the year.

TABLE 2. DETAILS OF CONDEMNED MEAT SHOWN  
IN TABLE 1

Meat Condemned	Beef	Mutton	Pork	Veal
Whole Carcases and Offals ...	1	2	15	—
Heads ... ..	46	—	235	—
Tongues ... ..	46	—	234	—
Pairs of Lungs ... ..	132	82	539	—
Livers ... ..	129	20	216	—
Plucks (complete) ... ..	—	1	55	—
Fats (Mesenteric) ... ..	21	—	144	—
Spleens ... ..	2	—	4	—
Hearts ... ..	4	4	104	—
Kidneys ... ..	1	—	14	—
Forequarters (whole) ...	—	4	—	—
Hindquarters (whole) ...	1	—	1	—
Other parts of Carcases ...	3	16	21	—



## OTHER FOODSTUFFS

The following foodstuffs other than butchers' meat have also been condemned as unfit for human consumption:—

### MEAT PRODUCTS

Corned Beef	31 tins	Pork	3 tins
Ham	14 tins	Stewed Steak	5 tins
Jellied Veal	11 tins	Tongue	8 tins
Luncheon Meat	8 tins		

### FISH (FRESH)

Coalfish fillets	2 stone	Whiting	1 stone
Salmon	12 lbs.		

### FISH (TINNED)

Salmon	6 tins	Sardines	3 tins
		Sild	2 tins

### FRUIT AND PRESERVES

Apples	1 tin	Orange Juice	4 tins
Apricots	51 tins	Peaches	59 tins
Fruit Salad	2 tins	Pears	19 tins
Gooseberries	1 tin	Pineapple	52 tins
Grapefruit	8 tins	Plums	2 tins
Oranges	13 tins	Tomatoes	94 tins

### VEGETABLES

Beans	1 tin	Peas	8 tins
Carrots	2 tins		

### MISCELLANEOUS

Cheese,			
Processed	7 tins	Rice Pudding	1 tin
Milk,			
Evaporated	6 lbs.		

## CLEAN FOOD REGULATIONS

Informal action has been generally the means of encouraging compliance with these Regulations but one Notice to repair the floor of a food shop was complied with.

The generally improved standard of the food-stalls in the market has been maintained and at the end of the year a new factory for the manufacture of pork-pies was in course of construction. This will supersede obsolete and unsatisfactory premises.

Two complaints were received of foreign bodies in pork-pies and these were referred to the County Council to be dealt with under the provisions of the Food and Drugs Act relating to nature, substance and quality of goods purchased. They were eventually dealt with by the issue of cautions to the manufacturers.

## ICE CREAM

There were three additions to the Register of premises licensed for the sale of Ice Cream during the year, all in respect of pre-packed Ice Cream manufactured by large National Distributors.



## MILK AND DAIRIES

There were three additional Distributors of milk registered during the year and one additional Licence under the Milk (Special Designation) Regulations, 1954, for the sale of Pasteurised and Tuberculin Tested milk, one additional Licence for the sale of Sterilised milk and one Supplementary Licence for the sale of Pasteurised and Tuberculin Tested milk.

A note-worthy innovation was the installation of the first slot-machine in the Borough for the vending of milk in cartons.

Infringement of these Regulations is the responsibility of the County Council and a sample of Pasteurised milk taken by that Authority was reported as satisfactory.

## WATER SUPPLIES

The various sources supplying the Borough were kept under observation and the results of the samples taken from such sources are given in the annexed table.

I am indebted to Mr. W. H. Dutton, Manager of Stamford Waterworks, for the results of the chemical analysis of five samples from the various sources supplying the Borough, which were in all cases reported as satisfactory in this respect.

Type of Water	No. of Samples	Satisfactory	Suspicious	Unsatisfactory
Chlorinated	10	10	—	—
Unchlorinated	12	11	—	1

## PET ANIMALS ACT, 1951

There were no applications for Licences for Pet Shops in the Borough.

## INFECTIOUS DISEASES, DISINFECTION AND DISINFESTATION

Enquiries were made in connection with 24 cases of Scarlet Fever, 1 case of Food Poisoning, 6 cases of Dysentery involving three families and 2 cases of Tuberculosis. Adequate measures of disinfection were carried out where appropriate.

No action has been necessary in respect of infestation by bugs but one room was disinfested in respect of fleas. One house in dirty condition was cleansed and treatment was also carried out in respect of one complaint of ants and three of flies. Disinfection of cells at the Police Station was also carried out by request.

## PRESERVED FOOD, ETC., FOOD AND DRUGS ACT

The number of premises on the Register remains unchanged.



## **MOVEABLE DWELLINGS, PUBLIC HEALTH ACT 1936,**

### **Section 269**

18 new applications for Licences to station moveable dwellings were received and approved during the year, in addition to renewals in respect of the Council's Empingham Road Caravan Site.

Unauthorised camping in the Brownlow Street/Belton Street area again continued to cause concern and the problem was eventually solved by the issue of Licences to station vans on land adjoining Cherryholt Lane, where appropriate sanitary facilities were provided.

A block of Licences was also granted to a Contractor operating on the Stamford By-Pass Scheme to station vans on land adjoining the Council's Empingham Road site. Sanitary accommodation was provided but the general condition of the site was causing concern at the end of the year. However, matters have since been remedied.

### **RAG FLOCK ACT, 1951**

The single registration of premises under the Act remains in force.

### **RODENT CONTROL**

Consequent upon the retirement of Mr. C. J. Knighten in July, the responsibility for Rodent Control was transferred to this Department. It was decided that the work of control should be carried out by a private firm of contractors who would deal with Council owned properties and private dwelling houses on a fixed contract basis and of business premises on a cost of material and labour basis.

The arrangement commenced on 1st October and is working well and up to the end of the year in the period under review, 31 complaints were received and were given adequate attention. In addition, 61 visits for investigation of complaints and treatment were made during the interregnum before the contract arrangements commenced. The Abattoir, Cattle Market, Sewage Disposal Works and the town sewers all received regular attention. The normal method of treatment is baiting with Warfarin poison.

### **HOUSING INSPECTION**

Very satisfactory progress with the work of slum clearance has been achieved during the year and by far the greater part of this task has now been accomplished. Clearance of the Eight Acres Area was completed and the remaining houses in Frisby's Buildings were also dealt with by Demolition Order procedure. In January a comprehensive report on the condition of the various Alms-houses was presented to the Health Committee. The prevailing conditions were brought to the notice of the Trustees in each case



and as a result two living units in Snowden's Hospital were closed, All Saints' Callis was closed completely (three units) while eight units at Hopkins' Hospital are being converted into four dwellings of reasonable standard. Grants were approved for work at Truesdale's and Hopkins' Hospital. It is likely that Williamson's Callis will be closed and schemes are awaited for Fryer's Callis and Burghley Almshouses.

Activity under the Rent Act has been confined to the cancellation of one Certificate of Disrepair.

24 properties were inspected as a result of applications for Improvement Grants and in 22 cases Grants were approved. These included the two groups of Almshouses above mentioned; two applications were refused. Grant Aided works were completed at 11 houses during the year.

No. of Visits	...	...	...	...	...	...	...	...	...	...	177
No. of Houses inspected	...	...	...	...	...	...	...	...	...	...	118
No. of Houses inspected and recorded	...	...	...	...	...	...	...	...	...	...	82
No. of Visits made for the purpose	...	...	...	...	...	...	...	...	...	...	123
No. of Houses unfit for habitation	...	...	...	...	...	...	...	...	...	...	17
No. of Houses not in all respects fit	...	...	...	...	...	...	...	...	...	...	45
No. of cases of Statutory Overcrowding discovered.	...	...	...	...	...	...	...	...	...	...	Nil
No. of cases of Statutory Overcrowding abated	...	...	...	...	...	...	...	...	...	...	1

### **Remedy of Defects**

No. of Houses vacated in Clearance Areas	...	...	...	...	...	...	...	...	...	...	1
No. of Houses dealt with by Demolition Orders and vacated	...	...	...	...	...	...	...	...	...	...	6
No. of Houses closed by Orders under Local Govt. Act, 1953	...	...	...	...	...	...	...	...	...	...	3
No. of Houses closed by accepting undertakings from owners not to use for habitation	...	...	...	...	...	...	...	...	...	...	12
No. of Houses made fit as a result of Informal Action	...	...	...	...	...	...	...	...	...	...	20

### **Proceedings under Public Health Acts**

No. of Houses in respect of which Notices were served for Abatement of Nuisance	...	...	...	...	...	...	...	...	...	...	5
No. of Houses where nuisances were abated	...	...	...	...	...	...	...	...	...	...	4

L. J. ROLL,  
Senior Public Health Inspector.

June, 1960.











