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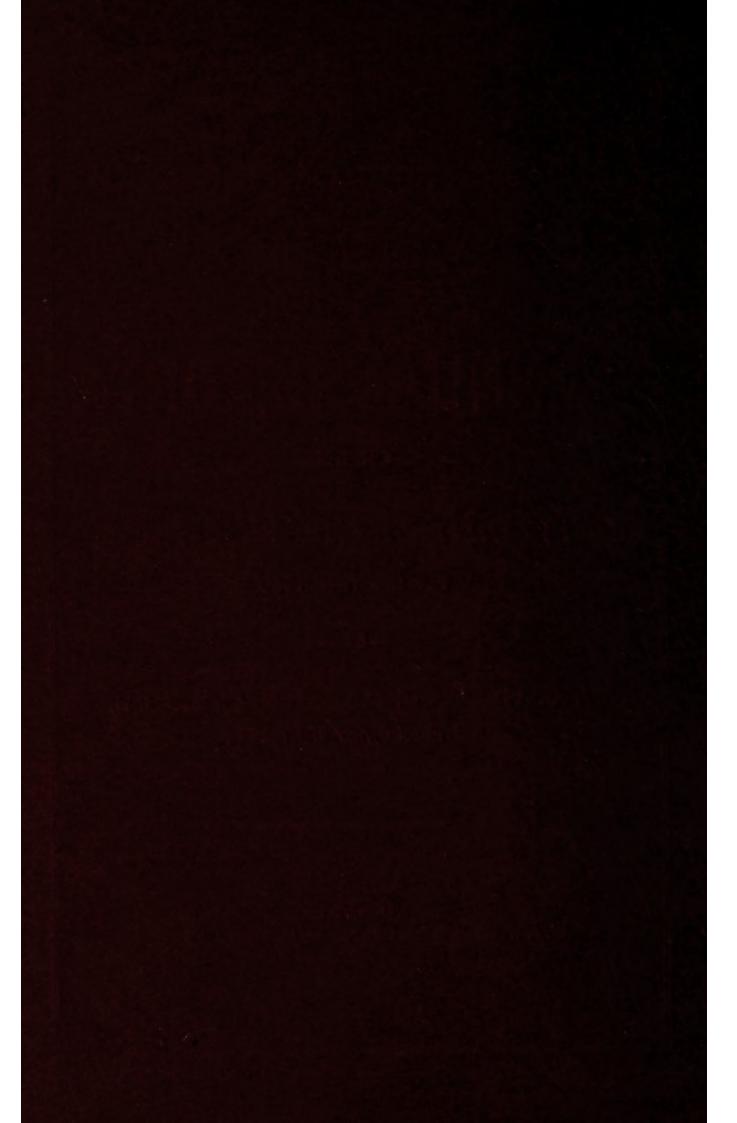
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CALOR OBE. M.S. Ch.B. D.P.H.

Middle Office of Resilience

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Marie Co. Company of the Same Street



To the Tamworth Rural District Council.

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have pleasure in submitting herewith my report on the health of the district for the year 1950. As usual, it incorporates the report of the Sanitary Inspector.

2. In the field of infectious diseases a gratifying feature was the absence of diphtheria for the fourth year in succession but less satisfactory was the substantial increase in the number of notifications of tuberculosis.

Progress towards the solution of the housing problem was disappointing but important improvements in water supplies and drainage were effected.

These matters are referred to in greater detail in the relevant sections of the report.

3. In my reports for 1948 and 1949 reference was made to the introduction and operation of a scheme of Area Administration of the health services of the County Council under the National Health Service Act, 1946. After being in operation for over two years the scheme has proved so successful on the whole that it may well be regarded as in the fore-front of modern public health administration in this country. As it has not been done before, it may now be appropriate to give a brief description of the scheme of Area Administration as it affects the North Western Area of the County which consists of the rural districts of Meriden and Tamworth.

With a few exceptions, the Warwickshire County Council as Local Health Authority, has delegated the discharge of its functions under Part III. of the National Health Service Act, 1946, to an Area Sub-Committee of the County Health Committee. The Sub-Committee consists of 15 members of whom four are members of the County Council and five and three are members of Meriden and Tamworth Rural District Councils respectively. In addition, there are three members, not members of a local authority, who are appointed by the Health Committee upon the nomination of the Area Sub-Committee.

The Medical Officer of Health for the two districts is Area Medical Officer and the combination of these appointments results in a co-ordinated health service which prevents overlapping and ensures that personal and local knowledge of all aspects of a case can be available in dealing with the many health problems which arise from time to time.

The Area Health Office undertakes, on behalf of the County Council, maternal and child welfare work, domiciliary nursing (nursing, midwifery and health visiting), care and after-care of the sick, a 'Home-Helps' service, vaccination and immunisation and the School Health Service.

It would be difficult to divide the activities of the Area Health Office as between the two districts but these may generally be regarded as proportionate to the district populations.

There are in the Area sixteen Child Welfare Centres and one Ante-Natal Clinic and 42 schools with 6,444 school children.

The Welfare Clinics are conducted by Medical Officers, Health Visitors and Nurses, with the invaluable assistance of voluntary helpers without whom it would be impossible to deal adequately with some 2,000 children under school age whose attendances reach a total of approximately 13,000 per annum. Great credit is due to these voluntary workers who are carrying out a service of inestimable value to the community.

In the schools over 3,000 children are medically examined each year and where necessary, and after consultation with their family doctor, arrangements are made for such specialist advice and treatment as may be required or, in some cases, for special educational facilities. In addition, cleanliness inspections by Health Visitors are in the region of 10,000 annually.

Members are familiar with the work of District Nurses and Midwives and it need only be mentioned that about 24,000 visits are made each year for general nursing care and that over 400 midwifery cases are undertaken.

It is of interest to note that approximately 50% of local mothers are confined in hospital, probably a result of bad housing conditions, overcrowding and financial considerations.

The Medical, Dental and Nursing Staff approved for the North Western Area and under the day-to-day administration of the Area Medical Officer, consists of:-

- 2 Assistant Medical Officers.
- 2 Dental Surgeons.
- 1 Area Nursing Officer.
- 18 District Nurse Midwives.
- 8 Health Visitors.

There is some difficulty at times in securing and maintaining a full complement of nursing staff and this is largely due to housing problems. Were suitable housing available staff would undoubtedly be forthcoming to ensure adequate health services, as is clearly demonstrated when posts with a house are advertised.

The position in regard to Health Visitors is particularly acute, possibly because it is not generally appreciated that they are as essential in a progressive health service as other Nursing Staff. Unless housing is provided prolonged vacancies in the establishment will be inevitable and mothers and children will be the chief sufferers.

4. In conclusion it should be noted that the report which follows has been prepared to comply with the requirements of the Ministry of Health.

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N. C. MACLEOD,

Medical Officer of Health.

TAMWORTH RURAL DISTRICT.

A. EXTRACT FROM VITAL STATISTICS FOR THE YEAR. Population (estimated) Mid-year, 1950 ... 15,890 Birth Rate ... 16.6 Still Births—Rate per 1,000 total births 15.0 Death Rate 10.4 Deaths from Pregnancy, Child-birth, Abortion Nil. Death Rate of Infants under one year of age :-All Infants per 1,000 live births 23 Legitimate Infants per 1,000 legitimate live births ... 23 Illegitimate Infants per 1,000 illegitimate live births Nil. Deaths from Measles (all ages) ... Nil. Deaths from Whooping Cough (all ages) Nil.

Population. The estimated population of 15,890 is approximately the same as for the previous year.

Birth Rate. 16.6 is slightly lower than in 1949 but is still higher than the 1950 rate of 15.8 per 1,000 for England and Wales.

Death Rate. 10.4 per 1,000 compares with the figure of 9.2 per 1,000 recorded for the previous year and 11.6 for England and Wales for 1950.

Table I. at the end of the report gives the causes of death from which it will be seen that the main killing diseases were diseases of the heart and circulatory system, cancer and respiratory diseases in that order.

It is of interest to note that there were five deaths from accidents, in two of which motor vehicles were involved.

Infantile Mortality. The rate of 23 per 1,000 live births is not as satisfactory as that for last year but compares favourably with the rate of 29.8 for England and Wales for the same period.

B. GENERAL PROVISION OF HEALTH SERVICES IN THE DISTRICT

Public Health Officers.

There is no improvement in the staffing position and, therefore, it becomes my duty to repeat and emphasise the statement on this matter made in last year's report as follows:-

"During the year it became clear that it is not possible for one Sanitary Inspector to perform efficiently and satisfactorily the many duties involved in a rural district with an area of 22,000 acres and a population of approximately 16,000. A recommendation for the appointment of an additional Inspector was therefore made to the Council which resolved 'that no further action be taken for the time being.' This is a matter which, in my opinion, merits early re-consideration if the sanitary condition of the district is to be adequately maintained."

Experience during the year under review has fully confirmed that understaffing is seriously affecting sanitary conditions in the district and that conditions are more likely to deteriorate than to improve.

The Council has certain statutory obligations and, in view of what has been said above, one must seriously doubt if it is in a position to carry them out in a manner consistent with modern public health requirements. For instance, the Council made byelaws regarding the "Handling, wrapping and delivery of food and sale of food in the open air" but, whereas the byelaws became operative in July 1950, it has not been possible to take any measures to enforce them nor will such measures be practicable until additional staff is provided.

The necessity for referring to the question of staffing for the second year in succession is to be regretted but a matter of such fundamental importance in maintaining satisfactory sanitary standards in the district must be kept before you.

C. SANITARY CIRCUMSTANCES OF THE DISTRICT.

1. Water Supplies.

(1) In previous reports reference has been made to the Kingsbury water supply which has been regarded as unsatisfactory for several years. This has now been remedied, as all arrangements were completed by the end of the year for a wholesome supply to be provided in the Kingsbury Area by Birmingham

Corporation as from 1st January 1951. And one may be justified in anticipating the 1951 report to the extent of stating that the new supply did, in fact, become available on that day.

- (2) Samples taken from mains supplies were found to be satisfactory.
 - (3) There was no case of plumbo-solvent action.
- (4) Particulars of piped supplies in the district were given in last year's report and, being unchanged, need not be repeated.
- (5) During the year seven houses without an indoor water supply had this service installed and the promise of similar action in respect of seven more was obtained.
- (6) A private water supply, found to be heavily polluted, are rendered satisfactory following the installation of a chlorinating plant on the advice of the Sanitary Inspector.

II. Drainage and Sewerage.

During the year the new Hurley Sewage and Sewage Disposal Scheme was completed except for a few minor items, good progress was made on the Bassetts Pole Scheme and work commenced on the scheme at Middleton.

The proposed Northern Area Scheme, which covers Austrey, Newton Regis, Seckington and Shuttington, received the approval in principle of the Ministry of Health following a local inquiry.

These schemes reflect credit on the Council for its progressive attitude to this important aspect of public health and, when they are completed and in operation, Tamworth will rank high amongst rural districts in respect of drainage and sewerage facilities.

The conversion of earth closets to water closets continued and additional water closets were provided at several properties so as to allow one for each family.

III. Rodent Control.

The Sanitary Inspector reports as follows on work carried out during 1950.

"The half-yearly treatments of the Council's sewers were carried out in June and December, with the following results:-

June.	Number of manholes baited	269
moure be	Number showing no takes of bait	160
	Number showing partial takes	83
	Number showing complete takes	26

December.	Number of manholes baited	253
	Number showing no takes of bait	158
	Number showing partial takes	70
	Number showing complete takes	25

The distribution of infestation remained fairly constant though the biggest improvement was in the Hurley sewers, undoubtedly due to the new sewerage scheme.

On general work your operative laid baits at upwards of 4,000 points and used gas at others. As a result the following number of dead rats were picked up:-

	on recoverable work in sewers, sewage works, et	230 c. 154
Bodies found		325 1034
	Total bodies found	1743

This figure probably only represents some 20%-30% of the actual kill as many die in their holes, especially when gas is used, and others among the undergrowth, etc., where it is impossible to find them, so that in all probability the total kill was between 7,000 and 8,000.

In addition to the work detailed above surveys have been made of farms and various parts of the district, and special visits followed receipt of reports of rat infestation from members of the public, who continue to co-operate with the Council in trying to keep under control this destructive pest.

Your Rodent Operative continues to give excellent service but the coming into operation of the Prevention of damage by Pests Act, 1949, on the 31st March 1950, which places the primary obligation on local authorities to ensure that its area is kept free from rats and mice instead of on occupiers, will increase the work, in particular the inspections of farms which, in the past, were under the County Agricultural Committee. This being so, it will be extremely difficult and almost impossible for your operative to fully cover the district on his present means of locomotion, i.e. a pedal cycle, and it appears to me that, if this service is to maintain its past efficient level, consideration will have to be given to supplying some form of motor transport. In this connection, I would like to point out to the Council that, under the new Act, Capital Expenditure of over £100 can, with the Ministry's approval, rank for grant as well as running expenses."

IV. Atmospheric Pollution.

An interesting report is provided by the Sanitary Inspector on the investigations during the year into smoke pollution in the district. He says:-

"Results are now available for a complete twelve months.

The reports on the six lead-peroxide gauges, giving records of the presence of sulphur gases in the atmosphere, showed that the order of pollution, worst first, was:-

- I. Amington.
- 2. Shuttington.
 - 3. Wilnecote.
 - 4. Halloughton.
 - 5. Hurley.
 - 6. Allen End.

Next year it will be interesting to compare results and in particular, if, as anticipated, Alvecote Colliery is closed, what effect this will have on the gauge at Shuttington, though it is recommended by the Fuel Research Station that a period of five years is required to set up a reliable average.

Once this average is obtained then any increase will be a matter of concern and enquiry.

The deposit gauge at Halloughton gave an average of 11.08 tons per square mile per month which compares with 24.05 for the Meriden gauge at Lea Marston.

The lead-peroxide gauges at Halloughton and Hurley, which are along the track of the prevailing wind from Lea Marston, and that at Lea Marston installed by the Meriden Rural District Council, gave the following results:-

Mg. sulphur trioxide per 100 sq. cm. lead peroxide surface per day.

Lea Marston 0.98
Halloughton 0.99
Hurley 0.94

No conclusions can be drawn from observations covering such a short period but it may be mentioned that it is generally accepted that ash from chimneys tends to be deposited within the first square mile from source while sulphur gases are carried much further afield in the atmosphere.

Exchange of results are made with the Meriden Rural District Council and I wish to express my thanks for Mr. F. T. Kenyon, the Senior Sanitary Inspector, for his co-operation and for permitting me to use extracts from his report."

V. A summary of visits made by the Sanitray Inspector is given in Table II.

D. HOUSING.

From a public health point of view housing of the people remains the outstanding problem in the district and the shortage of decent and adequate accommodation is responsible for much physical and mental infirmity. But only 34 houses were erected by the Council last year, a number which can hardly be regarded as satisfactory progress towards amelioration of this distressing situation.

However, there are prospects of some improvement in the 1951 house-building figures, an improvement which must be maintained if houses are to be provided within a reasonable time for hundreds of deserving applicants.

During the year, 30 cases were reported to the Council for special consideration in rehousing on account of serious over-crowing or grounds of ill-health and 11 such cases were rehoused.

On maintenance of buildings the Sanitary Inspector states that "continued progress has been made as regards minor repairs but large scale repairs are still minimised by the labour shortage and high cost coupled with low rents. Many houses are in such a state that very temporary patching is all that is possible but the continued housing shortage forbids action being taken to demolish these old worn-out properties with the result that the tenants have to continue to live in sub-standard houses with little hope in the near future of obtaining better houses.

In a case of a house subject to flooding a Demolition Order was made and the tenant rehoused."

E. INSPECTION AND SUPERVISION OF FOOD.

I Food Inspection.

The following items of food were examined by the Sanitary Inspector and found to be unfit for human consumption:-

6 tins of	THE RESIDENCE OF THE PARTY OF T	ıs)	5 lbs.
7 tins T	omatoes	 ***	15\frac{3}{4} lbs.
Butter		 	57-lbs.
Cod's Ro	e	 	64-lbs.
Cheese		 	10-lbs.

1513-lbs.

Slaughterhouses.

The slaughter and inspection of animals killed for food (other than bacon pigs killed by householders for their own use) is carried out at the Ministry of Food abbattoir which is situated within the Borough of Tamworth.

3. Food Poisoning.

There was no case of food poisoning during the year.

4. Food Hygiene.

The byelaws made by the Council under Section 15 of the Food and Drugs Act, 1938, in connection with the "Handling, wrapping and delivery of food and sale of food in the open air" came into operation in July 1950, but, for reasons indicated earlier in this report, they are likely to remain ineffective and meaningless until staff more in keeping with the requirements of the district is provided.

The fact that the byelaws were made shows the Council's appreciation of the need for improved hygienic conditions in the preparation, storing and handling of food.

5. Milk Supplies.

Routine sampling of milk in the district is undertaken by officers of the County Health Department to which I am indebted for the figures given below. Samples are also examined at the various large wholesale dairies. Herds found to produce tuberculous milk are investigated by the Divisional Veterinary Officer of the Ministry of Agriculture and Fisheries and his staff.

There is close co-operation between the departments mentioned and my office in deciding and carrying out such preventive measures as are necessary.

Investigations of Tuberculous Milk Supplies, 1950.

Number of completed investigations		5
Number of cows examined		91
Number of milk samples for diagnostic pu	rposes	15
Number of cows slaughtered under T.B. (Order	5
Number of cows removed from herds duri	ng	
investigations which may have been inf	ected	Nil.

During the year it was found necessary to serve a notice, under the Milk and Diaries Regulations, 1949, on one producer requiring treatment of milk prior to sale for human consumption.

F. PREVALENCE OF, AND CONTROL OVER, INFECTIOUS DISEASE.

The following table shows the cases of chief infectious diseases notified during 1950 together with their age incidence and deaths.

ty mean danger in this	10	No. of Cases Notified.				Re-	HS.			
	At Ages—Years.							Cases Reto Hospit		
Notifiable Disease.		Under 1	1-5	5—15	15—25	25—45	45—65	65 and upwards	Total Ca moved to	TOTAL DEATHS.
Measles	141	3	72	66	-	The same	-	1-9	-	L
Whooping Cough	26	2	11	13	1	No.	1	-	0	9
Pneumonia	15	-	4	4	3	1	-	3	1	9
Scarlet Fever	16	-	6	9	1	-	-	-	12	-
Erysipelas	1	9-27	22	-	recor	olulo	low	1	- Ho	00
Acute Poliomyelitis: Paralytic Non-paralytic	3 —		1 —	1	100	1	500	S to	3	14 I
Meningococcal Infection	1	-	-	1	-	-	-	-	1	-
Pulmonary Tuberculosis	13	-	2	-	2	4	3	2	8	4
Other forms of Tuberculosis	10	TOUR	3	3	1	2	1-	1	4	2
TOTALS	. 226	5	99	97	7	8	3	7	29	15

Diphtheria.

For the fourth year in succession the district was free from diphtheria.

During the year a full course of immunisation against diphtheria was completed by 155 children under 5 years of age and by 22 children between the ages of 5 and 14 years, a total of 177.

In addition 157 children were given a re-inforcing or "booster" dose.

Most of the immunisations were carried out at Welfare Centres and Schools.

The immunisation figures show a reduction of some 25% compared to those for the previous year. This is probably the result of much ill-directed, and possibly ill-conceived, publicity regarding the connection between diphtheria immunisation and poliomyelitis which eventually led to suspension of immunisation from July to November.

I have never been convinced of any great danger in this valuable preventive measure and it may well be that a marked reduction in the number of children immunised will prove more costly in the long run, from increased incidence of diphtheria, than any possible ill effects resulting from immunisation during a moderate outbreak of poliomyelitis.

Everything possible is being done to encourage immunisation, for the freedom from diphtheria must not be allowed to give rise to complacency on the part of parents and others responsible for the welfare of children.

Acute Poliomyelitis.

Three cases were notified during the year affecting one adult and two children. All were paralytic in type. Two have made a complete recovery and the third has made enough progress to enable her to return to school.

There was no connection between the cases which occurred in Belgrave, Kingsbury and Two Gates.

School Closures-NIL.

PREVALENCE OF, AND CONTROL OVER, TUBERCULOSIS.

	12	New C	ASES.		DEATHS.				
AGE- PERIODS.	Puln	Pulmonary.		Non- Pulmonary.		Pulmonary.		Non- lonary.	
	M.	F.	M.	F.	M.	F.	M.	F.	
0		_	_	_	_	_	-July 1	unqu	
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55		10-7000	01 53 07	-	15-0	- Citib	bu-VI	_	
65	. 2	-	-	1	1	10 tos	ob Trot	sood"	
Totals	. 7	6	5	5	3	1	1	1	

The notifications of tuberculosis during 1950, 13 pulmonary and 10 non-pulmonary, show a substantial increase on the figures for the previous year which were 9 and 4 respectively. There was one more death than in 1949.

This increase is the more notable when it is remembered that figures for the country as a whole have shown an appreciable improvement during the year under review. Pulmonary cases can be explained by delays in hospitalisation of infectious cases and lack of facilities for isolation, combined with overcrowding and bad housing. Although about 60% of such cases notified gained admission to a sanatorium the position is that, generally speaking, patients still have to face a waiting period of four or five months.

Until this dangerous gap can be bridged, and adequate housing is available, the control of tuberculosis of the lungs must remain a dangerous and urgent problem. The tragedy of non-pulmonary tuberculosis is that it can so easily be prevented and the antiquated laws governing the sale of milk must be held largely responsible for the present position.

FACTORIES.

The numbers on the registers are :-

- (1) Factories in which sections 1, 2, 3, 4 and 6 of the Factories Act are enforced by the Council—14.
- (2) Factories not included in (1) in which Section 7 is enforced by the Council—41.
- (3) Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers premises)—4.

One case of insufficient sanitary accommodation was found and plans for rectifying the defect have been submitted.

CANAL BOATS.

The Sanitary Inspector reports as follows:-

"Canal Boats. Public Health Act, 1936, Sec. 249.

The periodical visits to the docks and wharves still show that traffic is very light on the canal in this area.

During the year no registrations were cancelled and no new registrations made leaving the number on the register at 146. Of the 16 boats inspected, 12 only were at the time being used for sleeping. These were registered for occupation by a total of 44 persons and were occupied by 29, made up as follows:-

Male Adults
Female Adults
8
Children
7

No requests for certification of completion of repairs required by other authorities have been received during the year.

Contravention of the Act was met with in one case only and a complaint note issued in respect of a badly leaking cabin roof.

No boat was found to be carrying offensive cargo and as no infectious disease was met with, no boats were detained for disinfection."

Local Authority (excluding lout-workers premises) -3.

"Canal Boats, Tubby Houth Act, 1976, Sec. 249.

that trailing is very light on the canal in this seen.

TABLE 1.

TAMWORTH RURAL DISTRICT.

CAUSES OF DEATH DURING THE YEAR 1950.

		0.
Cause of Death.	Males.	Females
All Causes	82	84
I. Tuberculosis respiratory	3	I
2. Tuberculosis, other	I	I
3. Syphilitic disease	TORTON I	0-
4. Diphtheria	Section 10	
5. Whooping Cough	-	-
6. Meningococcal infections	-	-
7. Acute Poliomyelitis	Dill res	
8. Measles	TO THE SALE	
9. Other infective and parasitic diseases	I	2
10. Malignant neoplasm, stomach	2	2
11. Malignant neoplasm, lung, bronchus	2	200
12. Malignant neoplasm, breast	100	2
13. Malignant neoplasm, uterus	-	2
14. Other malignant and lymphatic neoplasms	8	3
15. Leukaemia, aleukaemia	-	
16. Diabetes	I	
17. Vascular lesions of nervous system	5	II
18. Coronary disease, angina	10	10
19. Hypertension with heart disease	2	I
20. Other heart disease	10	20
21. Other circulatory disease	6	
22. Influenza	I	
23. Pneumonia	5	4
24. Bronchitis	4	0
25. Other diseases of respiratory system	-	I
26. Ulcer of stomach and duodenum	I	_
27. Gastritis, enteritis and diarrhoea	1	I
28. Nephritis and nephrosis	-	_
29. Hyperplasia of prostate	I	1
30. Pregnancy, childbirth, abortion		-
31. Congenital malformations	I	2
32. Other defined and ill-defined diseases	13	14
33. Motor vehicle accidents	2	-
34. All other accidents	I	2
35. Suicide	2	I
36. Homicide and operations of war		

TABLE II.

SUMMARY OF VISITS BY SANITARY INSPECTOR

plies (i	ncludin	g samp	oling)	*****	64
					129
		*******	anie m		14
nises			rocto	deals	28
Dwellin	ngs		1.0869	24.00	22
(includ	ing Bak	cehouse	s)		21
lection	and dis	sposal	d infec		27
ric Poll	ution		religion	noilos	IIO
ntrol					31
Acts			distant	20.40	16
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