[Report 1946] / Medical Officer of Health, Torquay Borough.

Contributors

Torquay (England). Borough Council.

Publication/Creation

1946

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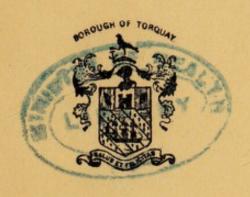
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BOROUGH OF TORQUAY

INTERIM REPORT

OF THE

Medical Officer of Health

for 1946





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TABLE OF CONTENTS.

						PAGE
Introductio	n	1				3
Staff .						5
Section A.	STATISTICS THE AR		CIAL CO		OF	7
Section B.	GENERAL PI	ROVISION E AREA			VICES	11
Section C.	SANITARY C	IRCUMSTAN	NCES OF	THE ARE	A	19
Section D.	Housing	3147	10			28
Section E.	Inspection	AND SUPI	ERVISION	of Fooi	o	29
Section F.	PREVALENCE	OF, A				35
Section G.	PORT HEAL	rh Admin	ISTRATIO	N		39
Section H.	MISCELLANE	ous				. 39

ST. MARYCHURCH TOWN HALL,

TORQUAY.

To the Worshipful the Mayor and to the Aldermen and Councillors of the Borough of Torquay.

MR. MAYOR, MRS. COUNCILLOR WHITE, AND GENTLEMEN,

I have the honour to submit an Interim Annual Report for the year 1946, in accordance with the instructions of the Minister of Health; as in the war years, some of the customary detailed information is omitted from the various sections.

During the year under review there is nothing of significance in the vital statistics, although more accurate comparisons will be possible when the age-distribution of the population is available again. The war-time emergency work still further decreased; but the effects of the last seven years must remain, perhaps enigmatical at present, although not without deep biological and social implications.

The rapid conversion and equipment of the premises at Shrublands and the inauguration of the Borough Maternity Home constitute a most gratifying provision, which is much appreciated by the many mothers who are patients there. The accommodation was badly needed; but this should only be a temporary arrangement, fulfilling a useful purpose pending the further reorganisation and institution of the larger Obstetric Centre for the area, to which it is now reasonable to look forward with confident patience.

Further intensive efforts were made in the organisation of the Home Help and Domestic Help Scheme, abounding as it does with difficulties; although this, too, is another provision which is urgently required. But the underlying cause, as in certain other spheres, is clear; for while all acclaim and are anxious to accept the benefits of such schemes, very few indeed are willing to undertake the hard toil of unrecognised service which is involved.

A useful start has been made in the provision of new houses, and this is of paramount importance: because not only does the serious shortage remain a source of considerable anxiety, but also without the establishment and appreciation of a good home life for every family the future of the nation is indeed bleak.

In the work of the sanitary section attention is called to the urgent need of improving conditions of handling food through every stage, from producer to consumer. The public receive occasional warnings when a serious epidemic produces newspaper headlines; but at other times there is the most amazing complacency in existing conditions—even in such prosaic but important matters as washing up dishes.

Coming events cast their shadows before, and under the National Health Service Act there will be on the appointed day (probably before my next annual report is published) the transfer of some of the work for which this Department is now responsible: the isolation hospital and the maternity home are to be placed under the Regional Hospital Board, while child welfare, with the Health Visitors section, diphtheria immunisation, and the ambulance service will be taken over by the Devon County Council. But you, as an Authority, can feel satisfied that these services have been inaugurated, developed and maintained as well-organised, efficient sections, which can with confidence be handed on, to be woven into the larger pattern of things to come—if also into the wider sphere of less personal administration. And perhaps it may be that

"As living link, or prophecy, or type Of purpose for fulfilment yet unripe, Each has its niche in the supreme design."

In conclusion, it is with appreciation that I acknowledge both the encouraging support given to me by the Chairman and members of the Public Health Committee, and also the co-operation and helpfulness of the medical profession in the many contacts of the daily routine.

To the Staff is due the greatest credit, for their loyal support and hard work deserve unbounded admiration: such an excellent record throws with hopeful promise a gleam on the years that shall be.

I have the honour to be,

Your obedient Servant,

J. V. A. SIMPSON.

STAFF

(a) Medical

Medical Officer of Health, Medical Superintendent of Isolation Hospital, and Chief Billeting Officer

> J. V. A. SIMPSON, M.D.LOND., B.S., M.R.C.S., L.R.C.P., D.P.H.CAMB.

Acting Deputy Medical Officer of Health and Assistant County Medical Officer
T. GIBSON, M.D.ED., C.M., D.P.H.LOND.

Medical Officer, Ante-Natal Clinic and Post-Natal Clinic *P. A. McCALLUM, M.B.GLASG., CH.B., D.P.H.CAMB.

Obstetric Consultants

*P. A. McCALLUM, M.B.GLASG., CH.B., D.F.H.CAMB.

*B. VENN DUNN, M.D.ED., F.R.C.S.ED.

Aural Surgeon (Maternity and Child Welfare, and Isolation Hospital)
*W. H. BRADBEER, M.S.LOND., D.L.O.ENG.

Pathologist and Bacteriologist

*G. A. C. LYNCH, M.D., D.P.H.LIVERP.

(b) Dental

Dental Officer for Maternity and Child Welfare N. HARRIS, L.D.S., R.C.S.ENG.

(c) Nursing

Health Visitors, Child Protection Visitors

†Miss G. JONES, S.R.N., S.C.M., H.V.CERT.R.S.I.

†Miss J. M. WALLACE, S.R.N., S.C.M., H.V.CERT., R.S.I.

†Miss M. P. MULLENDER, S.R.N., S.C.M., H.V.CERT.R.S.I.

†Mrs. L. LEE, S.R.N., S.C.M., H.V.CERT.R.S.I.

Matron, Isolation Hospital
Miss M. J. STEWART, S.R.N., R.F.N.

Matron, Borough Maternity Home Miss A. C. BOWDEN, S.R.N., S.C.M.

(d) Sanitary

Senior Sanitary Inspector, and Billeting Officer
G. J. LOVELESS, c.r.s.i., Cert. Insp. Meat and Food R.s.i.

District Sanitary Inspectors, and Billeting Officers
A. THOMPSON, c.r.s.i.

J. F. H. SMITH, c.s.i.s., Cert. Insp. Meat and Food R.s.i., Dip. R.i.p.H.H., Cert. Lab. Technique, Exeter.

H. T. BEECHEY, c.s.i.b., Cert. Insp. Meat and Food R.s.i., Dip. (Hons.)

(e) Other

Public Analyst *T. TICKLE, B.Sc., F.I.C.

> Chief Clerk W. H. NICKELS.

> > Clerks

W. D. WHITE. Miss I. M. WILTSHIRE. Miss L. M. HARRIS.

§Miss A. M. MOXH AY. *§Miss J. E. WHITE.

(Sanitary Inspectors) §F. J. PAYNE.

Assistants to Sanitary Inspectors E. D. TUCKER. §M. L. WHITE.

> Rodent Operatives §L. R. SCANT. §W. FRITH. §T. SCOURFIELD. §J. BULL.

(Maternity and Child Welfare) Miss K. HUDSON.

Senior Ambulance Attendant J. R. WICKINS.

> Ambulance Attendants F. BACKWELL. G. HARE. &L. SOPER. §R. E. C. JAMES. §H. DAGG.

* Part Time.

† Also School Nurse. § Temporary.

SECTION A.

STATISTICS AND SOCIAL CONDITIONS OF THE AREA

Area (in acres)	6,244
Registrar-General's estimate of resident population,	
13 30 10	49,010
Number of inhabited houses (end of 1946) according to	40,010
	10 000
Rate Books	13,228
Rateable value (end of 1946)	£536,558
Sum represented by a Penny Rate (end of 1946)	£2,146
Company of the compan	
Social Conditions,	
Including the chief Industries carried on in the Area the extent of Unemployment.	and
	oial aon
There is nothing exceptional to record about the so	
ditions; but the following figures, kindly supplied by the	
of the Ministry of Labour Employment Exchange, show the	ne extent
of unemployment.	
· · · · · · · · · · · · · · · · · · ·	Total.
January, 1946 133 41 3 3	180
July, 1946 97 26 3 1 January 1947 333 86 9 1	127
January, 1947 333 86 9 1	429
EXTRACTS FROM VITAL STATISTICS OF THE YEAR 19	946,
which relate to the net Births and Deaths after correction for	or inward
and outward transfers as furnished by the Registrar-Ge	
P: 11 - 1 000 C11 - 1: 1:1	16.32
Still birth-rate per 1,000 of the estimated population Still birth-rate per 1,000 total (live and still) births	27.95
Death-rate per 1,000 of the estimated population	15.40
Deaths from puerperal causes (Headings 29 and 30 of the Registrar	-General's
Short List):—	1,000 total
(live and s	still) births
No. 29 Puerperal sepsis	1.215
No. 30 Other maternal causes	1.215
Total	2.43
Death-rate of infants under one year of age :-	
All infants per 1,000 live births	30.0
Legitimate infants per 1,000 legitimate live births	26.7
Illegitimate infants per 1,000 illegitimate live births	54.9

Deaths from Cancer (all ages) ,, Measles (all ages) ,, Whooping Cough (all ages) ,, Diarrhœa (under two years of age) Particulars of any unusual or excessive mortality during the year which has received or required special comment.

During the year there has been nothing to report.

Population.

The Registrar-General's estimate for the resident population at the middle of 1946 is 49,010; and this figure is used in calculating the marriage-rate, birth-rate, death-rate and other statistical returns. The population at the last census in 1931 was 46,352.

Births.

The number of live births registered during the year, corrected for transfers, is 800, of which 402 were male and 398 female; there were 711 legitimate and 89 illegitimate births. There were 23 still-births, 19 legitimate and 4 illegitimate.

The birth-rate was 16.3 per 1,000 population, compared with 19.1 for England and Wales, and 21.3 for the smaller towns; the stillbirth-rate was 0.47 per 1,000 population, the corresponding rates for England and Wales and for the smaller towns being 0.53 and 0.59. The stillbirth-rate per 1,000 live and stillbirths was 27.95.

(The smaller towns comprise 148 towns, with a resident population between 25,000 and 50,000 at the 1931 census, and include Torquay.)

The proportion of illegitimate to total births in Torquay (after correction for transfers) was 11.3 per cent in 1946; this figure has risen progressively from 6.4 per cent in 1939 to a maximum of 17.7 per cent in 1945.

The total number of births registered is the highest recorded in Torquay, and the births exceed the deaths for the first time in many years. The birth-rate has risen from a minimum of 8.9 in 1941 to the high figure of 16.32 in 1946. It has only been higher on four occasions this century: 16.6 in 1900, 16.5 in 1901, 16.6 in 1906, and 18.6 in 1925.

The number of births depends upon the number of women of child-bearing age (i.e. between 15 and 44 years) in the population, and in the 1931 census there were only 5,173 married women between these ages; and whether the high rate is due to a biological increase after the war, or to an increase by immigration of the number of younger persons is not certain. When the up-to-date age-distribution of the resident population is available, it will probably then be seen that modern Torquay is beginning to change somewhat from its former self with the predominance of retired residents.

Marriages.

The marriage-rate was 6.0 per 1,000 population compared with 7.1 in 1945, 5.7 in 1944, 5.5 in 1943, 5.8 in 1942, and 6.2 in 1941.

Deaths.

The number of deaths registered during the year, corrected for transfers, is 755, of which 315 were males and 440 were females.

The crude death-rate was 15.4 per 1,000 population compared with 16.4 in 1945; the death-rate in 1946 for England and Wales was 11.5, and for the smaller towns 11.7.

In normal times, in order to make adjustments for the age and sex distribution of Torquay, the Registrar-General supplies an "areal comparability factor" with which to multiply the crude death-rate and so obtain an adjusted death-rate. This year, however, the Registrar-General again states: "The variety and magnitude of local population movements and the uneven incidence of civilian war deaths have together combined to frustrate the attempt to secure comparability between local death-rates by the use of Areal Comparability Factors, and the preparation and issue of such factors are being suspended under present conditions."

The chief causes of death were as usual for Torquay: (1) Heart disease 215; (2) Cancer 124; and (3) Intra-cranial vascular lesions 108; which between them are responsible for nearly two-thirds of the total deaths.

The causes of death are given in the accompanying table, supplied by the Registrar-General.

Infant Mortality.

The infant mortality rate was 30 per 1,000 total live births, compared with a rate of 43 for England and Wales and 37 for the smaller towns; the death-rate for legitimate infants per 1,000 legitimate births was 26.7, and the death-rate of illegitimate infants per 1,000 illegitimate births was 54.9. The infant mortality rate in Torquay tends to fluctuate owing to the comparatively small numbers upon which it is calculated: thus the figures for the preceding five years, 1941–45 inclusive, were 50, 28, 48, 42, 36, with an average of 41.

There were 2 maternal deaths during the year, the maternal mortality rate being 2.43 per 1,000 total births: this mortality rate also fluctuates considerably on account of the small numbers, and for the five years 1941–45 was 3.32, 3.32, 1.66, 2.61, 0.00, with an average of 2.18 per 1,000 total births. The rate for England and Wales in 1946 was 1.43, and in 1945 it was 1.79.

	Causes of Death in 194	6		Males	Females
	All Causes			315	440
1.	Typhoid and Paratyphoid Fever	s		-	BUS 1
2.	Cerebro-spinal Fever	****		-	1000
3.	Scarlet Fever	*****		-	-
4.	Whooping Cough		****	-	-
5.	Diphtheria			-	_
6.	Tuberculosis of Respiratory Syst	em		17	11
7.	Other forms of Tuberculosis			-	1
8.	Syphilitic Diseases			2	1
9.	Influenza			2	2
10.	Measles		****	-	-
11.	Acute Poliomyelitis and Polioenc	ephalitis		-	-
12.	Acute Infectious Encephalitis			-	-
	Cancer of Buccal Cavity and				100
13.	Oesophagus (Males only)		****	3	-
	Cancer of Uterus (Females)			1 0- 1	4
14.	Cancer of Stomach and Duodenu	m	****	10	10
15.	Cancer of Breast			-	19
16.	Cancer of all other sites			31	47
17.	Diabetes			2	5
18.	Intra-cranial Vascular lesions			31	77
19.	Heart Disease			89	136
20.	Other Diseases of the Circulatory	System		15	13
21.	Bronchitis			18	12
22.	Pneumonia			11	14
23.	Other Respiratory Diseases			. 1	2
24.	Ulceration of the Stomach or Du	odenum		8	1
25.	Diarrhœa (under 2 years)			-	funda- or
26.	Appendicitis			2	1
27.	Other Digestive Diseases			7	11
28.	Nephritis			13	9
29.	Puerperal and Post-abortive Seps				1
30.	Other Maternal causes			-	i
31.	Premature Birth			5	2
32.	Congenital Malformations, Birth				The Party
DATE OF THE PARTY OF	Infantile Disease			6	5
33.	Suicide			5	4
34.	Road Traffic Accidents			2	4 2
35.	Other Violent Causes			9	10
36.	All other Causes			26	39
50.					
	Death of Infants (Total			13	11
	under 1 year { Legitimate			11	8
	Illegitimate			2	3
	Canobianato			-	
	(Total			11	12
	Still births Legitimate			8	11
	Illegitimate			3	î
	Cambridge	****			

SECTION B.

GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA

 (i) Full particulars of the Public Health Officers of the Authority, including their duties, are incorporated in the beginning of the Report.

At the end of August Dr. J. T. Quinlan resigned from the post of Temporary Pathologist at the Torbay Hospital and Dr. G. A. C. Lynch was appointed to fill the vacancy.

Mr. M. G. Crook, Senior Sanitary Inspector, left in August to take up the post of Senior Sanitary Inspector in the Borough of Wanstead and Woodford, and Mr. G. J. Loveless, District Sanitary Inspector, was promoted to be Senior Sanitary Inspector. Later in the year Mr. P. H. Burge, District Sanitary Inspector in the Borough of Kettering, was appointed District Sanitary Inspector, but did not take up his duties in Torquay until early in 1947. Mr. R. S. Davey, Temporary District Sanitary Inspector, resigned on 31st March to return to Holsworthy R.D.C.

Two vacancies on the staff of Health Visitors were filled by the appointment as from 1st April of Miss M. Mullender from Worcestershire and Mrs. M. L. Lee from Bolton. This enabled a full health visiting staff to be available; and, as mentioned in the previous report, the proposed co-ordination of health visiting and school medical work (mutually agreed between the County Council and the Borough) was effected, each of the four nurses being responsible for an area of the town. This co-ordination materially assists the general work of both branches of the service and avoids overlapping of visits; but even so, it was soon evident that the staff was not adequate to cope with the growing volume of duties, and perhaps this may be left to be considered when the reorganisation takes place under the National Health Service Act, for there will be some alterations in the scope and type of work.

Unfortunately, the full staff in this section was soon interrupted, as Miss M. Mullender was appointed Superintendent Health Visitor in the Borough of Luton, and resigned on 31st December.

For the new Borough Maternity Home Miss A. C. Bowden, S.R.N., S.C.M., of Manchester, was appointed Matron, taking up her duties on 1st April.

After service in H.M. Forces Mr. W. D. White, Clerk, returned in June; and Mr. P. H. Burge was demobilised in July, proceeding direct to an appointment as District Sanitary Inspector in Kettering. Mr. F. J. Payne was appointed a Temporary Clerk, taking up his duties after demobilisation on 28th April, to fill the vacancy caused by the resignation of Mr. J. Martin, who became an articled pupil.

Mrs. V. J. Knapman, Clerk and Acting Senior Clerk during the war, resigned on her husband's demobilisation and left on 31st January; and Mrs. E. Oldrey and Mrs. P. Edwards, Temporary Clerks, also resigned on the return of their husbands from the Services at the end of February.

(ii) (a) Laboratory Facilities.

There have been no changes during the year.

(b) Ambulance Service.

The Borough is fortunate in having an efficient ambulance service day and night, with four ambulances. This 24-hour service is obtained with six driver-attendants, who work regular shifts and are called in if required at certain other times; and it is only by the hard work, the keenness and the loyalty of the men that such a creditable service has been maintained, in spite of many difficulties.

The replacement of vehicles is becoming exceedingly urgent and just as difficult, for although a new war-time model was bought in 1944, it is not the type of vehicle which commends itself to what should be the less austere days of peace. A new peace-time model has been ordered with a somewhat distant and problematical date of delivery.

This is one of the services to be transferred shortly from Torquay to the County Council. It is hoped that those responsible for the future organisation of ambulance services will appreciate the need for linking up staff to provide a greater number of men, when the maintenance of a rota with adequate off-duty times, free from being on call, can be obtained. Similarly, in an area like this, there should be different types of ambulances, with a large, high-powered, smooth-running vehicle for long-distance work, medium-sized ambulances for town work, with ample horse-power for the hills, small vehicles for one stretcher which can negotiate the narrow Devon lanes and the drives in the more rural areas; and, in addition, ordinary motor cars of a reasonable size should be included for sitting cases.

A new ambulance station is urgently required, for the Service had to leave its original quarters at the beginning of the war and has since moved twice to temporary premises. Some consideration should be given to basing the station on or near hospitals, for much mileage could then be reduced: and the staff might be associated with certain aspects of hospital work, to the mutual advantage of both sections of the Service.

(c) Nursing in the Home.

The St. Marychurch and Babbacombe District Nursing Association was wound up and discontinued on 31st March, as it was found impracticable to maintain the work. Their nurses attended the St. Marychurch and Babbacombe Infant Welfare Centre, and the Borough paid an annual grant towards the home nursing of cases like measles and whooping-cough and of minor ailments in children under five. It was arranged that the Queen's Institute should undertake this work, as they already do so for the other parts of the town; and the grant paid to them was increased accordingly.

- (d) Treatment Centres and Clinics.
- (e) Hospitals: Public and Voluntary.

There have been no changes during the year.

- 3. Midwifery and Maternity Services.
 - (i) Midwives Act, 1936.

The work under the Midwives Act has proceeded satisfactorily and without incident; 25 midwives notified their intention to practise. The Scheme by which the Queen's Institute carry out the domiciliary midwifery of the Borough has continued to operate well; during the year there were 287 domiciliary confinements.

(ii) Maternity Services.

The arrangements at the Torbay Hospital remain unchanged, with 2 ante-natal and 9 lying-in beds.

The combined scheme of the Hazelwood-Morningside Unit, described in previous reports, has continued to function in a very efficient and creditable way, with a good record of work. Under this arrangement all the maternity work is carried out at Morningside, while Hazelwood is an ante-natal and post-natal hostel for ex-Service girls sent by the Ministry of Health, and for cases from the Children's Aid Society.

In order to meet quickly the urgent need for more maternity accommodation for local cases, the temporary scheme approved towards the end of 1945 was proceeded with; and the houses of Shrublands and Blagdon (bought before the war as a prospective Health Centre) were converted into a Maternity Home of 12 beds. The planning and alterations were ably and rapidly carried out, and resulted in a most creditable unit being formed. On the ground floor provision was made for a reception room with bath and lavatory, labour ward, sterilising room, a lying-in ward for 2 beds, another for 4 beds and another for 3 beds, and sluice room; in addition there is matron's office, a staff dining-room, kitchen, scullery

and larder, together with a good linen store. By this arrangement the nursing and care of all the lying-in cases, while in bed, are on one floor and save much labour and time for the staff in avoiding up and down stairs—a most important lesson which was forcibly demonstrated, and very painfully learned, in some of the emergency homes during the war.

On the first floor there is a ward for 2 lying-in beds (patients who are out of bed and moved upstairs for the last few days), a nursery, a milk room, and in another part of the house an isolation room of one bed with separate lavatory; there is matron's room, assistant matron's room, one room for a staff midwife and one for the cook, with separate bath and lavatory accommodation for nursing staff, for patients and for domestic staff. There is hot and cold water in all wards and bedrooms, and the heating is electric tubular or radiators (supplemented by open fires if required); and in an annexe there are laundry facilities with a drying-room fitted with hot pipes.

As this is a temporary scheme all the adaptations were of the simplest kind and were made with only one or two minor structural alterations, both to avoid unnecessary expense and to save time; and the whole unit was ready in a few months. It was fortunate that most of the equipment was obtained and purchased from the emergency auxiliary hospital and maternity homes, as otherwise there would have been considerable delay in opening the Home; for some items of equipment have been on order for over twelve months, and are still not obtained.

Even more important than the building and equipment is the staff, and an adequate nursing and domestic staff was gradually found and appointed. Owing to shortage of accommodation within the Home, some of the staff sleep out in a nearby house or at home. The midwifery staff are trained, or are being trained after appointment, to obtain the certificate in gas-air analgesia, which is thus available for all cases.

The mothers attend the ante-natal clinic at the Torbay Hospital, where the selection is made of difficult or complicated cases for hospital, and normal cases, without suitable home conditions, for the maternity home; and the obstetric consultants are available if the midwives require medical assistance for any case in the Home.

The Home was officially opened on 31st July by the then Mayor, Mr. Alderman C. T. Bowden, J.P., who is also Chairman of the Public Health Committee. An excellent start has been made, the facilities being very greatly appreciated by all the mothers who have been patients there.

The accommodation available is taxed to capacity all the time; and although the beds provided have more than doubled the prewar provision of 9 beds at the Torbay Hospital, there is still the

same congestion in the Hospital Maternity Ward owing to an increasing number of cases being sent in from the adjoining areas of the county outside Torquay. This illustrates very clearly the need for co-ordination of all the hospitals and institutions, which fortunately will be obtained under the new Regional Board; for then, and only then, can proper regulation be procured through a centralised hospital admission bureau, for holding a just balance in booking normal cases and for keeping an adequate number of beds open for abnormal cases and for unforeseen emergencies throughout the whole area.

It should be emphasised, even at the risk of repetition, that the provision at the Borough Maternity Home is only a temporary measure; and your Authority still recommends the original scheme of utilising the Isolation Hospital as the Obstetric Centre for the district, when centralised facilities will be available which are adequate for the area and which will have the enormous additional advantage of becoming a training school for midwives.

During the year there were 1,163 births notified, and the confinements took place as follows:

	Residents.	Non-Residents.	Total.
Torbay Hospital Maternity Ward	156	130	286
Hazelwood-Morningside Unit	_	128	128
County Maternity Homes	57	-	57
Borough Maternity Home (from		many with religion to the	
31st July)	74	1	75
Torbay Hospital Private Wards	24	15	39
Private Nursing Homes	261	30	291
At home by Queen's Institute of			
District Nursing	287	-	287
	859	304	1163
			-

(iii) Sheets for Expectant Mothers.

In connexion with Circular 154/44, the issue was continued of priority dockets for sheets for expectant mothers. It was felt that shortage of sheets had sometimes been an inducement to women to seek institutional confinement and that midwives were hampered by lack of this necessary provision. Women holding R.B.2 expectant mother's ration books are eligible to purchase utility sheets on priority dockets if the midwife booked for the domiciliary confinement certifies that the mother is genuinely in need of additional sheets. The issue is normally two sheets, but not more than three can be allowed in any case.

Quarterly returns are made to the Priority Officer showing how the dockets have been issued, and during the year 197 mothers received dockets for 398 sheets.

(iv) Care of Premature Infants.

The arrangements previously detailed are unchanged. During the year the number of babies notified who weighed $5\frac{1}{2}$ lb. or less was 71, and of these 64 were born in hospital and 7 at home. The number of those born at home who were nursed entirely at home were 7, of which 1 died during the first 24 hours and 1 more during the first month; of those born in hospital, 5 died during the first 24 hours and 3 more during the first month.

(v) The Care of Illegitimate Children.

The scheme for the care of illegitimate children has continued to operate satisfactorily but perhaps under increasing difficulties; for the high rate of illegitimacy has now been maintained for a number of years, which does not make the solution easier of the many problems involved. The cases referred to the social worker numbered 85.

(vi) Home Help and Domestic Help Service.

These schemes have practically been in abeyance owing to the impossibility of obtaining suitable women to act as Home Helps: and in June, Circular 110/46 was received dealing with the general development of adequate services. The inauguration of the National Institute of House Workers will, it is hoped, result in increasing the supply of suitable women for Home Helps; and the establishment of an adequate service will make it easier to give effect to the recent suggestion of the Minister of Health that as many mothers as possible should be encouraged to have their confinements at home. It is recommended that Home Helps (for confinements) and Domestic Helps (for illness or infirmity) should be administered as one scheme called the Home Help Service. The appointment of a capable full-time organiser is considered essential to success.

Torquay is too small to justify a whole-time organiser, and as the Welfare Services are shortly to be transferred to the Devon County Council, your Medical Officer recommended that the County Council should be approached to ascertain if they would appoint a whole-time organiser and administer the scheme on the lines of the circular for the whole county including Torquay, and that Torquay should pay a proportion (the ratio of Torquay births to total county births), approximately one-tenth of the overhead cost of the organiser and administration, plus wages (less recovery from householders) of any Helps used within the Borough. The Borough of Torquay approved these recommendations, and a meeting was held on 1st July between representatives of the County Council and of the Borough.

Subsequently the Devon County Council decided that it is impracticable at present to prepare a scheme for the whole county but suggested that Torquay should prepare a scheme with a view to its extension later to the remainder of the county. A modified scheme was then approved by the Borough, and the organisation (such as visiting Women's Clubs and Institutes, explaining the scheme, trying to recruit helps and supervising their allocation, parents' contributions, etc.) was undertaken as part of her duties by a whole-time member of the staff within the administration of the department. Much help was obtained from the City of Oxford Scheme, details of which were given to Torquay by courtesy of the Medical Officer of Health. One very suitable home help willing to work whole-time was secured at the end of the year, and another was obtained early in 1947, so that there is a promise of a more hopeful record for the next annual report.

(vii) Health Visitors and Infant Welfare Centres.

The Health Visitors have continued to carry out a large amount of most creditable work, and as stated in a previous section, their duties in each district have been combined with the school medical service. Particular attention has continued to be given to diphtheria immunisation, to the eradication of verminous conditions and to the continued problems of illegitimacy and adoption of children.

The visits to mothers and children during the year numbered: under 1 year, 3,041 and 1-5 years, 3,381.

When the reconstruction of Shrublands began early in the year it was necessary to move the Infant Welfare Centre held there on Friday afternoons to Belgrave Church Hall, which is only a very short distance away. This centre had been started in October, 1939, as an additional welfare to meet the needs of evacuation; but the attendances have all along been good and still remain so high that it has not been possible to discontinue the centre, originally intended to be a temporary war-time provision, the clinical work being undertaken by your Medical Officer as an additional measure to help in the emergency.

(viii) Verminous Conditions and Uncleanliness.

The measures described last year following Circular 2831 have been diligently continued; and there is nothing to comment upon except to emphasize once again the close connexion between this problem and unsatisfactory careless homes.

(ix) Child Life Protection.

There is nothing exceptional to report.

(x) Adoption of Children (Regulation) Act, 1939.

The supervision by the Child Protection Visitors of these cases has continued, and during the year the number notified was 20, and the number of children adopted was 20.

(xi) Arrangements for Dental, Orthopaedic, etc., cases.

These arrangements are unchanged.

(xii) War-time Day Nurseries.

The full-time day nursery set up at Hillside for the war emergency to care for the children of mothers in work of national importance, was discontinued at the end of March.

(xiii) Fruit Juices and Cod Liver Oil.

In connexion with the scheme for the distribution of vitamins administered by the Ministry of Food, the assistance outlined previously was continued.

4. Nursing Homes.

In connexion with The Undertakings (Records and Information and Inspection of Premises) Order, 1943, from the Ministry of Labour, dated 19th June, 1944, a return is sent every quarter of the number of nursing and domestic staff employed at the beginning of the quarter and the number who have left or have been engaged during that period.

SECTION C.

SANITARY CIRCUMSTANCES OF THE AREA

1. (i) Water.

In this report very full details are requested in connexion with the water supply, and the Borough Water Engineer, Mr. R. V. Toms, has kindly supplied some of the information.

(i) Whether the water supply has been satisfactory (a) in quality;
 (b) in quantity.

The water supply has been maintained throughout the area of supply at a high standard of quality and ample quantity.

(ii) Where there is a piped supply, whether bacteriological examinations were made of the raw water and, where treatment is installed, of the water going into supply; if so, how many and the results obtained; the results of any chemical analyses.

Bacterial and chemical examinations have been made of both raw and treated water. The water is treated at the Watershed with lime to produce a pH of approximately 9.2, which allows for a pH of about 8.0 when the water reaches the consumer. The water is also filtered and chlorinated to obtain a residual of 0.25 to 0.5 parts per million.

Comprehensive analyses of the raw water numbered 3, bacteriological and chemical, as follows:

REPORTS BY THE COUNTIES PUBLIC HEALTH LABORATORIES, GIDEA PARK, ESSEX.

1. Sample 18.3.46. Trenchford Reservoir (Untreated). Chemical results in parts per 100,000

Appearance.—Very faint opalescence with very slight flocculent deposit of mineral and organic debris. Few infusoria present. Turbidity: less than 5 parts per million, Silica scale.

Colour Faint Yellow-brown, H	azen 13	Odour	Nil
Reaction pH Faint Acid	6.3	Free Carbonic Acid	0.3
Electric conductivity at		Total solids, dried at 180° C	7.5
20°C	.105	Alkalinity as Calcium Car-	
Chlorine in Chlorides		bonate	0.5
Hardness: Total	2.5	Carbonate Non-carbons	ite
Nitrogen in Nitrates	0.16	Carbonate Non-carbons temporary 0.0 permanent	2.5
Free Ammonia		Nitrogen in Nitrites	
Albuminoid Ammonia	0.0028	Ammoniacal Nitrogen	_
Oxygen absorbed in 4 hrs.		Albuminoid Nitrogen	-
at 27° c	0.100		
Metals: Iron	0.005		
Other metals	absent		

BACTERIOLOGICAL RESULTS

 $\begin{array}{c} \text{Number of Bacteria grow-} \\ \text{ing on Agar per c.c. or} \\ \text{ml. in} \\ \text{...} \end{array} \begin{array}{c} 1 \text{ day at } 37^{\circ} \text{ C} \\ \text{2 days at } 37^{\circ} \text{ C} \\ \text{3 days at } 20^{\circ} \text{ C} \\ \text{ml. in} \\ \text{...} \end{array} \begin{array}{c} 0 \\ \text{5} \\ \text{30} \end{array}$ $\begin{array}{c} 5 \\ \text{Resumptive Coliform Reaction} \\ \text{Present *10 c.c. Absent 1 c.c.} \\ \text{Bact. coli (Type 1)} \\ \text{...} \\ \text{Cl. welchii Reaction} \\ \text{...} \end{array} \begin{array}{c} \text{Present } 100 \text{ c.c.} \\ \text{Present } 100 \text{ c.c.} \\ \text{Present } 100 \text{ c.c.} \\ \text{Present } 100 \text{ c.c.} \end{array}$

This sample has faint opalescence and a trace of matter in suspension, but is not unduly turbid. The water is faintly acid in reaction, soft in character and deficient in alkalinity. It has only faint colour and is of satisfactory organic and bacterial purity for this raw water. Treatment is required, however, to restrain corrosive action on metals.

2. Sample 18.3.46. Fernworthy Supply at Trenchford Outlet Guage (Untreated).

CHEMICAL RESULTS IN PARTS PER 100,000

Appearance.—Very faint opalescence with very slight flocculent deposit of mineral and organic debris. Few infusoria, diatoms and chlorophyceæ present. Turbidity: less than 5 parts per million, Silica scale.

Colour Hazen: Yellow-	Odour Nil
brown	30 Free Carbonic Acid 0.44
Reaction pH	5.9 Total solids, dried at 180° C 4.0
Electric conductivity at	Alkalinity as Calcium Car-
20° C	50 bonate 0.2
Chlorine in Chlorides	0.9 \(\) Carbonate \(\) Non-carbonate
Hardness: Total	1.0 temporary 0.0 permanent 1.0
Nitrogen in Nitrates	0.00 Nitrogen in Nitrites absent
Free Ammonia	0.0030 Ammoniacal Nitrogen
Albuminoid Ammonia	0.0056 Albuminoid Nitrogen —
Oxygen-absorbed in 4 hours	Entitled on dramatic area made and
at 27° C	0.200
Metals: Iron	0.005
Other metals	absent

BACTERIOLOGICAL RESULTS

Number of Bacteria grow- ing on Agar per c.e. or 1 day	at 37° C · 9 days	at 37° C .	3 days at 20° C
ml. in	1	14	76
Presumptive Coliform Reaction	Present *10 c.c.	Absent	1 e.e.
Bact. coli	Present —	Absent	100 c.c.
Cl. welchii Reaction	Present 100 c.c.	Absent	10 e.c.

* False presumptive reaction.

* False presumptive reaction.

This sample has faint opalescence and a trace of matter in suspension including a few low forms of life normal to surface water, but it is not unduly turbid. The water is acid in reaction, very soft in character, and deficient in alkalinity. It has noticeable colour, but is of satisfactory organic and bacterial purity for this raw water.

Treatment is required to restrain corrosive action on metals and reduce organic content.

3. Sample 14.10.46. Trenchford Reservoir (Untreated). BACTERIOLOGICAL ANALYSIS ONLY

Number of Colonies de-			
veloping on Agar per c.c. > 1 day	at 37° C: 2 days	at 37° C:	3 days at 20°
or ml. in	1	2	80 .
Presumptive Coliform Reaction	Present 10 c.c.	Absent	1 e.e.
Bact. coli—Type 1	Present 10 c.c.	Absent	1 c.c.
Cl. welchii Reaction	Present —	Absent 10	00 e.e.

This sample is practically clear and bright in appearance, having only a trace of matter in suspension. The water shows bacterial impurity indicative of contamination by matter of excremental origin ,but the degree of pollution is not excessive. Treatment is, however, required to render the water suitable for public supply purposes.

A comprehensive analysis of the treated water going into supply numbered 1, bacteriological and chemical, at the Water works, as follows:

Sample 18.3.46. Tap off Main of Waterworks Stores, Torquay (Treated Water: filtered, limed, chlorinated)

CHEMICAL RESULTS IN PARTS PER 100,000

Appearance.—Bright with few particles of mineral debris. Turbidity: less than 5 parts per million, Silica scale.

Colour Normal	Odour	Nil
Reaction pH Neutral	7.1 Free Carbonic Acid	Trace
Electric conductivity at	Total solids, dried at 180° C	8.5
20° €	120 Alkalinity as Calcium Car-	
Chlorine in Chlorides	1.6 bonate	1.0
Hardness: Total	3.5 Carbonate Non-carbona	te
Nitrogen in Nitrates	3.5 Carbonate Non-earbona 0.16 temporary 0.0 permanent	3.5
Free Ammonia	0.0012 Nitrogen in Nitrites	
Albuminoid Ammonia	0.0020 Ammoniacal Nitrogen	-
Oxygen absorbed in 4 hours	Albuminoid Nitrogen	
at 27° C	0.050	
Metals: Iron (Total)	0.005	
Other metals	absent	
"Free chlorine reaction"	absent	

BACTERIOLOGICAL RESULTS

Number of Bacteria grow-			THE RESERVE OF THE PARTY OF
ing on Agar per c.c. or 1 day	at 37° C: 2 days	at 37° C:	3 days at 20° C
ml. in	0	3	20
	Present —	Absent	100 c.c.
Bact. coli	Present —	Absent	100 e.c.
Cl. welchii Reaction	Present 100 c.c.	Absent	10 c.c.

This sample is practically clear and bright in appearance, having only a few particles of matter in suspension. The water is neutral in reaction, soft in character and contains no excess of salinity or mineral constituents in solution. It is of good organic quality and of very satisfactory bacterial purity.

These results are consistent with a pure and wholesome water suitable for public supply purposes.

(Signed) GORDON MILES, B.Sc., F.R.I.C.

Samples are also taken regularly each week from a variety of sources in the Borough such as taps in private houses, canteens, dairies, drinking fountains, schools, and farms, and occasionally from the storage reservoirs. 51 such samples were submitted for bacteriological examination.

The results of 33 bacteriological examinations showed consistently good results, viz.:

COUNTY BACTERIOLOGICAL LABORATORY

"Probable number of coli-aerogenes organisms per 100 ml.=nil. This sample is satisfactory bacteriologically."

In the case of 18 other samples the examination showed that the probable number of coli-aerogenes per 100 ml. ranged from 2 to 130, and in two cases Bact. coli of the faecal type was detected.

These samples were chiefly in the autumn and, as stated in my last report, it is probable that the growth of organisms is caused by vegetable matter in the local mains and pipes: and there is also a connexion with climate and the season of the year. The two samples with evidence of Bact. coli of faecal type were definitely unsatisfactory and a source of anxiety.

(iii) Where the waters are liable to have plumbo-solvent action the facts as to contamination by lead, including precautions taken and the number and result of analyses.

In all the analyses no trace of metals was found except a minute trace of iron. The pH is maintained at the level mentioned previously to avoid action on lead.

(iv) Action in respect of any form of contamination.

In connexion with the bacteriological impurity referred to in the previous sections, after consultation with your Water Engineer, it was considered probable that there was some temporary contamination caused by cattle grazing on a catchment area of the moor taken over by the Devon War Agricultural Executive Committee and possibly by men employed by the Board of Trade working on forestry (felling timber for pit props) in close proximity to the reservoir. Immediate steps were taken to remove the cattle, the particular area was fenced off, and an agreement was reached with the Agricultural Committee not to allow the land adjacent to the water area to be used for arable purposes. Further precautions were taken in connexion with the forestry work which, fortunately, ceased on 30th November. And the chlorination of the water was raised to give a residual of 0.5 parts per million.

It is to be regretted that the purchase and clearance of the water-shed at the beginning of the century should have to be followed, owing to the urgent needs of the emergency, by these increased activities.

- (v) Particulars of the proportion of dwelling houses and the proportion of the population supply from public water mains (a) direct to the houses; (b) by means of standpipes.
- (a) The proportion of dwelling houses with a supply from public water mains direct to the houses is 98.75 per cent, and the proportion of the population thus supplied is 98.5 per cent.
- (b) The proportion of dwelling houses supplied by means of standpipes is 1.25 per cent, the proportion of the population thus supplied being 1.5 per cent.

(ii) Drainage and Sewerage:

The Borough Engineer, Mr. P. W. Ladmore, M.Inst.C.E., has kindly given the following details and those in connexion with public cleansing and salvage.

"Approximately 300 yards of 9-inch sewer and 34 yards of 18-inch have been reconstructed. Two housing schemes have been responsible for approximately 6,400 lineal yards of foul and surface water sewers (9-inch to 15-inch). (This work refers to temporary housing.) On two permanent housing estates 3,400 yards lineal of foul water sewers have been laid from 9-inch to 30-inch in diameter, and in addition a small stream has been culverted for nearly 500 yards with 18-inch and 24-inch diameter pipes."

(iii) Public Cleansing.

The arrangements during the year have been similar to those of previous years with certain modifications in the interval at which collections are made.

(iv) Salvage.

The collection and recovery of salvable material continue, but emphasis might with advantage be laid on the necessity for salvaging more waste paper and kitchen waste.

The following are the details of the amounts recovered:

106				Tons	Cwts.
Paper and	d Card	board		 441	14
Metal: fe	errous			 92	19
Metal: n	on-feri	rous		 31	2
Textiles				 10	8
Oil				 _	18
String				 1	19
Bones				 1	3
Rubber .				 -	-
Kitchen V	Vaste:				
Collected	by Cor	poratio	on	 884	2
Collected	by Pig	-keepe	rs	 391	5
Bottles an	d Jars	3		 878 doz.	
Number o	f Hats			 650	

2. Sanitary Inspection of the Area.

Dwelling Houses.

The inspection of all districts in the Borough has been very efficiently carried out during the year under your Senior Sanitary Inspector, who gives the subjoined tables showing the scope of the work. Considerable attention has been devoted to the inspection of food and milk, the purity and wholesomeness of which are of vital importance at all times; although it has perhaps taken the restrictions and conditions of the war to make such an obvious fact more fully realised and appreciated.

No.

inspected.

Visits.

30

Under Public Health	Acts		444		2225
Under Housing Acts			211		300
Overcrowding			16		24
Verminous Premises			102		117
Rats and Mice			110		132
New Houses-Perman	nent		59		64
Prefabr	ricated		130		130
General Public	Health.			I	nspections.
Drains and sewers:					
Ir	specte	d			896
T	ests ap	plied			297
Cesspools					66
Stables					28
Piggeries					16
Open Spaces					25
Yards					6
Public Conveniences					72
Tents, Vans and Shed	ls		****	****	22
Factories with mecha	nical p	ower			98
Factories without me	chanica	l powe	er		19
Workplaces					13
Outworkers					2
Common Lodging Ho	uses				10
					5
Cinemas, Dance Halls					10
Markets					26
Shops—Shop Act			****		128
Offensive Trades	****				7
Schools					24
Offices				•••	3
Water				I	nspections.
Water Supply : visits	1				62
samp					51
Swimming Bath: visi	ts				57
san	ples				60

chlorine tests

M	eat and Fo	ood.		I	nspections.
Meat Shops, Sta	alls, etc.				874
Cooked Meats					65
Slaughterhouses					544
Cowsheds					114
Dairies: visits					493
Samples: D.C.C					191
· Natio	nal Milk T	est Sc	heme		1809
Other	Samples				50
Sedin	nent Tests				50
Bakehouses					36
Hotels					11.
Ice-cream Premi	ses				196
Fishmongers					120
Fish Quay					167
Fish Fryers .					10
Greengrocers .					215
Grocers					347
Restaurants .			****		142
Street Vendors					41
Other Premises					109
34:	.77				NT

Miscellaneous.		Number
Complaints investigated	 	 293
Effluvia nuisances	 	 1
Other visits	 	 1566
Infectious disease enquiries	 	 206

NOTICES SERVED.

	· V	erbal	Written		Statutory		Total	
	Served	Complied with	Served	Complied with	Served	Complied with	Served	Complied with
Public Health Act	 161	135	178	156	7	5	346	296
Housing Act	 -	_	47	31	16	16	63	47
Factory Act	 -	-	17	14	-	_	. 17	14

FACTORIES ACT, 1937

The accompanying table gives the details of the inspections and defects found.

Only two outworkers are now employed and registered in the Borough. The decrease in the number is probably due to the fact that most of those persons previously employed by tailoring firms are now working on their own account.

1. Inspection of Factories.
(Including inspections made by the Sanitary Inspectors)

Premises.	Number of			
Tremises.	Inspections.	Written Notices.		
(i) FACTORIES in which Secs. 1, 2, 3, 4		THE PLANT		
Authorities	98	17	Nil	
Sec. 7 applies	19	_	,,,	
OTHER PREMISES under the Act	13	-		
Total	130	17	Nil	

2. Defects Found in Factories.

Donald Land	Number of Defects.					
Particulars.	Found.	Remedied	Referred to H.M. Inspector.	Prosecu-		
Want of Cleanliness	3	3		_		
Want of Ventilation	_	-	-	-		
Overcrowding	_		_			
Want of Drainage of Floors	_	_		_		
Other Nuisances	7	6		_		
Sanitary Accommodation:						
Insufficient	3	2		-		
Unsuitable or Defective	3	2	-	_		
Not Separate for Sexes	1	1	_			
Offences under the Factory and		The same				
Workshop Acts: Illegal Occupation of Underground Bakehouses	_		_	_		
Other Offences	-	-	-	-		
and offences under the Sections men- tioned in the Schedule to the Ministry of Health (Factories and Workshops Transfer of Powers) Order, 1921.)		181		A MONTH		
Total	17	14	Nil	Nil		

Measures against Rodents.

This work has been well maintained under your Senior Sanitary Inspector, who gives the following details:

In addition to the measures taken in 1943–44 in connexion with the Infestation Order, the Ministry's suggested scheme for the treatment of the main sewers was put into operation. Special treatment of sewers had not previously been undertaken, and a considerable amount of preparation was involved.

Preliminary work was carried out by the Borough Engineer's Department when a complete survey of the sewers was made. The Borough was divided into 39 areas of approximately 45 to 60 manholes, and area maps, with the manholes plotted, prepared. All manhole covers were eased and bait trays and ropes fixed where necessary. Owing to the shortage of labour at the time only two squads, each consisting of a rodent operative, a sewer man, and a labourer, were employed in the 39 areas, and the complete treatment covered eleven months. The treatment was supervised jointly by the Borough Engineer's and Public Health Departments.

During the first treatment 2,018 manholes were baited. Prebait consisting of sausage rusk was used on three days, followed by an application of rusk and zinc phosphide on the fourth day. The second treatment in each area followed at an interval of three weeks, when the same procedure was carried out; bread mash was used as bait base and arsenic oxide poison. In the first treatment 23 complete, 254 good, and 1,306 small poison takes were recorded. During the second treatment 1,934 manholes were baited, and 5 good and 227 small poison takes were recorded. The sewer maintenance treatment is a modified form of sewer treatment which follows after an interval of six months; two rodent operatives are now engaged on this part of the scheme.

Surface treatment of premises has been continued and the method of block control put into operation; two rodent operatives are engaged on these duties, when 365 premises were treated and 1,810 visits made. The total estimated kill of rats was: Sewer treatment, 5,000; Surface treatment, 5,343.

SECTION D.

HOUSING

During the year further progress was made in connexion with the new housing estates: 'at the Cadewell Estate 97 prefabricated houses were completed, and at Lummaton the site was prepared for 143 prefabricated houses, which were being erected.

Two permanent housing estates have been commenced at Watcombe; 122 houses are to be erected, of which 70 are in course of building and the remainder were about to be started. At Coombe Pafford 280 houses are to be built, of which 102 are in course of erection: and although no permanent houses were actually completed by the end of the year, 32 on the Coombe Pafford Estate were in an advanced stage of construction.

187 licences were issued to private builders, under which 105 dwellings had been completed and 17 were under construction; 6 war-destroyed dwellings were rebuilt by the Council, and 17 by private builders, with three completed.

To assist in finding accommodation for some of the inadequately housed families, 10 more houses were requisitioned during the year and 32 families (77 adults and 60 children) were accommodated.

It has become increasingly difficult throughout the year to remedy the many and varied defects which have resulted from the inability of owners during the war years to keep their properties in a good state of repair. The lack of manpower has been followed by an even greater shortage of building materials, and even essential repairs have had to be reduced to the barest minimum. Nevertheless, it has been possible to have 118 houses, which were found on inspection to be not in all respects reasonably fit for human habitation, rendered fit, 97 of these as a result of informal action.

In five cases persons were found to be living in premises which were entirely unsuitable for human habitation. These comprised a basement room at 51 Woodville Road, a shed at the rear of Princes Street, another shed at the rear of 99 St. Marychurch Road, an extension at the rear of 94 Belgrave Road, and a tenement at the rear of 45 St. Edmunds Road. All these premises were closed by arrangement with the owners, and the tenants are being accommodated by the Council's Housing Committee.

It is impossible to give a true picture of overcrowding in the Borough. Eight new cases have been recorded during the year, but many families needing houses have accepted temporary accommodation in rooms which are totally inadequate. The erection of the prefabricated houses during the year has been a useful contribution towards alleviating these unsatisfactory conditions, and the position will be further improved with the completion of the Council's Housing Schemes.

SECTION E.

INSPECTION AND SUPERVISION OF FOOD

(a) Milk Supply.

(iv) Bacteriological Examination of Milk.

Samples of milk have continued to be sent to the County-Bacteriologist each week. A total of 176 samples were submitted for examination, and the results are shown in the following tables:

Ordi	inary	Accree	dited	Tuber Test		Pasteu	rised	To	tal
Passed	Failed	Passed	Failed	Passed	Failed	Passed	Failed	Passed	Failed
52	65	10	2	15	4	27	1	104	72

All these samples are taken either at the farm at the time of production or in course of delivery to the retailer. The standard adopted by the County Bacteriologist for ordinary milk is the same as that applied to accredited milk, and it is therefore not surprising to find a high percentage of failures. Again, most of the milk consumed in the Borough is produced in adjoining districts. The percentage of failures in samples taken from producers of non-designated milk inside the Borough was 43.4 per cent against 63.3 per cent outside the Borough.

(v) Heat-treated Milk.

No additional licences have been granted during the year, but regular samples have been obtained from the one authorised Pasteurising establishment in the Borough, as required by Defence Regulation 55g (Restriction of Sale of Raw Milk). A total of 25 samples was submitted to the County Bacteriologist, with the following results:

	Passed	Failed
Phosphatase test	24	1
Methylene Blue reduction test	25	-

(vi) National Milk-Testing and Advisory Scheme.

In this connexion the sanitary inspectors have co-operated by taking samples from all producers bringing milk into the Borough for submission to the National Milk-Testing and Advisory Scheme's Laboratory. This scheme is particularly useful in improving conditions under which milk is produced outside the district, for when a sample is found to be unsatisfactory a visit is made to the farm by a Dairy Instructress, who gives advice on improving the keeping quality of the milk. The test applied to samples submitted under this scheme is the Resazurin Reduction Test, and the results are classified as follows: "A"—Satisfactory; "B"—Doubtful; "C"—Poor.

It is gratifying to note the steady improvement which has been maintained since the scheme was inaugurated, the year under review showing 21 per cent category "C" against 36 per cent in 1943.

- (b) Meat and Other Foods.
- (i) Inspection of Meat.

The following table gives the details of the inspections:

CARCASES INSPECTED AND CONDEMNED.

	Cattle, exclud- ing Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed (if known)	1518	981	1147	13278	177
Number inspected	1518	981	1147	13278	177
ALL DISEASES EXCEPT TUBERCULOSIS Whole carcases condemned	5	4	2	64	1
Carcases of which some part or organ was condemned	465	310	7	2254	28
Percentage of the number inspected affected with disease other than tuberculosis	30.9	31.6	0.8	17.4	16.3
TUBERCULOSIS ONLY Whole carcases condemned	9.	13	1	_	1
Carcases of which some part or organ was condemned	68	104	4	-	10
Percentage of the number inspected affected with tuber-culosis	5.0	11.9	0.4	_	6.2

(ii) Inspection of Other Foods.

Other Food condemned included :-

Other	rood c			No. of Articles.	Weight in lbs.
Canned	Vegetab	les	 	 774	11981
,,	Fruit .		 	 242	5301
,,	Soup .		 	 93	100
,,	Meat .		 	 812	29221
,,	Fish .		 	 556	4554
,,	Milk .		 	 990	745
.,	Conserv	es	 	 138	$202\frac{1}{2}$

				Weight
There's residents				in lbs.
Fish	 		 	4309
Bread	 		 	5651
Sugar	 		 	363
Sausages	 		 	64
Tea	 		 	1321
Bacon	 		 	251
Brawn	 		 	162
Suet	 		 The same of	281
Cheese	 		 	891
Butter	 		 	1061
Margarine	 		 	25
Condiments	 		 	261
Rabbits	 		 	122
Confectionery	 -		 	311
Pastries	 		 	230
Poultry	 		 	296
Cereals (includ			 	7051
Dried Egg	 		 	141
Chestnuts	 		 	20
Dried Fruit	 	^	 	2363
Fruit:				
Oranges	 		 57701	
Lemons			 180	
Grape Fruit			 190	
Peaches			 512	
Grapes	 		 2033	
Melons			56	
Bananas	 		34	
Apples			517	
Pears	 		 172	
Plums			536	
				81711
Vegetables:				
Various	 		 1503	
Peas	 		 160	
Potatoes	 		 14672	
				16335
				43299

(Total weight condemned: 19 tons 6 cwt. 67 lb. In addition 65 gallons of milk were condemned.)

(c) Adulteration, etc.-Food and Drugs Act, 1938.

The work under this Act has been continued; your Senior Sanitary Inspector acting as Sampling Officer, and the following is the record of samples taken:

		Forn	nal	Inform	al
		No. of	Not	No. of	Not
		Samples	Genuine	Samples G	lenuine
Milk	 	28	1	6	-
Margarine	 	- 10	-	5	-
Lard	 	- 19	-	4	3
Butter	 	_	-	5	-
Meat Pie	 	_	-	1	
Fish Cakes	 	-		1	
Baking Powder	 	-	-	2	-
Bun Flour	 	_	_	1	
Vinegar	 	1	1	3	-
Semolina	 	-	_	1	
Essence of Rennet	 	-		1	-
Apple Juice	 	_	-	1	-
Cooking Fat	 	-	-	1	-
Raising Powder	 	_	- 10	1	-
"Phospherine"	 		-	1	-
Peppermint	 	1	-	1	-
Lemon Squash	 	1	1	-	-
Bicarbonate of Soda	 	-		1	
Mustard	 			1	
Ground Ginger	 			1	
Sugar Lime Juice	 			1	1
	 			0	1
	 			9	
Lemonade Crystals	 			1	
0.1.1.09	 			1	
Lemon Flavouring	 			1	
Cocoa	 			i	
Saccharin				i	
Egg Savouries	 ::		1 1 1 1 1	i	
Orange Squash	 	2	1	2	2
Sausages	 		_	1	
Duringer					

The formal samples not genuine were as follows:

A sample of milk taken from a churn when delivered to the retailer contained I per cent added water and was 22 per cent deficient in fat: the appeal to the cow showed that there was some deficiency in fat at the source of the milk, and a warning letter was sent to the producer.

A sample of vinegar was 17 per cent deficient in acetic acid; and a letter of warning was sent to the vendor.

A sample of lemon squash was 28 per cent deficient in crystalline citric acid, 9 per cent deficient in sugar, and 17 per cent deficient in saccharin. A sample of orange squash from the same manufacturer was 33 per cent deficient in crystalline citric acid. These cases were referred to the Regional Officer of the Ministry of Food for legal action.

(d) Ice-cream.

Circular 183/46 was received in October referring to draft regulations for the sanitary control of ice-cream. The effect of the regulations, in short, is that the mixture of which ice-cream is composed must be pasteurised before freezing; it may be heated either to 150° F. for 30 minutes or to 160° F. for 10 minutes. Further regulations govern the subsequent cooling process, which must be quickly carried out immediately after the heating, and the maintenance of a sufficiently low temperature thereafter. These requirements do not apply to a complete cold mix powder, supplied in airtight containers and manufactured from previously heat-treated material: this may be made up with "wholesome drinking water", and colouring or flavouring materials, fruit, nuts, or chocolate may be added without subsequent pasteurisation.

The Circular also called attention to the powers which Local Authorities have in connexion with the Food and Drugs Act, and it is stated that "no test has yet been devised of the safety of ice-cream, and there is no known test which would be sufficiently reliable for use as a statutory test of its contamination with non-pathogenic organisms." A good idea of the hygienic quality can, however, be obtained by performing a total bacterial count, a coliform count and the identification of the coliforms as of excremental type or otherwise. And in this connexion it is of interest to record that the Bacteriologist in charge of the County Public Health Laboratory at Exeter has been carrying out research work for the Medical Research Council on the bacterial findings of a number of samples submitted from Torquay.

It will be remembered that early in 1945, when it became permissible again to manufacture and sell ice-cream, the Corporation approved a printed statement to give to those persons applying for registration of premises. The relevant provisions of Section 13 of the Food and Drugs Act, 1938, were set out, together with recommendations about premises, equipment, vessels and appliances.

But in all this the chief factor is the human element: and the price of safety is unwearying constant vigilance in maintaining the most scrupulous cleanliness and care.

(e) Food and Disease.

The risks arising from the handling of food have been accentuated by the war-time emergency and the various communal organisations; for the introduction of a carrier or of an unrecognised case of disease would seriously affect a much greater number of consumers.

Strict personal cleanliness among staff and a high standard of hygienic conditions in the premises must be maintained; and knowing the frailty of human memory and the ease with which good intentions unconsciously tend to lapse, it is most essential to reiterate these obvious but often sadly neglected facts.

During the year notices on cards prepared before the war by the Public Health Department were distributed, as also were the cards of the Central Council for Health Education. Each card impressed on those engaged in handling food that their first duty was to wash their hands: and it is hoped that these cards are now displayed in such a way as to catch the attention of even the most absent-minded or apathetic worker.

SECTION F.

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES

1. Notifiable Diseases (other than Tuberculosis).

The incidence of infectious disease for the year is given in the subjoined table, which also includes the number of cases admitted to hospital and the number of deaths.

Disease			Total cases notified	Cases admitted to Hospital	Total Deaths
Smallpox	30,110		ophisis o		ante tra
Scarlet Fever			63	45	d/
Diphtheria			3	3	
Measles			21	2	-
Whooping Cough			46	1	_
Enteric Fevers			1	1	_
Puerperal Pyrexia			6	4	_
Pneumonia			24	10	_
Cerebro-Spinal Fever			1	1	-
Erysipelas			11	4	_
Ophthalmia Neonatorun	a		_	-	-
Acute Poliomyelitis			2	2	_
Acute Polioencephalitis			-	-	-
Encephalitis Lethargica				_	
Dysentery				_	_
Malaria (contracted abro			2	2	-
Typhus Fever (contract	ed abr	road)	_	_	-

The case of typhoid fever was in a child of 3 years of age and was related to another case, that of his mother, who had typhoid fever in July, 1945; an earlier case occurred in November, 1941, in another relative staying temporarily in the house which was the home of the grandmother. Full investigations on the previous occasions gave negative results for all the contacts; but on this occasion positive Vi-agglutinations were obtained in the mother (possibly due to the previous attack, for the titre fell subsequently), and in the grandmother, who was ultimately proved to be a carrier, by isolation of the organism (not without difficulty, as the particular type was unusually troublesome to grow and isolate) and by obtaining the same phage types in the related cases.

The usual full precautions were taken and the carrier dealt with along the lines recommended in the annual report of the Chief Medical Officer of the Ministry of Health for 1932; and a full report of the clinical and epidemiological features was submitted to the Senior Regional Medical Officer of the Ministry of Health.

Immunisation.

Diphtheria immunisation continues to make satisfactory progress. Each Health Visitor is responsible for a district and for ensuring that each child under school age is immunised as soon as possible after the age of one year: and the birthday cards of the Central Council of Health Education are sent out for the first birthday of every child. The Health Visitors keep records on their cards whether or not the child has been immunised, and repeated visits are made to stimulate the laggards and those who procrastinate, and to parents who object.

Individual appointments are sent to each parent notifying them to bring the child, and full record cards, similar to the suggested Card "A" in Circular 193/45, are completed. The necessary statistical returns are made in accordance with the requirements of the Ministry of Health.

The following table shows the position at the end of the year:

IMMUNISATION IN RELATION TO CHILD POPULATION.

Number of Ch						ull Course of mber, 1946.		ion
Age at 31.12.46, i.e. Born in Year	1	- Constant	2 1944	3 1943	4 1942	5–9 1937–1941	10–14 1932–1936	Total under 15
Number Immunised		388	445	419	367	2234	1938	5791
Estimated mid- Year Popu- lation, 1946 (R.G. Esti- mate)	3090 5490							8580

DIPHTHERIA NOTIFICATIONS AND DEATHS IN RELATION TO IMMUNISATION.

N	OTIFICATIONS.	DEATHS.				
Age at Date of Notification. Number of Cases Notified.		Number of Cases included in preceding Column in which the Child had Completed a Full Course of Immunisa- tion.	Age at Date of Death.	Number of Deaths.	Number of Cases included in preceding Column in which the Child had Completed a Full Course of Immunisa- tion.	
Under 1			Under 1	- T	mi-L	
1	_	_	1	-	_	
2	1		2	-		
3		ye - data	3	-	net - st.	
4	_		4	_		
5–9	2	-	5-9	-		
10–14		-	10-14	-		
Totals	3		Totals	_	-	

Scabies.

The arrangements for treatment previously outlined have continued, and have proved adequate.

2. Isolation Hospital Treatment.

The number of cases admitted to the Isolation Hospital is shown in the following table:

Cases admitted	l.		
Scarlet Fever			49
Diphtheria			4
Enteric Fevers			1
Cerebro-Spinal Fever			-
Measles		****	3
Whooping Cough			1
Erysipelas			5
Chicken-pox			2
Rubella			2
Mumps			-
Encephalitis lethargica	B.		
Acute poliomyelitis			-
For observation			12
Other Causes			4

83

3. Tuberculosis.

Particulars of any action under the Public Health (Prevention of Tuberculosis) Regulations, 1925 (relating to persons suffering from Pulmonary Tuberculosis employed in the Milk Trade), or under Section 172 of the Public Health Act, 1936 (relating to the compulsory removal to Hospital of persons suffering from Tuberculosis).

No action was required.

4. Tuberculosis.

New cases and mortality during 1946.

Particulars of new cases of Tuberculosis and of deaths from the disease in the area during 1946 are given in the following table:

Age Periods	New Cases				DEATHS				
	Respiratory		Non- Respiratory		Respiratory		Non- Respiratory		
	Male	Female	Male	Female	Male	Female	Male	Female	
Under 1 year	-	-	_	_	-	-	_	-	
1 to 5 years	-	-	-	-	-	-	-	-	
5 to 15 years	-	-	2	-	3	-	-	-	
15 to 25 years	7	7		1	3	3	-	1	
25 to 35 years	3	8	-	1	3	1	-	-	
35 to 45 years	4	4	-	-	1	-	-	-	
45 to 55 years	4	_	-	-	1	-	-	-	
55 to 65 years	4	. 2	1	-	4	4	-	-	
65 and over	1	2	-	-	2	3	-	-	
TOTALS	23	23	3	2	17	11	-	1	

SECTION G.

PORT HEALTH ADMINISTRATION

This section is published separately.

MISCELLANEOUS

SECTION H.

1. Government Evacuation Scheme.

During the year the further remaining steps were taken in the gradual winding-up of this scheme in which your Medical Officer is Chief Billeting Officer, and your Senior Sanitary Inspector and District Sanitary Inspectors Billeting Officers. The Hostel for unaccompanied children at St. Agnes was closed at the end of March, the few children left being transferred to other hostels in the county: this hostel had been in operation for six years and had accommodated many hundreds of children while waiting for billets, or changing billets, or being temporarily unsuitable for billeting.

Under Circular 225/45 the welfare of unaccompanied children was transferred to the Devon County Council after 31st March; and in Torquay there were only 12 unaccompanied children left, of whom 3 remained in private billets. The issuing of billeting orders and the maintenance of the receipt system is still the duty of your Authority. The number of persons billeted on Form "B" (adults and accompanied children) gradually declined and the last billeting order under this section expired in September.

In connexion with Circular 5/46 it was stated that all houses requisitioned may in future be used as a general pool of accommodation for the inadequately housed; and as there is now no distinction between evacuees and other persons, the requisitioned houses held under the Evacuation Scheme and administered by your Medical Officer were transferred in May to the Housing Authority and administered by your Housing Manager.

In connexion with all equipment held under this scheme or for other Civil Defence purposes, the procedure laid down in Circular 208-45 was followed, and the items were disposed of satisfactorily.

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