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**Yeovil Rural District Council**

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**ANNUAL REPORT**

OF THE

**MEDICAL OFFICER OF HEALTH**

FOR THE YEAR ENDED

**31st DECEMBER, 1966**




YEOVIL RURAL DISTRICT COUNCIL

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH

FOR THE YEAR ENDING 31ST DECEMBER, 1966

PUBLIC HEALTH OFFICERS

Medical Officer of Health	P. Power Fox, M.B., Ch.B., D.P.H.
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TO THE  
CHAIRMAN AND COUNCILLORS  
OF THE  
YEovil RURAL DISTRICT COUNCIL

--- ooOoo ---

Ladies and Gentlemen,

I have the honour to present my Annual Report for the year 1966.

VITAL STATISTICS

Births

The total number of live births during the year was 500, as compared with 516 for the previous year. The Standardised Birth Rate was 16.4, as compared with 16.2 for the previous year. The Rate for England and Wales was 17.7.

Deaths

The number of deaths of infants under the age of one year was 6, as compared with 4 for the previous year. The Infant Mortality Rate (i.e. deaths under one year, per 1,000 live births) was 12.0 as compared with 7.7 for the previous year. The rate for England and Wales was 18.9. The Perinatal Mortality Rate was 11.8, as compared with 17.1 for the previous year. The rate for England and Wales was 26.3. The Standardised Death Rate of the general population was 10.8, as compared with 8.5 the previous year. The Death Rate for England and Wales was 11.7. Of the total number of deaths of all ages, namely, 289, 148 occurred in people aged 75 years and over.

Infectious Diseases

The number of infectious diseases notified was 388, as compared with 291 for the previous year. The increase was mainly accounted for by the increase in the number of cases of Measles notified, 371 in 1966, as compared with 265 in 1965.

Immunization

The following table shows the immunization state of children born in 1965 and who were immunized against various infectious diseases in either 1965 or 1966.

No. of children born in 1965 = 516	No. immunized in 1965      1966		Total	Percentage Immunized
Immunized against Diph- theria	191	191	385	74.6%
Immunized against Whooping Cough	191	191	382	74%
Immunized against Polio-myelitis	281	284	568	101%
Immunized against Tetanus	191	191	385	74.6%

## Smallpox

The number of vaccinations of children under 2 years of age was 268, some of these children born in 1965 and some in 1966. The average birth rate for the two years was 508, and based on this figure the percentage of children vaccinated under the age of 2 years during the year 1966 was 52.7%. The total number of vaccinations of children 0 - 15 years carried out in 1966 was 361, and based on a birth rate of 508, the percentage of children vaccinated by the age of 15 years is 92%.

## INDEPENDENT SCHOOLS

In previous Annual Reports I have made mention of the wide scope of the School Medical Service provided by the County Council. The objects of Assumption B of the Beveridge Report are

- "(a) to provide a system of medical service directed towards the achievement of positive health, of prevention of disease and the relief of sickness;
- (b) to render available to every individual all necessary medical services, both general and specialist, and both domiciliary and institutional."

and the aims of the School Medical Service are very similar to the above objects, with the exception that the School Medical Service is restricted to pupils attending maintained schools and is not available to pupils attending independent schools. There are, in the Yeovil Divisional Education Area (Yeovil Borough and Yeovil Rural District), five private or independent schools, with an approximate school population of 780. These schools have Medical Officers, but their relationship to the pupils is similar to that with regard to children attending maintained schools. No provision is made for routine school medical inspections, and in particular, no routine vision testing, colour vision or hearing testing. The absence of these facilities is disquietening and in the Annual Report "The Health of the School Child, 1964 and 1965, the Chief Medical Officer made the following observations

### (A) "Vision Testing of Children in Independent Schools"

A number of local education authorities have extended their school health service arrangement to some of the independent schools in their areas under Section 78 (2) of the Education Act, 1944. Unless such arrangement is in force it is possible for a child to spend all his school life without having a single test of vision; discovery of a visual defect will then be dependent upon suspicion of the child himself, his parents or teachers that his vision is defective. This method of finding by chance is unsatisfactory. (page 20 and 21) Health of the School Child, 1964 and 1965.

### (B) "Defective Colour Vision"

Various large-scale surveys, made from time to time by different workers using a variety of tests, have shown that the percentage of persons with defective colour vision in the male population is 8.0 per cent, and in females only 0.4 per cent.

In many trades and professions it is essential that those employed should possess the ability to discriminate between colours accurately, otherwise the colour defective person may be at a



serious disadvantage. In some industries materials may be wasted and much time lost, whilst in certain occupations this defect might endanger the safety and even lives of others. Unless the colour vision defect has been discovered, a boy might spend months training for work for which he is later found unsuitable.

The multiplicity of colours used to differentiate the various wires used in cables is well known, and the difficulties that these must cause for a worker with defective vision are an obvious example. This was confirmed by a letter sent in 1965 to the Department of Education and Science by the National Federated Electrical Association, which stated:- 'This association provides the employers' panel on the National Joint Industrial Council for the Electrical Contracting Industry and has the responsibility for introducing proposals to improve the efficiency of the industry and the safety of the electrical operatives. A number of instances have occurred recently which has emphasized the need for young persons entering the industry, with a view to apprenticeship training, to be free from colour deficiency of the eyes, since they will be making electrical connections, when they are older, with cables which have the principal colour codes of red, black, green, with the increasing use of yellow, blues and many others with electronic wiring systems. You will appreciate the danger a colour deficient person can be to himself, his colleagues and whoever uses the electrical system he installs if the electrical wires are wrongly connected because the colours have been incorrectly identified.' The letter concluded by urging examination for colour deficiency before a child left school.

"In some occupations it may be possible for a boy to carry out the work allotted to him satisfactorily but, because of a colour vision defect, he might be debarred from promotion as this would call for a degree of colour vision discrimination of which he is incapable. If this possibility were known to him at the time of choosing his occupation, an ambitious boy might choose differently." (pages 21 and 22, Health of the School Child, 1964 and 1965).

With regard to routine hearing testing, at a Symposium arranged by the Welsh Faculty of the Royal College of General Practitioners in Cardiff 6.5.67, Professor A. L. Cochrane, Director of the Medical Research Council's Epidemiological Research Unit, who was not convinced of the value of certain much publicised screening procedures, supported tests for the detection of phenylketonuria and defects in hearing.

In the Annual Report, Health of School Children, there is listed the number of defects in school children found at routine medical inspections. The incidence for 5 year olds was 10.65%, 11 year olds, 17.18% and 14 year olds, 18.56%. In Somerset for the year 1965, the incidence of defects per 1,000 children examined was 265, defects relating to skin, otitis media, heart, lung and hernia, totalled 121, vision 125 and squint 19. There is no evidence to suggest that the incidence of defects amongst the children (approximately 780) attending independent schools in the Yeovil Borough and Yeovil Rural District is any less than that of children attending the maintained schools.

Permission is given to Local Education Authorities in Section 78 para 2.(b) of the Education Act, 1944 to make arrangements for securing the medical inspection and the provision of medical treatment of pupils in attendance at independent schools, subject to the consent of the proprietors. I wrote to Dr. Perry Jones, Principal School Medical Officer, that vision testing, colour vision testing and hearing testing should be provided for children attending independent schools. At a conference of School Medical



Officers, 17.7.67, this matter was discussed, and the appropriate minute reads:-

"Dr. Parry Jones was not anxious to embark on such an extension of work because there were already certain statutory obligations (Nurseries and Child Minders Regulations Act, 1948; B.C.G. vaccination of College of Education Students, etc.) which were not being fulfilled. It was also pointed out that in the previous year the Committee had turned down similar demands for vision testing for independent schools in the Chard area."

It is obvious that so long as the County medical service have insufficient medical personnel, there must be defects in the services provided, but I consider that pupils attending independent schools should receive the same standard of school medical service as children attending maintained schools, with special reference to vision testing, including colour vision testing and hearing testing.

#### FLUORIDATION

In my Annual Report for the year 1963, I made a comprehensive report on this subject. I made mention in my report that 23 Local Authorities out of the total of 36, which comprise the County, i.e. 63.8%, had voted in favour of Fluoridation, and that the Somerset County Council had received a report dealing with Fluoridation from their own Committee, which also advised in favour of Fluoridation. Despite the foregoing, the Somerset County Council voted against Fluoridation, the voting being 39 against, 34 in favour, and 9 abstentions.

In this Annual Report for the year 1965, Dr. D. C. Lycett, County Medical Officer of Health, Wiltshire, wrote as follows:-

"At the end of the year 93 authorities, covering almost half the population of England and Wales, had resolved in favour of fluoridation of water. At the time of writing (August, 1966), authorities covering over two-thirds of the population have agreed. It is most unfortunate that Wiltshire should be among the authorities who have rejected it. On the average three year old children drinking unfluoridated water have three times as much dental decay, and five year olds have twice as much, as those in areas where the supply is fluoridated, apart from the lasting benefit of fluoridation to older persons. It is difficult to believe that this state of affairs can give much satisfaction to anyone."

Apropos of the same subject, Dr. W. McCormack, Medical Officer of Health for the London Borough of Harrow, reporting on Fluoridation, stated:-

"The question of fluoridation of water supplies was considered by the Health Committee in the light of Ministry of Health Circular 15/65. The Committee met representatives of the Harrow Committee against Fluoridation to hear their views on the matter, considered my full report and then resolved to recommend to the Council that arrangements be made for the addition of fluoride to the Borough's water supplies. This recommendation was fully debated and finally adopted by the Council. There, because it is impracticable for the Water Company to provide fluoridated water in only part of its area, the matter rests, until such time as there is unanimity among the various local health authorities within the Water Undertakers statutory area of supply. When one considers the amount of time and money that must have been expended over the whole country in arguing and publicising the 'pros and cons' of fluoridation and then considers the monumental mass of scientific and medical evidence proving the efficacy of fluoride as a caries inhibitor, one wonders whether this should not have been decided centrally rather than left for local decision."

Again, in the 1963 Annual Report, I wrote:-

- (1) There is ample evidence to show the need for improved preventive treatment of the teeth.
- (2) That fluoridation is the best practicable means available at present.
- (3) That the improvement achieved in children extends into middle age.
- (4) There are no medical contraindications to fluoridation.
- (5) That the opposition to fluoridation is mainly due to ignorance, apathy and groundless prejudice.
- (6) Relevant to the above an appeal against the decision of Mr. Justice McGregor, that the Lower Hutt population (New Zealand) were entitled in law to add fluoride to water, was considered by the Judicial Committee of the Privy Council, who upheld the decision of Mr. Justice McGregor. Lord Upjohn, member of the Judicial Committee, quoted from the judgement of Mr. Justice McGregor, when he said:- 'I was satisfied on the evidence that (1) there is a high incidence of dental caries in New Zealand generally; (2) there was almost a complete absence or at least a high deficiency in the fluoride content of the natural artesian well water supply of Lower Hutt; (3) that the absorption of fluoride has a substantial effect in reducing the incidence of dental caries, especially in young children; (4) there are no deleterious effects on the human body from the absorption of fluoride, more emphatically in the minute proportion of one part per million; (5) any surplus fluoride taken into the body is excreted without harmful results; and (6) tablets or other vehicles for the taking of fluoride are unsatisfactory in that the required regularity with children would not be achieved, and natural water is the only really satisfactory vehicle.'

The County Council in May, 1963, circularized all Local Authorities to obtain their views on Fluoridation. Their refusal to implement the decision of the Local Authorities who voted strongly in favour of Fluoridation, i.e. 23 authorities in favour, 13 against, would appear to be a negation of democratic government. A fluorine content of 1 part per million in water is essential if Somerset children are to have a minimum incidence of dental disease. According to the County Analyst, the majority of water supplies in the County contain less than 0.1 part per million. This deficiency can be rectified by Fluoridation and only by Fluoridation.

I again have pleasure in recording my appreciation of the help and co-operation received from the Council, from the Public Health Committee and from members of the staff.

I have the honour to be,  
Yours obedient servant,

P. POWER FOX

Medical Officer of Health.



## YEOVIL RURAL DISTRICT

### STATISTICS OF THE AREA FOR THE YEAR 1966

Area (in acres)	...	...	...	...	53,457
Rateable Value	...	...	...	...	£757,508
Estimated Produce of 1d. rate in year ending 31.3.67.	...	...	...	...	£3,006. 12. 9.
No. of inhabited houses (31.3.67)	...	...	...	...	8,682
Population	...	...	...	...	28,900

### PHYSICAL FEATURES AND SOCIAL CONDITIONS

The Yeovil Rural District, comprising an area of 53,457 acres, is situated in the South-East area of the County of Somerset and is composed of 31 rural parishes.

The area in general is not very much above sea level: the greatest point of elevation being Ham Hill, 426 feet above sea level.

### WATER SUPPLY

The water supply during the year has been satisfactory, the impounding reservoir at Sutton Bingham having been completed in early December, 1955. The capacity of the reservoir is 575 million gallons, with an estimated net yield of 2.4 million gallons per day. Detailed information regarding bacteriological and chemical analyses are included in the Senior Public Health Inspector's Report.

### METEOROLOGY

The climate is mild and relaxing. There is little fog or mist.

### RAINFALL

The rainfall for the year 1966, as recorded at the Sutton Bingham Reservoir was 37.65 (35.88 in 1965).

### OCCUPATION

The main industry of the district is agriculture, which is chiefly of a dairying and grazing nature. In addition, the manufacture of gloves is an important industry, glove factories being located at Martock, Stoke-sub-Hamdon and Tintinhull, in addition to the glove making which is carried out in the homes. A considerable proportion of people resident in the Yeovil Rural District are employed in the Yeovil Borough.

### HOSPITAL SERVICES

The Hospital Services are mainly situated in the Yeovil Borough. The South Petherton Hospital, which deals with infectious diseases is situated in the Rural District. The Hospital Services are administered by the South Somerset Hospitals Management under the general direction of the South Western Regional Hospital Board.

Situated in the Yeovil Borough are

- (1) Yeovil & District Hospital - an acute general hospital.
- (2) Summerlands Hospital - mainly used as a geriatric hospital.
- (3) Yeovil Maternity Hospital (Crossways) - 14 beds.
- (4) Balidon Maternity Hospital - a General Practitioner Unit - 17 beds.



The Yeovil General Hospital consists of 92 beds, of which 6 are private. The number of patients discharged throughout the year was 2,941 (2985 in 1965). In addition, 6,723 new patients attended the Specialist and Out-patient Clinics, making a total number of attendances of 28,988.

In addition, there were 1,787 attendances at the Orthoptic Department, and 33,713 units of work were carried out in the Radiological Department.

#### INFECTIOUS DISEASES

Cases of infectious diseases requiring hospital treatment, are treated at South Petherton Hospital (50 beds). In general, only the Cubicle Block is required (10 beds), and the other 40 beds are utilized for post-operative cases, so relieving the strain on Yeovil Hospital and for General Practitioner patients and semi-chronic sick.

#### TUBERCULOSIS

A chest clinic is held on Mondays and Wednesdays at Yeovil Hospital. Patients requiring in-patient treatment are admitted to the Cheddon Road Hospital, Taunton.

#### CHRONIC SICK

Summerlands Hospital (100 beds), which is situated in the Borough is the largest hospital in the area used for this purpose. This hospital was originally a Poor Law Institute built in 1837, and the layout etc., does not conform with the accepted standards of today. Considerable improvements have already been carried out, and further improvements are being planned.

#### LABORATORY SERVICE

A Laboratory is located at Yeovil Hospital, which deals with a large proportion of the pathological work connected with the hospital and the surrounding area. An emergency service is maintained, which deals primarily with the Yeovil Hospital blood bank. The larger Laboratory at Musgrove Park Hospital undertakes work beyond the scope of Yeovil Hospital. Also a Public Health Laboratory Service has a Laboratory in Taunton, at which bacteriological examination of swab, blood, sputum and faeces is carried out. Bacteriological and chemical analyses for the examination of milk, food, water supplies and sewage effluent are also carried out.

#### AMBULANCE FACILITIES

The Ambulance Service is the responsibility of the Somerset County Council. The new ambulance station, which was opened in April, 1963, has ample garage accommodation for the ambulances, with under floor heating, a heated blanket store adjacent to the vehicles, a well equipped workshop for maintenance and repairs of a minor nature, a sluice for bottles and bed pans and also a dressing destructor.

The large airy control overlooks the station yard, and from here a constant supply of messages to and from the ambulances on the road is kept up, by the use of short wave radio.

## HOUSING

I am indebted to the Housing Manager for the following information;

	<u>Private</u>	<u>Council</u>
Houses, etc. completed during the year ended 31.12.66. ...	137	36
Houses, etc., erected post-war ...	2,004	1,087
Houses, etc., sold post-war ...	-	24
Houses, etc. erected by the Local Authority and still owned by them	-	2,007
No. of applicants on the waiting list as at 31.12.66	-	550

## VITAL STATISTICS OF THE YEAR

The statistics furnished by the Registrar General show the number of births and deaths after correction has been made for transfers to the normal place of residence of the individuals concerned. From these figures can be calculated the "crude" birth and death rates. As however, the highest mortality occurs at the two extremes of life, and industrial areas in general have a bigger proportion of people living in the middle age periods of life, some correction must be made for the irregularities of distribution as regards age and sex, as otherwise the death rate will afford no accurate means of comparing the healthiness of one district with another. This comparability factor is furnished by the Registrar General, and applied to the "crude" birth or death rate, gives a standardised rate and enables comparison to be made with the rate for England and Wales or with rates of other districts.

Live Births ... ..	500
Live Birth Rate ... ..	17.3.
Stillbirths ... ..	3
Stillbirth Rate per 1,000 (live and still) births ...	5.9
Total Births ... ..	503
Infant Deaths ... ..	6
Infant Mortality Rate per 1,000 live births ...	12.0
Infant Mortality Rate per 1,000 legitimate births ...	12.5
Infant Mortality Rate per 1,000 illegitimate births ...	47
Neo-natal Mortality Rate (First four weeks) per 1,000 related live births	8.0
Early Neo-natal Mortality Rate (First week) per 1,000 related live births	6.0
Peri-natal Mortality Rate (stillbirths + deaths during the first week) per 1,000 total live and still births	11.9
Percentage of illegitimate live births ... ..	4.03
Maternal Deaths (excluding abortion) ... ..	Nil.
Maternal Mortality (including abortion) ... .. (per 1,000 total births)	Nil.

## BIRTHS

				<u>1966</u>	<u>1965</u>
		<u>Male</u>	<u>Female</u>	<u>Total</u>	<u>Total</u>
(a)	<u>Live Births</u>				
	Legitimate ...	263	216	479	489
	Illegitimate ...	10	11	21	27
		<u>273</u>	<u>227</u>	<u>500</u>	<u>516</u>
Crude Birth Rate per 1,000 estimated population				= 17.3	18.1
Standardised Birth Rate per 1,000 estimated pop.				= 16.4	16.2
Birth Rate for England and Wales				= 17.7	18.0

## (b) Stillbirths

	Legitimate ...	2	1	3	7
	Illegitimate ...	-	-	-	1
Stillbirth Rate per 1,000 live and still births				= 5.9	15.1
Stillbirth Rate for England and Wales				= 15.3	15.7

## DEATHS

				<u>1966</u>	<u>1965</u>
		<u>Male</u>	<u>Female</u>	<u>Total</u>	<u>Total</u>
Total Deaths...		145	144	289	249
Crude Death Rate per 1,000 pop.				10.0	8.7
Standardised Death Rate per 1,000 pop.				10.8	9.5
Death Rate for England and Wales				11.7	11.5

## MATERNAL MORTALITY

There were no maternal deaths during the year 1966.

## BIRTH RATES

The Table below shows the birth rate for the previous ten years.

1956	1957	1958	1959	1960	1961	1962	1963	1964	1965	1966
14.8	17.06	16.4	18.6	17.09	17.9	17.8	17.3	17.6	18.1	16.4



## DEATHS

There was an increase in the number of deaths, 289 in 1966, as compared with 249 for the previous year. The Standardised Death Rate was 10.8, as compared with 9.5 for the previous year. The Death Rate for England and Wales was 11.7.

The following Table shows the age and sex incidence, and it will be noted that amongst the males, of the 145 deaths, 40 occurred amongst those 65 years and over, and 58 amongst those 75 years and over. Of the females, out of the total of 144 deaths, 28 were 65 years and over, and 90 were 75 years and over.

## AGES AT DEATH

Ages at death in years			Males	Females	Total
Under 1 year	...	...	3	3	6
1	...	...	-	1	1
5	...	...	-	-	-
15	...	...	4	-	4
25	...	...	2	1	3
35	...	...	5	1	6
45	...	...	10	2	12
55	...	...	23	18	
65	...	...	40	28	68
75 & over	...	...	58	90	148
Total	...	...	145	144	289

			1966	1965
Deaths from Cancer (all ages)	..	...	57	46
Deaths from Heart Disease (all ages)	....	...	102	97
Deaths from Phthisis (all ages)	...	...	Nil.	Nil.

The Crude Death Rate for the past ten years is as follows:-

1956	1957	1958	1959	1960	1961	1962	1963	1964	1965	1966
9.5	9.3	9.5	10.1	9.5	9.1	8.1	9.6	9.7	8.7	10.0

The following table shows the causes of death and the sex distribution.

Causes of death	Males	Females
Measles	-	1
Other infective and parasitic diseases	2	-
Malignant Neoplasm, Stomach	4	4
Malignant Neoplasm, Lung, Bronchus	10	2
Malignant Neoplasm, Breast	-	8
Malignant Neoplasm, Uterus	-	5
Other malignant and lymphatic neoplasms	8	16
Leukaemia, Aleukaemia	1	-
Diabetes	1	2
Vascular lesions of the nervous system	14	23
Coronary Disease, Angina	39	16
Hypertension with heart disease	2	1
Other heart disease	17	27
Other circulatory disease	6	14
Influenza	-	1
Pneumonia	10	10
Bronchitis	6	3
Other diseases of respiratory system	1	1
Ulcer of Stomach and Duodenum	1	-
Gastritis and Enteritis, Diarrhoea	3	-
Nephritis and nephrosis	4	-
Hyperplasia of prostate	1	-
Congenital Malformations	2	-
Other defined and ill-defined diseases	8	10
Motor Vehicle Accidents	3	-
All other accidents	2	-
Total	145	144

#### CANCER

The number of deaths due to Cancer (all forms) was 57. The Table as set out below shows the incidence of Cancer for previous years.

1956	1957	1958	1959	1960	1961	1962	1963	1964	1965	1966
40	39	46	62	52	45	42	40	43	46	57

#### CANCER DEATH RATE PER 1,000 POPULATION

	1956	1957	1958	1959	1960	1961	1962	1963	1964	1965	1966
Yeovil Rural District	1.6	1.6	1.8	2.4	2.02	1.7	1.5	1.4	1.5	1.6	1.9
County of Somerset	1.89	2.09	2.08	2.12	2.157	2.22	2.17	2.17	2.31	2.2	2.23
England & Wales	2.1	2.1	2.12	2.13	2.15	2.16	2.17	2.1	2.21	2.2	3.3

## INFANTILE MORTALITY

The number of children dying within the first twelve months of life was 6, as compared with 4 for the previous year. The rate per 1,000 live births was 12.0, as compared with England and Wales, 18.9. The following Table shows the number of deaths, and the Infantile Mortality Rate as compared with previous years.

	1956	1957	1958	1959	1960	1961	1962	1963	1964	1965	1966
No. of deaths	9	5	9	12	10	5	5	11	7	4	6
Rate per 1,000 live births in Rural Dis.	25.2	12.7	23.6	25.6	22.7	10.7	10.5	23.6	13.8	7.7	12.0
Rate per 1,000 live births in England & Wales	23.8	23.1	22.5	22.6	21.9	21.4	20.7	22.3	20.0	19.0	18.9

## CAUSES OF DEATH AND AGE

	Under 4 weeks	4 weeks and under 1 year
Congenital Malformations	1	-
Measles ... ..	-	1
Pneumonia ... ..	-	1
Other defined and ill-defined diseases	3	-
R Total ...	4	6

## INFECTIOUS DISEASES

The following Table sets out the details of infectious diseases during the year, and also the figures for the previous year.

	Cases Notified	
	1966	1965
Anthrax ... ..	-	1
Food Poisoning ... ..	-	1
Measles ... ..	371	265
Puerperal Pyrexia ... ..	-	1
Scarlet Fever ... ..	5	11
Tuberculosis Pulm. ... ..	-	2
Typhoid ... ..	-	1
Whooping Cough ... ..	11	9
Erysipelas ... ..	1	-
Total ... ..	388	291



## IMMUNIZATION

### Diphtheria and Whooping Cough

The following Table shows the number of children who completed a full course of primary immunization during the year 1966.

Children born in the years:-							
	1966	1965	1964	1963	1959 - 62	Under 16 years	Total
Diphtheria	198	191	20	3	8	1	421
Whooping Cough	198	191	20	3	2	1	415

In addition, 785 children in the same age groups received re-inforcement or booster doses against Diphtheria.

### Smallpox

Age Groups:-							
0 - 3 mths.	4 - 6 mths.	7 - 9 mths.	10 - 12 mths.	1 year	2 - 4 yrs.	5 - 15 yrs.	Total
P.	P.	P.	P.	P. R.	P. R.	P. R.	P. R.
11	18	18	12	209 -	63 4	30 187	361 191

### Polio-myelitis

No. of persons who received a course of primary vaccination during the year 1966.

Children born 1966	Children born 1965	Children born 1964	Children born 1963	Children born 1959-62	Others under 16	Total
134	284	41	16	16	3	494

### Re-inforcement Doses

Children born 1966	Children born 1965	Children born 1964	Children born 1963	Children born 1959 - 62	Others under 16	Total
-	-	-	-	261	25	286

### Tetanus

No. of children who received a full course of primary immunization during the year 1966.

Children born in the years:-						
1966	1965	1964	1963	1959 - 62	Others under age 16.	Total
198	191	20	3	10	132	554

### Re-inforcement Doses

Children born in the years:-						
1966	1965	1964	1963	1959 - 62	Others under age 16.	Total
-	60	153	24	313	109	659

### TUBERCULOSIS

The number of cases of Pulmonary Tuberculosis notified during the year was nil. Non-pulmonary nil. There were no deaths recorded as due to pulmonary or Non-pulmonary Tuberculosis.

	1966	1965	1964	1963	1962	1961	1960	1959	1958	1957
No. of cases notified Pulmonary	-	2	4	5	6	4	7	7	12	5
No. of cases notified Non-Pulmonary	-	-	-	1	3	2	1	2	4	2
No. of deaths Pulmonary	-	-	-	1	1	-	1	2	-	1
No. of deaths Non-Pulmonary	-	-	-	-	-	1	-	-	-	-
Death Rate of Respiratory Tuberculosis per 1,000 population	-	-	-	.03	.03	-	.03	.08	-	.04

# MATERNITY AND CHILD WELFARE

## INFANT WELFARE CLINICS

The establishment and maintenance of the Infant Welfare Clinics are a direct responsibility of the Somerset County Council, and during recent years the number of such clinics in the Yeovil Rural District has been increased to 7. At each clinic, other than the Houndstone Camp Clinic, a doctor engaged by the Somerset County Council attends regularly, also a District Nurse. Facilities are available for the purpose of Infant Welfare Foods, including National Dried Milk, Orange Juice, etc., and certain proprietary dried milk preparations, which are sold at the clinics at special prices. Apart from other considerations, the clinics have an important educational value. Associated with each clinic is a voluntary Committee, the value of whose services it would be difficult to over emphasize.

The following Table sets out the attendances, etc. at the various clinics.

	HARTOCK	STOKE- SUB- HANDON	SOUTH PETER- TON	WEST COKER	HOUND- STONE	WRAX- HILL ROAD	ILCHESTER	TOTAL
No. of children who attended for the 1st time under 1 yr. of age	41	29	46	28	24	30	78	266
No. of children who attended during the yr.	132	78	162	79	33	54	196	734
Total attendances of children during yr.	607	615	672	388	134	154	916	3,486
Average attendance of children per session	50	25	28	32	11	14	42	202
Total No. of consultations with Medical Officer	137	61	139	107	-	22	109	575
No. of sessions with Medical Officer	12	12	24	12	-	11	22	93
Total No. of sessions	12	24	24	12	12	11	22	117

## BIRTHS

Live Births	...	Legitimate	479	Illegitimate	21	Total	500
Stillbirths	...	"	3	"	-	"	3
Infant Deaths	...	"	5	"	1	"	6



#### BLOOD EXAMINATION CLINIC

This Clinic was commenced in 1947, and it is held at the Preston Road Clinic, Yeovil. Since its inception, 710,278 individual pregnant women have been examined, 877 examinations being carried out in 1966. The area from which patients are drawn, is, as would be expected, mainly the Yeovil Borough and Yeovil Rural District. Patients are referred by the private practitioner or midwife, without previous appointment. A card, showing the patient's blood group and whether she is Rh. Positive or Rh. Negative, is forwarded to her direct, together with a letter emphasizing the importance of her retaining the card in case she ever requires a blood transfusion for any purpose. A report giving further information, including percentage of haemoglobin, and W.R. test, is forwarded to the Midwife or Matron of the maternity unit, depending on where the patient is having her confinement. Previously, similar information was forwarded to Yeovil Hospital, in case the patient was admitted there for any reason and required a blood transfusion, but a copy is now forwarded direct by the Laboratory doing the tests.

A record of all blood tests is kept at the Public Health Department. In the case of second or subsequent pregnancies of Rhesus Negative women, as the test is normally carried out early in pregnancy, a further test is carried out six to eight weeks before the expected date of confinement, in order to exclude antibodies. If antibodies are found to be present, and if in sufficient quantities to threaten the welfare of the baby when born, arrangements are made for the baby to be born either at Bristol or Taunton, so that the blood transfusion of the baby can be carried out if necessary.

#### HOME HELP SERVICE

This service continues to render excellent assistance and the following Table shows the scope of its activities.

<u>No. of cases who received help in 1966</u>					<u>Yeovil Rural District</u>	
<u>Type of Case</u>					<u>1966</u>	<u>1965</u>
Maternity	...	...	...	...	24	22
Old Age and Infirmary	...	...	...	...	118	85
Chronic Illness	...	...	...	...	6	2
General Illness	...	...	...	...	2	4
Mental Health	...	...	...	...	-	1
Families of children	...	...	...	...	1	1
Post-operation	...	...	...	...	1	7
Tuberculosis	...	...	...	...	1	1
Accidents	...	...	...	...	-	2
					153	125

#### NATIONAL ASSISTANCE ACT

No action was taken under Section 47 of the above Act.

## ANNUAL REPORT OF THE PUBLIC HEALTH INSPECTOR

To the Chairman and Members of the Yeovil Rural District Council

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present the annual report of the work of the Public Health Inspector's Department for 1966.

### STAFF

During the year the staff of the Department comprised three Public Health Inspectors additional to myself.

### MEAT INSPECTION

There were three slaughterhouses in operation during the year. The total number of animals killed was 52,682 compared with 37,174 in 1965.

	<u>1966</u>	<u>1965</u>
Cattle (excluding cows)	2,062	3,296
Cows	18,704	18,390
Calves	1,790	2,149
Sheep and Lambs	26,951	10,411
Pigs	3,175	2,928
Total	<u>52,682</u>	<u>37,174</u>

Despite curtailment of Export Trade due to Foot and Mouth Disease Restrictions and to the Shipping Strike, Annual throughput at Martock continued to rise.

The pattern of disease remains fairly constant with an increase this year of Echinococcosis. The increased incidence of this condition coincides with the opening of the new Severn bridge and with the purchase of cattle from markets North of the bridge.

As was stated last year, there is a liason between the Ministry of Agriculture, Fisheries and Food and this Department. The liason will now be strengthened by the setting up of laboratory facilities at Taunton. Samples of doubtful carcasses will be collected by the Ministry and reasonable guidance as to fitness given within 24 hours.

Of equal importance to the constant inspection for disease is the need for maintenance and improvement of hygienic standards. New slaughterhouse Hygiene Regulations require that wiping cloths be no longer used and experiments to find the most suitable method of spray cleaning carcasses have been carried out. A satisfactory method for beef has been selected using high pressure hand sprays with water temperature maintained at approximately 80° - 90°F. For sheep and calves, hoses fitted with nylon brushes and gravity fed thermostatically controlled water may prove to be satisfactory.

This Slaughterhouse is one of a few involved in European trade and it is interesting to note that food production standards are set by the requirements of the importing countries. Food badly prepared will not travel and nowhere is this more noticeable than in fresh meat. Trade with E.E.C. and E.F.T.A. countries has required that English meat shall comply with the standards for interstate trading and this encourages better practices from which the internal trade will also benefit.

Annalysis of 1965 - 66 figures on throughput related to inspection units per hour, showed that, due to introduction of piece work, the rate of inspection had increased from 75 units per hour to 120 units per hour. Whilst the total number of hours worked was slightly less, throughput had continued to rise. This condensation of more work into a shorter period of time, emphasised the need for two inspectors to be on duty for most of the slaughtering period.

Work is proceeding on the additional lairage, new boning and cutting room and on the additional refrigerating space, and it is hoped that these will be ready for use in 1967.



Details of the specific diseases and conditions found in the animals were as follows:-

	<u>Pigs</u>	<u>Sheep</u>	<u>Adult Cattle</u>	<u>Calves</u>
Abcesses (Multiple)	1		6	
Abnormal Odour associated with disease	1	1	2	3
Anaemia (Advanced)	2	1	2	1
Bruising (Extensive and Severe)	1	10	12	3
Dead on Arrival	5			
Emaciation, Pathological	3	32	2	
Fevered	2	5	8	8
Gangrene		3	10	
Immaturity		4		10
Insufficient bleeding	1	3	1	5
Jaundice		1		
Lymphadenoma		2		
Lymphosarcoma	1		2	
Mastitis (acute septic)				
Metritis (acute septic)			3	
Moribund	4	4	2	2
Oedema (generalised)		133	72	10
Pericarditis (acute septic)	3			
Peritonitis (acute diffuse septic)	1	12	3	2
Pleurisy (acute diffuse septic)	2	3		
Pyæmia	15	6	16	10
Pyelonephritis			18	
Polyarthrititis	5	4		
Septicaemia	10	8	20	3
Swine Dysipelas Acute	2			
Toxaemia		2	6	
Tuberculosis	44	-	13	-
Tumours		2	17	1
Uraemia			2	1

Carcases and Offal inspected and condemned in whole or in part during the year:-

	<u>Cattle</u> <u>Exclud-</u> <u>ing</u> <u>Cows</u>	<u>Cows</u>	<u>Calves</u>	<u>Sheep</u> <u>and</u> <u>Lambs</u>	<u>Pigs</u>
Number killed	2,062	18,704	1,790	26,951	3,175
Number inspected	2,062	18,704	1,790	26,951	3,175
<u>All diseases except</u> <u>Tuberculosis and</u> <u>Cysticerci</u> Whole carcasses condemned	11	223	80	266	81
Carcases of which some part or organ was condemned	646	10,982	6	1413	1,223
Percentage of the number inspected affected with disease other than tuber- culosis and cysticerci	25%	60%	5%	60.25%	41%
<u>Tuberculosis only</u> Whole carcasses condemned	-	1	-	-	-
Carcases of which some part or an organ was condemned	1	12	-	-	44
Percentage of the number inspected affected with tuberculosis	Less than 1%	Less than 1%	-	-	1.5%
<u>Cysticercosis</u> Carcases of which some part or organ was condemned	9	56	-	-	-
Carcases submitted to treatment by refrigeration	2	-	-	-	-
Generalised and totally condemned	1	-	-	-	-
Weight of meat condemned (in lbs.) for					
(a) Tuberculosis	316	322	-	-	456
(b) Cysticercosis	Total 880 lbs.		-	-	-
(c) Other	Total 332,463				
Total (in lbs.) condemned	Total 334,463 (149 tons 6 cwt 5 lbs.)				

## HOUSING - Inspection of houses:

In this district the 'comparatively' few 'slum' houses were all dealt with during the 1950's. Progress during recent years has of necessity therefore been less spectacular. Nevertheless, there has been steady progress, with the result that a stage is being reached whereby the really 'unfit' houses have disappeared and it is principally 'borderline' cases which are now being revealed. This situation is being accentuated by the fact that the standard of fitness, as defined by the Housing Act 1957, has become outdated - at least in areas where the 'slum' problem has been less acute - but, because a great deal of work still has to be done in the larger towns, it is considered unlikely that the present 'standard' of unfitness will be amended appreciably in the near future. It will therefore, more than ever, be necessary for the department to endeavour to persuade owners to renovate their houses to a standard above the legal minimum and also of course at the same time to impress on owners the benefit of improving the amenities at the same time.

### (A) REPAIR - HOUSING AND PUBLIC HEALTH ACTS

Number of houses rendered fit after service of notices:

	Section 9, 10 and 16 Housing Act 1957		Public Health and similar Local Acts.		Totals	
	Informal	Formal	Informal	Formal	Informal	Formal
(a) By owner	-	-	3	2	3	2
(b) By local authority	-	-	-	-	-	-
Totals	-	-	3	2	3	2

### (B) BEYOND REPAIR - HOUSING ACT 1957

#### (a) INDIVIDUAL HOUSES

Number of 1. undertakings accepted (section 16)	<u>2</u>
2. closing orders made (section 17)	<u>9</u>
3. demolition orders made (section 17)	<u>-</u>
4. closing orders made (section 18)	<u>-</u>
5. " " determined (section 27)	<u>4</u>
6. closing orders revoked and demolition orders substituted (section 28)	<u>-</u>
7. houses demolished following demolition orders	<u>-</u>
8. numbers of people displaced (a) individuals	<u>22</u>
(b) families	<u>9</u>

#### Improvement Grants

The following figures indicate that there was a decline in Discretionary Grant applications during the year, but that Standard Grant applications were constant.

Only one application was received from a tenant asking that the owner be requested to provide the Standard amenities. It would appear that the majority of tenants are either unaware or reluctant to use the power given to them by the Housing Act 1964.



### Discretionary grants

(Note: 1965 figures are quoted in brackets)

(i)	No. of applications received ... ..	15	(37)
	No. of applications approved a) owner occupied houses ..	7	(15)
	b) tenanted houses ... ..	8	(21)
	Total amount of grant approved . ... ..	£5,622	(£14,038)
	An average grant per house was approximately .. ...	£375	(£390)
(ii)	Amount paid in grants during the year ... ..	£10,964	
	Average grant paid per house ... ..	£391	

### Standard grants

(i)	No. of applications received ... ..	18	(18)
	No. of applications approved a) owner occupied houses ..	10	(15)
	b) tenanted houses ... ..	8	(3)
	No. of applications where the Council agreed to give additional grants for the formation of a) bathrooms ...	7	(6)
	b) septic tanks ..	6	(5)
(ii)	Grant paid on completion of improvements:		
	No. of dwellings concerned ... ..	12	(19)
	Total amount of grant paid ... ..	£1899	(£2,694)
	Average per house ... ..	£158	(£142) approx.
	Amenities provided with Standard grant assistance:		
	Fixed bath or shower ... ..	10	(17)
	Wash-hand basin ... ..	10	(18)
	Hot water supply to one or more fittings ... ..	11	(19)
	W.C. within the dwelling . ... ..	12	(16)
	Food store ... ..	10	(16)

## OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963

All the premises registered under this Act have been inspected at least once during the first two complete years of the operation of the Act, with the exception of public houses which are to be the subject of a survey under other legislation.

Contraventions have been of a minor nature and there were no accidents reported during the year.

The following table gives a summary of inspections and registrations during the year.

	Offices	Shops	Catering Establishments	Fuel Depots	Warehouses	Totals
Number of Premises Registered in 1966	2	6	1	1	2	12
Total No. of Registered Premises at the end of 1966	21	52	14	2	3	92
General Inspections of Registered Premises during 1966	8	22	14	1	2	47
Visits of all kinds to Registered Premises in 1966	13	68	18	2	1	103

## FOOD HYGIENE

### Inspection of Premises

The general standard of premises throughout the District was found to be satisfactory.

It has been noticeable that with a change of occupier, particularly in grocery shops, there has usually been considerable improvement in the premises. In these cases and where major shop alterations are carried out or new shops built the tendency has been towards mini-supermarketing.

Hygienic 'fall-out' from this tendency has been the confinement of money handling to one member of the staff, better stock rotation and more readily cleansable premises.

### Food Complaints

Eight complaints were received during the year regarding food purchased in the District.

After careful, thorough and impartial investigations into each case, legal action was taken in one instance.

This prosecution arose from a complaint of a cigarette end in the crust of a loaf of bread. It was possible to prove in this case that the cigarette end had been stubbed out in the baking tin before the dough had been put in.

Other complaints concerned cooked meat products (3), confectionery (3) and bread (1).

The increase in complaints (4 in 1965) would seem to be large, particularly when it is probable that for every case which comes to our notice, two are not reported. To put the figures in perspective however, it is necessary to consider that for every millionth loaf of bread, sausage roll and bottle of milk produced, one complaint is received.

#### Sampling

##### Ice Cream

Routine samples from a local source of manufacture submitted to the Public Health Laboratory gave satisfactory results throughout the year.

##### Other Food

During an outbreak of fungoid in soft fruit in the District, random and informal samples of soft fruit were taken for assessment of fungicide contamination.

The results led one to believe that a sufficient time interval between spraying and harvesting the crop had not been allowed.

#### PETROLEUM ACT

89 premises were licensed for the storage of petroleum. A total of 87 visits were made to licensed premises during the year.

#### DISEASES OF ANIMALS ACTS - SWILL BOILING PLANTS

There were 8 licensed plants in the district and all were inspected during the year.

#### RODENT CONTROL

##### Prevention of Damage by Pests Act 1949

	<u>TYPE OF PROPERTY</u>	
	<u>NON- AGRICULTURAL</u>	<u>AGRICULTURAL</u>
1. a Total number of properties (including nearby premises) inspected following notification	481	4
b Number infested by (i) Rats	253	3
(ii) Mice	44	
2. a Total number of properties inspected for rats and/or mice for reasons other than notification	88	
b Number infested by (i) Rats	64	
(ii) Mice	-	



Test baiting of sewers was carried out once during the year, but no infestations were revealed.

Although all complaints were dealt with promptly, very little survey work was possible as the one man employed on rodent control spent approximately 60% of his time on other duties principally refuse collection.

#### CARAVAN SITES AND CONTROL OF DEVELOPMENT ACT, 1960

1. Total number of visits made to all sites

93

2. Number of site licences operating as at 31st December, 1966:

(a) Individual

(b) Multiple (more than 3)

3. Total number of caravans

4. Number of contraventions - section 9 (i.e. breaches of licence conditions)

5. Number: (a) remedied informally

(b) prosecutions

(c) convictions

PRIVATELY OWNED SITES	
RESIDENTIAL	HOLIDAY
47	2
33	-
14	2
195	15
2	-
2	-
-	-
-	-

#### REFUSE COLLECTION AND DISPOSAL

The two new Karrier "Ramillies" 50 cu. yd. continuous Compression rear loading vehicles which were introduced into the vehicle fleet in December 1965 gave trouble free service throughout the year. Their use enabled the daily tasks to be accomplished in less time than formerly and ensured the success of the extension of the weekly collection service to all the domestic properties in the District. On average approximately 135 tons of refuse was collected weekly from domestic properties in the district.

A more powerful crawler tractor was purchased during the year for use at the disposal tip and this resulted in improvement in the practice of controlled tipping and a better appearance of the site generally.

During mid summer a discharge of percolate from the tip into a spring fed watercourse occurred and complaint was received of pollution. The volume of discharge varied with weather conditions. It was not considered necessary to construct treatment plant of a permanent nature. However, temporary lagoons and ponding of a tributary of the main stream was carried out in order to settle out suspended solids. Several samples of stream water were submitted to the laboratory for chemical analysis and these indicated that the drinking quality of the water was acceptable as far as cattle were concerned. This matter has since been kept under frequent observation.

## GENERAL INSPECTIONS

The total number of inspections carried out during the year was:-

Animal Boarding Establishments .....	5
Clean Air Act.....	2
Dangerous Buildings.....	1
Drainage.....	91
Disinfestations and disinfections.....	15
Diseases of Animals Act.....	12
Factories.....	7
Food Premises	
Bakers and Bakeries.....	14
Butchers.....	21
Cafes, Hotels and Restaurants.....	55
Canteens and Mobile Canteens.....	5
Fish and chip shops.....	4
Greenfrocers.....	-
Grocers.....	71
Licensed Premises and Off Licences.....	3
Sweet confectionery.....	11
Wet fish shops.....	-
Ice Cream.....	36
Housing General.....	231
Housing Grants.....	423
Inspection of food.....	35
Litter Act.....	21
Meat Inspection.....	750
Means of Escape in case of fire.....	4
Caravans.....	93
Noise Abatement Act.....	6
Nuisances.....	232
Offices and Shops Act.....	103
Refuse Collection and Disposal.....	162
Rent Act.....	2
Rodent Control.....	24
Scrap Metal Yards.....	5
Slaughterhouses.....	11
Water Supplies (Private).....	49
Petroleum Acts.....	87
Miscellaneous.....	14

### LITTER

There were a number of complaints of dumping of garden refuse in lanes and one of household refuse. In two cases it was possible to trace the persons concerned. One was prosecuted and fined. The other returned to the site, removed the deposit and took it to the Councils disposal tip. There were three cases of old cars dumped on lay-bys. These were removed by a privately owned car breaking firm.

### NUISANCES

232 Inspections were made during the year in connection with the investigation of complaints of nuisance. In one case it was found necessary to take Statutory action. The majority of the complaints arose from the disposal of waste arising from intensive systems of pig keeping.

### GYPSIES

The presence of these families in a lane near Ham Hill again gave rise to serious complaint. A number of them were new to the district and they proved to be particularly objectionable. They were finally removed after two successful prosecutions by the police. Measures were taken to make sites in this lane impracticable for camping. To date these measures have been very effective. Officials of adjoining Local Authorities were consulted with a view to the provision of a Local Authority owned site for these people, but little enthusiasm was expressed for the idea.

I wish to express my thanks to the Members of the Council and to all the Additional Public Health Inspectors for their continued support during the year.

I have the honour to be

Your obedient servant,

*B. Morris.*

B. MORRIS

Senior Public Health Inspector.



# SECTION 'C'

## SANITARY CIRCUMSTANCES OF THE AREA

### 1) WATER SUPPLIES

The whole of the area with the exception of 121 houses with well or spring supplies, is served by the Wessex Water Board mains supply.

#### Sample results

Taken by Wessex Water Board from main's supplies		Taken by Public Health Department			
		from Wessex Water Board mains		from Private Supplies	
Satis- factory	Unsatis- factory	Satis- factory	Unsatis- factory	Satis- factory	Unsatis- factory
35	2	8	Nil	11	17

### 2) SANITARY INSPECTIONS OF THE AREA

Inspections for nuisance	....	232
Informal Notices served and complied with	....	43
Drainage tests and inspections	....	91
Houses disinfected	....	Nil
Inspections of water supplies (private)	....	49
Slaughterhouse Inspections	....	11
Offices, Shops and Railway Premises Act	....	103

Clean Air Act - Smoke emission from industrial chimneys is not generally a problem in this District. However, the emission of oil fumes from two chimneys gave rise to complaint.

SECTION 'D'

HOUSING AND HOUSING INSPECTIONS

1) NEW HOUSES

Houses erected during the year.

Local Authority - for Slum Clearance	Nil
for other purposes	39

Houses in course of erection.

for Slum Clearance	Nil
for other purposes	65

2) PRIVATE ENTERPRISE

Houses erected during the year 137

Houses in course of erection 110

Houses gained from conversion of large houses or buildings into flats or dwellings 6

Houses lost from conversion of two or more houses to one 3

3) HOUSING INSPECTIONS

1) (a) Total number of dwelling houses inspected for housing defects (under P.H. or Housing Acts) 180

(b) Number of inspections made for this purpose 654

2) (a) Number of dwelling houses (included under sub-head 1 above) which were inspected and recorded under H.Con.Reg., 1925 and 1932. 43

(b) Number of inspections made for this purpose 186

(c) Number of houses in which no action necessary Nil

3) Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human occupation. 9

4) Number of dwelling houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects fit for human habitation. 40

4) HOUSING ACTION

(a) Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their officers 40

(b) Number of houses demolished voluntarily or in consequence of informal action Nil

5) ACTION UNDER STATUTORY POWERS DURING THE YEAR

(Proceedings under Sections 9, 16, 17, 18 and 26 of the Housing Act, 1957)

- |  |     |
|--|-----|
| 1) Number of dwelling houses in respect of which notices were served requiring repairs | Nil |
| 2) Number of houses which were rendered fit after service of formal notice:-           |     |
| (a) by owners  | Nil |
| (b) by Local Authority in default of owners  | Nil |

6) PROCEEDINGS UNDER THE PUBLIC HEALTH ACTS

- |  |     |
|--|-----|
| 1) Number of dwelling houses in respect of which formal notices were served requiring defects to be remedied | 2   |
| 2) Number of dwelling houses in which defects were remedied after service of formal notice:-                 |     |
| (a) by owners  | 2   |
| (b) by Local Authority   | Nil |

7) PROCEEDINGS UNDER SECTIONS 9, 17 and 42 OF THE HOUSING ACT, 1957

- |  |     |
|--|-----|
| 1) Number of dwelling houses in respect of which Demolition Orders were made | Nil |
| 2) Number of dwelling house demolished in pursuance of Demolition Orders     | Nil |
| 3) Number of dwelling houses in respect of which Closing Orders were made    | 9   |

8) PROCEEDINGS UNDER SECTION 18 OF THE HOUSING ACT, 1957

- |   |     |
|---|-----|
| 1) Number of separate tenements or underground rooms in respect of which Closing Orders were made   | Nil |
| 2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenements or rooms having been made fit (Section 27) | 4   |

9) HOUSING ACT, 1957 - OVERCROWDING

- |   |     |
|---|-----|
| (a) 1) Number of dwellings overcrowded at the end of the year (estimated) | 52  |
| ii) Number of families dwelling therein (estimated)                       | 76  |
| iii) Number of people dwelling therein (estimated)                        | 228 |
| (b) Number of new cases of overcrowding reported during the year          | 6   |



(c) i) Number of cases of overcrowding relieved during the year	6
ii) Number of persons concerned in such cases	21
(d) Particulars of any cases in which dwelling houses have again become overcrowded after the Local Authority have taken steps for the abatement of overcrowding	Nil

### SECTION 'E'

#### INSPECTION AND SUPERVISION OF FOOD

##### FOOD PREMISES

The following shows the number of food premises etc. by type of business:-

Cafes etc.	15
General Stores	66
Bakers	6
Butchers	13
Licensed Premises	52

##### PREMISES REGISTERED UNDER SECTION 16 OF THE FOOD AND DRUGS ACT, 1955

Ice Cream	112
Preserved Foods	18
Number of Registered Dairies	Nil
Number of Private Slaughterhouses licensed	4
Number Operating	3

##### BYELAWS (UNDER SECTION 15 OF THE FOOD AND DRUGS ACT, 1938)

It was not found necessary to take any action.

##### ADULTERATION

The Council is not a Local Authority under the Food and Drugs Act.

(1) The first part of the report is devoted to a general survey of the situation in the country. It is a very interesting and useful survey, and it is well worth reading. It is a very interesting and useful survey, and it is well worth reading.

(2) The second part of the report is devoted to a detailed survey of the situation in the country. It is a very interesting and useful survey, and it is well worth reading. It is a very interesting and useful survey, and it is well worth reading.

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(4) The fourth part of the report is devoted to a detailed survey of the situation in the country. It is a very interesting and useful survey, and it is well worth reading. It is a very interesting and useful survey, and it is well worth reading.

(5) The fifth part of the report is devoted to a detailed survey of the situation in the country. It is a very interesting and useful survey, and it is well worth reading. It is a very interesting and useful survey, and it is well worth reading.

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(7) The seventh part of the report is devoted to a detailed survey of the situation in the country. It is a very interesting and useful survey, and it is well worth reading. It is a very interesting and useful survey, and it is well worth reading.

(8) The eighth part of the report is devoted to a detailed survey of the situation in the country. It is a very interesting and useful survey, and it is well worth reading. It is a very interesting and useful survey, and it is well worth reading.

(9) The ninth part of the report is devoted to a detailed survey of the situation in the country. It is a very interesting and useful survey, and it is well worth reading. It is a very interesting and useful survey, and it is well worth reading.

(10) The tenth part of the report is devoted to a detailed survey of the situation in the country. It is a very interesting and useful survey, and it is well worth reading. It is a very interesting and useful survey, and it is well worth reading.





