[Report 1947] / Medical Officer of Health, Winchester R.D.C.

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Winchester Rural District Council

ANNUAL REPORT

ON THE

Health of the Rural District for the Year 1947

BY

JOHN L. FARMER, M.B., D.Obst., R.C.O.G., D.P.H.
Medical Officer of Health

AND

FRANK HURST, M.S.I.A., C.R.S.I.
Senior Sanitary Inspector

WINCHESTER
Printed by Herbert Curnow Ltd., St. Peter Street

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July, 1948.

TO THE CHAIRMAN AND MEMBERS OF THE HEALTH COMMITTEE.
WINCHESTER RURAL DISTRICT COUNCIL.

Mr. Chairman, Ladies and Gentlemen,

I beg to submit the Annual Report for the year 1947 on the health and sanitary circumstances of the Rural District of Winchester.

Outstanding events during the year were the increases in the incidence of infantile paralysis and of measles. The normal epidemic cycle of approximately two years of measles outbreaks has been to some extent altered by certain factors during the war period, possibly the widespread evacuation of children.

No case of diphtheria was notified; in 1939 the number notified was twenty-three. The absence of the disease in 1947, it can be claimed with certainty, has been achieved by the energetic work carried out in the last few years in the protection of children by immunisation. Efforts must not be relaxed; the endeavour is to immunise each year a number of children at least equal to the number born.

The National Health Service Act is destined to come into force on 5th July, 1948. In view of this the report has been expanded to include some information about the personal health services available in the District. The County Councils and the County Borough Councils will become the Local Health Authorities and will be responsible under the Act for making provision for Vaccination, Immunisation, Home Nursing, Health Visiting, Midwifery, Ambulance Services, Prevention of Illness, Care and After-care, Domestic Help, Health Centres and duties under the Lunacy, Mental Treatment and Mental Deficiency Acts. This Council will not be affected to any great extent, but it is possible that it will secure representation on various committees with benefit, through local knowledge, to the operation of a particular service.

An attempt has been made to make the Annual Report of more general interest; in its preparation, the staff of the Health Department has played no small part; to them, to Mr. Hurst, the Senior Sanitary Inspector, and to the District Sanitary Inspectors, Mr. Beyer and Mr. Smith, thanks are due to their unfailing consideration and co-operation throughout the year.

I am,

Your obedient Servant,

JOHN L. FARMER,

Medical Officer of Health.

GENERAL PROVISION OF HEALTH SERVICES IN THE DISTRICT

Public Health Officers

Senior Sanitary Inspector:
FRANK HURST, M.S.I.A., C.R.S.I.

District Sanitary Inspectors:
S. H. BEYER, M.S.I.A., C.S.I.B.
H. J. SMITH, M.S.I.A., C.S.I.B.

Clerical Staff:
C. B. ASHMAN.
MISS J. A. LEWIS.

Rodent Officer:
T. A. SAWKINS.

Rodent Operatives:
D. G. P. ALLEN.
MISS J. R. BARTLETT.
MISS B. START.

Medical Officer of Health:
JOHN L. FARMER, M.B., Ch.B., D.Obst., R.C.O.G., D.P.H.

Surveyor's Department

Surveyor:
A. J. R. WATTS, A.F.A.S.

District Surveyors:
P. J. MITCHELL, P.A.S.I., A.R.San.I., A.I.Mun.E., A.I.A.S., F.F.S. (Eng.), Chartered Surveyor.
L. R. NIPPIERD.

LABORATORY SERVICES

Until 1st May, 1947, laboratory examinations were carried out at the County Public Health Laboratory, The Castle, Winchester. As from the 1st May laboratory examinations relating to Bacteriology and Epidemiology have been carried out by the new Public Health Laboratory located at the Royal Hampshire County Hospital, Winchester (Telephone 3807). The Director of the Public Health Laboratory is Dr. R. D. Mackenzie. The County Laboratory has continued to deal with chemical analyses, e.g., of water, sewage, milk and other substances.

AMBULANCE FACILITIES

1. (a) **For Infectious Diseases.** The ambulances belonging to the City of Winchester and to the County Borough of Southampton are used when required.

(b) **For cases of ordinary sickness.** Such cases are served by two ambulances and operated jointly by Winchester City and this Rural District.

2. **Hedge End and District.** Towards the end of 1946, negotiations were completed for the acquisition of another vehicle as the original ambulance was proving unsatisfactory. This new vehicle began to operate in July, 1947.

CLINICS

These are under the direction of the County Medical Officer and are as follows :—

(a) Child Welfare Centres.

Centre.	Hall.	Days.
ALRESFORD	Methodist Church Hall	1st and 3rd Tuesdays
BOTLEY	The Catherine Wheel	1st Wednesday
BURSLEDON	Parish Hall	3rd Tuesday
CHERITON	Parish Hall	1st and 3rd Fridays
COLDEN COMMON	Parish Hall	4th Friday
CRAWLEY	Village Hall	2nd Friday
FAIR OAK	Women's Hall	2nd and 4th Thursdays
HAMBLE	Memorial Hall	2nd and 4th Mondays
HEDGE END	St. John's Rooms	2nd and 4th Tuesdays
ITCHEN ABBAS	Village Hall	2nd Thursday
KING'S WORTHY	Jubilee Hall	1st Friday
MICHELDEVER	Northbrook Hall	3rd Thursday
NETLEY	Jubilee Hall	1st and 3rd Wednesdays
SPARSHOLT	Sparsholt Manor	1st Monday
SUTTON SCOTNEY	Victoria Hall	3rd Tuesday
WEST END	Church Hall	2nd and 4th Wednesdays
WORTHY DOWN	Camp Hut	1st Monday

All Child Welfare Clinics are held from two to four p.m.

(b) Tuberculosis Clinics.

WINCHESTER	County Medical Dept., The Castle, Winchester	Thursdays at 10 a.m.
EASTLEIGH	Health Centre, Chamberlayne Rd., Eastleigh	Tuesdays at 10 a.m.

(c) **Ante-natal Clinics.**

ALRESFORD	Methodist Church Hall	1st, 3rd and 4th Mondays at 2 p.m.
EASTLEIGH	Health Centre, Chamberlayne Road	Mondays at 2 p.m.
HAMBLE	Memorial Hall	4th Thursday at 2 p.m.
WEST END	Church Hall	1st Tuesday at 2 p.m.

(d) **Venereal Diseases Clinics.**

WINCHESTER	Royal Hampshire County Hospital	Males—Saturdays at 10 a.m. Females—Tuesdays at 2.30 p.m.
SOUTHAMPTON	Cardigan Road (back of East Park Terrace)	Males—Mondays, Tuesdays, Wednesdays, Thursdays and Fridays at 5 p.m. Saturdays at 9 a.m. Females—Mondays, at 9 a.m., Thursdays at 3 p.m. Tuesdays and Fridays at 2 p.m.

School Health Services

(e) **Minor Ailments Clinics.**

Cases attend clinics at Eastleigh and Winchester as follows :—

EASTLEIGH	Health Centre, Chamberlayne Road	Fridays at 9.30 a.m.
WINCHESTER	4, The Square, Winchester	Daily—mornings

(f) **Verminous Cleansing Clinics.**

Cases attend clinics at Eastleigh, Fareham, Winchester and Andover as follows :—

EASTLEIGH	Health Centre, Chamberlayne Road	Fridays at 10 a.m.
WINCHESTER	4, The Square	Wednesdays at 10 a.m.
FAREHAM	Holy Trinity Church House, West Street	Fridays at 10 a.m.
ANDOVER	Old Cottage Hospital, Junction Road	Thursdays at 10 a.m.

(g) Orthopaedic Clinics.

Cases attend clinics at Eastleigh, Fareham and Winchester. Remedial Classes in schools, for minor postural defects, began in 1946 and the scheme is being extended.

(h) Ear, Nose and Throat Clinics.

Cases attend one of the following :—

Royal Hampshire County Hospital, Winchester.
Royal South Hants and Southampton Hospital, Southampton.
Southampton Children's Hospital, Southampton.

(i) Dental Clinics.

Clinics are held in various centres for treatment of local children.

(j) Child Guidance Clinics.

Cases attend the following centres :—

EASTLEIGH	Health Centre, Chamberlayne Road	Thursdays—mornings
WINCHESTER	Trafalgar House, Trafalgar Street	Tuesdays, Thursdays & Saturdays—mornings

(k) Ophthalmic Clinics.

Cases attend the following centres :—

EASTLEIGH	Health Centre, Chamberlayne Road	Wednesday mornings
WINCHESTER	Trafalgar House, Trafalgar Street	Wednesday afternoons

(l) Speech Therapy Clinics.

Cases attend clinics at Winchester and Southampton by arrangement with the County Medical Officer.

VACCINATION

This can be arranged privately or through the Public Vaccinator.

Public Vaccinators

New Alresford, Old Alresford, Bighton, Itchen Stoke, Ovington and Northington	Dr. C. E. Meryon
Beauworth, Bishops Sutton, Bramdean, Cheriton, Kilmeston and Tichborne	Dr. H. R. Leishman
Abbotts Barton, Chilcombe, Crawley, Headbourne Worthy, Itchen Valley, Kings Worthy, Littleton and Sparsholt	Dr. C. J. Penny
Micheldever and Wonston	Dr. G. M. Edelston
Compton, Fair Oak, Morestead, Owslebury, Hursley, Otterbourne, Twyford and Colden Common	Dr. G. Marsden Roberts
Botley, Hedge End and West End	Dr. A. S. Pern
Bursledon, Hamble and Hound	Dr. G. E. M. Turner

NURSING HOMES

The training and provision of District Nurses and Midwives is supervised by the Hampshire County Nursing Association, 81 North Walls, Winchester.

HOSPITALS

General. There is no hospital within the area, but hospitals at Southampton and Winchester are available.

Tuberculosis. Sanatorium treatment is provided by the County Council at Chandlersford and Bishopstoke.

Infectious Diseases. Cases of Infectious Disease from the Rural District are admitted to the Victoria Isolation Hospital, Winchester, with the exception of cases from the parishes of Hamble, Hound and West End which, by arrangement with the County Borough of Southampton, are admitted to the Southampton Isolation Hospital, Millbrook.

Smallpox. Accommodation is arranged by the County Council.

Maternity Hospitals. The County Council has made arrangements with hospitals for the reception of maternity cases from this district.

STATISTICS OF THE AREA

Area	110,436 acres
Rateable Value as at 31st December, 1947	£273,688
Sum represented by a penny rate	£1,111. 6s. 9d.
Population	37,500

VITAL STATISTICS

	1947			1946		
	M.	F.	Total	M.	F.	Total
Live Births (Legitimate) ...	386	314	700	333	331	664
Live Births (Illegitimate) ...	27	24	51	30	26	56
Total Live Births ...	413	338	751	363	357	720

Live Birth Rate per 1,000 of the estimated population was 20.02 compared with 20.5 for the whole of England and Wales.

	1947			1946		
	M.	F.	Total	M.	F.	Total
Still Births (Legitimate) ...	9	5	14	8	12	20
Still Births (Illegitimate) ...	1	1	2	1	1	2
Total Still Births ...	10	6	16	9	13	22

Still Birth Rate per 1,000 total births was 20.86 compared with 24.05 for the whole of England and Wales.

	Male	Female	Total
Deaths	217	204	421

Death Rate per 1,000 of the estimated population was 11.2 compared with 12.0 for the whole of England and Wales.

Deaths from Puerperal Causes:—

Puerperal Sepsis ..... nil

Other maternal causes ..... one

(This mother died in October, 1947, in the Borough Hospital, Southampton, from pulmonary embolism following an abnormal delivery.)

Deaths from Cancer (all ages)	67
Deaths from Measles (all ages)	0
Deaths from Whooping Cough (all ages)	1
Deaths from Diarrhoea (under two years of age)	1

The death rate of infants under one year of age was 29.3 per 1,000 live births compared with 41.0 for the whole of England and Wales.

CAUSES OF DEATH	Males	Females
1. Typhoid and Paratyphoid	—	—
2. Cerebro-Spinal Fever	—	—
3. Scarlet Fever	—	—
4. Whooping Cough	—	1
5. Diphtheria	—	—
6. Tuberculosis of Respiratory System ...	5	6
7. Other forms of Tuberculosis	2	—
8. Syphilitic Disease	—	—
9. Influenza	1	1
10. Measles	—	—
11. Acute Polio-myelitis and Polio-encephalitis (Infantile Paralysis) ...	1	—
12. Acute Infective Encephalitis (Sleepy Sickness) ...	—	—
13. Cancer of Buccal Cavity and Oesophagus (M)	2	—
Uterus (F)	—	4
14. Cancer of Stomach and Duodenum	7	3
15. Cancer of Breast	—	9
16. Cancer of other sites	22	20
17. Diabetes	2	1
18. Intracranial Vascular Lesions	16	31
19. Heart Disease	61	58
20. Other Diseases of the Circulatory System ...	7	5
21. Bronchitis	12	5
22. Pneumonia	9	7
23. Other Respiratory Diseases	2	1
24. Ulcer of Stomach or Duodenum	6	—
25. Diarrhoea under two years	1	—
26. Appendicitis	2	—
27. Other digestive Diseases	9	2
28. Nephritis	6	6
29. Puerperal and Post-abortive Sepsis ...	—	—
30. Other Maternal Causes	—	1
31. Premature Birth	2	3
32. Congenital Malformations, Birth Injury, Infantile Disease	5	6
33. Suicide	1	—
34. Road Traffic Accidents	3	4
35. Other Violent Causes	8	3
36. All other causes	25	27
All Causes Total ...	217	204

Deaths of Infants under one year of age (included in the above table) :—

	Male	Female	Total
Legitimate	11	11	22
Illegitimate	—	—	—

The deaths in the above table include residents who died outside the District and exclude non-residents who died within the District. Non-civilians are excluded.

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES

Incidence of Commoner Infectious Diseases since 1939

Year	Diph-theria	Scarl't Fever	Pneu-monia	Measles	Whooping Cough	Puerperal Pyrexia	Infantile Paralysis
1939	23	32	2	*	*	7	4
1940	5	51	5	403	116	4	4
1941	13	41	22	568	177	7	—
1942	4	57	16	149	37	7	1
1943	2	63	27	562	142	10	2
1944	2	55	15	61	49	4	—
1945	2	49	23	675	115	3	1
1946	2	38	25	75	72	1	—
1947	-	27	18	448	49	1	11

*No figures available for 1939.

The following table gives particulars of infectious diseases notified during the year, excluding tuberculosis, for which a separate table is given :—

Disease	Notified	Removed to Hospital
Scarlet Fever	27	13
Diphtheria	—	—
Pneumonia	18	—
Erysipelas	6	1
Puerperal Pyrexia	1	1
Typhoid and Para-typhoid	—	—
Infantile Paralysis (Acute Poliomyelitis and Polio-encephalitis) ...	11	10
Cerebro-spinal Fever	—	—
Measles	448	1
Whooping Cough	49	—
Ophthalmia Neonatorum	3	1

Only certain forms of Pneumonia are notifiable.

The cases of Scarlet Fever, Erysipelas and Infantile Paralysis were visited and advice given as to the necessary medical precautions and disinfection.

Tuberculosis

The following table refers to new cases, cases transferred to the District and mortality during the past three years :—

Year	New Cases					Transferred to District					Deaths				
	Pulmonary		Non-Pulmonary		Total	Pulmonary		Non-Pulmonary		Total	Pulmonary		Non-Pulmonary		Total
	M	F	M	F		M	F	M	F		M	F	M	F	
1945	10	9	—	4	23	6	3	—	—	9	4	5	3	—	12
1946	20	7	3	4	34	6	8	—	—	14	6	5	2	—	13
1947	17	9	1	3	30	10	6	—	1	17	5	6	2	—	13

All cases which are diagnosed as suffering from Tuberculosis are notified to me.

Scarlet Fever

Twenty-seven cases were notified compared with thirty-eight the previous year. There were no deaths. The incidence of the disease was 0.72 per thousand population compared with 1.37 throughout England and Wales.

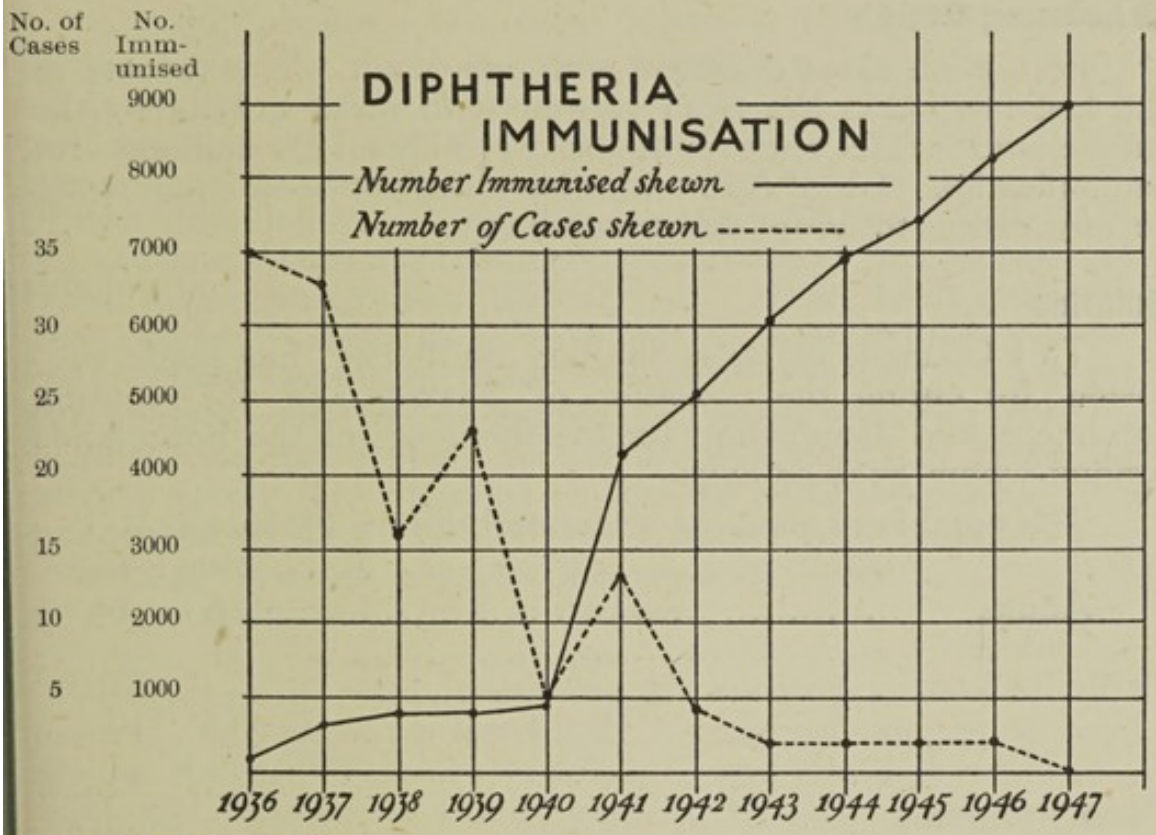
The great majority were mild in type. It is doubtful if it is advisable on public health grounds to remove all cases of Scarlet Fever to hospital. Many cases are not recognised and it is now well-known that the germ which causes Scarlet Fever may cause also a sore throat alone or a sore throat accompanied by a rash.. If control were to be adequate, notifications of all types would appear to be necessary and not just that type known as " Scarlet Fever."

Diphtheria

It is pleasing to be able to report that no case of Diphtheria was notified during 1947. In 1939, to quote from the Annual Report for that year, " of twenty-three cases, only one had been immunised; immunisation is offered free to children up to five years of age, but only eight were treated." In 1947, 747 children received primary inoculation and 608 children received " boosting " doses. Eighty-one per cent. of children under fifteen years of age in the District have been immunised. I consider the area to be well protected against the risk of Diphtheria.

The value of mass immunisation is very obvious. The aim is now to protect children as soon after the age of six months as possible. It is well-known that any immunity a child may derive from its mother is fleeting and the scheme under consideration for replacement of the Birthday Card by a " reminder " at the age of six months should prove acceptable.

On the other hand, the most common age for Diphtheria is about five years; by this time the effect of the primary immunisation in babyhood has waned and the child should have a " re-inforcing " or " boosting " dose before he begins school life. The present trend is to re-inoculate every four to five years throughout the period of school attendance, and this policy has been pursued with vigour in 1947, the figure rising from 38 in the previous year to 608 in the year just past



Infantile Paralysis

Eleven cases occurred during 1947, which was an epidemic year with the highest incidence so far recorded. Cases were scattered throughout the area and varied in degree of severity. Two pre-school children, four school children and five adults were affected. They were, with one exception, admitted to hospital and arrangements were made for such orthopaedic treatment as was necessary to be carried out at Lord Mayor Treloar Cripples' Hospital, Alton, and Park Prewett Hospital, Basingstoke. One death occurred; at the end of the year it seemed likely that in two cases there would be considerable residual disability, in two there would be moderate disability and in the remainder it appeared that there might be no after-effects.

Measles

Measles, like Whooping Cough, became notifiable in 1940. Epidemics occur usually every two years and, as can be seen from the table, 1947 was an epidemic year with 448 cases. There were no deaths reported.

Serum will protect children for only a few weeks; supplies are available to medical practitioners and encouragement is given to its use to protect the younger child. Leaflets containing advice on prevention and treatment were obtained by this Council and distributed as far as was practicable where outbreaks occurred.

Whooping Cough

Forty-nine cases occurred with one death. This disease in the last few years has been viewed with more gravity by the public and there appears to be an increasing demand for immunisation. Local Authorities have not yet been encouraged to any extent to adopt this treatment.

Scabies

This Council, being a Sanitary Authority, has made provision for curing the condition of Scabies and for securing treatment and disinfection for the members of the households among whom Scabies exist.

The number of patients so treated during 1947 was :—

	Male	Female
Adults	6	6
Children	11	13
Total	17	19

Food Poisoning

One localised outbreak occurred at Twyford in July affecting over a dozen people. It seemed extremely probable that the ultimate cause was the consumption of duck eggs. Everyone made a good recovery.

Several articles on the subject of food poisoning in general were prepared for the Press and other local publications from time to time.

In October, a conference on " Food and Drink Infections " was held in London and was attended by representatives of this Council. Steps were being taken at the end of the year to carry out, as far as is possible in a Rural District, some of the recommendations.

HOUSING

The housing shortage is one of the most serious menaces to the general well-being of the people. It is reflected in every day life in the many problems, which, with adequate housing accommodation, would seldom, if ever, come to light.

The main difficulties are from the evil results of overcrowding, the irritation of sharing a kitchen and the lack of adequate sanitary facilities. During the year, the system of allocation of houses was modified by the Council so as to give more recognition to the above factors.

Marked progress has been made in the housing of the people during the year. Families occupying " prefabs," which are provided with all the modern appliances, are showing, by their appreciation, that these dwellings are admirable and convenient homes. In the occupation of the various camps in the District, families have been supplied with all reasonable facilities consistent with the relatively shorter life of these structures. When taken over by the Council, many of the roofs and walls were poorly insulated, there were only the most primitive amenities and they were particularly unhealthy in winter. Much that was deficient has been supplied, but even with the available facilities one cannot but admit that the majority of these huts provide a very low standard of housing accommodation. The enthusiasm to accept " converted huts " as a solution to a housing problem emphasises the need for every family unit to have four walls and a roof of its own.

People are more conscious of the deficiencies of their houses. The need for so-called " modern " houses is being met by the provision of " prefabs " and the high number of traditional Council houses erected in the area. As far as is possible in a rural district, these answer the demand for a house with modern conveniences.

Provision of New Houses

New housing accommodation has been provided during the year in the undermentioned parishes :—

Parish	Traditional	Non-Traditional
BOTLEY	6	—
BURSLEDON	6	—
CHERITON	—	6
COLDEN COMMON	—	2
COMPTON	14	—
FAIR OAK	10	—
HOUND	6	—
KING'S WORTHY	2	—
MICHELDEVER	—	8
NEW ALRESFORD	24	—
OLD ALRESFORD	—	10
SPARSHOLT	6	—
WEST END	2	—
Totals	76	26

Housing by Private Enterprise

During the year, twenty-four houses have been completed by private enterprise.

Temporary Housing Accommodation

Additional accommodation has been secured for living purposes by the conversion of Rest Centre Huts ; the total now occupied is : West End 6, Hedge End 10, and Botley 4. Service Camps requisitioned now total seven and provide accommodation for 136 families.

At Moorhill Camp, West End, the condition of eighteen Nissen huts was considered as unsatisfactory for family use. These were occupied mainly by gipsies, and in the course of the year all the huts were pulled down and removed from this site, which otherwise may have developed into a nuisance of some magnitude.

Maintenance

The shortage of materials and labour makes the repair and maintenance of dwelling houses extremely difficult. Licences have been issued for essential work to make properties weathertight and to repair or replace sanitary equipment which may have become inimical to the health of the occupants, but the continued postponement of minor repairs is gradually causing deterioration of the pre-war standard of housing in the District. Another factor is that the high cost of repairs and the low, restricted rents militate against the desire of many owners to keep their properties in better condition.

Thankless is the task to advocate the gospel of cleanliness when soap and detergents are in short supply, or to urge a high standard of cleanliness when structural defects cannot always be remedied.

Rural Housing Survey

The Rural Housing Survey is still proceeding. The total number of houses surveyed at the end of the year was 7,632, approximately 98 per cent. of the houses coming within the scope of the survey (up to, but not exceeding, the rateable value of £20).

The following categories are prepared in accordance with Ministry of Health Circular 64/1944, together with a classification system of grouping showing whether public supply services are, or will be, available :—

Category	Group A	Group B	Group C	Total
1. Houses satisfactory in all respects	158	475	34	667
2. Houses with minor defects ...	1008	2379	536	3973
3. Houses requiring repairs, structural alterations or improvements	204	1474	177	1855
4. Houses suitable for reconditioning under Housing (Rural Workers) Acts ...	—	218	77	295
5. Houses unfit for habitation and beyond repair at reasonable expense ...	26	464	238	728
Totals	1381	5063	1062	7632

Group Classifications are as follows :—

Group "A"—" Services available, i.e., piped water supply, water carriage sewerage system, gas or electricity " denoting that these services are available but not necessarily connected.

Group " B "—" Restricted number of services available, others likely to become available in the near future," denoting that one or several of the above services are available but not necessarily connected and those not at present available may become so in the near future.

Group " C "—" Rural conditions only ; services not available or anticipated to be available in the near future," denoting that these conditions are not likely to be varied.

WATER SUPPLY

The County Borough of Southampton and the City of Winchester provide by means of their mains the bulk of the water supply to the dwelling houses in this District. Two private water companies, the Alresford Water Company and the Crabwood Water Supply, provide water to one and two parishes respectively. Periodical examinations, bacteriological and chemical, are made and all reports thereon during the year have been satisfactory.

The following are copies of the reports of the Chemical and Bacteriological analyses of the water supplied by the Alresford Water Company and the Crabwood Water Supply :—

Alresford Water Company

CHEMICAL RESULTS IN PARTS PER MILLION

Appearance:	Clear and bright	Albuminoid Ammonia:	0.000
Colour (Hazen)	Nil	Metals:	Absent
Reaction PH: Neutral	7.1	Turbidity (Silica Scale):	Nil
Electric conductivity at 20deg. C.:	445	Odour: Very faint and chlorinous	
Chlorine in Chlorides:	12	Free Carbon Dioxide:	25
Hardness—total:	245	Total solids dried at 180deg. C.:	300
Carbonate (temporary):	220	Alkalinity as Calcium Carbonate:	220
Non-Carbonate (permanent):	25	Nitrogen in Nitrites	Absent
Nitrogen in Nitrates:	3.2	Oxygen absorbed in 4hrs. at 27 deg. C.:	0.000
Free Ammonia:	0.000	Residual Chlorine:	0.25

BACTERIOLOGICAL RESULTS

Number of colonies developing on Agar per c.c. or m.l. in	1 day at 37°C. 0	2 days at 37°C. 1	3 days at 20°C. 0

Presumptive Coliform Reaction	Present in: —	Absent from:	100 m.l.
Bact. coli.	Present in: —	Absent from:	100 m.l.
Cl. welchii reaction	Present in: —	Absent from:	100 m.l.

REMARKS: This sample is clear and bright in appearance, neutral in reaction and free from iron and other metals. The water is hard in character, but not unduly so, and contains no excess of salinity or mineral constituents in solution. It is of the highest standard of organic and bacterial purity. These results are consistent with a pure and wholesome water suitable for public supply purposes.

(Signed) GORDON MILES for THE THREE COUNTIES PUBLIC HEALTH LABORATORIES.

Crabwood Water Supply

CHEMICAL ANALYSIS

Free and Saline Ammonia:	0.00018	Poisonous Metals:	Nil
Albuminoid Ammonia:	0.002	Iron:	Nil
Oxygen absorbed in 4hrs. at 27 deg. C.:	0.01	Total hardness:	24.8
Nitrogen present as Nitrites:	Nil	Alkalinity to Methyl Orange temporary hardness:	21.0
Total solids dried at 100 deg. C.:	33.0	Alkalinity to Phenolphthalein (=free alkali):	Nil
Chlorine (x 1.648 = common salt):	1.2	PH value:	7.3

BACTERIOLOGICAL EXAMINATION

No. of colonies per m.l. capable of growing upon agar at 27deg. C in 2 days	3
No. of colonies per m.l. capable of growing upon agar at 22deg. C in 2 days	5
No. of colonies per m.l. capable of growing upon lactose Bile Salt agar in 2 days	None
Probable number of coliform organisms present in 100 m.l.	None
Probable number of B. welchii and Faecal Coli per 100 m.l.	None

REMARKS: Chemically and bacteriologically satisfactory for a public supply.

(Signed) H. LESLIE CRONK, County Medical Officer.

Chemical and bacteriological analyses of the water supplied by the County Borough of Southampton and the City of Winchester can be obtained by reference to the Annual Reports of the respective Medical Officers of Health.

In addition, there are one or two estate supplies and a standpipe supply for the village of Owslebury.

All sources of water supply in the District are derived from deep wells sunk in the chalk strata. A certain quantity of water is extracted from the River Itchen by the Southampton Corporation and is subjected to a process of sedimentation (with the addition of sulphate of alumina) followed by filtration through rapid gravity sand filter and finally sterilised by means of the " Chloramine " treatment.

The water supply has been generally satisfactory in quality and quantity and free from plumbo-solvent action, although in the more rural part of the area some of the shallow wells tended to yield a limited and sedimentary supply during the dry periods.

Two hundred and eighty-two additional houses have been supplied with Company's water during the year and many agricultural cottages have been given a piped supply of water from agricultural water schemes.

Approximately seventy-one per cent. of the population are connected with the main supply and fifty-five per cent. of the dwelling houses.

Samples of well water supplying 66 individual properties were examined during the year. Eight of these were found to be unsatisfactory for drinking purposes.

SEWERAGE AND DRAINAGE

A sewerage scheme for the parishes of Hedge End, Botley and Bursledon, and also the unsewered part of the parish of Hound, adjoining them, has been prepared by a firm of Consulting Engineers and presumably work on the construction of the scheme will follow on the sewerage scheme for the parish of West End, the work of which is now being carried out.

SCAVENGING

A system of kerbside collection of refuse and salvage is now in operation throughout the whole of the Rural District by direct labour. The frequency of collection varies with the need of the various parishes, the more urbanised parishes once a week and the more rural once a month. Disposal is by means of controlled tipping.

FACTORIES, WORKSHOPS AND WORKPLACES

Inspection of Factories, Workshops and Work places

Premises 1	Inspections 2	No. of written notices 3	Occupiers prosecuted 4
Factories (with mechanical power) ...	42	2	—
Factories (without mechanical power)	64	2	—
Other premises under the Act (including works of building and engineering construction, but not including outworkers' premises) ...	—	—	—
Totals	106	4	—

SANITARY INSPECTOR'S REPORT, 1947

The number of inspections carried out during the year is as follows :—

Statute	Nature of Visit	No. of Inspections	
Milk and Dairies Regulations, 1926 to 1943 ...	(a) Number of Milk Producers registered during year ...		25
	(b) Inspections for re-constructions, alterations and cleanliness ...	103	
	(c) Number of alterations and improvements to dairy premises		5
Factories Act, 1937 ...	Inspections ...	10	
	Re-inspections ...	31	
Shops Act, 1934	Routine inspection of premises ...	14	
Food and Drugs Act, 1938 ...	Inspection of food ...	161	
Housing Act, 1936 Part II ...	(a) Rural Housing Survey ...	2589	
	(b) Houses inspected in respect of essential repairs ...	123	
	(c) Re-inspection of premises ...	601	
Public Health Act, 1936 ...	(a) Inspection of premises ...	205	
	(b) Nuisances found and remedied	145	
	(c) Re-inspection of premises ...	803	
	(d) Water Supply Inspections ...	486	
	(e) Infectious Diseases—Visits and Disinfections ...	90	
	(f) Drainage inspections ...	300	
Rat and Mice (Destruction) Act, 1919. Rodent Control ...	(a) Number of premises surveyed ...	3479	
	(b) Number of premises treated ...		907
	Interviews ...		546
	Samples of well-water examined ...		66
	Number reported polluted ...		8
	Samples of milk examined for efficiency of Pasteurisation ...		13
	Sewage effluent examined ...		2
	Milk Samples for streptococci ...		5
	Total	9140	