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BOROUGH OF WORKSOP

1948

ANNUAL REPORT

of the

Medical Officer of Health

M. B. McCANN, L.R.C.P., L.R.C.S., L.M., D.P.H.,

including the Report of the

Chief Sanitary Inspector

and

Cleansing Superintendent

T. H. MILLAR, F.S.I.A., M.R.S.I., M.INST.P.C.

Health Department,
Park House,
Park Street,
Worksop.

October, 1949.

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

Gentlemen,

I have the honour to submit for your consideration the annual health report for 1948, together with the vital statistics relative to the period.

The year under review was specially noteworthy because of the launching of the National Health Service on 5th July.

In common with other important municipal boroughs, Worksop lost direct control of its excellent Maternity and Child Welfare Services on that date. In handing over these services to the Nottinghamshire County Council, the Borough Council does so secure in the knowledge that they have discharged their obligations to the people of Worksop conscientiously and satisfactorily.

The infant mortality rate at 38 per 1,000 live births is the lowest in the history of the Borough. The excellent work of our local midwives, health visitors, doctors, and hospitals, have all contributed to this result; nevertheless, there are no grounds for complacency; the fight for an even lower infant death rate must be continued. In the text of the report will be found concise commentaries under various headings.

I should like to take this opportunity to express my thanks to the staff of the Department for their loyal and generous assistance, to the Officers of other Departments for their help and co-operation, and to the Council for support and encouragement.

I remain,
Your obedient Servant,

MoB. McCANN.

Medical Officer of Health.

MAYOR

COUNCILLOR T. W. COGGAN.

HEALTH AND SEWERAGE COMMITTEE.

Chairman: Alderman J.H. Saxton.

Vice Ch: Alderman H. Adwick.

Alderman H. Hartland, Councillors W.R. Bower, C. Cuthbert, D.H. Godley, E. Harris, C. Harrison, R.H. Newstead, S.J. Skillen, L. Ward Walters, J.H. Wand.

HOUSING COMMITTEE.

Chairman: Councillor S.J. Skillen.

Vice Ch: Councillor C. Cuthbert.

Councillors W.R. Bower, I. Charlesworth, W.H. Curr, D.H. Godley, E. Harris, C. Harrison, J. Hopkinson, A. Newman, R.H. Newstead, J.H. Wand.

MATERNITY & CHILD WELFARE COMMITTEE.

Chairman: Alderman H. Adwick.

Vice Ch: Councillor A. Newman.

Aldermen H. Hartland, J.H. Saxton, Councillors W.R. Bower, W.H. Curr, E. Harris, C. Harrison, H.B. Taylor.

CO-OPTED MEMBERS.

Mesdames T.W. Coggan, M.E. Hartley, W. Mellish, A.E. Piggott and J.H. Saxton.

REPRESENTATIVES TO THE NORTH NOTTS. JOINT HOSPITAL BOARD.

Aldermen H. Adwick, H. Hartland, Councillors W.H. Curr, S.J. Skillen and J. Wilkinson.

REPRESENTATIVES TO THE NORTH NOTTS. JOINT SMALLPOX HOSPITAL BOARD.

Alderman H. Hartland, Councillor W.H. Curr.

PUBLIC HEALTH STAFF.

Medical Officer of Health (part-time) Superintendent Child
Welfare and Ante-natal Clinic.

M. B. McCann, L.R.C.P., L.R.C.S., L.M., D.P.H.

Medical Officer, Ante-Natal Clinic.

H. T. Tate, M.B.E., M.B., B.Ch., D. Obst. R.C.O.G., M.M.S.A.

Chief Sanitary Inspector and Cleansing Superintendent.

T. H. Millar, F.S.I.A., M.R.S.I., M. Inst. P.C.

Additional Sanitary Inspectors.

W. H. Harris, M.R.S.I., M.S.I.A.,

J. F. Godfrey, A.R.S.I.

Veterinary Surgeon (Part-time).

T. Bowett, M.R.C.V.S.

Health Visitors.

Miss C. M. Lord, S.R.N., S.C.M., R.F.N., Cert. R.S.I.

Mrs. E. Blood, S.R.N., S.C.M., Cert. R.S.I.

Mrs. M. Seymour, S.R.N., S.C.M., Cert. R.S.I.

Clerks.

Health Department. Miss B. Latham, Miss M. Harrison.

Mat. & Child Welfare. Miss C. Kitchen, Miss E. Dickinson.

SECTION A.

GENERAL STATISTICS.

Area in acres:	17,935
Population at census 1931	26,286
Estimated population 1948	30,580
Number of inhabited houses at the end of 1948	7,967
Rateable value	£162,708
Sum represented by a penny rate	£641

VITAL STATISTICS.

<u>BIRTHS - Live</u>	<u>Males.</u>	<u>Females.</u>	<u>Total</u>
Legitimate	336	315	651
Illegitimate	<u>23</u>	<u>12</u>	<u>35</u>
	359	327	686
	<u> </u>	<u> </u>	<u> </u>

Birth rate per 1,000 of estimated population	22.43
Birth rate per 1,000 of England & Wales	17.9

<u>STILLBIRTHS.</u>	<u>Males.</u>	<u>Females.</u>	<u>Total.</u>
Legitimate	10	17	27
Illegitimate	<u>-</u>	<u>-</u>	<u>-</u>
	10	17	27
	<u> </u>	<u> </u>	<u> </u>

Rate per 1,000 (live & still) Births	37.8
Rate per 1,000 of population	.88

<u>DEATHS - Resident.</u>	<u>Males.</u>	<u>Females.</u>	<u>Total.</u>
	153	153	306

Death rate per 1,000 estimated resident population	10.0
" " " " " " " " England & Wales	10.8

<u>INFANT DEATHS (Under 1 year)</u>	<u>Males.</u>	<u>Females.</u>	<u>Total.</u>
Legitimate	17	7	24
Illegitimate	<u>2</u>	<u>-</u>	<u>2</u>
	19	7	26
	<u> </u>	<u> </u>	<u> </u>

Infantile mortality rate per 1,000 live births	37.9
" " " " " " " England & Wales	34

MATERNAL DEATHS

From: Puerperal and Post Abortive Sepsis	-
Other maternal causes	1

Rate per 1,000 total (live and still) births 1.4

Causes of Death - Worksop Borough 1948.

	<u>Males.</u>	<u>Females.</u>	<u>Total.</u>
Diphtheria	-	2	2
Scarlet Fever	-	-	-
Measles	-	1	1
Cerebro Spinal Fever	-	-	-
Whooping Cough	-	1	1
Tuberculosis of Respiratory System	8	3	11
Other forms of Tuberculosis	-	1	1
Syphilitic Diseases	1	1	2
Influenza	2	2	4
Cancer (Uterus F. Oesophagus M.)	2	5	7
Cancer of stomach and duodenum	3	2	5
Cancer of breast	-	5	5
Cancer of all other sites	18	13	31
Intra Cranial Vascular Lesions	13	19	32
Diabetes	2	1	3
Heart Disease	31	56	87
Other diseases - circulatory system	11	3	14
Bronchitis	11	3	14
Pneumonia	5	8	13
Other respiratory diseases	1	1	2
Ulcer of stomach and duodenum	3	-	3
Diarrhoea (under 2 years)	-	-	-
Appendicitis	1	-	1
Other digestive disease	3	5	8
Nephritis	1	-	1
Puerperal and Post Abortive Sepsis	-	-	-
Other Maternal causes	-	1	1
Premature Births	5	-	5
Congenital malformation, birth injury etc.	4	4	8
Suicide	1	-	-
Road Traffic accidents	4	1	5
Other violent causes	9	2	11
All other causes	<u>14</u>	<u>13</u>	<u>27</u>
	<u>153</u>	<u>153</u>	<u>306</u>

SECTION B.

General Provision of Health Services for the Area.

Infant Welfare Centres.

Carlton Road.

Sessions held each week on Mondays and Wednesdays 2 - 4 p.m.

Number of sessions	99
New cases under 1 year	361
New cases over 1 year	22
Attendances	5,463

Rhodesia Sub-Clinic.

Sessions held fortnightly on Wednesday 10 a.m. - 12 noon.

Number of sessions	24
New cases under 1 year	27
New cases over 1 year	3
Attendances	441

Scofton Sub-Clinic.

Sessions held fortnightly on Tuesdays 10 a.m. - 12 noon.

Number of sessions	20
New cases under 1 year	11
New cases over 1 year	7
Attendances	153

Manton Sub-Clinic.

Sessions held fortnightly on Wednesdays 10 a.m. - 12 noon.

Number of sessions	24
New cases under 1 year	43
New cases over 1 year	11
Attendances	568

Ante-Natal Clinic.

The total number of women who attended the clinic during the year was 483; which is 67.7 of the total (live and still) births.

Number of sessions	75
New cases	343
Return cases	1,539

Post-Natal Clinic.

Number of Sessions	24
Attendances	210

Provision of Maternity Beds.

Under agreement with the County Council, maternity cases are admitted to the County General Hospital, on recommendation of the Medical Officer of Health.

Emergency cases are admitted on recommendation of local practitioners.

Total number admitted under the Council's scheme up to 5th July, 1948 ... 86.

Maternity Outfits.

These have been provided free since the 5th July, but prior to this date they were provided by the Council at cost price.

Workshop Cripples Guild.

This important Guild continues to function independently of the Sheffield Regional Hospital Board and carries on its great work of the care and after-care of cripples in Workshop and neighbouring districts.

The sessions are as under :-

Orthopaedic Clinics

Tuesday 9.30 a.m.

Thursday 9.30 a.m.

Saturday 9.30 a.m.

The Orthopaedic Surgeon, Mr. Bell-Tawse, F.R.C.S. visits the clinics in the Maternity & Child Welfare Centre, Carlton Road, Workshop, on the second Tuesday in each month. There is a resident physiotherapist.

Care of Illegitimate Children.

Under a scheme adopted in 1944, the district has the service of a part-time Welfare Officer of the County Council Almoner Service, who co-operates with the Health Visitors and with the workers of the voluntary moral welfare organisations.

Adoption of Children (Regulations) 1939.

No. of persons who gave notice under Section 7 (3)	-	6
No. of children in respect of whom notice was given	-	Nil

Infant Life Protection.

There were no children under statutory supervision during the year.

Ambulance Service.

Ambulance services are provided by Nottinghamshire County Council and are controlled from County Council Headquarters in Nottingham. The District Officer for Workshop Borough is Mrs. M.A. Bartle, 29, Blyth Road, Workshop. Workshop has been designated as a 'Main Station' with an attached 'Sub-Station'. Vehicles comprise 4 ambulances and 2 sitter-cars. Telephone No. Eastgate, Workshop: 2128.

Laboratory Service.

Certain bacteriological work in connection with suspected cases of Typhoid, Dysentery, Food Poisoning, and the examination of ice-cream samples, is carried out at the Victoria Hospital, Workshop, and at the Public Health Laboratory, Lincoln.

HOME NURSING.

The District Nursing associations employing whole and part-time nurses will continue their Home Nursing Services on behalf of the Local Health Authority.

The District Nurses for this area are :-

Mrs. H. Boyle, 30, Bracebridge, Tel. Worksop 2949.

Mrs. Freeman, Darfoulds. Tel. Worksop 2947.

HOME HELP SERVICE.

A service has now been organised in Worksop to provide domestic help to necessitous cases, either full or part time.

These may include :-

Maternity Cases.

Mothers of young children where some help is recommended by the doctor.

Cases of illness where no other help is available.

The Aged and infirmed.

These Home Helps do cleaning, plain cooking, shopping, etc., but not nursing. They make their own provision for meals.

A recommendation from the Doctor or Nurse is necessary.

The Householder is required to pay at the rate of 1/10d. per hour unless unable to do so when the rate of payment is determined by applying the County Council's Scale of Assistance. Payments for the Service are made to the County Treasurer and not to the Home Help. The Home Helps receive a weekly wage from the County Council.

The County Council employ an Organiser for the District and any further information regarding the Home Help Service may be obtained from her at Park House, Park Street, Worksop. (Telephone Worksop 2281 Ex. 26).

SECTION C.

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES.

Whooping Cough.

There was a marked increase in the number of cases of Whooping Cough and one death from this disease occurred.

Whooping Cough is today the most serious of all the common infectious diseases in this country for the very young. Success in other parts of the world, especially in the United States, with injections of a prophylactic vaccine had not until recently been achieved over here. Early trials in 1945 with strictly controlled conditions failed to show any benefits to the injected children over those who did not receive the vaccine. The trials have continued and in the current issue of the Medical Press the whooping cough immunisation committee of the Medical Research Council publishes a preliminary statement of more recent work which is much more hopeful.

The trials have now been in progress for over two years and a total of 4,691 children have either been injected or have served with the full knowledge of their parents, as "controls" receiving no injections. This method is essential for a scientific appraisal of the results in view of the variation in the severity of the disease from time to time and place to place. In six out of seven trials under these conditions the incidence and severity of whooping cough in the test groups were "appreciably less" than in the control groups, while in the seventh trial the results in the test group were only slightly less favourable.

There appeared to be considerable variation in the value of the vaccines used and further investigation is proceeding to try to discover a cause for this. Parents who wish to have their children protected against the disease should make arrangements with their own doctor.

Scarlet Fever.

There were 121 cases of scarlet fever notified during the year, representing an increase of 18 over that for 1947.

The disease which we call scarlet fever differs in no essential from tonsillitis or sore throat caused by the streptococcus germ. In some cases the germ causes sore throat with a rash, in others sore throat alone. Thus a child with sore throat and no rash can infect another child who will develop full scarlet fever. The child with the rash is perhaps the luckier of the two for he is more likely to receive proper attention.

Medical opinion now generally recognises the anomaly of the present practice of notifying scarlet fever only when there is a rash, and also that little is to be gained either clinically or administratively by separating those manifestations of acute infection with the haemolytic streptococcus which are accompanied by a rash from those which are not.

Two questions seem therefore to arise: First, should all cases of haemolytic

streptococcal infection be notified? The answer to this seems to be "no": they are too numerous and too variable to permit full epidemiological investigation of each notification.

The second question is: Should we continue the anomalous present practice of notifying only scarlet fever with rash? Here the answer seems to be "yes", for it has, with all its deficiencies, the limited value of providing an indicator of the trend and incidence of one of the most striking manifestations of haemolytic streptococcal infection - (a) a manifestation, which in the decade 1861 - 1870 had an average death rate of 2,282 per million at ages under 15, contrasted with 3 in 1947.

Poliomyelitis.

Only one notification of Poliomyelitis was received during 1948. Poliomyelitis has been notifiable in England since 1912, but there has been no epidemic comparable to that of 1947.

Originally the disease occurred chiefly in young children - hence the name infantile paralysis - but in recent years an increasing proportion of adolescents and adults have been affected. The disease is thought to spread by person-to-person contact, but in which way is still unknown. The current view is that for every person showing clinical signs of the disease many are infected, but show few or no symptoms. Doctor Horstmann of Yale University summarized the position as follows in the Lancet early in 1948:-

"In spite of all the information collected by many investigators in many lands we still cannot say why poliomyelitis suddenly became epidemic almost sixty years ago, why it is increasing rather than decreasing like other infectious diseases, why it is a summer disease with a preference for certain lands, how it is spread or how it may be prevented."

Adequate facilities for the treatment of this disease are available at neighbouring hospitals.

Diphtheria - National and Local incidence.

Since the inception of the Diphtheria Immunisation scheme in 1940, the number of cases of, and deaths from Diphtheria has shown a very marked decrease. The number of cases in 1948 was also the lowest ever recorded, being about 47,000 below the average of 55,000 obtaining in the ten-year period 1931/40. Apart from the avoidance of unnecessary suffering, this has resulted in substantial savings in hospital costs, and has freed Medical and Nursing personnel for other work.

Total of deaths and original notifications during the past 9 years have been as follows:-

TABLE 1.

ENGLAND AND WALES.		
Year	Diphtheria	Cases
	Deaths	
1940	2,480	46,281
1941	2,641	50,797
1942	1,827	41,404
1943	1,371	34,662
1944	934	29,949
1945	722	25,246
1946	472	18,283
1947	244-	10,465-
1948	150-	8,034-

These figures speak for themselves. Let us now look at the progress of the campaign in Worksop.

TABLE 2.

Year	No. of children who completed a full course of treatment.		Population	
	Under 5	Over 5	Under 5	5-15 years
1944	482	111	2,554	5,023
1945	655	87	2,720	4,840
1946	303	152	2,650	4,530
1947	276	34	2,771	4,588
1948	365	61	2,890	4,629

These figures are disappointing but as they only represent the numbers immunised at the clinics, it is possible that they do not give the full story. It is known that many of our local doctors conducted immunisations privately before the 5th July, 1948, after which date they were obliged to keep records for transmission to the District Medical Officer of Health.

I regret to record that there were three cases of Diphtheria in the Borough with two deaths. Two female patients, aged 14 years and 42 years respectively, died in the second half of the year. One male aged 23 years survived. On investigation it was discovered that none of them had been immunised at any time.

Measles.

The number of cases notified during the year was 363, that is, 8 less than for 1947. This disease, which causes much ill-health, appears to be viewed with unconcern by a large number of parents. The general attitude adopted is "oh, he's got to get

it sometime or other, so let's get it over!"

Admittedly, the infection is difficult to control, but allowing children to wander around with a measles rash, (as occurred in two instances), or allowing them out of bed before the doctor has been consulted, does not make the task any easier.

One great advantage which follows the notification of cases of measles is their following up by the health visitors. Inquiries made after apparent recovery may lead to the detection of the early signs of chronic ear trouble or chronic lung disease, and the course of these diseases may often be arrested by timely advice and treatment.

TUBERCULOSIS IN ENGLAND AND WALES.

Ministry Statement.

A recent statement issued by the Ministry of Health points out that the present situation regarding tuberculosis in England and Wales needs to be judged against the background of the progress made during the period between the two world wars. Between 1918 and 1939 the number of deaths from all forms of tuberculosis fell from about 58,000 in 1918 to about 25,600 in 1939. Then in 1940 and 1941 the number of deaths rose to over 28,000. This increase, however, was checked, and the figures for 1942, 1943 and 1944 were approximately 25,500, 25,600 and 24,100. The fall continued in 1945 and 1946, when deaths numbered 23,955 and 22,847 respectively, rising slightly in 1947 to 23,550.

These mortality figures are the most reliable criterion of the trend of tuberculosis, as against the number of notifications of the disease, which are not necessarily an accurate reflection of its incidence. It is observed, however, that the numbers of deaths in the war years, unexpectedly favourable though they were, were higher than they would have been if the pre-war rate of decline had continued; the number of notifications rose above and still remain above the pre-war level. In 1918 the total number of formal notifications was about 90,000; in 1938 about 50,000; and it has since been as follows:

1939	...	46,000	1944	...	54,000
1940	...	46,600	1945	...	52,000
1941	...	51,000	1946	...	51,300
1942	...	52,600	1947	...	51,700
1943	...	54,000			

The relation between respiratory and non-respiratory types of tuberculosis, which hitherto has shown no substantial deviation from year to year (although such a factor as increasing pasteurization of milk may materially affect the incidence of non-respiratory tuberculosis as times goes on), may be gauged from the fact that in 1947, of the total of 23,549 deaths, 20,156 were due to respiratory tuberculosis.

The admission of patients to tuberculosis institutions for treatment with reasonable promptness continues to present a serious problem. The reason for this is not the lack of sufficient accommodation but the persisting shortage of nurses. The number of patients under institutional treatment at June 30, 1948, was about

29,200, while the number on the waiting-lists for such treatment was about 9,000. The number of new patients who came on the registers of tuberculosis dispensaries in the quarter ended June 30, 1948, was about 13,000.

Developments in the Tuberculosis Service.

The introduction in 1942 of mass radiography to detect respiratory tuberculosis in its earlier stages constituted an important advance. Owing to the wartime limitations on the production of the apparatus and on the availability of medical man-power it has been possible to provide these mass radiography units only gradually in selected areas of the country. By Dec. 31st, 1948, there were 37 of these units in operation in England and Wales, and the Ministry itself operates one at a fixed centre in London as a training and research unit. By June 30, 1948, about 2,500,000 persons had been examined, of whom approximately 94% were found normal at the time of examination. The number of cases in which clinical investigation following evidence of abnormality in the miniature film led to diagnosis of active tuberculosis conditions was approximately 9,564, or between 3 and 4 per 1,000 of all the persons examined.

Under the National Health Service Act the responsibility for the tuberculosis treatment services - namely, institutional and out-patients services, including the mass radiography service - passed on July 5, 1948, from county and county borough councils to the regional hospital boards, though the local authorities remain responsible as the local health authorities under the Act for the prevention, care, and after-care work in relation to tuberculosis.

Under the National Assistance Act, persons who suffer a loss of income in order to undergo treatment for respiratory tuberculosis and need financial help over and above such statutory payments as National Insurance Benefit and Family Allowance are able to obtain this through the National Assistance Board. The main object of this assistance is to afford a reasonable standard of maintenance for the patient and his dependants during the period of treatment so as to encourage the sufferer for both his own and the community's sake, to give up work to undergo early treatment.

In November 1948, a Mass Radiography Unit visited Worksop, and the following is an extract from the Medical Director's report.

Survey 10.

Survey of Factory Employees and General Public in Worksop and district at the School Clinic, Worksop during November, 1948.

Summary

		<u>Male.</u>	<u>Female.</u>	<u>Total.</u>
No. X-rayed	...	2,058	1,714	3,772
No. of large films	...	100	71	171
No. of Clinical Examinations	...	38	28	66

Cases of Pulmonary Tuberculosis and
Suspected Pulmonary Tuberculosis.

Referred to County Tuberculosis Officer - 34 (4 sputum positive)

The Medical Director goes on to say "as you will see from the report, just over 1 per 1,000 were found to have active Pulmonary Tuberculosis and 4 - 5 per 1,000 had the disease, the activity of which was in doubt at the time of examination. These results are what we usually obtain in a survey of this kind. (In other words the number of significant cases of Pulmonary Tuberculosis found was neither higher nor lower than in our other survey). The results also show that on an average the smaller the firm the better the response. This is no doubt due to the closer liaison between employees in a small firm. As usual the response from Collieries was poor due mainly to the awkward times when miners have to be at their work".

The diagnosis and treatment of persons suffering from tuberculosis was undertaken by the Nottinghamshire County Council up to the 5th July, 1948, and these functions passed to the Sheffield Regional Hospital Board after that date. The clinic serving this area is adjacent to the School Clinic, Watson Road, Worksop.

Rehabilitation of Tuberculous persons.

Village Settlement. The Local Health Authority will continue to maintain the Sherwood Village Settlement and the associated Sherwood Industries for the rehabilitation of tuberculous persons.

Liaison between the Tuberculosis Officer and the District Medical Officer of Health.

The Tuberculosis Officer (who is employed by the Sheffield Regional Hospital Board) systematically passes on to me, in confidence, brief clinical particulars of every diagnosed case of Tuberculosis in the Borough, together with a summary of the home conditions and an indication of any preventive action which might be taken, whether the case is "infectious" or not, and the intentions as to future care.

Food Poisoning.

There were no outbreaks of food poisoning during the year. It is important to stress, however, that probably 3,000 deaths occur yearly from this cause alone in England and Wales. The Ministry of Health has this to say about food poisoning: "From evidence collected in various inquiries into the cause of food poisoning outbreaks, it is clear that in many instances it is the human element that introduces bacteria into the offending food. The infecting bacteria can be derived from a carrier who may never have suffered from any gastro-intestinal trouble and be entirely unaware that he or she harbours an organism that may cause illness if introduced into food. Catarrhal conditions of the nose and throat or trifling sores on the hands and arms may be the source of staphylococci of a type which if given a chance to multiply in food generates an entero-toxin that is a cause of food poisoning. To prevent food poisoning outbreaks the two most important points to insist on, besides the elementary one of scrupulous cleanliness, are (a) that all food handlers should thoroughly wash their hands and lower arms before touching the food, not only when they begin work but also

every time their work is interrupted, and (b) that as far as possible the food should be eaten as soon as it has been prepared. This latter precaution is often difficult to secure in canteens where meat, trifles, custard and puddings, cooked the day before, are often reheated before consumption. Unfortunately the reheating does not destroy staphylococcal entero-toxin. If food has to be kept after cooking it should be placed in a refrigerator as soon as possible to prevent the multiplication of any bacteria it may contain. Several outbreaks have been due to defective refrigerators and to the present difficulties of getting them repaired or obtaining new ones."

Typhoid, Paratyphoid, and Cerebro-Spinal Fevers.

No notifications were received under this heading during the year.

ICE-CREAM (HEAT TREATMENT, ETC.) REGULATIONS, 1947.

The Regulations which came into operation on 1st May, 1947, broadly require that, subject to certain qualifications, the ingredients of ice-cream shall be heat treated after being mixed and that the mixture shall then be cooled until the freezing process is begun. After freezing, the ice-cream must not be sold unless it has been kept at a temperature not more than 28° F; or, if its temperature has risen above 28° F; unless it has again been heat treated and then kept at not more than 28° F after having been frozen.

On several occasions, after objection had been raised to the poor grading of a vendor's samples, the Sanitary Inspectors visited the premises and found some source of contamination, or incomplete cleaning or sterilization of the plant. When precautions were taken on their advice, good samples were then produced.

Much of the low grading of ice-cream is associated with faulty cleaning and sterilization of plant, especially the equipment used after the ice-cream has been heat-treated, namely the pipes and valves going to the homogenizer, cooler, storage tanks, and the freezer. Special attention must be given to the cooler because of the large surface exposed and of the crevices where dirt can remain, and to the freezer because of the blades.

In heat-treated ice-cream a frequent cause of trouble is delayed cooling. Ice-cream must be cooled to 45° F. or below, within 1½ hours according to the regulations to prevent bacterial multiplications and subsequent deterioration in quality.

In cold-mix ice-cream the common source of trouble is faulty sterilization of utensils such as the mixing bowls, spoons, and the freezer with its blades. Some type of sterilization must be used, as cleaning alone is not a sufficient guarantee against bacterial contamination and multiplication.

In pre-packed ice-cream the method of pre-packing must be carefully scrutinized, as many of the cutting and packing machines are difficult to clean and sterilize. Hand pre-packing has its own obvious dangers. Retail samples are frequently contaminated by the serving spoons or spatulas which are usually left on the counter or in a bowl of water. Though the water may be boiled originally, once it is enriched with ice-cream it affords an excellent culture medium for bacterial multiplication, and in warm weather soon becomes grossly contaminated with micro-organisms.

EXAMINATION AND GRADING OF ICE-CREAM.

A sub-committee appointed by the Medical Research Council, report that the results of the bacteriological examination of ice-cream samples during 1948 by the methylene blue reduction test, confirm their previous conclusions that the test affords a simple and practicable means for the routine grading of ice-cream.

During the year the number of ice-cream samples submitted for bacteriological examination to the Workshop Victoria Hospital, was 8 and the grading of these was as follows :-

Sample	Bacteria per millilitre.	Bacillus Coli in 0.1 millilitre.	Methylene Blue Test	Provisional Grade.
Special	-	-	Satisfactory	1
1	16,000	Absent	"	1
2	82,000	Present	Fails at 3 hrs.	2
3	10,000	Absent	Satisfactory	1
4	480,000	Present	Fails at 3 hrs.	2
5	33,000	Absent	Satisfactory	1
6	1,200,000	Present	Fails at 1 hr.	3
7	28,000	Absent	Satisfactory	1
8	760,000	Present	Fails at 2 hrs.	3

Following the receipt of the unsatisfactory reports, the premises of the manufacturers and vendors were visited by a sanitary inspector and a thorough examination of methods and apparatus was instituted. As the result of these visits conditions usually showed a rapid improvement. It is but fair to say that our local vendors are only too anxious to co-operate with the Health Department in ensuring that an absolutely safe product is available for human consumption.

The Central Public Health Laboratory Service advises on grading of ice-cream as follows - "Owing to the numerous factors governing the hygienic quality of ice-cream and to the experimental error of the laboratory test itself, it is unwise to pay too much attention to the bacteriological results of any given sample. Judgement should be based rather on a series of samples. It is suggested that over a six-monthly period, 50 per cent. of a vendor's samples should fall into Grade 1, 80 per cent. into Grades 1 and 2, not more than 20 per cent. into Grade 3, and none into Grade 4."

VERMINOUS CONDITIONS.

Excellent premises for treatment are available in the County Council Clinic, Watson Road, through the kind permission of the County Medical Officer.

The treatment clinic is under the capable supervision of Miss R. Greaves (County Officer, Workshop Area, St. John's Ambulance Brigade).

TABLE 3.

INCIDENCE OF SCABIES (WORKSOP)	
Year.	No. of Cases.
1943	492
1944	622
1945	794
1946	605
1947	560
1948	316

POWERS AND LEGAL ENACTMENTS.

Under the Scabies Order, 1941, a Medical Officer of Health, on becoming aware that a person was verminous or suffering from scabies had power to inspect the house, examine all the occupants and secure the treatment of persons found to require it. Here was recognition by the Government that scabies and lousiness are essentially household conditions. The Order was cancelled on the 31st December, 1947; it was introduced as an emergency wartime measure to combat an exceptional increase of scabies which threatened to be detrimental to the war effort. The Ministry of Health, intimated at that time that it would be desirable to revert to the less drastic statutory powers contained in the Public Health Act, 1936.

Education Act, 1944. An Education Authority (in our area, the Nottinghamshire County Council) have power to direct their Medical Officer or any person authorised by him to examine for the presence of vermin any child in attendance at a public elementary school. The education authority has power to require the parent to cleanse a child, in accordance with written instructions supplied, within 24 hours and, on failure of the parent to do so, to remove the child and cleanse him. If the parent, after the child has been cleansed, allows the child to become verminous again he is liable to a fine. Under the attendance bye-laws a parent can be prosecuted for failing to maintain a child in such a condition as to enable him to attend school. During the year under review, no proceedings were taken by either the Borough Council or the Nottinghamshire Council in this district. The exercise of patience and tact obviated recourse to legal measures.

HEALTH EDUCATION.

During the year the diphtheria Trailer Film, No. 11 was shown at all local cinemas and I gratefully acknowledge the ready co-operation of the Managers concerned.

Leaflets and posters dealing with Diphtheria, Measles, Infantile Paralysis, and Food and Drink infections were distributed at various centres throughout the Borough.

SECTION D.

ENVIRONMENT HEALTH SERVICES.

HOUSING.

Six years of war, followed by four years of post war shortages of materials, high prices, and other difficulties, have created a housing problem, the solving of which will be our greatest task for some years to come. The position, however, is improving as the following table will show.

TABLE 4.

Housing Progress (Borough of Worksop), 1948.

Houses Erected.

Year.	Prefabricated - type houses.	Traditional-type houses.	Old age pensioners bungalows.
1946	70	16	--
1947	--	56	26
1948	77	70	30

The close association which exists between bad housing conditions and ill-health are too well known to require stressing here. These conditions are causing physical, mental, and moral strain. Worksop, in common with other large towns, has got its share of such cases and the Housing Committee are doing their best to alleviate and improve conditions.

FOOD AND DRUGS ACT, 1938.

The Regulations are administered by the Nottinghamshire County Council. The Chief Inspector has forwarded an extract from the Public Analyst's Report for 1948 upon articles of food and drugs taken in the Borough.

Forty one samples comprising both food and drugs were analysed and only one sample proved unsatisfactory.

TABLE 5.

MILK (Special Designations) REGULATIONS, 1936 - 1948.

Heat Treated Milk (Prescribed Tests) Order, 1944.

Samples of Milk taken by County Sampling Officers and submitted to prescribed Tests.

	<u>No. Samples taken.</u>	<u>Complied.</u>	<u>Failed to comply.</u>
Tuberculin Tested.	12	12	-
Accredited	17	16	1
Pasteurised, Heat Treated, etc.	14	14	-

Water Supply.

The supply of water from the Council's boreholes at Sunnyside is satisfactory as regards quality and quantity.

Ninety eight per cent of the inhabited houses in Worksop are supplied from the public water main; the remaining houses are supplied from private water works, or from deep wells.

During the year under review 12 samples of raw water were subjected to bacteriological examination and with the exception of one sample, were found to be satisfactory. Eight samples were submitted for chemical analysis and all proved satisfactory.

HOUSING STATISTICS.

1. Inspection of Dwellinghouses during the year:-

1.	(a)	Total number of dwellinghouses inspected for housing defects (under Public Health or Housing Acts).	520
	(b)	Number of inspections made for the purpose.	579
2.	(a)	Number of dwellinghouses included under the sub-head (1) (above) which were inspected and recorded under the Housing Consolidated Regulation, 1925.	0
	(b)	Number of inspections made for the purpose.	0
3.		Number of dwellinghouses found to be in a state so dangerous or injurious to health as to be unfit for human habitation.	6
4.		Number of dwellinghouses (exclusive of those referred to under the preceding sub-head) found not to be in all respects fit for human habitation.	514

2. Remedy of defects during the year without service of Formal Notices:-

Number of defective dwellinghouses rendered fit in consequence of informal action by Local Authority or their Officers.	552
---	-----

3. Action under Statutory Powers during the year:-

1.	Proceedings under Sections 9, 10 & 16 of the Housing Act, 1936:-	
(a)	Number of dwellinghouses in respect of which notices were served requiring repairs.	0
(b)	Number of dwellinghouses which were rendered fit after service of formal notices ...	
	(a) by Owners	0
	(b) by Local Authority in default of Owners	0

2. Proceedings under Public Health Acts:-

(a) Number of dwellinghouses in respect of which notices were served requiring defects to be remedied.	31
(b) Number of dwellinghouses in which defects were remedied after service of formal notices:-	
(a) by Owners	35
(b) by Local Authority in default of Owners	0

3. Proceedings under Sections 11 & 13 of the Housing Act, 1936. 6

4. Proceedings under Section 12 of the Housing Act, 1936. 1

4. Housing Act, 1936 - Overcrowding.

(a) (1) Number of dwellings overcrowded at end of year.	534
(11) " " families dwelling therein	1,083
(111) " " persons " "	3,527
(b) Number of new cases of overcrowding reported during the year	159
(c) (1) Number of cases of overcrowding relieved during the year	140
(11) Number of persons concerned in such cases	485
(d) Particulars of any cases in which dwellinghouses have again become overcrowded after the Local Authority have taken steps for the abatement of overcrowding.	0
(e) Any other particulars with respect to overcrowding upon which the Medical Officer of Health may consider it desirable to report.	

All housing applications are dealt with by the Housing Department.

Health Department check applications for Health, Insanitary conditions and overcrowding, and the Medical Officer allocates extra points according to the circumstances found.

These are added to general points in the application, and applicant placed in appropriate points group for re-housing consideration.

Tuberculosis and urgent overcrowding cases receive priority.

Number of new houses erected during the year:-

(a) By Local Authority ...	239
Converted huts occupied...	43
(b) By private enterprise ...	55

FACTORIES ACTS, 1937 and 1948

PART I OF THE ACT

1. INSPECTIONS for purposes of provisions as to health (including inspections made by Sanitary Inspectors)

Premises (1)	M/c line No. (2)	Number on Register (3)	Number of			M/c line No. (7)
			Inspections (4)	Written notices (5)	Occupiers prosecuted (6)	
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities ...		27)		-	-	
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority ...		70)	91	-	-	
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)		-	-	-	-	
TOTAL		97	91	-	-	

2. CASES IN WHICH DEFECTS WERE FOUND

(If defects are discovered at the premises on two, three or more separate occasions they should be reckoned as two, three or more "cases")

Particulars (1)	M/c line No. (2)	No. of cases in which defects were found				Number of cases in which prosecutions were instituted (7)	M/c line No. (8)
		Found (3)	Remedied (4)	To H.M. Inspector (5)	Referred By H.M. Inspector (6)		
Want of cleanliness (S.1)		2	2				
Sanitary Conveniences (S.7)							
(a) insufficient		2	2		1		
(b) unsuitable or defective		5	5		1		
(c) not separate for sexes		2	2		2		
TOTAL		11	11		4		

APPENDIX A.

STATISTICAL AND SOCIAL CONDITIONS OF THE AREA.

TABLE 1.

COMPARATIVE INFANT MORTALITY RATES

Year	Worksop	County Boroughs and Great Towns, including London.	England and Wales.
1931	62	71	66
1932	54	69	65
1933	69	67	64
1934	59	63	59
1935	49	62	57
1936	59	63	59
1937	48	62	58
1938	49	57	53
1939	53	53	50
1940	80	61	56
1941	68	71	60
1942	64	59	49
1943	57	58	49
1944	47	52	46
1945	45	54	46
1946	51	46	43
1947	43	47	41
1948	38	39	34

APPENDIX A. (Contd).

STATISTICAL AND SOCIAL CONDITIONS OF THE AREA.

VITAL STATISTICS 1948 - COMPARATIVE RATES

TABLE 2.

	Annual rate per 1,000 of pop.			Death rates per 1,000 live births.		Notification - rates per 1,000 of pop.			
	Live Births	Stillbirths	Deaths all causes	Diarrhoea and enteritis under 2 yrs.	Deaths under 1 year	Scarlet Fever	Diphtheria	Measles	Whooping Cough
England and Wales	17.9	.42	10.8	3.3	34	1.73	0.08	9.34	3.42
126 C.B. and Great towns inc. London	20.0	.52	11.6	4.5	39	1.90	0.10	9.75	3.51
148 smaller towns - pop. 25,000 - 50,000	19.2	.43	10.7	2.1	32	1.62	0.09	8.84	3.31
London Adm. County	20.1	.39	11.6	2.4	31	1.37	0.10	9.17	3.13
W O R K S O P	22.4	.88	10.0	0.0	38	3.95	0.09	11.51	5.46

APPENDIX A. (Contd).

STATISTICAL AND SOCIAL CONDITIONS OF THE AREA.

TABLE 3.

INFANTILE MORTALITY - 1948.

ANALYSIS of Deaths under one year of age.

	0-1 mth.	1-3 mths.	3-6 mths.	6-9 mths.	9-12 mths.	Total under 1 year.
Accidental ...	-	3	-	1	-	4
Atelectasis ...	2	-	-	-	-	2
Broncho - pneumonia ...	-	1	5	1	-	7
Cerebral Haemorrhage ...	1	-	-	-	-	1
Congenital Malformations...	1	1	1	-	-	3
Haemolytic Disease ...	-	1	-	-	-	1
Prematurity ...	5	-	-	-	-	5
Convulsions ...	-	-	-	1	2	3
Totals ...	9	6	6	3	2	26

APPENDIX C.

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES.

TABLE 1.

MONTHLY NOTIFICATIONS OF INFECTIOUS DISEASE.

DISEASE	January	February	March	April	May	June	July	August	September	October	November	December	Totals
Scarlet Fever	14	12	10	9	15	13	10	1	8	3	14	12	121
Whooping Cough	81	30	12	17	8	1	3	3	8	4	-	-	167
Measles	-	1	1	2	-	7	45	26	10	22	68	181	363
Pneumonia	1	-	3	1	-	-	3	-	-	-	-	-	8
Acute Poliomyelitis	-	-	-	-	-	-	-	-	1	-	-	-	1
Puerperal Pyrexia	-	-	-	-	1	-	-	-	-	-	-	-	1
Diphtheria	-	-	-	-	-	1	1	1	-	-	-	-	3
Totals:	96	43	26	29	24	22	62	31	27	29	82	193	664

APPENDIX C. (Contd).

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES.

TABLE 2.

Notification of Tuberculosis.

	New Cases Notified.				TOTAL.
	Pulmonary		Non- Pulmonary		
	M.	F.	M.	F.	
Under 1 year	-	-	-	-	-
1 - 5 years	-	-	1	1	2
5 - 15 years	-	-	1	-	1
15- 25 "	5	2	-	-	7
25- 35 "	3	5	1	-	9
35- 45 "	2	1	-	-	3
45- 55 "	2	-	-	-	2
55- 65 "	1	-	-	-	1
65 years and upwards	-	-	-	-	-
Totals	13	8	3	1	25

B O R O U G H O F W O R K S O P

ANNUAL REPORT OF THE CHIEF SANITARY INSPECTOR
AND CLEANSING SUPERINTENDENT.

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

Sir, Lady and Gentlemen,

I have the honour to present my Annual Report for the year ended 31st December, 1948.

The portion on the Public Cleansing Services is for the financial year ended 31st March, 1949.

I wish to record my appreciation of the courtesy and consideration accorded to me by the members of the Council, and I am indebted to all Officials and other staffs for their unfailing help during the year.

I am,

Your obedient Servant,

T. H. MILLAR.

Chief Sanitary Inspector.

DETAILS OF INSPECTIONS AND VISITS.

Dwelling Houses:-

General sanitary conditions and housing defects	...	...	795
Water supplies	...	...	142
Nuisances	...	...	76
Notifiable diseases and disinfection	...	...	177
Verminous conditions and disinfestation	...	...	158
Checking housing applications, suspected overcrowding, etc.			214
Common lodging house	...	...	8
Shops re Sanitary conditions	...	...	40
Schools	...	...	6
Cinemas and Assembly Halls	...	...	13
Vans and hutments	...	...	18
Factories	...	...	91
Offensive trades	...	...	16
Keeping of pigs, poultry and dogs	...	...	103
Premises, lands, watercourses, etc. infected with rats and mice			91
Smoke observations, and dust emissions	...	...	15
Drainage and testing, outfall works, sewers, etc.	...	...	343
Accumulations of manure and other refuse	...	...	17
Refuse receptacles, collection and disposal	...	...	783
Salvage	...	...	386
Miscellaneous including Mass radiography	...	...	639

Meat and other Food Inspections.

Meat and food inspections	...	...	848
Slaughterhouses	...	...	84
Meatshops and stalls, stores, and vehicles, bakehouse and other food preparation places	...	...	289
General provision, fruit shops, stores, etc.	...	...	64
Fish shops, fried fish shops and stalls	...	...	143
Ice-Cream premises	...	...	136
Dairies	...	...	85
Cowsheds	...	...	73
Markets	...	...	35

Self - suppliers of Pigs scheme (Private producers).

Number of pigs inspected	...	...	723
Part carcasses and organs condemned	...	...	30 sts.

Horses and Ponies slaughtered for human consumption.

Number inspected	...	...	158
Part carcasses and organs condemned	...	...	7 sts.

Summary.

Complaints received	...	...	443
Total nuisances and defects dealt with	...	...	1,064
Total re-inspections made...	...	...	1,504
Number of Notices served: Informal	...	...	513
Statutory	...	...	31
Number of Notices complied: Informal	...	...	489
Statutory	...	...	29

Sanitary Improvements, defects remedied, etc.

Houses:

Floors relaid or repaired	...	...	73
Woodwork repaired	...	...	102
Handrails provided or renewed	...	...	9
Windows repaired	...	...	133
Dampness remedied	...	...	126
Plasterwork and brickwork repaired	...	...	127
Ceilings repaired or renewed	...	...	49
Fireplaces repaired or renewed	...	...	81
Chimneys repaired or rebuilt	...	...	31
Roofs repaired	...	...	97
Food storage improved	...	...	23
New sculleries built	...	...	2
Washing accommodation repaired	...	...	51
Fallspouts and eaves gutters repaired	...	...	119
Fallspouts disconnected from drains	...	...	6
Yards and passages repaved or repaired	...	...	83
Outbuildings repaired	...	...	45
Obstructive buildings demolished	...	...	4
Rainwater tanks abolished...	...	...	3

Water Supply.

Samples of water submitted for analysis	...	...	5
Houses connected to public supply mains in lieu of unsatisfactory supplies from wells	...	...	31
Other internal supplies provided	...	...	4
Water supplies repaired or renewed	...	...	46
Wells filled in	...	...	2

Drainage, closet accommodation etc.

New drains constructed	...	...	81
Additional gullies provided	...	...	23
Drains reconstructed	...	...	45
Drains repaired or cleansed	...	...	92

Drains ventilated	...	...	...	11
New inspection chambers provided	...	...	...	21
Inspection chambers repaired	...	...	...	16
Sinks and washbasins provided	...	...	...	45
Baths provided	...	...	...	4
Waste pipes provided or repaired	...	...	...	59
Soil pipes provided or repaired	...	...	...	10
Ventilating pipes repaired	...	...	...	8
Urinals repaired	...	...	...	2

Conversions, Water Closets, Ashpits, Dustbins and Outfall Works.

Privies converted to water closets	...	...	...	9
Pail closets to water closets	...	...	...	1
Waste closets to water closets	...	...	...	1
Additional water closets provided	...	...	...	18
Water closets reconstructed	...	...	...	16
Water closets repaired	...	...	...	65
Pails renewed	...	...	...	4
Wet ashpits abolished	...	...	...	5
Dry ashpits abolished	...	...	...	2
Cesspools and septic tanks provided	...	...	...	4
Outfalls works improved	...	...	...	2
Dustbins provided and renewed	...	...	...	269

Common Lodging Houses.

On register	...	...	...	1
Application for registration	...	...	...	1
Rooms used for sleeping	...	...	...	9
Lodgers accommodated nightly	...	...	...	43
Inspections	...	...	...	10

Eradication of Bedbugs.

Number of houses infested...	...	...	...	12
(a) Council houses	...	...	...	2
(b) Other houses	...	...	...	10
Number of houses disinfested	12

Other Vermin (Cockroaches, etc.)

Number of houses disinfested	68
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Insecticide (with D.D.T. content) is sprayed in all affected rooms.

Slaughter Houses.

Central slaughtering is carried out at Retford, but in order to provide slaughtering accommodation for private pig breeders, local butchers owning slaughterhouses in the Borough apply annually for the renewal of their slaughterhouse licences.

Annual licences renewed during the year	...	16
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Slaughter of Animals Act, 1933.

Number of applications for licences	...	2
Number of applications for renewal of licences	...	7
Number of licences granted	...	9

Offensive Trades.

Number of applications for renewal of consent	...	3
Number of consents granted for period of 1 year	...	3

Milk Supply.

Number of registered milk producers at 31. 12. 48.	...	23
" " " " retailers " "	...	30
" " inspections (a) Producers	...	79
(b) Retailers	...	79
Number of defects or unsatisfactory conditions found and remedied		
(a) Producers	...	8
(b) Retailers	...	5

Milk (Special Designations) Orders.

Number of licences granted:-

(a) for production and sale of Pasteurised Milk	...	1
(b) for sale of Pasteurised Milk	...	3
(c) for sale of Tuberculin Tested Milk	...	2
Number of samples of milk submitted for examination	...	21

All samples were satisfactory.

Inspection of other foods.

The following foodstuffs and tinned meat, glass and packet goods, fish, fruit, vegetables, eggs, jams, cakes, puddings, etc., were surrendered as unfit for human consumption:-

Meat	...	287 lbs.	Mixed Vegetables	13 lbs.
Sausage	...	25 "	Spaghetti	11 "
Bacon	...	6 "	Cherries	120 "
Lard	...	20 "	Apples	26 "
Margarine	...	40 "	Damsons	12 "
Butter	...	2 "	Grapefruit & Juice	80 "
Cheese	...	23 "	Oranges & Juice	38 "
Eggs	...	44 "	Dates, Figs & Prunes	74 "
Flour	...	38 "	Peaches & Apricots	60 "
Oatmeal & Barley	...	11 "	Plums, Pears, etc.	41 "
Peas	...	377 "	Golden Syrup	14 "
Beans	...	72 "	Jam and Marmalade	83 "
Beetroot	...	31 "	Cakes, Sponge Puddings	-
Tomatoes	...	423 "	Picklets, Crumpets and	
Tomato Juice & Paste	...	171 "	Mixtures	413 "
Onions	...	9 "	Tinned Milk	271 "
Assorted Pickles	...	56 "	Tins & Jars (Mixed)	31 "
Cucumber	...	16 "	Fish	1,403 "
Soups	...	47 "		

PUBLIC CLEANSING.

Details of collection and disposal during year April 1948 - March 1949.

No. of dustbins emptied	418,454
No. of dry ashpits emptied	53
No. of wet ashpits emptied	125
No. of pail closets emptied	4,724
No. of cesspools emptied	119
	<u>423,475</u>

No. of loads removed by S.D. Freighters	2,804
" " " " " Dennis vehicle	1,233
" " " " " Karrier "	1,047
" " " " " Ford "	913
	<u>5,997</u>

No. of loads deposited on Gateford Road	
Tip	1,509
" " " " " Sandy Lane Tip	3,033
" " " " " Lady Lea Tip	43
" " " " " Fields	386
" " " " " in Public Sewers	113
" " " of soil for covering purposes	-
" " " to Paper Shed	913
Total	<u>5,997</u>

The services of the Cleansing Department were extended to 198 new and other premises during 1948, situate at Pelham Street (29), Shrewsbury Road (27), Howard Street (8), Lincoln Street (6), Netherton Road (1), Retford Road (1), Shepherds Avenue (15), Kilton Hill (3), Richmond Road (1), Wingfield Avenue (4), Shireoaks Common (9), Leeds Road (27), Pembroke Road (11), Cornwall Road (10), Vessey Road (7), York Place (15), Lime Grove (5), Chesterfield Road (1), Stubbin Lane (1).

Privies converted into W.C.s.	...	1,415
Pail closets converted into W.C.s.	...	60
Waste water closets converted into W.C.s....		1
Privies converted into pail closets	...	6
Wet ashpits abolished	...	930
Dry ashpits abolished	...	1,676
Pail closets abolished	...	12
Privies abolished	...	1,615
Portable dustbins provided	...	8,445

Number of privies	...	71
Number of pail closets	...	62
Number of wet ashpits	...	55
Number of dry ashpits	...	26
Number of cesspools	...	60
Number of water closets	...	8,908

	£.	s.	d.	£.	s.	d.
Gross expenditure				10,726.	1.	-

Rents of properties etc.	329.	6.	11.
Sale of engine	30.	19.	-.

<u>Salvage</u>	tons.	cwts.	qrs.	lbs.			
Waste Paper	305	2	2	14	2,044.	9.	8.
Kitchen Waste	45	13	3	-	113.	19.	8.
Waste Bones	1	12	2	-	9.	6.	8.
Textiles	4	1	1	17	62.	-.	5.
Bottles	-	10	1	-	9.	17.	-.
Scrap Iron	4	3	1	-	10.	6.	11.
Tyres	3	-	2	-	3.	-.	6.
String	-	3	2	-	1.	11.	6.
Non Ferrous Metals	-	4	3	-	11.	3.	9.
	<u>364</u>	<u>11</u>	<u>3</u>	<u>3</u>	<u>£2,626.</u>	<u>2.</u>	<u>-.</u>
						£2,626.	2. -.

Net cost	£8,099. 19. -.
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A scheme for the salvage of Waste Paper and Cardboard was inaugurated in October, 1936.

From November 1939 to 31st March, 1949, 4,013 tons. 5 cwt. 21 lbs. of salvage of all types, having a total value of £18,986. 7s. 5d. have been recovered and returned to industry.

Included in this total, the recovery of Waste Paper amounted to 2,373 tons. - cwt. 66 lbs. with a value of £15,137. 11s. 8d.

Rat and Mouse Destruction - Infestation Order, 1943.

During the year, your Rat Catcher's operations included the investigation and dealing with complaints of minor infestations.

The banks of the River Ryton, and streams, sewers, sewage disposal works and lands, tips, allotments, etc. have all received attention and have produced good results in some sections.

His activities have proved beneficial to the Borough and throughout his 972 visits he has destroyed and collected 1,831 rats and 187 mice.
