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Annual Report

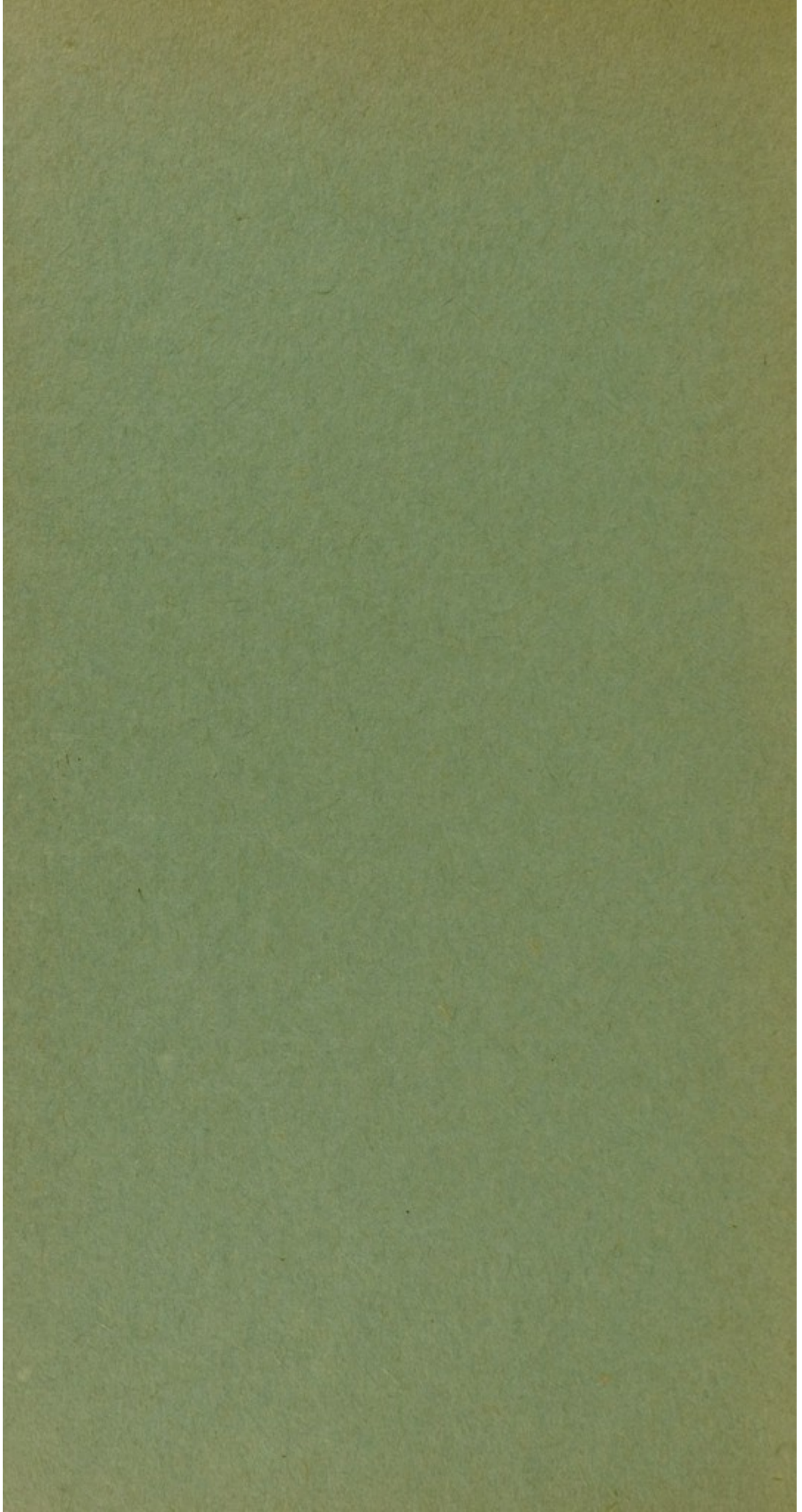
of the

Public Health Services

of the Borough of Brighouse

1952

FRANK APPLETON, M.B., Ch.B., D.P.H.,
Medical Officer of Health.



Borough of



Brighouse

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THE JOURNAL OF THE

ROYAL SOCIETY OF MEDICINE

AND ITS AFFILIATED SOCIETIES

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Borough of Brighouse

Health and Cleansing Committee

(As at December 31st, 1952).

His Worship the Mayor :
Councillor G. TURNER, M.C., J.P.

Chairman :
Councillor L. KAYE, B.Sc.

Vice-Chairman :
Alderman G. A. STILLINGFLEET.

Alderman	HINCHLIFFE.	Councillor	GREEN.
"	TATTERSALL.	"	HARRISON.
"	WHITELEY, C.B.E.	"	HULME.
Councillor	BINNS.	"	REDFEARN.
"	ENRIGHT.		

MATERNITY AND CHILD WELFARE SUB-COMMITTEE.

His Worship the Mayor : Councillor G. TURNER, M.C., J.P.

Councillor L. KAYE, B.Sc. (Chairman).

Alderman G. A. STILLINGFLEET (Vice-Chairman).

Alderman	TATTERSALL.	Mrs. S. BROOK.
"	WHITELEY, C.B.E.	" G. BROWN.
Councillor	ENRIGHT.	" M. PICKARD.
The Mayoress:	Mrs. G. TURNER	" P. L. WHITLEY

Health Department

PUBLIC HEALTH OFFICERS.

Medical Officer of Health :

F. APPLETON, M.B., Ch.B., D.P.H. Also Divisional Medical Officer, Division 18, West Riding County Council; Medical Superintendent, Clifton Ante-Natal Hostel.

Deputy Medical Officer of Health and Deputy Divisional Medical Officer :

Mrs. A. MARSHALL, M.B., Ch.B.

Assistant County Medical Officer for Division 18, West Riding County Council :

Mrs. M. S. GISBOURNE, M.B., Ch.B. (Appointed 1st October, 1952).

Orthopædic Surgeon :

**W. BARCLAY, M.C., F.R.C.S.

Ophthalmic Surgeons :

**R. W. GREATOREX, M.B., Ch.B.

**P. M. WOOD, M.B., Ch.B., D.O.M.S., F.R.C.P.

Dental Officer :

J. TODD, L.D.S.

Chief Sanitary Inspector and Cleansing Superintendent :

C. R. MOSS, M.B.E., F.Inst.P.C., F.S.I.A.

Ollett Gold Medallist—Sanitary Inspectors' Association.

Assoc. Mem. Inst. San. Engineers.

Cert. Royal Sanitary Institute.

Cert. Inspector of Meat and Foods.

Testamur Institute of Public Cleansing.

Deputy Chief Sanitary Inspector :

J. F. ASPINALL, M.S.I.A., A.M.Inst.P.C.

Cert. R.S.I. and S.I.J.E.B.

Cert. Inspector of Meat and Foods.

Diploma Institute of Hygiene.

Testamur Institute of Public Cleansing.

Additional Sanitary Inspectors :

- D. BROOK, M.S.I.A.
Cert. R.S.I. and S.I.J.E.B.
Cert. Inspector of Meat and Foods.
- N. N. MORRIS, M.S.I.A.
Cert. R.S.I. and S.I.J.E.B.
Cert. Inspector of Meat and Foods.
Diploma Royal Institute of Public Health & Hygiene.

Acting Senior Health Visitor :

- Miss M. LATIMER, S.R.N., S.C.M.
Health Visitor's Certificate.
Queen's Nurse.

Health Visitors :

- Miss N. BRIERLEY, S.R.N., R.F.N.
Health Visitor's Certificate.
- Miss M. C. CHRISTIE, S.R.N., S.C.M.
Health Visitor's Certificate.
Diploma Industrial Nursing.
- Miss L. P. TINKER, S.R.N.
Health Visitor's Certificate.
- Miss E. WALKER, S.R.N., S.C.M.
Health Visitor's Certificate.
Queen's Nurse.

School Nurse :

- Miss A. D. ANDERSON, S.R.N., S.C.M.

Assistant Health Visitors :

- *Mrs. M. ARMITAGE, S.R.N.
- *Mrs. I. HEPWORTH, S.R.N., S.C.M., R.F.N.

Midwives :

- Mrs. E. BRIGGS, S.R.N., S.C.M.
- Miss E. V. CROSSLEY, S.R.N., S.C.M., R.F.N.
- Mrs. N. FOSSARD, S.R.N., S.C.M., R.F.N.
- Miss M. E. THOMPSON, S.R.N., S.C.M.

Home Nurses :

- Miss O. SALISBURY, S.R.N.
- Mrs. F. SYKES, S.R.N.
- Miss A. TOLLAND, S.R.N., S.C.M.
- Miss A. WHITELEY, S.R.N., S.C.M.

Mental Health Social Worker :

- Miss E. C. WROE, S.R.N., S.C.M., R.M.N.
Health Visitor's Certificate.

Matron, Clifton Ante-Natal Hostel.

Miss K. McCORMICK, S.C.M.

Staff at Day Nurseries :

Miss M. CARROLL, Certificated Teacher.

Wellholme Park :

Miss M. E. SHEFFIELD, R.F.N., Matron.

Mrs. D. S. FREEMAN, S.R.N., S.C.M., Deputy Matron

Ogden Lane :

Miss V. M. CLARKE, S.R.N., S.C.M., Matron.

Mrs. I. BOOTH, N.S.C.N., Deputy Matron.

Holme House :

Miss D. BAILEY, C.N.N., Matron.

Mrs. R. M. PALMER, N.S.C.N., Deputy Matron.

These personnel were assisted by a staff of Certificated Nursery Nurses and Nursery Assistants.

Senior Clerk :

G. O. RICHARDSON.

Clerks :

Mrs. R. E. G. DAY.

Mrs. G. HURLEY.

Miss S. WALTON.

Mr. J. R. C. WELLS.

Miss C. WOOD.

School Health Service :

Miss I. HOLMES.

Miss M. TAYLOR.

Cleansing and Sanitary Section :

Mrs. M. STEAD.

Miss P. McKETTRICK.

Divisional Depot Superintendent, County Ambulance Service :

W. ANDERSON.

* Part time.

** Part time by arrangement with the Regional Hospital Board.

TO THE MAYOR, ALDERMEN AND COUNCILLORS OF THE BOROUGH OF BRIGHOUSE.

Mr. Mayor, Madam and Gentlemen,

I have the honour to present the Annual Report on the work of your Public Health Department for 1952.

The remarks in this report have this year been kept as brief as possible and the section on the Ante-Natal Hostel, applying as it does to the whole of the County, has been omitted, but I have included a report from the Mental Health Social Worker, and the usual statistical tables have all been included.

Once again I have to report a fall in the Birth Rate, and at 13.3 per 1,000 of the population it is the lowest recorded in post-war years.

The Death Rate also fell and there was an excess of births over deaths, giving a natural increase of population of 16, a figure that does not indicate that we are likely to grow very much in population with our existing boundaries.

The Infantile Death Rate was 22 and I am happy to report that the standard of child care in this Borough has continued to be high.

We have, of course, our Problem Families, in which the care of the children is most unsatisfactory. These families are few in number, and looking back over a period of years we can even record some improvement in most of them. The best way of eliminating them would appear to be their prevention. The important person in the prevention of a problem family is the mother. It is remarkable how little some women can obtain for how much income, just as it is remarkable how much most mothers can purchase for how little. These poor managers often themselves come from a family where they have not received the care and training which is customary in the good home ; much of this training is unconscious, and children just copy the good example of their mothers. It is interesting to watch children at play in the Day Nurseries, and to see the small fathers going to work and the small mothers getting on with their cooking and cleaning.

It is discouraging for a good and careful mother, who is only just managing on an income which she desires to supplement, to fail to secure admission to a Day Nursery for her children, when the children of other women whose husbands have higher earnings secure admission. Despite this, we have occasionally admitted children who belong to the families who are on the outer fringe of problem families, and so have helped the mother who is a bad manager to have a little more on which to manage. At the same

time, children are trained to eat proper food, and parents to provide it. I am quite sure that Day Nursery provision has prevented some families slipping back to dirt and degradation.

Day Nurseries are expensive and perhaps difficult to justify on economic grounds, as the persons employed might be used to occupy the posts the mothers fill, but they do enable us to care for the children of widows, illegitimate children, the children who live in sunless streets and the children whose homes are unsatisfactory, and at the same time allow the children to stay with their own parents instead of being removed to a residential establishment, however benevolent it may be.

Every female child of a problem family is herself a probable head of a future problem family. The males have more chance if they can succeed in marrying strong, capable women who have spirit and endurance.

Unfortunately, problem families are usually above the average size, and often have many credentials for rehousing by reluctant Housing Committees. Some people believe that these sub-standard families should go into sub-standard houses in this Borough, but no private owner would take willingly as tenants these families, and I believe that the only hope for the children to grow up as reasonable citizens is for the rehousing of these families in the ordinary Council house, placing them under constant surveillance. The established problem family is an almost insoluble problem, but the incipient problem family should, I believe, have every facility to have greater opportunity than a normal family.

We agreed with the Divisional Education Officer to arrange for Health Visitors to give Mothercraft training in the Senior Schools, when the Head Teachers were able to fit this into the school syllabus, and we have given this training in Elland and in Queensbury but not so far in Brighouse. I hope it will be possible for us to do so in the near future.

The most prevalent notified diseases in 1952 were Measles and Chickenpox, for neither of which have we any known prophylactic. There were no cases of Diphtheria notified during the year and there was a fall in the number of children immunised against this disease. It would be a great pity if the absence of cases led the public into a feeling of false security. At present our satisfactory position depends on a preponderance of immunised persons among the population at risk; if the present trend continues we shall no longer be in this happy position. There was an increased demand for Whooping Cough immunisation and a fall in the incidence of this disease.

Although the number of notifications of Pulmonary Tuberculosis was higher, probably due to better ascertainment, the number of deaths was less. The continual fall in the incidence and

severity of infectious diseases enabled the Halifax Hospital Management Committee to utilise part of Northowram Hall Hospital for Sanatorium purposes, and we no longer have the long delay in admissions for cases of this disease.

There were two cases of Anterior Poliomyelitis notified in the early Spring. They were unconnected sporadic cases and none occurred during the usual season of greatest prevalence.

This year we had our full establishment of Health Visitors and they were able to spend more time with individual cases. The importance of the work of the Health Visitors is increasingly recognisable and although like all educational work of a socio-medical character its benefits are intangible and unassessable by short-term standards of cause and effect, I consider that they are far the most important of our twentieth century social workers.

There are welcome signs that they, the general purposes socio-medical workers, are having closer associations with the general medical practitioners. Both these workers are the keystones of a health service, and both of them save the hospital services a great deal of money. It is perhaps unfortunate that they and the hospital services all come under a different body for administration. Both the family doctor and the family visitor have information of value to each other and the Health Visitor can receive and can give useful information as to the social habits and social conditions of the family. From her colleagues, the Mental Health Social Worker and the Tuberculosis Health Visitor, and from her knowledge as School Nurse, she often has a fund of information the usefulness of which is not always appreciated by the family doctor. On the other hand, his intimate relationship with the family which is usually closer than that of any other person, can frequently give the nurse important guidance in her approach to a problem.

It is my belief that these two field workers, who are the most important of all in the National Health Service, will come closer together despite their different administrative framework, and anything we can do in this Department to foster this co-operation will be done. Meanwhile, we appreciate the friendly relationship which exists in this town.

The work of the Family Doctor, the Health Visitor, the Home Nurse, the Home Help and the voluntary visitor from the club are all helping to make life more tolerable for the old people. The Association of voluntary bodies known as the Old People's Welfare Committee is now able to report that there are four new and flourishing clubs for old people in the area.

I wish that more could be done in the way of part-time employment of the old. The sudden change from a busy life to one without settled employment is too drastic, especially for those without hobbies. Old people have earned their retirement by their work,

but many of them would prefer a more gradual cessation of work, and do not welcome a greatly increased leisure with a greatly reduced income. This does not always apply, of course, and the decision should be theirs. It is much more difficult for employers to make arrangements when the decisions of their employees vary, but I hope that a scheme of gradual retirement will eventually be made possible by more and more firms.

There was less difficulty in the placing of old persons in hospitals and at the end of the year there was practically no waiting list, but there was a marked shortage of ground floor accommodation in the Welfare Homes provided by the West Riding County Council, and many of the old people whose disabilities prevented them going upstairs, had to wait for long periods of time.

The proper housing of the people continued to be the most important environmental problem. Already we can see ahead to the time when the Council will own one tenth of the houses in the Borough, and with the present pegged rents and high cost of repairs an extension of Council ownership would appear to be the only way of dealing with the problem alternative to allowing rent increases. It is indeed sad to reflect that as each new house goes up, other houses become less and less habitable.

The standard of living demanded in this decade is one family, one house, and we are still a long way from this, but I should feel happier if we were removing some of the completely out-moded houses. A house considered suitable during the period of the Industrial Revolution will just not do today, and perhaps it is better in some cases for two families to share one decent house, than for people to continue to live in worn-out and out-of-date houses.

It is a difficult problem; people are individuals, and individuals differ in their mental as well as their physical needs. It is impossible now-a-days for some women to share a kitchen without impairment of mental health, and re-housing requires a psychological as well as a physical approach. But, of course, it is useless to tell an applicant that, although a neighbour's family is less overcrowded, his needs are greater because his wife is less adaptable.

A short period spent in the office of a Housing Manager, or even in the office and clinics of a Medical Officer of Health, would furnish any reasoning citizen with grounds for the belief that shortage of proper housing accommodation alone is not only responsible for minor irritation, but is a disrupting influence on the whole family. This problem includes such aspects as two women in one kitchen, no place where the father can relax alone in his own home after a heavy day's work, no place where washing and clothes drying can take place without interfering with the family's comfort, and no place where parents and children can be bathed without inconvenience to other members of the family as well as the bather.

Perhaps still more important, there is usually no real privacy for the young married couple away from children and relations, where they can discuss and resolve their own individual problems together.

It cannot be wondered at that parents and children—young and adult—seek recreative activities outside the home, and the various activities for youth, and the working men's clubs play an important and useful part in avoiding maladjustment. It is perhaps a tribute to human resilience that there is not more of it.

These problems are worse in an industrial district where smoke and dirt are constant enemies. As more and more estates are built with houses properly spaced and fitted with grates capable of more complete combustion, the problem of domestic smoke at least will become less serious, and there is no doubt that domestic smoke forms a large part of our atmospheric pollution problem.

Meanwhile, regular observations were taken during 1952 and particulars of these and of the extent of pollution measured by the recording instruments are contained in this Report. I hope that we shall be able to record substantial progress in this direction year by year.

It is a matter for congratulation that we are a small town surrounded by hills and that often people can at least escape the fog when they go to their homes, but we were glad to learn that the London "smog" had encouraged the Government to take an interest in this most important environmental problem.

Once again I can report no major outbreak of food poisoning in this Borough, and the food preparation premises continue to have careful supervision, but the human element is still the most important factor and the importance of the cleanliness of food handlers cannot be stressed too often.

In conclusion I should like to thank you, Mr. Mayor, Mr. Chairman, Madam and Gentlemen for the keen interest you take in our work. The Town Clerk and the other Chief Officials have continued to give us willing help on many occasions. The interest taken in our work is stimulating and has helped to sustain the efforts of an extremely loyal and hardworking staff, of whose efforts this report can only give a bare outline.

I have the honour to be, Mr. Mayor, Madam, and Gentlemen,

Your obedient servant,

FRANK APPLETON,

Medical Officer of Health.

October, 1953.

Annual Report of the Medical Officer of Health for the Year 1952

STATISTICS AND SOCIAL CONDITIONS OF THE AREA.

AREA (in Acres)	7,875
POPULATION: Census 1931, 30,401. 1952 (est.)	30,420
AVERAGE NUMBER OF PERSONS PER ACRE	3.9
NUMBER OF INHABITED HOUSES	10,908
AVERAGE NUMBER OF INHABITED HOUSES PER ACRE	1.39
AVERAGE NUMBER OF PERSONS PER HOUSE	2.8
RATEABLE VALUE	£170,892
PRODUCT OF A PENNY RATE	£686

The textile depression which occurred at the end of 1951, and resulted in over 500 persons claiming unemployment benefit at the end of that year, continued during the first three months of 1952, and the figures of unemployed were higher than for 15 years, but by the middle of the year it had almost completely disappeared, and trade in general was very much improved at the end of the year. As it was, the textile depression affected principally the part time workers, and there was very little unemployment among full time workers. At the end of 1952, 21 men and 38 women were totally unemployed, and 14 men and 5 women were temporarily unemployed.

I am indebted to the Manager of the Local Employment Exchange for this information.

EXTRACTS FROM VITAL STATISTICS FOR THE YEAR.

Live Births—	M.	F.	Totals
Legitimate	189	199	388
Illegitimate	8	8	16
Total	197	207	404

Live Birth Rate : 13.3 per 1,000 of estimated resident population.

Still Births—	M.	F.	Totals
Legitimate	7	2	9
Illegitimate	—	—	—
Total	7	2	9

Still Birth Rate per 1,000 total (live and still) births 21.8.

Deaths—	M.	F.	Totals
	196	192	388

Crude Death Rate : 12.8 per 1,000 of estimated resident population.

Adjusted Death Rate : 11.7 „ „ „ „

Deaths from Maternal Causes—	Deaths	Rate per 1,000 total (live & still) Births
Puerperal Sepsis	—	—
Other Maternal Causes	—	—
Total	—	—

Death Rate of Infants under one year of age—	
All Infants per 1,000 live births	22.3
Legitimate Infants per 1,000 legitimate live births	23.2
Illegitimate Infants per 1,000 illegitimate live births	—

Deaths from Diseases of the Heart and Circulation (all ages)	152
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Deaths from Cancer (all ages)	74
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Deaths from Measles (all ages)	—
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Deaths from Whooping Cough (all ages)	1
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TABLE 1.

BIRTH RATES, CIVILIAN DEATH RATES, ANALYSIS OF MORTALITY, MATERNAL MORTALITY and CASE RATES FOR CERTAIN INFECTIOUS DISEASES IN THE YEAR 1952 for England and Wales, London, 160 Great Towns, 160 Smaller Towns and Brighouse.

(Provisional Figures based on weekly and quarterly Returns).

	England and Wales	160 County Boro's and Great Towns (including London)	160 Smaller Towns (Resident Populations 25,000 to 50,000 at 1951 Census)	London Administrative County	Brighouse
Births—					
Rates per 1,000 Home Population					
Live Births ...	15.3	16.9	15.5	17.6	13.3
Still Births ...	(0.35	0.43	0.36	0.34	0.30
	(22.6(a)	24.6(a)	23.0(a)	19.2(a)	21.8(a)
Deaths—					
All Causes ...	11.3	12.1	11.2	12.6	12.8
Typhoid and paratyphoid ...	0.00	0.00	0.00	—	—
Whooping Cough ...	0.00	0.00	0.00	0.00	0.03
Diphtheria ...	0.00	0.00	0.00	0.00	0.00
Tuberculosis ...	0.24	0.28	0.22	0.31	0.13
Influenza ...	0.04	0.04	0.04	0.05	0.00
Smallpox ...	0.00	—	—	—	—
Acute poliomyelitis (including poliomyelitis) ...	0.01	0.01	0.00	0.01	0.00
Pneumonia ...	0.47	0.52	0.43	0.58	0.26
Notifications (corrected)—					
Typhoid Fever ...	0.00	0.00	0.00	0.00	0.00
Paratyphoid fever ...	0.02	0.02	0.03	0.01	0.00
Meningococcal infection ...	0.03	0.03	0.03	0.02	0.00
Scarlet fever ...	1.53	1.75	1.58	1.56	1.31
Whooping Cough ...	2.61	2.74	2.57	1.66	3.22
Diphtheria ...	0.01	0.01	0.03	0.01	0.00
Erysipelas ...	0.14	0.15	0.12	0.14	0.03
Smallpox ...	0.00	0.00	0.00	—	—
Measles ...	8.86	10.11	8.49	9.23	15.41
Pneumonia ...	0.72	0.80	0.62	0.57	0.99
Acute poliomyelitis (including poliomyelitis) :					
Paralytic ...	0.06	0.06	0.06	0.06	0.06
Non-paralytic ...	0.03	0.03	0.02	0.03	0.00
Food Poisoning ...	0.13	0.16	0.11	0.18	0.00
Puerperal pyrexia ...	17.87(a)	23.94(a)	10.22(a)	30.77(a)	0.00

		Rates per 1,000 Live Births				
Deaths—						
All causes under 1 year of age ...	27.6(b)	31.2	25.8	23.8	22.3	
Enteritis and diarrhoea under 2 years of age ...	1.1	1.3	0.5	0.7	0.00	

MATERNAL MORTALITY IN ENGLAND AND WALES.

	Rates per 1,000 Total (Live and Still) Births	Brighthouse
Sepsis of pregnancy, childbirth and the puerperium ...	0.09	—
Abortion with toxæmia	0.02	—
Other toxæmias of pregnancy and the puerperium ...	0.21	—
Hæmorrhage of pregnancy and childbirth	0.09	—
Abortion without mention of sepsis or toxæmia ...	0.04	—
Abortion with sepsis ...	0.07	—
Other complications of pregnancy, childbirth and the puerperium	0.02	—

(a) Per 1,000 Total (Live and Still) Births.

(b) Per 1,000 related Live Births.

TABLE 2.

CAUSES OF DEATH OF BRIGHOUSE RESIDENTS IN 1952.

Causes of Death.					M.	1952. All Ages. F.	Total.
1.	Tuberculosis—respiratory	...	...	...	4	—	4
2.	Tuberculosis—other	...	...	...	—	—	—
3.	Syphilitic disease	...	...	...	1	—	1
4.	Diphtheria	...	...	...	—	—	—
5.	Whooping Cough	...	...	...	—	1	1
6.	Meningococcal infections	...	...	...	—	—	—
7.	Acute poliomyelitis	...	...	...	—	—	—
8.	Measles	...	...	...	—	—	—
9.	Other infective and parasitic diseases	...	...	...	—	1	1
10.	Malignant neoplasm stomach	...	...	...	9	2	11
11.	Malignant neoplasm lung, bronchus	...	...	...	13	2	15
12.	Malignant neoplasm breast	...	...	...	—	12	12
13.	Malignant neoplasm uterus	...	...	...	—	5	5
14.	Other malignant and lymphatic neoplasms	...	...	...	18	13	31
15.	Leukæmia, aleukæmia	...	...	...	—	1	1
16.	Diabetes	...	...	...	—	4	4
17.	Vascular lesions of nervous system	...	...	...	28	34	62
18.	Coronary disease, angina	...	...	...	25	18	43
19.	Hypertension with heart disease	...	...	...	4	7	11
20.	Other heart disease	...	...	...	34	41	75
21.	Other circulatory disease	...	...	...	9	14	23
22.	Influenza	...	...	...	—	—	—
23.	Pneumonia	...	...	...	2	6	8
24.	Bronchitis	...	...	...	14	9	23
25.	Other diseases of respiratory system	...	...	...	4	2	6
26.	Ulcer of stomach and duodenum	...	...	...	3	1	4
27.	Gastritis, enteritis and diarrhœa	...	...	...	—	—	—
28.	Nephritis and nephrosis	...	...	...	3	2	5
29.	Hyperplasia of prostate	...	...	...	4	—	4
30.	Pregnancy, childbirth, abortion	...	...	...	—	—	—
31.	Congenital malformations	...	...	...	—	2	2
32.	Other defined and ill-defined diseases	...	...	...	10	11	21
33.	Motor vehicle accidents	...	...	...	3	—	3
34.	All other accidents	...	...	...	3	2	5
35.	Suicide	...	...	...	5	2	7
36.	Homicide and operations of war	...	...	...	—	—	—
Totals					196	192	388

VITAL STATISTICS

The estimate of the population of Brighouse is the mid-year estimate of the Registrar General. His estimate is 30,420 compared with the mid year estimate of 30,500 for 1951. He considers, therefore, that our population has decreased by 80. There were 404 births and 388 deaths, so that there was a natural increase of population.

Birth Rate.

The birth rate for the year is 13.3 per 1,000 of the population. This is 1.4 below the rate for the previous year, 2.0 below the rate for England and Wales, 2.2 below the rate for the 160 Small Towns, and 2.1 below the rate for the West Riding Administrative County. It is the lowest birth rate we have had in the post-war years.

There were 16 illegitimate births, representing 3.9 per cent. of the total live births, and an illegitimate birth rate of 0.53 per 1,000 of the estimated population.

During the year there were 9 stillbirths, none of which were illegitimate. This gives a stillbirth rate of 21.8 per 1,000 (live and still) births, as compared with 24.5 for the Administrative County of the West Riding of Yorkshire and 28 for this town last year. This is 0.30 per thousand of the population, this figure being comparable with the rate based on the population of England and Wales, which is 0.35.

Death Rate.

The death rate for the Borough is 12.8 per 1,000 of the population. To compare the death rate with any degree of accuracy with that of the Country as a whole it is necessary to adjust the crude death rate by multiplying it by the area comparability factor. Every district varies as to the distribution of population among the sexes and in age ranges. The area comparability factor is an attempt to standardise our sex and age range with that of the Country as a whole. Our area comparability factor is 0.92, which means that with our present sex and age range the crude death rate has to be adjusted downwards to bring it into line with the Country as a whole, and our corrected death rate is 11.7, which is slightly above that for England and Wales (11.3), but below that for the Administrative County (12.3).

The chief causes of death this year were, in order of frequency :—

1. Diseases of the Heart and Circulation — 152 (compared with 189 in 1951).
2. Cancer—74 (compared with 56 in 1951).
3. Vasc. Lesions of Nervous System—62 (compared with 64 in 1951).
4. Pneumonia, Bronchitis, Influenza and other respiratory diseases—37 (compared with 62 in 1951).

Infant Deaths.

Nine children under one year of age died during the year. None of these children were illegitimate.

The infantile mortality rate, or the death rate of infants under one year of age per 1,000 live births, is 22.3. This is the lowest rate in the history of the Borough, and compares favourably with last year's rate of 24.4. It can also be compared with this year's rate for the West Riding Administrative County, which is 30.1, the rate for the 160 Small Towns (25.8) and the rate for the Country as a whole (27.6).

It must be remembered, however, that only one more death would have a considerable influence when we are dealing with such small figures, and it would be wrong to attach a great deal of significance to the fact that our infantile death rate is so low, unless we take it over a number of years. As I remarked last year, it is only since 1949 that this rate has been in the twenties, and during the last four years it has never been higher than 25. This, I think, does point to a very favourable trend in our vital statistics.

Particulars of the deaths of children under one year of age are appended below, and last year's figures are given in brackets :—

- 4 (2) under 24 hours (2 males, 2 females).
- 2 (6) between one day and seven days (males).
- (1) between one month and three months.
- 3 (2) between three months and nine months (1 male, 2 females).

A table is inserted giving particulars of all the infant deaths, tabulated as to cause and time of survival, and according to the time of year in which the child died.

TABLE 3.
CAUSES OF INFANTILE MORTALITY IN BRIGHOUSE
BOROUGH, 1952.

Cause of Death.	1 day and under.														
	1 day and under.	2—7 days.	8—14 days.	15—21 days.	22—28 days.	In first month.	2—3 months.	4—6 months.	7—9 months.	10—12 months.	In first year.	1st Quarter.	2nd Quarter.	3rd Quarter.	4th Quarter.
Prematurity	3	1	—	—	—	—	—	—	—	—	4	2	2	—	—
Congenital Malformations	1	—	—	—	—	—	—	—	—	—	1	—	1	—	—
Broncho-Pneumonia	—	1	—	—	—	—	—	2	—	—	3	2	—	1	—
Whooping Cough	—	—	—	—	—	—	—	—	1	—	1	1	—	—	—
Totals	4	2	—	—	—	—	—	2	1	—	9	5	3	1	—

Premature Births.

There were 32 children born prematurely during the year. Four of these were born at home, two of whom survived. Of the 28 children born in hospital 26 survived.

A table is appended giving details of the premature births.

TABLE 4.

TABLE SHOWING BIRTH WEIGHTS OF PREMATURE INFANTS.

Domiciliary Confinements.

Birth Weight, lbs. ozs.	No. of Infants.	No. of Infants who survived		
		24 hours.	2—7 days.	1 month.
3 —	2	1	—	—
4 12	1	1	1	1
5 8	1	1	1	1
Totals ...	4	3	2	2

Institutional Confinements.

Birth Weight, lbs. ozs.	No. of Infants.	No. of Infants who survived		
		24 hours.	2—7 days.	1 month.
1 4	1	—	—	—
3 2	1	1	1	1
3 4	2	2	2	2
3 5	1	1	1	1
3 6	2	2	2	2
3 12	1	1	1	1
3 15	1	1	1	1
4 —	1	—	—	—
4 6	1	1	1	1
4 8	2	2	2	2
4 11	1	1	1	1
4 15	1	1	1	1
5 —	1	1	1	1
5 2	1	1	1	1
5 3	3	3	3	3
5 5	2	2	2	2
5 6	1	1	1	1
5 7	2	2	2	2
5 8	3	3	3	3
Totals ...	28	26	26	26

Maternal Deaths.

There were no maternal deaths in this Borough during 1952.

TABLE 5.

COUNTY AMBULANCE SERVICE. DIVISION 18.

Return of patients carried for the year 1952.

	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total
Patients													
(a) Admissions	158	152	163	158	194	141	154	142	154	166	147	178	1907
(b) Discharges	46	74	49	48	61	38	72	55	50	49	57	88	687
(c) Transfers	10	16	9	9	15	7	5	9	6	8	2	14	110
(d) Out-Patients	845	705	750	713	689	791	833	752	898	896	913	806	9591
(e) Accident Patients	19	14	16	24	24	20	28	34	21	15	14	24	253
Total No. of Patients	1078	961	987	952	983	997	1092	992	1129	1134	1133	1110	12548
Analysis of Patients													
Males	460	392	401	367	390	445	451	475	500	466	486	470	5303
Females	618	569	586	585	593	552	641	517	629	668	647	640	7245
Stretcher Cases	208	195	207	223	247	158	208	199	190	216	191	237	2479
Sitting children	870	766	780	729	736	839	884	793	939	918	942	873	10069
Children	45	63	72	70	71	73	85	69	118	94	86	71	917
Further Analysis of Total Patients in Part 1 above less (d) and (e).													
Urgent	58	44	28	54	64	41	51	46	51	54	65	80	636
Maternity	29	24	29	31	28	27	32	31	37	32	18	28	346
Infectious	4	4	2	4	1	1	1	4	8	-	6	5	40
Mental	2	2	-	5	-	-	1	1	1	1	1	1	15
General Patients	121	168	162	121	177	117	146	124	113	136	116	166	1667
Journeys	322	302	287	308	323	280	315	277	321	336	310	326	3707
Miles	8006	6942	7001	6710	7579	6600	7570	6555	7764	7873	7214	7320	87134

GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA.

Laboratory Facilities.

The Public Health Laboratory, Wakefield, continues to receive clinical material and water samples for bacteriological examination, while chemical analysis is carried out by Messrs. F. W. Richardson, and A. Jaffe, Bradford, the County Analysts.

Divisional Ambulance Service.

I append opposite particulars of the cases transported during the year. This Table is drawn up in accordance with the standard information suggested by the Ministry of Health, and gives rather fuller information than that provided in 1951. The number of cases carried shows an increase on last year. This Table applies, of course, to the whole Division. It has not been found possible to split up the Divisional figures to give the figures for the Borough of Brighouse alone.

Nursing in the Home.

The same team of nurses has been responsible for the Home Nursing Service in the Brighouse Borough, Miss Whiteley being the nurse in charge of the Hipperholme area, Mrs. Sykes of the Rastrick and Southowram areas, Miss Tolland of the Clifton area and part of Brighouse, and Miss Salisbury for the Brighouse area.

Altogether, 7,525 individual visits were made to patients and 376 new cases were treated during the year. In all areas there was an increase in the number of visits made.

The gradual ageing of the population has resulted in an increased demand for home nursing attention among the old. With the sulphonamides and anti-biotics the emphasis in home nursing has shifted from the more spectacular acute nursing to the nursing of the chronic sick. This work is very exacting and very important, but it does not make the same dramatic appeal. It has meant that the Home Nurse is now visiting more cases regularly and is serving a larger proportion of the population. I do not think it is generally realised how much the Home Nurse contributes to the happiness and comfort of old people.

Domestic Help Service.

The demand for Home Helps for domestic cases continues to increase, but the demand for maternity cases has decreased somewhat, and the fall in the number of maternity cases provided with a Home Help is greater proportionately than the fall in the number of domiciliary confinements. During the year, Home Helps were provided in 49 maternity cases as compared with 65 last year, and in 163 domestic cases as compared with 123 in 1951.

During the first six months of 1952 the district had not recovered from the textile depression, and in common with the end of 1951 we were able to obtain a sufficient number of Home Helps to supply all our needs, and the number of hours worked was running well over our establishment. We were grateful that the County Council were able to increase the establishment, but even with the increase, if the rate of employment had continued we should still have exceeded it. It was noteworthy that when everyone was provided with a Home Help the demand for the services of Home Helps was particularly active.

In June the position had changed, and had gradually deteriorated, many of our best Home Helps drifting back to the textile industry, in which they were skilled, and by the end of the year we were no longer able to provide Home Helps in all the cases that required them, and had fallen back to our usual position in this area, where there is a shortage of female labour.

During the period when female labour was obtainable to meet all demands, there was a tendency for the services of a Home Help to be called upon by relatives who had time to carry out the work themselves. We feel that it is our duty to watch this position; if the "Welfare State" is to succeed it is essential that it should not be exploited, and although it is our endeavour to help the community in every way possible, an intelligent and co-operative spirit is required by the members of the community. We should be very sorry to see any increase in the tendency for people to pass on to us responsibilities that properly belong to themselves.

Clinics and Treatment Centres.

The Table of Clinics and Treatment Centres is appended opposite.

TABLE 6. CLINICS AND TREATMENT CENTRES.

Name.	Situation.	When Open.
Child Welfare Clinic	Huddersfield Road ...	Wednesdays, 2-4 p.m. Thursdays, 2-4 p.m.
do.	Wesleyan School, Hipperholme ...	Mondays, 2-4 p.m.
do.	St. Annes-in-the-Grove, Southowram	Thursdays, 3-4 p.m.
Combined Ante-Natal and Post-Natal Clinics	Huddersfield Road ...	Tuesdays, 2-4 p.m.
do.	Wesleyan School, Hipperholme ...	Fridays, 2-4 p.m.
do.	St. Annes-in-the-Grove, Southowram	Thursdays, 2-3 p.m.
do.	Brook House, Atlas Mill Road ...	Mondays, 2.45 p.m. Thursdays, 10.45 a.m.
Artificial Sunlight Clinic	...	School Children, Mondays, 2 p.m. Thursdays, 10 a.m.
do.	Wesleyan School, Hipperholme ...	Mondays, 11 a.m.-12.30 p.m. Fridays, 2-4 p.m.
do.	St. Annes-in-the-Grove, Southowram	Mondays and Thursdays, 9.30 a.m.
*Diphtheria and Whooping Cough Immunisation Clinic	Huddersfield Road ...	Fridays, 11 a.m.
Vaccination Clinic	Huddersfield Road ...	Fridays, 11 a.m.
do.	Wesleyan School, Hipperholme ...	By appointment.
do.	St. Annes-in-the-Grove, Southowram	By appointment.
Minor Ailments Clinic	Brook House, Atlas Mill Road ...	Every weekday at 9 a.m.
do.	Wesleyan School, Hipperholme ...	Mondays, 9.30-10.30 a.m.
do.	St. Annes-in-the-Grove, Southowram	Thursdays, 9.30-10.30 a.m.
Dental Clinic	Bonegate House, Bradford Road ...	By appointment.
Remedial Exercises Clinic	Brook House, Atlas Mill Road ...	Tuesdays, 1.45 p.m.
Ante-Natal and Post-Natal Exercises Clinic	Brook House, Atlas Mill Road ...	Tuesdays, 2 p.m.
Tuberculosis Dispensary	Royal Halifax Infirmary ...	Mon., Tues. & Wed., 9.15 a.m. to 12 noon.
Venereal Diseases Clinic	Royal Halifax Infirmary ...	Thurs. 2.30-7 p.m.
do.	York Place, New North Road, Huddersfield ...	Mon. 2-4 and 5-7 p.m.
	...	Wed. 10 a.m.-12 noon and 2-4 p.m.
	...	Fri. 2-4 and 5-7 p.m.
Consultant Clinics, Ear, Nose and Throat, Ophthalmic & Orthopædic	Brook House, Atlas Mill Road ...	By appointment.
Orthoptic Clinic	Brook House, Atlas Mill Road ...	Bi-weekly (by appointment).

* This is also carried out at the ordinary Child Welfare sessions.

MATERNITY AND CHILD WELFARE.

Health Visitors.

Since the formation of the Divisional Health Service the Health Visitors have had an increasing field of service. With the National Health Service Act they became responsible for helping and advising every member of the family. Although the birth rate has fallen, the number of old people in the community has increased, and particularly the number who require help.

The Midwife and Home Nurse have definite clinical duties to perform, duties which can be reasonably well assessed in basis of time, but the Health Visitor's work is, of course, primarily educational in nature, and to obtain its full value the time spent on individual cases varies tremendously. Mothers who regularly attend the clinic and perhaps have experience with other children, and whose child makes uninterrupted progress, need very much less advice than the mother who has had no previous children, who cannot or will not attend the Child Welfare Centre regularly, or has a baby who takes his feed with difficulty or does not make the progress which is expected.

The old person who is surrounded with loving relatives or who has graciously accepted old age and performs the household tasks which are within her capacity, using the services of Home Helps, friends or neighbours to supplement these, and has adapted herself to her environment and her capabilities within that environment, takes up very much less of the Health Visitor's time than the old person who has not yet accepted the decrease in vigour, the reduction in physical reserve, or the loss of concentration, and perhaps memory, which often accompanies old age. The old person who worries, who never believes that anyone else can do things quite so well as herself, and is, to some degree, unreconciled to growing old gracefully, takes up much more of the Health Visitor's time. Time is often no object to the old, and work among the old and with the young mother cannot be rushed.

We are told that we live in a Welfare State, which surely means that the State has now accepted responsibility for its weaker members, and of all the services offered by the State through its Local Authorities, the Health Visiting Service is the one that particularly helps those less capable of helping themselves. In this, the Health Visitors are helped to a large extent by the Home Nursing and Home Help Services.

The co-operation of the Health Visitors with the other members of the public health team is excellent, and the Home Nurses and Midwives regularly consult the Health Visitors about their difficulties. The Health Visitor also forms a link with the schools through her work as school nurse.

Perhaps the most important work for the Health Visitor of the future—work which is only just beginning—is her work with

the General Medical Practitioners. Our Health Visitors know, and are known to most of the Doctors in the town, but we could wish that they had more opportunity of co-operating. Many of the children who have a difficult home background are known by us as well as they are known by their own Doctor, and in some instances we can furnish useful information. Recently we have been asked by Consultants and by Doctors to give background reports on various cases, and occasionally we have been furnished by the Doctors with very useful information about social conditions which we can do a great deal to alleviate. It is felt that this co-operation could be extended very profitably to the good of the community.

Minor degrees of mental ill health are dealt with almost daily by the Health Visitors, but we have the services of a Mental Health Social Worker to deal with any really difficult cases.

TABLE 7.

Visits paid by the Health Visitors in 1952.

First Visits to children under 1 year ...	...	...	...	...	...	409
Subsequent visits to children under 1 year ...	...	...	...	...	...	2,961
Visits to children 1 to 5 years ...	...	...	...	...	...	4,590
Visits to Expectant Mothers ...	...	...	...	...	...	192
Miscellaneous ...	...	...	...	...	...	2,509
Total ...						10,661

Ante-Natal Clinics.

Table 8 gives particulars of the attendances at the ante-natal clinics. Only 114 confinements took place at home, but 124 new expectant mothers attended our ante-natal clinics.

Since the National Health Service Act came into operation there has, of course, been a gradual falling off in attendances at the ante-natal clinics due to several reasons, the principal ones being the increasing number of patients who attend their own Doctors for ante-natal care and the increased use of the hospitals, but another important reason is the fall in the birth rate, and although the number of confinements taking place at home has been less, the proportion has been higher this year. Because of this falling off in attendances, the number of ante-natal sessions has been reduced.

Some of the mothers who attended our ante-natal clinics were delivered in the Halifax General Hospital, and some of those delivered at home received ante-natal care from their own Doctor. Several mothers attending our clinics also attended at intermediate times at the hospital or their own Doctor. It is an advantage for

all the patients being delivered at home to attend our ante-natal clinics, where they see their own Midwife who will deliver them, and, of course, they have the added advantage of meeting the Health Visitor and can discuss any of their problems with her before the baby is born.

It has been our practice to follow up all the babies born in this area and we have always included a Table to show the percentage of mothers having ante-natal care. For the first year since this has been done it is possible to report that every mother had some form of ante-natal care. Particulars of this are given in Table 9.

TABLE 8.

Attendances at the Ante-Natal Clinics.

	1948	1949	1950	1951	1952
Number of Sessions	157	148	150	127	119
Number of new expectant mothers ...	182	134	159	144	124
Total number of individual expectant mothers	222	196	211	191	176
Total number of attendances	1017	954	1012	829	731
Average number of patients per session	6.48	6.45	6.75	6.53	5.41

TABLE 9.

The Percentage of 413 Investigated Cases in which Medical Ante-Natal Care was given in 1952.

				Primiparae.		Multiparae.		All Mothers.	
				Number	Per Cent.	Number	Per Cent.	Number	Per Cent.
Cases investigated	...	...	...	169	—	244	—	413	—
Attended Brighthouse Ante-Natal Clinics	...	...	...	19	11.3	97	39.4	116	28.0
Attended Hospital Ante-Natal Clinics	...	...	...	106	63.1	80	32.5	186	45.0
Attended own Doctors ante-natally	...	...	...	44	25.6	67	28.1	111	27.0
Total who received medical ante-natal care				169	100.0	244	100.0	413	100.0

Relaxation Clinic.

Much of the educational work carried out in pregnancy is now done at Relaxation Clinics, where the mothers are given exercises and also taught to relax during labour. This clinic is useful because it is attended not only by mothers who attend our own Ante-Natal Clinics, but also by mothers who are to be delivered in hospital and mothers who go to their own doctor for ante-natal care.

This Clinic makes a special appeal to the more intelligent members of the community, who readily see the benefit of being taught the processes of labour. It is among the more intelligent women that fears, often groundless, are most prevalent. Imagination, founded on incomplete knowledge can result in the mother entering labour overwrought and apprehensive, and tense when she should be relaxed. Trained in the proper use of her muscles by the Midwife, who can also explain much of the process before the confinement, and meeting as she does other women who have had babies after instruction and are attending these classes just for refresher purposes, much of the fear can be removed, and already we are having better and better results from this clinic.

85 women attended the classes and made 607 attendances. 40 of these women were patients at the Ante-Natal Hostel.

There were also 31 patients who attended for post-natal exercises.

Post-Natal Attendances.

Only 59 women attended our post-natal clinics during the year. Most of the women having their first baby, however, were hospital cases and attended at the hospital post-natal clinic. It is indeed difficult to persuade the average mother who is having her second or subsequent baby that there is any necessity for her to receive an examination once the baby is born. The difficulties in her attendance are considerable, accompanied as she often has to be by her children, and although the attendances at the child welfare centres show that most mothers are prepared to make considerable efforts for the sake of their children they are not prepared to go to the same amount of trouble for themselves. This is unfortunate, as there is no doubt that a post-natal examination will often prevent a great deal of trouble later on.

It is estimated that just over half of all women who were confined had post-natal examinations. We shall not be happy until this figure is much higher.

Domiciliary Midwifery.

This year there were less births than last year, so we could again expect some falling off in our figures for domiciliary con-

finements. but although there were 50 less confinements there were only 23 less deliveries at home than last year, so that proportionately, for the first time for many years, the trend towards hospital for confinement has been reversed. We welcome this because we believe that the proper place for a new baby is at home, and that the mother, the centre and pivot of the whole family, should not have to go away from her home for a physiological process. I think there is no doubt that the older child is very much less disturbed by the arrival of a new baby when the baby arrives while the mother is still at home than he is when his mother goes away and comes back with a new arrival. Instead of welcoming him on her return she appears to spend more time with the new baby, and it is small wonder that jealousy occurs. A mother, too, often worries less about her household while she is at home and knows what is going on than if she is away and has to hear about it from others.

There is now an increased maternity allowance for women who have their babies at home. This is a matter of simple justice. for in the case of a mother who has her baby at home, Home Helps and all household expenses have to be maintained, whereas a woman having her child in hospital is kept for nothing and has very much reduced incidental expenses. Perhaps when this increased maternity allowance becomes fully appreciated the improvement noticed this year in the proportion of domiciliary confinements will be maintained.

Women are now being discharged from hospital before the end of 14 days because of the shortage of hospital beds. Most of these women, who go home supposedly to continue their rest, which is still necessary after the confinement, plunge themselves at once into household duties. If only more women had their babies at home this difficulty would not be apparent, and women would be able to stay in hospital for the full 14 days.

There are, of course, medical reasons and social grounds for hospital confinement. In this area there are still many houses which are not suitable for domiciliary confinement. Despite the new Council houses, this is likely to continue, for it is often the woman who has finished having her family who occupies a Council house. Naturally, the Council houses are often let to the woman who has several children, and nowadays after having two or three children many families do not become any larger, so we have reached the position where families are re-housed from unsatisfactory dwellings when they are at their maximum. Another factor in the limitation of families is, of course, that the rents of Council houses are so very much more than the pre-war rents of private houses, and the family budget deters the family planner from increasing the number in the family. At one time the provision of a new housing estate meant increased work for the midwife in that area, but now comparatively few of our babies are born on Council estates.

The work done by the Midwives is set out in Table 10 below.

TABLE 10.
Work done by the Municipal Midwives during 1952.

Labours conducted :	(a) as midwives	...	...	...	...	...	114
	(b) as maternity nurses	...	...	...	...	...	—
	(c) total	...	...	...	...	...	114
Ante-Natal visits	...	...	...	...	...	...	1,165
Post-Natal visits	...	...	...	...	...	...	2,119

Dental Scheme.

During the year, 71 expectant mothers were referred for treatment, and treatment was completed in 34 of these cases.

Breast Feeding.

Last year I was able to state that the decline in breast feeding which had been noted all over the Country, and was particularly noticeable here in 1949, had been temporarily halted, and the number of cases of breast feeding this year has only been equalled once since 1942. I think that much of this is due to the excellent work done in the Relaxation Clinic, and also to the increased amount of time being spent by the Health Visitors in the homes of the mothers, due to an increase in staff.

Table 11 shows the percentage of babies partially or wholly breast fed, and Table 12 shows the percentage of causes for the abandonment of breast feeding.

Reasons for Abandoning Breast Feeding.

	No. of cases
A. Maternal.	
(a) General health of mother (obstetric causes, mental shock)	28
(b) Local condition (breast abscess, defective nipples)	10
(c) Failure of milk without known cause	37
(d) Work	1
(e) Twins	1
B. Infant.	
Prematurity, illness, unknown cause	4
C. Others.	
(a) Adopted babies	4
(b) Lack of perseverance	8

TABLE 11.

Year.	Percentage breast fed + supplements at 7th month	Percentage wholly breast fed for 1, 2, 3, 4 or 5 months.	Percentage breast + bottle fed for 1, 2, 3, 4 or 5 months.	Total percentage wholly or partly breast fed.
1952	33.2	25.6	17.3	76.1
1951	25.6	27.1	18.9	71.6
1950	32.3	26.8	13.0	72.1
1949	27.8	33.0	7.8	68.6
1948	22.5	43.9	10.5	76.9
1947	35.1	28.0	9.2	72.3
1946	35.4	21.6	13.0	70.0
1945	40.4	20.2	10.5	71.1
1944	37.98	22.87	12.5	73.35
1943	34.0	20.0	12.0	66.0

TABLE 12.

Year.	Maternal causes.	Infant causes.	Other causes.
1952	82.8	4.3	12.9
1951	73.9	3.7	22.4
1950	74.4	5.1	20.5
1949	83.4	7.0	9.6
1948	73.4	2.8	23.8
1947	75.4	6.3	18.3
1946	68.2	10.9	20.9
1945	75.65	8.7	15.65
1944	58.4	2.7	38.9
1943	71.5	3.2	25.3

INFANT WELFARE CENTRES.

The work of the respective clinics is set out in Table 13 which follows.

TABLE 13.

Attendances at the respective Infant Welfare Clinics in 1952.

	Huddersfield Road	Hipperholme	Southowram	Totals
Number of Sessions	102	50	50	202
Individual Children attending ...	532	270	208	1010
Children attending for the first time	182	76	39	297
Medical Consultations	1090	662	692	2444
Average number of medical con- sultations per session ...	10.69	13.24	13.84	12.1
Attendances of children under 1 year	2941	1134	801	4876
Attendances of children over 1 year	1150	607	763	2520
Total attendances	4091	1741	1564	7396
Average attendances per session	40	34.82	31.28	36.61
Highest attendance at one ses- sion	74	55	49	

Voluntary Helpers.

I am once again pleased to record our deep appreciation of the excellent work carried out by the Voluntary Helpers at our clinics. Many of these ladies have given faithful service over a long number of years and have maintained continuity at the clinics during changes of staff.

Artificial Sunlight Treatment.

The work done is set out in Table 14 which follows, and it will be seen that 110 children received 796 exposures, compared with 103 children and 1,291 exposures in 1951.

TABLE 14.

The work of the Artificial Sunlight Clinics during 1952.

	Brighouse	Hipperholme	Southowram	Total
Number of children treated ...	48	40	22	110
Number of exposures	330	376	90	796

Orthopædic Treatment.

During the year, 20 children under school age were examined by Mr. Barclay, the Orthopædic Surgeon. Particulars of these cases are appended below :—

Spastic Diplegia	1
Torticollis	1
Congenital abnormality of spine	1
Congenital dislocation of hip	1
Talipes Equino-Varus	1
Genu Valgum	5
Deformity of foot	7
Injury to foot	1
Pes Planus	1
Wasting of Quadriceps	1

Ophthalmic Scheme.

During 1952, 37 pre-school children were examined at the Ophthalmic Clinic. Spectacles were prescribed in 20 cases. Particulars of these cases are given below :—

Strabismus	32
Hypermetropia and Strabismus	3
Conjunctivitis and Blepharitis	1
Dacrocystitis	1

DAY NURSERIES.

Attendances.

		Wellholme Park	Ogden Lane	Holme House
No. on register at 31st December, 1951	.....	32	37	36
No. on register at 31st December, 1952	...	40	37	38

The total waiting list at the three Day Nurseries was 82 at end of 1952. This waiting list is, of course, very much less than we had in the immediate post-war years. This is partially due to the mothers knowing that children are now admitted on a priority basis, and many of the children who do not fall into the priority classes have very little hope of ever being admitted. It is now the County Council's policy that children should be admitted on "health" grounds, and the priority classes are as follows :—

- A. The young child whose mother is ill or having a baby.
- B. The illegitimate child whose mother is seeking work.
- C. Children of parents who cannot find suitable homes or are living in overcrowded and/or insanitary dwellings.

- D. The young child of the widow who must educate and support her family unassisted and also the young child of the mother whose husband is ill.
- E. The child whose mother is engaged in the textile or other export industry.
- F. The child whose mother is engaged in the armament industry.
- G. Other reasons.

Category D includes women who are separated from their husbands and have the sole charge of the family. Many of these cases and those in category B would have to draw National Assistance if they were not admitted to the Nursery. There is perhaps a strong case for substantial grants to be made to the mother of the illegitimate child so that she need not go out to work but can support and care for her child herself at home. The cost of Nursery provision is a high one, and there is a great deal to be said for a mother being given an allowance to look after her own child rather than that this child should be supported by the rates in a Nursery.

Category G, other reasons, includes children who have been admitted because the mother was unable to take advantage of the advice offered to her and to care for the child adequately. In some cases these are temporary admissions. We often find that a child whose mother states he is very discriminating about his food and will not take much of the food offered to him will, in the company of his fellows, eat well and present no difficulty. A short period in the Nursery is sufficient to overcome these difficulties, particularly if the mother is encouraged to go in at lunch time and see the child eating with the others.

The only child often benefits very much from the social contacts with other children in the Nursery, and I should be very sorry indeed to see the Nurseries closed.

Other cases are from incipient problem families. The mother is unable to bring the child up adequately when she is responsible for his sole care, but she can manage at the weekend, particularly if she is in daily contact with the Nursery and is given practical help as well as advice on the management of the child, and in many respects Category G is the most important one. Our Day Nurseries have a very big advantage over Residential Nurseries. Every child in the Nursery belongs, they all have a parent to whom to go home, and although the Nurseries are expensive they are, of course, far less costly than Residential Nurseries, to which some of the children may have to go if the Day Nursery provision were to cease.

In order to help the children to feel that even in the absence of the mother a mother-substitute is available to look after them, as far as possible one nurse is responsible for the same children each day. The Nurseries are so planned that one room is set aside for the under-2 group and one room for the over-2 group, and they are furnished with cots and beds respectively. There is much to be said

for the organisation of the Nurseries more on the family group system, where children of different ages are associated together in a little family, but this is not, of course, so necessary in a Day Nursery. Indeed, many of the children refer to it as going to school, and it is surprising how pleased the 2 year olds are to graduate into the larger room. Many of the modern Day Nurseries have provision for a group from 2 to 3. This is useful, as so often the 2 year olds find themselves physically out-classed when they first enter the 2-5 room.

The infectious rate among the children in the Nurseries was very much less than last year. I believe that the reduction in Whooping Cough infection is due to some degree to the fact that we had in the latter part of the year 100% of the children who had been immunised against Whooping Cough. We were also able to report 100% acceptance for Diphtheria Immunisation. There were no cases of Sonne Dysentery in the Nurseries this year.

The total infectious diseases among the children during the year have been :—

Measles	.....	.....	.....	.....	7
Chicken Pox	.....	.....	.....	.....	19
Whooping Cough	.....	.....	.....	.....	4

MENTAL HEALTH.

Last year I gave some indication of the work being done in the mental health field in this area, and it will be remembered that a special Mental Health Social Worker commenced work in this Division and in the neighbouring Division, No. 19, in May, 1951. She was able to devote very much more time to the care of mental defectives in their own homes and to follow up special cases discharged from mental hospitals. Some of the mental hospitals have their own Social Worker and it has been necessary to try to correlate with them the cases to be visited so that they are not visited by more than one person. This has not always been easy, as information from the hospitals has not always been sufficiently complete.

1952 was the first full year of work of the Mental Health Social Worker, who in addition to being a trained nurse is also a trained health visitor, and I give her report for the Division in full. This applies, of course, to Brighouse, Elland and Queensbury and not just to her work in the Brighouse Borough. It has been thought better to present this as a Divisional Report for obvious reasons. This lady has brought a great deal of comfort to a great many people. Her work is of a patient nature, she often has to spend a long time with a patient before any improvement is achieved, but it will be seen from her report that the work she is doing is of great value to those who have heavy burdens to bear. She reports as follows :—

Mental Deficiency.

During 1952 there were four notifications under Section 57 of the Education Act, 1944, and three notifications under the Mental Deficiency Acts. Three defectives were admitted to Mental Deficiency Institutions and five defectives came on the waiting list for admission. There was one death during 1952.

Two defectives under 16 years of age were admitted to Institutions for a period of short term care. One was a boy aged 6 years whose mother had to have Mental Hospital treatment, and the other was a girl of 18 months whose home care was not entirely satisfactory.

Regular visits were made to all defectives in the area who are under supervision. Visits were also made to five defectives not formally reported.

There were 13 requests for background information of patients in Mental Deficiency Institutions.

The number of defectives under supervision as at the 31st December, 1952 is as follows :—

Statutory Supervision.

Females under 16 years	.....	.....	.....	9
Males	„	„	„	7
Females over 16 years	.....	.....	.....	16
Males	„	„	„	14

Under Guardianship.

Males	2
Females	2

Under Observation.

Males	4
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Employment.

Sixteen defectives are in regular gainful employment. Six adult defectives are capable of attending to their own physical needs and of helping in their homes. Six adult defectives are entirely dependent on relatives for their physical needs and care. All defectives over the age of 16 years who are incapable of earning their own living obtain the National Assistance Board Allowance.

Training.

Ten children and three adult defectives have attended group training classes during the year, one child and three adults have received training in their own homes. One child has attended at Bradford Occupation Centre throughout the year and has been conveyed there and returned by taxi each day.

The provision of training, both in group training classes and in the homes, has been of immeasurable value to the defectives and their families. It has also eased the work of the Social Worker

considerably. The offer of some form of training, however limited, has helped to mitigate the blank despair of parents who realise that their child can never go to school. Parents are encouraged to discuss their children more freely if they know that something can be done to help them. Parents also come in contact with one another when bringing their children to the classes and it must be a relief to know of others with a problem similar to their own.

The higher grade defectives look forward to their classes, enjoy the social contact with others and find great joy in their achievements. The lower grades require a great deal of physical care and intensive effort is needed to keep them happily occupied. Great credit is due to Mrs. Gardner, the home teacher, and to her assistant, Mrs. Bird, for the hard work done and the timeless patience shown towards these children in the group training classes. Training by persons other than their relatives is essential in the case of backward children. Parents tend to be over protective or lack time and patience for training, and so continue to do things for the child that he could learn to do for himself.

The care of defectives in their own homes in this area is satisfactory in all but a few cases and these are in families of the lower intelligence level, who do not understand or appreciate the need for extra vigilance in the care of the more backward member of their family. The homes of these families are usually dirty and badly kept and visits and advice are not readily welcomed. One girl left the area temporarily to live in a nearby town and on her return she was found to be pregnant. She is an amiable, attractive, high grade defective but her home conditions are poor.

The management of spastic low grade defectives in their own homes is not always satisfactory. The child is kept on a fluid or near fluid diet far too long and there is little attempt at habit training. A child who was given a minced full diet improved in health and he became more contented. He responded very well when "potted" at regular intervals and to have fewer napkins to wash was a relief to the mother.

The provision of beds in Institutions for defectives requiring a period of short term care has been of great benefit in cases where the mother has been ill or in need of a rest from the strain of continuously coping with a defective child. It is also gratifying to the Social Worker to be able to offer some form of practical help where it is so badly needed.

Care and After Care.

There were no requests for after care of patients discharged from Mental Hospitals from the hospital concerned, but at the request of the Medical Officer, visits were made to 34 patients who had had Mental Hospital treatment. Visits were also made to five cases notified from other sources who, because of some minor mental disturbance, were in need of help and advice.

A large number of patients entering Mental Hospitals do so voluntarily and many derive great benefit from the treatment obtained. Their relatives are gratified when there has been a complete return to mental health. A small group of patients, particularly those suffering from Anxiety Neurosis, do not stay in hospital long enough to complete treatment. They return home and complain bitterly about hospital conditions and the insane patients with whom they have been housed. Their ineptitude and lack of self confidence is pathetic to behold and they are a great trial to their relatives who have to be encouraged to look upon the patient's "awkwardness" as a real illness. Some of the patients improve and though not entirely well return to their employment. Others deteriorate, and some return to hospital as "Certified" patients. Many of these patients are males who have been on war service. Their relatives are very ready to assert that the patient's mental breakdown is the result of some tragic experience.

Of other after care cases, two patients suffering from Arthritis who tended to become depressed were supplied with handwork materials. They appeared to derive some benefit from the occupation and the extra visits, and their mental and physical condition improved.

A woman suffering from a physical disability causing mental deterioration was found to be unable to care for her children satisfactorily. With her consent, the children were received into a local Children's Home where they are doing very well.

It is regrettable that there is no point of liaison regarding after care between the Mental Hospital in the area and the Local Authority. Not all patients are in need of care after discharge. With a short outline of the patient's history and some guidance with regard to the after care thought to be necessary, selected cases would probably be more satisfactorily dealt with. Nevertheless, some patients and their relatives have appeared to benefit from the help and advice given. Contact has been made with other Social Workers, when the need for their specialised help has arisen, and a small measure of material assistance has been obtained from a voluntary organisation in the area.

The Duly Authorised Officer, Mr. Johnson, has given me the following report on his work in the Brighouse Borough during 1952 :—

Persons removed as certified patients to Mental Hospitals under Section 16, Lunacy Act, 1890.	8
Persons removed under Section 20, Lunacy Act, 1890.	2
Persons removed under Section 21, Lunacy Act, 1890	1
Persons assisted in obtaining admission to Mental Hospitals as voluntary patients under Section 1, Mental Treatment Act, 1930.	6

GERIATRICS.

Last year I referred to the increasing amount of time that was being spent by the Health Visitors with old people. The old indeed look forward eagerly to their regular visits, but the pressure of time does not, of course, allow these visits to be prolonged, and they are usually made for some purpose—visiting with regard to the provision of a Home Help, advice in cases of sickness, etc. Regular visiting by a voluntary agency in addition to the special visiting of General Practitioners, Health Visitors and District Nurses, is one of the best ways of keeping old people happy and contented, and I should like to pay tribute to the excellent work being done in the district.

The opening of the Hipperholme and Lightcliffe Old People's Club, which is appropriately known as "The Good Companions Club," was a real milestone in the care of the old people of this Borough. From the beginning, this club was run on sound practical lines. It will be remembered that it has always been my opinion that the old people who can go to a club are not the ones who perhaps need the most attention, as it is the ones who live alone and are not able to get out who most need the help of voluntary visitors. It has been surprising, however, how many people have managed to attend and have found a new interest in life because of the Good Companions Club, and right from the beginning the non-attenders have been visited by the Committee. It is now my opinion that with the club as a focal point visiting can best be organised. The only trouble with the club, and indeed with others, is that the numbers wishing to attend were greater than the capacity of the club.

The success of the Good Companions Club led to the Old People's Welfare Committee encouraging the formation of other clubs, and as I write these lines the "65" Club has already been started at Hove Edge, the Golden Link Club at Rastrick, the Good Companions Club at the Civil Defence Headquarters in Brighouse, and the Good Companions Club at Norwood Green. The Rastrick Club has proved so successful that already it has become apparent that two clubs are needed in this area. In Norwood Green we have perhaps, the ideal community for a club. The village is very much a self-contained unit, where everybody already knows everyone else, and where the numbers attending could be properly assessed from the outset. The atmosphere of these clubs is wonderfully cheerful and happy, and these old people, who have contributed to the wealth of the Country during their working years, are being helped to enjoy a well earned retirement.

Altogether, a great deal of progress has been made in the care of the old. The services we provide through the District Nurses, Health Visitors and Home Helps have continued to expand, and form now a most important part of the work of this Department.

SANITARY CIRCUMSTANCES IN THE AREA.

Water Supply.

Of the 10,908 inhabited houses in the Borough, 10,868 are on the public supply, which has remained satisfactory as regards quantity and quality throughout the year. With the exception of six houses supplied by stand-pipe, all those on public supply receive water directly to the houses. The remaining houses have private supplies derived from springs and wells, the majority of which are frequently contaminated by animal pollution. The only safe way for people with private supplies or with shallow wells is for the water to be boiled and the householders have been advised accordingly. It is unlikely that any great improvement in this position will be made in the near future, as most of the houses and farms not on public supply are remote from any public water main or service.

I am informed by Mr. Lawson, the Water Engineer, that the following extensions and replacements of main were carried out during 1952 :—

Extensions of main —

- 60 yards of 3" main, Lightridge Road, Fixby.
- 90 yards of 6" main, Industrial Site, Clifton.
- 22 yards of 3" main, Stoney Lane Estate.
- 2,680 yards of 8", 6", 4" and 3" main, Field Lane Estate.
- 1,900 yards of 8" and 6" rising main to Lands Reservoir.

Replacements of main —

- 66 yards of 2" main, Ryecroft Lane, Rastrick.
- 23 yards of 3" and 2" main, Huddersfield Road.

Drainage and Sewerage.

The requirements for drainage and sewerage in this area were very adequately dealt with in a Sewer Survey which was published by the Borough Engineer four years ago.

I am informed by the Borough Engineer that the actual work carried out during 1952 was as follows :—

All sewers constructed on first stage of Field Lane Housing Estate.

The Queens Road area of Norwood Green, the east end of River Street, and various parts of Southowram are still not connected to the sewer. In the majority of cases the existing sewers are not within a distance that Statutory Powers could be exercised to compel owners to connect up to sewers.

Rivers and Streams.

The West Riding Rivers Board is the supervising Authority. No complaints regarding the pollution of any streams in the area were received by the Health Department during the year.

Public Cleansing.

Full details regarding Public Cleansing are given by the Cleansing Superintendent.

Sanitary Inspection of the Area.

The work done during the year is set out in tabular form in the Sanitary Inspector's Report.

Smoke Abatement.

387 observations of smoke emissions were taken during the year. In only three cases was the Byelaw limit of three minutes in half an hour exceeded.

Full details of the atmospheric pollution gauges are given in the Sanitary Inspector's Report. It will be seen that the total solids were highest at Wellholme Park in the centre of the town, and at Lightcliffe. It is considered that much of the pollution at Lightcliffe comes from neighbouring County Boroughs.

West Riding County Council (General Powers) Act, 1951.

This Act contains some extremely useful provisions, and under it 19 vehicles for retailing food stuffs within the Borough have been registered, and an opportunity was taken by the Sanitary Inspector of asking the owners of these vehicles to provide facilities for hand washing.

Section 120 of this Act provided for the registration of hairdressers and barbers, and 35 establishments were registered. Byelaws were made by the Local Authority to ensure cleanliness of premises, instruments, towels and equipment and of all persons employed.

Section 53 gave us summary powers to deal with choked drains. This is a useful provision in view of the urgency of the matter.

Rag Flock and Other Filling Materials Act, 1951.

We have three premises registered for the manufacture of Rag Flock and one for the storage of Rag Flock, and eleven inspections were made.

Public Baths.

I am obliged to Mr. W. Cockroft, the Baths Manager, for the following statement of the attendances of bathers during 1951 and 1952 :—

Mixed —	1951	1952
Mixed Bathing	15,467	17,189

Females—

Ladies	846	799
Girls	3,436	3,539
Girls' Swimming Classes	7,712	6,686
Ladies' Club and Season Tickets	1,738	1,778
Ladies' Slipper Baths	1,382	1,292

Males—

Men	1,474	1,922
Boys	3,321	3,447
Boys' Swimming Classes	17,042	16,024
Men's Club and Season Tickets	1,076	1,581
Men's Slipper Baths	9,763	8,844
	<hr/> 63,257	<hr/> 63,101

It is interesting to see from these figures that the number of slipper baths for both men and women is gradually decreasing. There is little doubt that this is due to the number of new houses being provided by the Council which enable people to have a bath in their own homes.

I only wish that it had been possible to provide a municipal laundry. Every house should have a bath, and every house should have proper washing facilities. As it is at present, the weekly wash means that in many houses the house is rendered almost uninhabitable during wash day. It appears probable that it will be impossible to provide wash houses for a great many of our older houses, and I am still hopeful that it might be possible to provide centrally, by voluntary or other means, a series of electric washing machines where people can go to do their washing under modern conditions.

The swimming bath is well maintained. Regular routine samples of the water have been submitted for bacteriological examination. These were generally satisfactory, but coliform organisms were found in samples submitted in June, July and October. In no case were these present in greater proportion than two per 100 millilitres. The Baths Manager and his staff continue to exercise the best possible supervision.

Housing Programme.

The Borough Engineer informs me that the following houses were completed during 1952 :—

Stoney Lane Estate —

2 bedroom houses	18
3 bedroom houses	20
Single person flats	8

Cain Lane, Southowram —

2 bedroom houses	16
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Total	<hr/> 62
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This compares with the total of 179 houses, a list of which was given in last year's Report, which it was hoped to complete in 1952.

The programme for 1953 is as follows :—

Stoney Lane Estate —

2 bedroom houses	2
3 bedroom houses	18
4 bedroom houses	2
2 bedroom flats	1
3 bedroom flats	1
bed sitting room flats	1

Cain Lane Estate —

2 bedroom houses	6
3 bedroom houses	12
4 bedroom houses	2

Field Lane Estate —

2 bedroom houses	34
3 bedroom houses	46
2 bedroom flats	40

Total 165

Up to the end of 1952, 577 new post-war houses and 375 pre-war houses, a total of 952 houses, had been built by this Corporation. It is hoped that in 1953 the thousandth Corporation house will be completed, and now the Corporation own almost one eleventh of the houses in the Borough.

The number of houses built up to now has not been sufficient to deal with all the cases of overcrowding, and there is still a considerable waiting list, but most of the serious cases have now been re-housed and the time has come when consideration should be given to the elimination of some of the worst of the sub-standard houses existing in this Borough.

Two of the camps used by squatters have been eliminated, but there still remains the camp at Birds Royd. This camp has been a very useful adjunct to the housing provision of the Borough, and in some respects it has offered amenities not always obtained in some of the sub-standard houses, but it is hoped that the time has now come when the Council will consider the re-housing of the persons from this camp, and its elimination.

The post-war years have been very difficult ones for this Department. We have known how unsatisfactory some of the houses were, with no proper facilities for cooking, no facilities for the washing of clothes, no proper ventilation and no proper food store. Many of the houses are extremely damp, and indeed, worn out. Even with the best of maintenance, houses built a hundred years ago cannot be expected to fulfil modern standards. Damp-proof

courses, proper ventilation, facilities for washing clothes, and proper arrangements for the storage of food are, in my opinion, essential for the wellbeing of the people. We are told that in many homes before the Industrial Revolution people in the textile areas worked, ate and slept in the same room, but these standards belong to the past. Already we have a legal standard for overcrowding and it is accepted that persons cannot live properly when this standard is not attained.

The 1949 Housing Act gave us a standard for a proper house. Houses provided or improved with assistance under Part II of this Act must be dry and in good repair, have each room properly lighted and ventilated, have an adequate water supply and a proper drainage system. In addition they should —

- Be provided with efficient and adequate means of supplying hot water for domestic purposes.

- Have an internal or otherwise readily accessible W.C.

- Have a fixed bath, preferably in a separate room.

- Be provided with facilities for domestic washing, including a copper, preferably in a separate room.

- Be provided with a sink or sinks with suitable arrangements for the disposal of waste water.

- Be provided with adequate points for artificial lighting in each room.

- Be provided with adequate facilities for heating each habitable room.

- Have satisfactory facilities for preparing and cooking food.

- Have a well ventilated larder or food store.

- Have proper provision for the storage of fuel.

- Have a satisfactorily surfaced path to outbuildings and convenient access from a street to the back door.

There are a great many houses in this area which do not conform to these provisions.

It has been said by some that the relief of overcrowding is more important than the elimination of unfit dwellings, and that any house is better than none. It is quite true that the effect on the mental health of two women sharing one kitchen is incalculable, but to live in an unfit house has perhaps more effect on the physical as well as the mental health of the persons condemned to do so, and it is considered that in this Borough we have now reached the stage where relief of overcrowding should take second place to the removal of unfit houses.

Up to the present we have been bringing forward unfit houses only when the tenants were likely to be rehoused for other reasons. I consider that the time has now come when the Health and Housing Committees will seriously have to consider an onslaught on some of the many worn out houses we possess.

In 1952, four houses were represented individually as being unfit. A Closing Order was made in respect of one of these houses as it was impossible to pull it down without disturbing another house, but Demolition Orders were made in respect of the other three. In addition, a Clearance Order was made in respect of four cottages at Norwood Green after an Inquiry had been held.

INSPECTION AND SUPERVISION OF FOOD.

Premises for the Manufacture, Preparation and Sale of Food.

I am pleased to report that we had no major food poisoning outbreaks in this area. All premises connected with food have been visited, over 1,000 visits having been made to various types of food premises.

From time to time samples have been taken from a premises where the dressing of crabs and preparation of mussels are undertaken. An unsatisfactory report showed the presence of *Staphylococcus Aureus*. I examined all the food handlers and one person was found with a cut on the hand, from which it was possible to isolate the same organisms. This cut was almost healed and was not obviously infective. The firm are most co-operative and a strict watch is being kept for anyone with an injury of this kind. The difficulty with this type of work is, that working as they do with shells, it is very easy to have a slight scratch or abrasion which often passes unnoticed. No known cases of food poisoning resulted from the presence of *Staphylococcus Aureus*.

Milk Supply.

Although we are not responsible for the production side of the milk supply, regular samples are taken from the distributors and all unsatisfactory samples are reported to the Ministry of Agriculture and Fisheries. Fifteen milk distributors were registered, of whom six are resident in the Borough. There were also 34 shops registered for the sale of bottled milk.

108 samples were taken for chemical analysis on behalf of the West Riding County Council. 96 of these samples were satisfactory. The remaining twelve samples were genuine, although there was a slight deficiency in solids not fat. In addition, 216 samples were taken for the methylene blue test, and of these 19 were found to be unsatisfactory and required following up. None of the 12 samples of sterilised milk taken for the turbidity test showed inefficient sterilisation, and all the samples submitted for the phosphatase test showed satisfactory pasteurisation.

During the year we were only able to take 20 samples for the biological test for Tuberculosis because of the shortage of laboratory animals. It was possible, however, to take samples from the suppliers of all the six cases of non-pulmonary Tuberculosis

notified during the year. It will be appreciated that a milk supply which may be infected at the time of the causation of the disease may no longer be infected by the time the sample is taken, and that the biological test necessitates a period of six weeks, during which time the offending animal may have been removed. One of our samples was infected with the tubercle bacillus, but by the time we received this report the whole herd had been disposed of and no cattle were then kept at this farm. At the present time it appears that the only satisfactory way of assuring safety is for the public to drink pasteurised milk, or at least see that their children do so. All the milk supplied in the schools is pasteurised.

Ice Cream.

Two premises were registered for the manufacture of Ice Cream. A regular inspection of these premises was made and 22 samples were taken direct from the manufacturers, 19 of which were in Grade I. The remaining three samples were in Grades II, III and IV.

There is an increasing consumption of iced lollies, which present for children the advantage of being cheaper than ice cream and have an attractive colour and flavour. Although they do not form as good a medium for the multiplication of bacteria, it is essential that these too should be prepared under proper conditions and premises retailing iced lollies have been registered and regular routine inspections of these premises carried out. 97 samples of iced lollies were submitted for examination and no coliform organisms were found.

Meat and Other Foods.

A detailed statement regarding the action taken with regard to meat and other foods is given in the Sanitary Inspector's Report.

Adulteration, etc.

The administration of the Food and Drugs Act is carried out by the West Riding County Council, samples being taken by our Sanitary Inspectors.

Chemical and Bacteriological Examinations of Food.

Samples of foodstuffs for chemical and bacteriological examination are taken by the County Council.

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS DISEASES.

General.

The notifiable diseases most prevalent during the year were Chicken Pox and Measles.

It has not been the policy of this Department to recommend disinfection of premises as a routine measure, but terminal disinfection has always been carried out in cases of Tuberculosis where the patient has been removed to sanatorium.

Diphtheria Immunisation.

Children were immunised at the Infant Welfare Centres, at a special morning session at Huddersfield Road Centre, and in the Schools.

The prophylactics used were two doses (0.5 and 0.5 c.c) Alum Precipitated Toxoid for children under 5 years. For children over 5 years Toxoid Antitoxin Floccules are used, three doses of 1 c.c. each. Previously immunised children were given a reinforcing dose of 1 c.c. on reaching the age of $4\frac{1}{2}$ to 5 years.

205 children completed a full course of primary immunisation during the year. 68 children were given a reinforcing dose.

The number of children who had completed a full course of immunisation at any time up to the 31st December, 1952 is as follows :—

(Aggregate 31st December, 1952).

Under 1	1 yr.	2 yrs.	3 yrs.	4 yrs.	5-9 yrs.	10-14 yrs.
26	263	289	384	399	1812	1705
						Total 4878

The number of children immunised this year is the lowest since 1940. This cannot be accounted for entirely by the fall in the birth rate, although this has, of course, some bearing on the position. The number of live births was 404, so that roughly only half of the children born were immunised. In order to have a satisfactory state of immunity in the population it is considered that 75% should be attained. The fact that we have had no cases of Diphtheria in the Borough during the past few years is undoubtedly one of the factors leading to a reduced demand for immunisation. Most of the mothers realise the efficacy of this, but often they put the immunisation off with the idea of having it done later. It is wise for them to arrange to have their children immunised at eight months of age as a routine measure. There is still a high level of immunity in this town, but unless our figures improve this will fall.

Whooping Cough Immunisation.

210 children were immunised against Whooping Cough during the year.

NOTIFIABLE DISEASES.

Diphtheria.

No cases of Diphtheria were notified in the Borough during 1952.

Smallpox.

No cases of Smallpox occurred during 1952.

Only 80 persons received primary vaccinations during the year. This figure included the people who were vaccinated specifically for the purpose of going abroad, and is a disappointing one. Since vaccination ceased to be compulsory in July, 1948, and we undertook vaccination under the National Health Service Act, 61 persons were vaccinated in 1949; in 1950, when there were suspected cases of Smallpox in a neighbouring County Borough, 1,330 persons were given primary vaccination; in 1951, when we ourselves had a suspected case, 125 persons were vaccinated. The figure this year can more properly be compared with 1949, when there were no suspected cases of Smallpox in the vicinity and 61 persons were vaccinated.

On the whole the mother of the young baby is conscious of the need for vaccination, but once again she puts it off for a more appropriate time, which never comes, and I would again urge parents to have their children vaccinated, unless there are medical reasons for delay, at the age of four months.

Puerperal Pyrexia.

No cases of Puerperal Pyrexia were notified during the year.

Ophthalmia Neonatorum.

No cases of Ophthalmia Neonatorum were notified during 1952.

Pneumonia.

30 cases of Pneumonia were reported, compared with 31 in 1951. There were 8 deaths.

Tuberculosis.

The statistics relating to Tuberculosis are presented in tabular form in Table 17.

No action has been found necessary under the Public Health (Prevention of Tuberculosis) Regulation, 1925, nor under the Public Health Act, 1936, Section 172.

There were 44 notifications of Respiratory Tuberculosis during 1952, as compared with 26 in 1951. It will be seen that the number of notifications shows no downward trend. This year it was

expected that the notification rate would be higher, as we had a visit from the Mass Radiography Unit, particulars of which are given below, but in addition we have been able to arrange for the X-ray examination of all the contacts of cases of Tuberculosis, except those who refuse, and these are very few in number. It is among the contacts that many cases of very early Pulmonary Tuberculosis have been discovered. The treatment of this disease is now very much more promising, and early cases can now be cured. The higher rate of notification can, I think, be taken as indicating that more cases of early Tuberculosis are being found and steps taken to deal with them.

Six of the seven cases under 15 years of age were of the juvenile type, that with care and attention will recover completely, and would not have been discovered at one time. The remaining case was an adult type. One of the cases was discovered during the Mass Radiography Survey.

It was our policy to test the immunity of child contacts and to arrange for B. C. G. immunisation to be carried out when the segregation of the immunised children could be attained.

Perhaps the death rate gives a better indication of the progress we are making in the fight against this disease. Last year there were six males and one female died from Tuberculosis, and this year there were four males. Two of these were old cases with well established disease.

It is hoped to arrange a Mass Radiography Survey at more frequent intervals. By this means early cases will be picked out, and I think it also helps by bringing to the public notice the importance of examination at the first signs of any chest trouble. It is important that the public should understand that with early diagnosis Tuberculosis is no longer a disease to be feared to the same extent as previously.

MASS RADIOGRAPHY SURVEY.

The Mass Radiography Unit of the Leeds Regional Hospital Board visited the district in October, and sessions were held at Hipperholme, at the St. John Ambulance Hall, Brighouse, and at Messrs. Blakeboroughs, who very kindly gave permission for people other than their own employees to be examined at their premises. I give below the results supplied to me by the Unit. It is not possible, however, to draw any conclusions at all from such evidence since the persons examined constitute only a small proportion of the population and are not necessarily representative of the population taken as a whole. The information given is in respect of people actually examined during the survey and may, therefore, include persons normally resident in other areas.

	M.	F.	Total
1. Examinations carried out			
(a) Miniature X-rays taken	1709	1322	3031
(b) Large X-rays taken	30	6	36
2. Analysis of Provisional Findings			
(a) Cases of active tuberculosis	5	4	9
(b) Cases of inactive tuberculosis	29	32	61
(c) Other abnormalities (see below)	42	22	64
(d) Failed to attend for large film	7	—	7
3. Analysis of abnormalities other than tuberculosis (See 2(c) above).			
Disease Code No.			
1. Anatomical abnormalities	4	3	7
2. Chronic bronchitis and emphysema	2	—	2
3. Pneumonia — lobar	3	4	7
4. Broncho pneumonia	—	—	—
5. Consolidation — cause unknown	—	—	—
6. Bronchiectasis	5	1	6
7. Pulmonary fibrosis — non tuberculous	4	—	4
8. Pneumokoniosis — non tuberculous	4	—	4
9. Pneumokoniosis accompanied by tuberculosis	2	—	2
10. Basal fibrosis	6	1	7
11. Pleural thickening	6	1	7
12. Pleural and interlobar effusion	—	—	—
13. Spontaneous pneumothorax	—	—	—
14. Intrathoracic tumours	—	—	—
15. Cardio vascular lesions — congenital	1	1	2
16. Cardio vascular lesions — acquired	4	9	13
17. Miscellaneous	1	2	3

Cerebro Spinal Fever.

No cases of Cerebro Spinal Fever were notified during 1952.

Acute Anterior Poliomyelitis.

There were two cases of Acute Anterior Poliomyelitis during the year. Both these were notified at the end of March, but one of them apparently dated from the end of January, when the patient had a febrile illness for which the Doctor was not called in, and it was only when muscular wasting was noticed that the Doctor was called. Neither of these cases had any direct connection with each other.

Sonne Dysentery.

There were two cases of Sonne Dysentery notified during the year. Last year we had a great many more cases but most of

these were found in the Nursery by routine examination after a case had occurred there. During this year we received a certain amount of unofficial information of cases of diarrhoea which led us to suspect that there may have been other cases unascertained.

Scarlet Fever.

During 1952 there were 40 cases of Scarlet Fever, compared with 68 in 1951. All the cases were of a mild character and there were no deaths from this disease.

Food Poisoning.

There were no cases of Food Poisoning during 1952.

Chicken Pox.

1952 was an epidemic year for Chicken Pox in Brighouse, and during the year 565 cases were notified, compared with 61 in 1951. Some of the cases were, for Chicken Pox, severe in character, but there were no noteworthy complications and no deaths from this disease.

Measles.

469 cases of Measles were notified during the year, compared with 622 cases last year. There were no deaths from this disease.

Whooping Cough.

There were 98 cases of Whooping Cough notified in 1952, compared with 134 in 1951. One child died from the disease.

CANCER.

74 deaths—40 males and 34 females—were registered as being caused by some form of malignant disease. These figures show an increase of 18 cases compared with the 1951 figures.

TABLE 15.
MONTHLY NOTIFICATIONS OF INFECTIOUS DISEASES DURING 1952.

Month	Tuberculosis		Scarlet Fever	Pneumonia	Erysipelas	Diphtheria	Chicken Pox	Measles	Whooping Cough	Anterior Poliomyelitis	Dysentery	Totals
	Lungs	Other										
January ...	1	—	4	6	—	—	12	3	28	—	—	54
February ...	5	—	1	2	—	—	7	—	10	—	1	26
March ...	3	1	2	2	—	—	76	3	14	1	1	103
April ...	2	—	2	5	—	—	175	1	10	1	—	196
May ...	3	—	—	2	—	—	95	7	10	—	—	117
June ...	3	—	1	1	—	—	86	8	7	—	—	106
July ...	4	1	—	5	1	—	52	14	4	—	—	81
August ...	2	1	1	—	—	—	37	16	3	—	—	60
September ...	5	—	3	—	—	—	12	65	2	—	—	87
October ...	1	—	3	1	—	—	6	230	7	—	—	248
November ...	9	—	6	—	—	—	1	53	—	—	—	69
December ...	6	3	17	6	—	—	6	69	3	—	—	110
Totals ...	44	6	40	30	1	—	565	469	98	2	2	1257

TABLE 16.

NOTIFIABLE DISEASES (OTHER THAN TUBERCULOSIS)
AND HOSPITAL ADMISSIONS DURING THE YEAR 1952.

Disease.	Cases Notified.	Admitted to Hospital.	Total Deaths.
Measles	469	—	—
Smallpox	—	—	—
Scarlet Fever	40	14	—
Diphtheria	—	—	—
Pneumonia	30	1	8
Erysipelas	1	—	—
Chickenpox	565	3	—
Acute Poliomyelitis	2	1	—
Dysentery	2	—	—
Whooping Cough	98	7	1
Totals ...	1207	26	9

TABLE 17.

TUBERCULOSIS — New Cases and Mortality during 1952.

Age Periods.	New Cases.				Deaths.			
	Respiratory.		Non-Respiratory.		Respiratory.		Non-Respiratory.	
	M.	F.	M.	F.	M.	F.	M.	F.
0	—	1	—	—	—	—	—	—
1	1	1	1	—	—	—	—	—
5	—	—	—	1	—	—	—	—
10	1	3	—	—	—	—	—	—
15	—	4	2	1	—	—	—	—
20	1	3	—	—	—	—	—	—
25	4	3	1	—	—	—	—	—
35	2	3	—	—	—	—	—	—
45	6	2	—	—	1	—	—	—
55	3	1	—	—	3	—	—	—
65 and upwards ...	2	3	—	—	—	—	—	—
Totals ...	20	24	4	2	4	—	—	—

TABLE 18.
ANNUAL INCIDENCE OF VARIOUS INFECTIOUS
DISEASES IN BRIGHOUSE SINCE 1893.

Year	Small-Pox	Scarlet Fever	Diphtheria	Enteric Fever	Erysipelas	Tuberculosis			Pneumonia
						Lungs	Other	Total	
1893	19	152	3	9	21				
1894	—	31	8	31	10				
1895	—	40	7	25	16				
1896	—	46	5	30	24				
1897	—	66	6	21	36				
1898	—	86	5	22	33				
1899	—	195	11	17	20				
1900	—	95	17	16	16				
1901	—	34	44	6	14				
1902	12	51	20	8	12				
1903	13	48	3	3	3				
1904	69	39	6	4	5				
1905	—	57	10	16	13				
1906	—	68	12	9	15				
1907	—	23	37	8	7				
1908	—	25	24	6	8				
1909	—	124	19	7	7				
1910	—	45	12	3	6				
1911	—	22	9	5	7				
1912	—	56	6	1	7				
1913	—	122	6	1	7	62	11	73	
1914	—	203	24	3	14	42	12	54	
1915	—	60	99	2	16	35	17	52	
1916	—	20	36	3	5	24	8	32	
1917	—	13	15	1	3	57	16	73	
1918	—	22	14	—	4	71	8	79	
1919	—	39	11	3	7	40	11	51	
1920	—	27	13	—	13	27	8	35	14
1921	—	151	13	—	3	21	6	27	7
1922	—	72	8	1	18	17	8	25	14
1923	—	71	6	1	5	15	9	24	9
1924	—	65	6	3	3	26	11	37	20
1925	2	62	2	1	11	22	17	39	13
1926	—	18	4	1	7	30	14	44	11
1927	30	15	3	2	2	24	8	32	22
1928	5	37	3	1	6	22	8	30	8
1929	—	207	7	6	3	16	9	25	17
1930	5	179	24	1	4	18	15	33	10
1931	9	40	19	1	6	21	12	33	14
1932	—	41	18	3	9	24	7	31	16
1933	—	38	11	2	11	27	16	43	16
1934	—	27	15	1	8	5	4	9	5
1935	—	86	13	—	11	13	5	18	12
1936	—	80	11	—	4	15	7	22	7
1937	—	91	26	1	11	20	8	28	30
1938	—	70	32	—	19	22	11	33	31
1939	—	36	22	—	19	18	6	24	32
1940	—	28	11	3	17	19	7	26	36
1941	—	49	27	1	8	18	5	23	23
1942	—	102	12	—	5	14	4	18	18
1943	—	80	16	—	8	22	5	27	25
1944	—	94	18	—	5	12	10	22	19
1945	—	47	7	—	4	17	9	26	9
1946	—	30	4	2	6	11	2	13	16
1947	—	51	6	—	6	23	4	27	7
1948	—	42	2	—	6	25	8	35	16
1949	—	37	1	—	4	33	2	33	41
1950	—	46	1	—	2	17	6	23	10
1951	—	68	—	—	5	26	4	30	31
1952	—	40	—	—	1	44	6	50	30
Totals	164	3909	830	291	586	1015	344	1359	589
Av'rg's	2.7	65.0	13.8	4.85	9.8	25.4	8.6	34.0	17.8

TABLE 19.
BIRTH RATE, STILL BIRTH RATE, INFANTILE MORTALITY RATE AND DEATHS FROM
DIARRHOEA FOR 10 YEAR PERIODS FROM 1896.

Decade	Live Births Rate per 1,000 of the Population		Still Births Rate per 1,000 Total Births	Infantile Mortality Rate		Total Deaths of Infants from Still Birth and Failure to survive 1st year of life. Rate per 1,000 total births	Death Rate from Diarrhoea under 2 years of age, per 1,000 live births	
	Brighouse	England & Wales		Brighouse	England & Wales		Brighouse	England & Wales
1896-1905	23.70	28.8	not known	139	147	not known	8.4	31.4
1906-1915	18.44	24.8	49.6	94	123	133.8	6.4	22.3
1916-1925	15.6	20.1	47.77	81	83	117.9	6.4	9.8
1926-1935	12.3	15.8	54.7	63	65	114	3.5	6.3
1936-1945	14.35	15.4	30.48	53.97	53	82.68	3.37	5.2
1946	16.87	19.1	25.19	33.79	43	57.95	1.19	4.4
1947	18.12	20.5	38.46	40.00	41	76.92	5.45	5.8
1948	16.55	17.9	26.72	39.22	34	64.88	0.00	3.3
1949	16.42	16.7	17.51	23.76	32	40.86	0.00	3.0
1950	14.81	15.8	13.02	24.2	30	36.88	0.00	1.9
1951	14.75	15.5	28.0	24.4	29.6	51.84	0.00	1.4
1952	13.3	15.3	21.8	22.3	27.6	43.58	0.00	1.1

TABLE 20.
DEATHS FROM SPECIFIED CAUSES SINCE 1896.
BOROUGH OF BRIGHOUSE.

Decade	Maternal Mortality Death Rate per 1,000 Total Births	Deaths from Various Causes—Rates per 1,000 Population												
		Typhoid and Para typhoid Fever	Small- Pox	Meas- les	Scar- let Fever	Whoop- ing Cough	Diph- theria	Infl'u- enza	Can- cer	Tuberculosis			All Causes	
										Lungs	Other	Total	B'house	Eng'd & Wales
1896-1905	4.06	0.08	0.02	0.32	0.17	0.23	0.16	0.15	0.66	1.58	0.39	1.97	15.25	16.8
1906-1915	6.38	0.05	0.00	0.30	0.06	0.17	0.25	0.12	0.93	1.29	0.41	1.70	13.68	14.3
1916-1925	5.60	0.02	0.00	0.11	0.05	0.14	0.09	0.85	1.23	1.12	0.36	1.48	14.71	13.3
1926-1935	5.25	0.02	0.00	0.01	0.02	0.03	0.06	0.53	1.75	0.76	0.18	0.94	13.84	12.05
1936-1945	4.16	0.01	0.00	0.01	0.01	0.04	0.04	0.24	1.95	0.43	0.11	0.54	14.95	12.04
1946	0.00	0.03	0.00	0.00	0.00	0.03	0.00	0.10	2.42	0.40	0.03	0.43	14.42	11.5
1947	1.75	0.00	0.00	0.03	0.00	0.00	0.00	0.03	1.81	0.43	0.03	0.46	13.90	12.0
1948	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	2.04	0.42	0.06	0.48	14.18	10.8
1949	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.42	2.11	0.49	0.06	0.55	14.08	11.7
1950	0.00	0.00	0.00	0.00	0.00	0.03	0.00	0.06	2.24	0.03	0.06	0.09	14.00	11.6
1951	2.16	0.00	0.00	0.00	0.00	0.00	0.00	0.42	1.83	0.23	0.03	0.26	14.85	12.5
1952	0.00	0.00	0.00	0.00	0.00	0.03	0.00	0.00	2.43	0.13	0.00	0.13	12.8	11.3

TABLE 21.
BOROUGH OF BRIGHOUSE.
TOTAL DEATHS FROM CERTAIN SPECIFIED CAUSES, AVERAGE DEATHS PER ANNUM,
AND NOTIFICATIONS AND CASE MORTALITY OF CERTAIN INFECTIOUS DISEASES SINCE
1894.

	Maternal Mortality			Typhoid and Para- typhoid Fever	Small- pox	Meas- les	Scar- let Fever	Whoop- ing Cough	Diph- theria	Influ- enza	Can- cer	Tuberculosis		
	Puer- peral Sepsis	Other Puer- peral Causes	Total									Lungs	Other	Total
Total Deaths since Incorporation of Borough, 1894	20	66	86	45	4	180	68	152	135	443	1975	1276	309	1585
Average Deaths Per Annum ...	0.34	1.12	1.46	0.76	0.06	3.00	1.15	2.58	2.29	7.51	33.47	21.63	5.24	26.86
Total Infectious Diseases Notified ...	—	—	—	301	164	Notifi- able only since 1939 4026	3909	Notifi- able only since 1939 800	830	Not Notifi- able	Not an Infect- ious Dis- ease	1016 Notifi- able only since 1913	343 Notifi- able since 1913	1359
Case Mortality Rate per 100 Cases ...	—	—	—	14.95	2.44	3 d'ths since 1939	1.74	10 d'ths since 1939	16.26	—	—	643 d'ths since 1913	173 d'ths since 1913	816 d'ths since 1913
												63.29	50.44	60.04

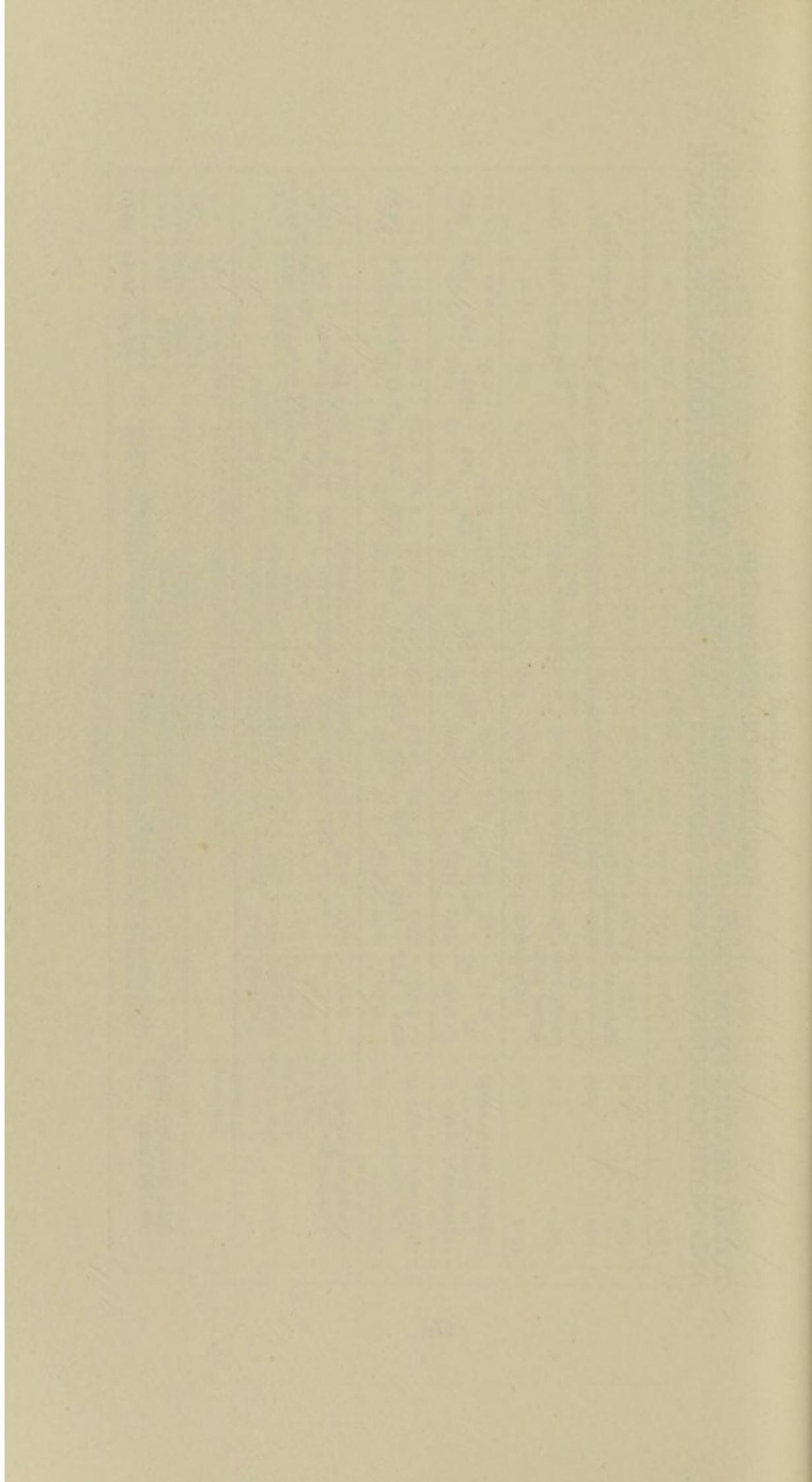


TABLE 22.
ANNUAL BIRTHS, STILL BIRTHS AND INFANTILE MORTALITY IN BRIGHOUSE SINCE THE
INCORPORATION OF THE BOROUGH, 1894.

Year	Population	Total Births	Stillbirths		Live Births		Birth Rate for England and Wales	Deaths of Infants under 1 year	Infantile Mortality Rate per 1,000 live births		Total Deaths of Infants from Stillbirth or failure to survive 1st year of life		Deaths from Diarrhoea under 2 years of age		
			No.	Rate per 1000 total Births	No.	Rate per 1000 of population			Brighouse	England and Wales	Stillbirths and Deaths under 1 year of age	Rate per 1000 total births	No.	Rate per 1000 live births	England and Wales Rate per 1000 live births
1894	21,043				571	27.13	29.6	65	113.83	137			1	1.7	14.35
1895	21,153				573	27.08	30.3	76	132	161			15	26.2	33.85
1896	21,238				547	26.83	29.7	77	141	148			5	9.1	23.71
1897	21,347				573	26.84	29.7	74	129	156			4	6.9	36.33
1898	21,466				549	25.37	29.4	108	198	160			13	23.7	41.93
1899	21,570				503	23.31	29.3	61	128	163			2	3.97	44.90
1900	21,690				513	23.63	28.9	75	151	154			1	1.97	32.16
1901	21,780				516	23.69	28.5	91	176	151			11	21.3	36.66
1902	21,960				492	22.40	28.6	63	125	133					17.07
1903	21,983				501	22.78	28.4	60	120	132			4	7.99	21.92
1904	22,076				477	21.67	27.9	53	106	145			2	4.19	34.78
1905	22,177				454	20.54	27.2	54	111	128			2	4.41	25.02
1906	22,196				460	20.72	27.0	65	141	132			5	10.90	36.73
1907	22,280	442	20	45.25	422	18.94	26.3	42	99	116	62	140.3			14.76
1908	22,365	475	23	48.32	452	20.21	26.5	47	104	120	70	147.6	3	6.64	24.04
1909	22,455	428	17	39.72	411	18.30	25.6	40	97	109	57	133.2	1	2.43	14.97
1910	22,520	427	24	56.26	403	17.89	24.8	36	89	105	60	140.5	2	4.96	15.69
1911	20,843	391	24	61.64	367	17.57	24.4	29	79	130	53	135.5	9	24.50	44.04
1912	20,900	377	18	47.74	359	17.77	23.8	29	81	195	47	124.4			9.18
1913	20,960	397	24	60.41	373	17.79	23.9	25	67	108	49	123.4	2	5.34	24.20
1914	21,020	398	17	42.71	381	18.12	23.8	29	76	105	46	115.1	1	2.62	21.05
1915	21,100	361	16	44.32	345	17.10	21.8	36	104	110	52	144.0	2	5.79	18.86
1916	19,748	366	21	57.38	345	16.06	21.6	21	61	91	42	114.8			12.47
1917	19,332	310	15	48.40	295	13.68	17.8	26	88.4	96	41	132.3	6	2.03	12.18
1918	19,364				304	14.01	17.7	36	118	97					10.99
1919	21,000	304	11	36.18	293	14.01	18.5	26	88.6	89	37	121.3	1	3.4	9.59
1920	20,871	445	22	49.44	423	20.27	25.4	31	73.16	80	53	119.1			8.3
1921	20,610	416	22	52.90	394	19.12	22.4	38	111.0	83	60	144.2	4	10.2	15.5
1922	20,670				331	16.01	20.6	31	96.6	77			8	24.1	6.2
1923	20,390	299	14	46.82	285	13.48	19.7	16	56.14	69	30	100.4	3	10.52	7.7
1924	20,100	314	19	60.51	295	14.66	18.8	13	44	75	32	101.9	3	10.8	7.3
1925	19,920	303	9	29.70	294	14.70	18.3	24	81.6	75	33	108.9	1	3.4	8.4
1926	19,440	311	17	54.66	294	15.1	17.8	14	47	70	31	99.7	1	5.4	8.7
1927	19,380	267	11	41.20	256	13.2	16.7	23	90	69	34	127.3			6.3
1928	19,460	264	12	45.45	252	12.9	16.7	11	44	65	23	87.1	1	4.0	7.0
1929	19,640	267	18	67.41	249	12.1	16.3	20	80	74	38	142.3	2	8.0	8.1
1930	19,640	242	15	61.16	227	11.6	16.3	16	75	60	31	128.1			6.0
1931	19,940	219	14	63.9	205	10.3	15.8	15	73.2	66	29	132.4			6.0
1932	19,740	263	8	30.4	255	12.9	15.3	20	78.4	65	28	106.4	1	3.91	6.6
1933	19,670	213	8	37.6	205	10.4	14.4	10	48.4	64	18	84.5			7.1
1934	19,550	266	16	64.00	250	12.78	14.8	15	64.00	59	31	116.6	2	8.0	5.5
1935	19,510	258	21	81.40	237	12.15	14.7	9	37.97	57	30	116.3	1	4.22	5.7
1936	19,430	231	7	30.30	224	11.53	14.8	19	84.82	59	26	112.1	4	17.86	5.9
1937	30,120	425	18	42.35	407	13.51	14.9	17	41.77	58	35	82.4			5.8
1938	30,140	453	19	41.94	434	14.4	15.1	20	46.08	53	39	86.1			5.5
1939	29,900	441	19	43.08	422	14.1	15.0	17	40.28	50	36	81.6			4.6
1940	29,540	365	11	30.10	354	11.98	14.6	27	76.27	55	38	104.1	1	2.80	4.6
1941	29,680	407	16	39.31	391	13.17	14.2	29	74.16	59	45	110.5			5.1
1942	29,170	458	10	21.83	448	15.35	15.8	20	44.64	49	30	65.5	2	4.46	5.2
1943	28,500	474	6	12.66	468	16.42	16.5	20	42.73	49	26	54.8	1	2.13	5.3
1944	27,840	519	15	28.9	504	18.10	17.6	29	57.54	46	44	84.78	2	3.97	4.8
1945	27,540	420	6	14.29	414	15.03	16.1	13	31.4	46	19	45.24	1	2.42	5.6
1946	29,810	516	13	25.19	503	16.87	19.1	17	33.79	43	30	57.95	1	0.03	4.4
1947	30,350	572	22	38.46	550	18.12	20.5	22	40.00	41	44	76.92	3	5.45	5.8
1948	30,810	524	14	26.72	510	16.55	17.9	20	39.22	34	34	64.88		0.00	3.3
1949	30,760	514	9	17.51	505	16.42	16.7	12	23.76	32	21	40.86		0.00	3.0
1950	30,710	461	6	13.02	455	14.81	15.8	11	24.22	30	17	36.88		0.00	1.9
1951	30,500	463	13	28.0	450	14.75	15.5	11	24.44	30	24	51.84		0.00	1.4
1952	30,420	413	9	21.8	404	13.3	15.3	9	22.3	28	18	43.58		00.0	1.1

TABLE 23.

ANNUAL DEATHS FROM SPECIFIED CAUSES IN BRIGHOUSE SINCE THE INCORPORATION OF THE BOROUGH,
1894.

Year	Population	Maternal Deaths			Number of Deaths from Various Causes and Rates per 1,000 of Population																				Tuberculosis								All Causes			
		Puer- per- Sep- sis	Other Puer- peral	Total Death Rate per 1000 Total Births	Typhoid and Paratyphoid Fever		Smallpox		Measles		Scarlet Fever		Whooping Cough		Diphtheria		Influenza		Cancer		Tuberculosis				All Causes											
					No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate	Lungs		Other		Total		No.	Rate						
																							No.	Rate	No.	Rate	No.	Rate			No.	Rate	No.	Rate	No.	Rate
1894	21,043				5	0.24	—	0.00	4	0.19	1	0.05	13	0.61	4	0.19	7	0.33	13	0.61	36	1.71	7	0.33	43	2.04	312	14.6								
1895	21,153				3	0.14	—	0.00	13	0.62	1	0.05	3	0.14	3	0.14	—	0.00	11	0.51	40	1.8	13	0.61	53	2.41	349	16.50								
1896	21,238				2	0.09	—	0.00	16	0.75	3	0.14	6	0.28	—	0.00	—	0.00	14	0.65	40	1.74	3	0.14	43	1.88	360	17.00								
1897	21,347				3	0.14	—	0.00	4	0.19	5	0.24	10	0.46	1	0.05	11	0.51	10	0.46	32	1.36					322	15.08								
1898	21,466				4	0.24	—	0.00	12	0.56	3	0.14	1	0.05	2	0.09	1	0.05	17	0.79	41	1.72					418	17.60								
1899	21,570				2	0.09	—	0.00	—	0.00	9	0.41	3	0.14	1	0.05	6	0.28	15	0.70	33	1.41					371	17.10								
1900	21,690	—	2	3.89	2	0.09	—	0.00	10	0.46	7	0.32	13	0.60	6	0.28	—	0.00	15	0.70	39	1.82	12	0.56	51	2.38	399	18.39								
1901	21,780	—	3	5.81	3	0.14	—	0.00	2	0.09	1	0.05	—	0.00	12	0.55	—	0.00	14	0.65	43	1.88					345	15.84								
1902	21,960	—	2	4.06	1	0.05	2	0.09	14	0.65	2	0.09	5	0.23	7	0.31	2	0.09	9	0.41	33	1.50	9	0.41	41	1.91	305	13.88								
1903	21,983	—	4	3.99	—	0.00	1	0.05	6	0.28	2	0.09	6	0.28	—	0.00	4	0.18	10	0.45	27	1.23	5	0.23	32	1.46	258	11.73								
1904	22,076	—	—	0.00	—	0.00	1	0.05	—	0.00	3	0.13	5	0.23	1	0.05	4	0.18	21	0.95	43	1.94	13	0.59	56	2.43	305	13.81								
1905	22,100	—	3	6.60	—	0.00	—	0.00	5	0.23	1	0.04	—	0.00	4	0.18	4	0.18	20	0.90	30	1.35	9	0.41	39	1.76	268	12.11								
1906	22,196	—	5	10.86	2	0.09	—	0.00	7	0.31	7	0.31	4	0.18	1	0.05	1	0.04	21	0.94	27	1.21	13	0.58	40	1.79	312	14.50								
1907	22,280	—	1	2.37	1	0.05	—	0.00	—	0.00	—	0.00	9	0.39	9	0.39	5	0.22	15	0.67	25	1.12	6	0.26	31	1.38	298	13.37								
1908	22,365	—	1	2.21	—	0.00	—	0.00	14	0.63	—	0.00	—	0.00	10	0.45	6	0.26	20	0.89	31	1.38	11	0.49	42	1.87	320	14.30								
1909	22,455	—	2	7.29	3	0.14	—	0.00	1	0.04	2	0.09	8	0.35	5	0.22	7	0.31	16	0.71	26	1.15	5	0.22	31	1.37	283	12.60								
1910	22,520	—	3	7.46	1	0.05	—	0.00	11	0.48	1	0.04	5	0.22	4	0.18	2	0.09	27	1.20	24	1.06	10	0.44	34	1.50	264	11.72								
1911	20,843	1	1	5.44	1	0.05	—	0.00	—	0.00	—	0.00	2	0.10	3	0.14	3	0.14	14	0.67	24	1.14	10	0.48	34	1.62	258	12.53								
1912	20,900	1	1	5.57	2	0.10	—	0.00	2	0.10	3	0.15	3	0.15	1	0.05	—	0.00	25	1.19	27	1.24	9	0.43	36	1.67	294	14.06								
1913	20,960	1	2	8.04	1	0.05	—	0.00	—	0.00	—	0.00	—	0.00	1	0.05	1	0.05	18	0.85	39	1.91	6	0.28	45	2.19	284	13.55								
1914	21,020	1	2	7.87	—	0.00	—	0.00	1	0.04	—	0.00	6	0.28	5	0.23	—	0.00	27	1.28	34	1.62	9	0.42	43	2.04	290	13.80								
1915	21,100	1	2	8.69	—	0.00	—	0.00	31	1.43	1	0.04	—	0.00	15	0.71	4	0.17	18	0.89	22	1.04	11	0.52	33	1.56	331	16.40								
1916	19,748	1	1	5.79	—	0.00	—	0.00	2	0.10	—	0.00	2	0.10	8	0.38	4	0.17	30	1.51	27	1.42	12	0.60	39	2.02	316	16.05								
1917	19,332	1	2	10.16	1	0.05	—	0.00	2	0.10	1	0.05	—	0.00	1	0.05	8	0.38	19	1.03	19	0.93	12	0.60	31	1.53	299	15.51								
1918	19,364	1	1	6.57	—	0.00	—	0.00	3	0.15	—	0.00	15	0.77	2	0.10	59	3.04	22	1.13	32	1.65	7	0.35	39	2.00	373	19.26								
1919	21,000	—	2	6.82	—	0.00	—	0.00	—	0.00	—	0.00	—	0.00	—	0.00	28	1.39	20	0.99	26	1.31	6	0.29	32	1.59	295	14.60								
1920	20,871	—	—	0.00	—	0.00	—	0.00	7	0.33	1	0.05	—	0.00	3	0.14	4	0.19	28	1.34	23	1.10	5	0.24	28	1.34	271	12.98								
1921	20,610	—	—	1	0.05	—	0.00	—	0.00	1	0.05	3	0.14	2	0.10	7	0.34	19	0.91	19	0.91	7	0.34	26	1.25	263	12.76									
1922	20,670	—	2	6.04	—	0.00	—	0.00	—	0.00	1	0.05	1	0.05	1	0.05	19	0.92	25	1.21	18	0.87	6	0.29	24	1.16	265	12.82								
1923	20,390	1	1	7.01	—	0.00	—	0.00	1	0.05	—	0.00	3	0.15	—	0.00	9	0.44	21	1.03	21	1.03	6	0.29	27	1.32	272	13.33								
1924	20,100	—	1	3.38	—	0.00	—	0.00	—	0.00	4	0.19	3	0.15	2	0.09	23	1.14	28	1.38	23	1.14	7	0.34	30	1.48	283	14.08								
1925	19,920	1	2	10.20	1	0.05	—	0.00	7	0.35	1	0.05	1	0.05	—	0.00	10	0.50	35	1.81	17	0.85	6	0.30	23	1.15	314	15.70								
1926	19,440	—	—	0.00	—	0.00	—	0.00	—	0.00	—	0.00	—	0.00	2	0.10	10	0.51	36	1.85	20	1.02	5	0.25	25	1.27	257	13.2								
1927	19,380	—	1	3.90	—	0.00	—	0.00	2	0.10	—	0.00	—	0.00	1	0.05	25	1.29	34	1.75	20	1.02	6	0.31	26	1.33	297	15.3								
1928	19,460	—	—	0.00	—	0.00	—	0.00	—	0.00	—	0.00	—	0.00	1	0.05	6	0.31	20	1.03	17	0.87	4	0.20	21	1.07	243	12.5								
1929	19,640	—	1	4.01	1	0.05	—	0.00	—	0.00	—	0.00	1	0.05	—	0.00	24	1.22	36	1.83	18	0.91	6	0.30	24	1.21	308	15.7								
1930	19,640	—	2	8.80	2	0.10	—	0.00	—	0.00	2	0.10	2	0.10	1	0.05	3	0.15	39	1.98	13	0.66	1	0.05	14	0.71	266	13.5								
1931	19,940	—	1	4.60	—	0.00	—	0.00	—	0.00	—	0.00	1	0.05	2	0.10	5	0.25	39	1.98	13	0.66	1	0.05	14	0.71	266	13.5								
1932	19,740	1	1	7.60	—	0.00	—	0.00	—	0.00	—	0.00	1	0.05	2	0.10	5	0.25	35	1.75	15	0.75	6	0.30	21	1.05	273	13.7								
1933	19,670	—	1	4.70	1	0.05	—	0.00	—	0.00	1	0.05	1	0.05	1	0.05	13	0.65	31	1.57	12	0.61	2	0.10	14	0.71	266	13.4								
1934	19,550	1	3	15.04	—	0.00	—	0.00	—	0.00	—	0.00	—	0.00	2	0.10	3	0.15	40	2.05	11	0.56	2	0.10	13	0.66	274	14.0								
1935	19,510	—	1	3.88	—	0.00	—	0.00	—	0.00	—	0.00	—	0.00	—	0.00	3	0.15	38	1.90	11	0.56	2	0.10	13	0.66	247	12.7								
1936	19,430	3	—	12.99	—	0.00	—	0.00	—	0.00	2	0.10	2	0.10	3	0.15	4	0.20	38	1.96	8	0.41	4	0.20	12	0.61	294	15.13								
1937	30,120	1	—	2.35	—	0.00	—	0.00	—	0.00	1	0.03	1	0.03	2	0.07	24	0.79	55	1.83	17	0.56	4	0.13	21	0.69	447	14.84								
1938	30,140	—	1	2.21	1	0.03	—	0.00	—	0.00	1	0.03	—	0.00	—	0.00	3	0.09	52	1.73	10	0.33	4	0.13	14	0.46	404	13.4								
1939	29,900	2	—	4.53	—	0.00	—	0.00	—	0.00	—	0.00	—	0.00	1	0.03	4	0.13	61	2.04	14	0.47	3	0.10	17	0.57	476	15.92								
1941	29,680	—	1	2.46	—	0.00	—	0.00	—	0.00	—	0.00	—	0.00	9	0.30	47	1.59	10	0.34	4	0.14	14	0.47	462	15.67										
1942	29,170	—	1	2.18	—	0.00	—																													

ANNUAL REPORT OF THE CHIEF SANITARY INSPECTOR
AND CLEANSING SUPERINTENDENT FOR THE YEAR
1952

TO HIS WORSHIP THE MAYOR, ALDERMEN AND
COUNCILLORS OF THE BOROUGH OF BRIGHOUSE.

Mr. Mayor, Lady and Gentlemen,

I have pleasure in submitting to you the Annual Report of the environmental health and public cleansing services for the year 1952, the former services covering the period ending 31st December, 1952, whilst the latter is for the financial year ending 31st March, 1953.

The report sets out in detail the activities of the Department during the year, from which it will be seen that good solid progress was made in all sections of the Department.

Housing still remains the most vital problem, difficulties in the repair of sub-standard houses being the major problem. In very few instances can advantage be taken of the repairs section of the Housing Act, with the result that the great majority of defects are dealt with under the Public Health Act. It is very pleasing to record that your Council decided to proceed with one clearance area during the year.

New Legislation in the shape of the West Riding County Council (General Powers) Act came into operation on the 1st April, 1952. The powers contained in the same in relation to the Registration of Food Hawkers, and Hairdressers and Barbers Shops being most useful.

The Public Cleansing Services were well maintained during the year and although the revenue decreased compared to the previous year, the results were still very satisfactory due to greater efficiency being obtained through the introduction of modern paper and tin baling equipment.

In conclusion may I tender my thanks to the Chairman, Vice-Chairman and members of the Health and Cleansing Committee for their continued confidence and support in all matters referred to them, to the Sanitary Inspectors for their assistance, to the Clerical Staff, Foreman Engineer and finally the workmen of the Cleansing Department.

I am, Mr. Mayor, Lady and Gentlemen,

Your obedient servant,

C. R. MOSS,

Chief Sanitary Inspector and
Cleansing Superintendent.

WATER.

Public Water Supply.

The Borough of Brighouse is supplied with water from the Halifax Corporation Reservoirs, and during the year under review regular routine samples for Bacteriological Examination were taken from the various Wards in the Borough with the following results:—

Ward.	Number of Samples Submitted.			Number Satisfactory.	Number Unsatisfactory.
Central	6	6	—		
Clifton	6	6	—		
Hipperholme	6	6	—		
Hove Edge	6	6	—		
Longroyde	6	6	—		
Lightcliffe	6	6	—		
Southowram	6	6	—		
Woodhouse	6	6	—		
Totals	48	48	—		

Private Water Supplies.

During the year samples were also submitted from private wells and springs in the Borough with the following results:—

Situation.	No. Submitted.	Satisfactory.	Unsatisfactory.
Ashday Works	1	—	1
Brighouse Mills	1	—	1
Cromwell Bottom	1	—	1
Elliott's, Sand & Gravel Works	1	—	1
Field Head, Norwood Green	6	1	5
Lower Norcliffe Farm ...	1	1	—
Regional Slaughterhouse ...	2	1	1
Ridge End Cottages ...	2	—	2
Sunny Bank, Southowram	2	—	2
Totals	17	3	14

Field Head, Norwood Green was dealt with as a clearance area and is referred to later in this report.

Examination for Plumbo-Solvency.

One sample of water was submitted during the year for special examination for Plumbo-solvency, details of the examinations were as follows :—

Supply.	Date Sample Collected.	Address at which Collected.	Approx. length of Lead Service Pipe.	Result of Examination.	
				Lead contents (Grains per Gal.	pH value.
After standing in pipe for measured period of $\frac{1}{2}$ hr.	4.4.52	40 River St. Rastrick	25 ft.	Nil	6.6
After standing in pipe all night	4.4.52	do.	25 ft.	Nil	6.4

Water Supply — Public Swimming Baths.

Routine samples of the water in the Bathing Pool of the Public Swimming Baths, Mill Royd Street, were submitted during the year for Bacteriological Examination. The details of these are as follows :—

Month.	No. Obtained.			No. Satisfactory.	No. Unsatisfactory.
January	2	—
February	2	—
March	2	—
April	2	—
May	2	—
June	2	1
July	4	2
August	2	—
September	2	—
October	2	—
November	2	—
December	2	—
Totals	26	23	3

SANITARY ACCOMMODATION.

53 additional water closets were provided during 1952 to existing properties, 93 water closets were provided for new houses.

The following table indicates the numbers of the various types of Sanitary Conveniences in the Borough at the end of the year :—

Fresh Water Closets	.....	.....	.....	.....	11,279
Waste Water Closets	.....	.....	.....	.....	64
Pail Closets	.....	.....	.....	.....	186
Privies	.....	.....	.....	.....	86

4 privies and 1 pail closet were converted to fresh water closets during the year.

DRAINAGE.

47 inspections were paid during the year in connection with the repairs and reconstruction of drains to existing houses.

In 48 instances use was made of the smoke test, whilst in 136 instances the use of colour was resorted to and the water test was used on two occasions.

PREMISES AND OCCUPATIONS CONTROLLED BY BYELAWS AND REGULATIONS.

Offensive Trades.

The following Offensive Trades are carried on in the Borough with the permission of the Council :—

Tripe Boiler	.....	.....	.....	.....	.....	1
Soap Boilers	.....	.....	.....	.....	.....	2
Rag and Bone Dealers	.....	.....	.....	.....	.....	2

8 inspections were paid to these premises during the year, and the Byelaws were found to be well observed.

MOVEABLE DWELLINGS

Tents, Vans, Sheds, etc.

3 sites in the Borough are licensed under the provisions of Section 269 of the Public Health Act, 1936, as the Sites for moveable dwellings, as follows :—

Land, Atlas Mill Road	.....	.....	.....	3 caravans
Broadholme, Mill Yard, Atlas Mill Road	.....	.....	.....	1 caravan
Whittaker Pitt, Clifton	.....	.....	.....	1 caravan

FACTORIES ACT, 1937

Bakehouses.

212 inspections were paid during the year to 18 bakehouses in the Borough.

Factories (Mechanical and Non-Mechanical).

8 complaints were received from H.M. Inspector of Factories. The following improvements were carried out at Factory Premises during the year :—

SANITARY ACCOMMODATION.

	No. of defects.	
	Found.	Remedied.
Conveniences requiring cleansing	1	1
Unsuitable or defective conveniences	7	6

239 inspections were paid to these premises during the year and the following additional defects were revealed and action taken :—

Absence of notice as to sex	1
Conveniences requiring cleansing	6
Conveniences inadequately lighted	7
Insufficient sanitary conveniences	2
Unsuitable or defective conveniences	4
Other offences	3

The following is a list of classified trades carried on in the Borough :—

Aerated Waters	1
Aircraft Parts	1
Artificial Stone	6
Asphalt	1
Bakehouses	19
Bedding Manufacture	2
Blacksmiths	3
Boot and shoe repairs	7
Brick Manufacture	5
Cabinet Making	3
Caravans	1
Card clothing	4
Carpet Manufacture	4
Cattle Foods	2
Chemicals	1
Clock Making	1
Clothing	7
Coal Gas	1
Condiment Manufacture	3
Dyers	5
Electrical trades	4

Electro Plating	1
Enamelling	1
Engineering	17
Engraving	1
Fireplace Manufacture	1
Fish Meal	1
Flock Cleansing and Teasing	1
Flour Milling	1
Food preparation	5
Generation and transforming of electricity	2
Glazed Pipes	1
Gramophone Parts	1
Handbags	1
Ice Cream	2
Joinery	24
Laundering	4
Machine tools	8
Maltsters	3
Metal Spinning and Stamping	1
Metal founding	11
Mortar Grinding	4
Motor Vehicle Repairs	18
Oil Refining	1
Packing Manufacture	2
Packing Cases	1
Paint Manufacture	2
Patent Glazing	1
Pattern making	3
Photography	2
Plumbing	4
Portable Buildings	2
Printing	3
Radio and television	5
Rubber Pads — Horses	1
Rubber—Fabric Lined	1
Rug manufacture	1
Sheet metal workers	4
Soap Manufacture	2
Stone trades	3
Tanning	2
Textiles	39
Warehousing	3
Wire drawing	10
Wire Goods	6
<hr/>	
Total	288
<hr/>	

PREVENTION OF DAMAGE BY PESTS ACT, 1949.

This work is carried out by the Part-time Rodent Operative employed by the Department, and the following table indicates the types of infestation treated during the year.

(1) Types of Infestations.

		Local Aut'y.	Private Premises	Agri- cultural Premises	Business Premises	Total
Rats,	Major.	1	Nil	4	Nil	5
	Minor.	8	31	4	10	53
	Total.	9	31	8	10	58
Mice.		1	22	Nil	18	41
	Total.	10	53	8	28	99

(2) Baits and Poisons used.

BAITS.

Sausage Rusk.
Bread Mash.
Oatmeal.
Soaked Wheat.

POISONS.

Zinc Phosphide.
Red Squill.
Arsenic.

In addition to the above-mentioned poisons, a new rodenticide, Warfarin, has been employed by the Department.

Warfarin is an anti-blood coagulant which when ingested gives rise to internal haemorrhage, culminating in painless death in three to five days time.

A lethal dry mix is laid directly, thus obviating the necessity of pre-baiting and the laying of specific poison points, whilst the painless effect of the mix results in the rodents feeding right up to the time of death, eliminating the need for check points.

(3) Gassing.

On no occasion during the year has gassing been used for the purpose of achieving disinfection.

(4) Results of Treatments.

	Local Aut'y.	Private Premises	Agri- cultural Premises	Business Premises	Total
Rats.					
Major Infestations.	1	Nil	4	Nil	5
Infestations cleared.	1		3		4
Reduced to Minor.			1		1
Infestations outstanding.	Nil	Nil	1	Nil	1
Minor infestations.	8	31	4	10	53
Infestations cleared.	8	30	3	10	51
Infestations outstanding.	Nil	1	1	Nil	2
Total infestations out- standing at year end.	Nil	1	2	Nil	3
Infestations re-treated.	Nil	1	5	Nil	6
Mice.					
Infestations treated.	1	22	Nil	18	41
Infestations cleared.	1	22		18	41
Infestations outstanding.	Nil	Nil	Nil	Nil	Nil

(5) Details of Treatments.

Number of pre-baits laid	.....	.....	.....	.....	1615
Number of poison points laid	.....	.....	.....	.....	545
Number of check baits laid	.....	.....	.....	.....	207
				Total	2367
Number of bodies seen	.....	.....	.....	.....	150
Number of presumed killed	.....	.....	.....	.....	628
				Total	778

(6) Details of Inspections carried out.

Number of inspections paid to premises by Inspectors relative to the Act	.....	.....	.....	.....	562
Re-inspections paid by Inspectors	.....	.....	.....	.....	385
Number of visits paid by Rodent Operative during the year in connection with the above infestations	.....	.....	.....	.....	346
				Total	1293

RAG FLOCK AND OTHER FILLING MATERIALS ACT, 1951

4 premises were registered under the above Act during the year; 3 for the use of rag flock as filling material for furniture manufacture, and 1 for the storage of rag flock. 11 inspections were carried out on these premises during the year.

3 samples of rag flock were submitted for examination to the prescribed analyst and were found to be satisfactory. Average results are set out in the following table.

Test	Result	Permissible Amount
Chlorine in parts per 100,000	11.66	30
Oil and Soap	2.90%	5.0%
Soluble impurities	0.97%	1.8%

ATMOSPHERIC POLLUTION.

387 "timed $\frac{1}{2}$ hr." observations were taken during 1952. The following table gives detailed particulars of the observations taken:—

No. of chimneys of which observations have been taken	71
No. of observations taken	387
Average No. in Minutes black smoke during the above 387 observations .....	.33
Average No. of minutes smoke other than black smoke during the 387 observations	2.58
No. of observations showing black smoke	55
Average No. of minutes black smoke during the above 55 observations	2.31
No. of observations showing black smoke exceeding 3 minutes in every 30	3
Average No. minutes black smoke during the above observations	16.80
Maximum No. of minutes black smoke emitted by any one chimney during 30 mins. observation	30
No. of Notices of Offence served	3

Details of results of the atmospheric pollution gauges are given on page 71. Comparison with two previous years are as follows :—

	1952.	1951.	1950.
	Total Solids in Tons per Square Mile.		
Wellholme Park	141.37	152.9	145.7
Rastrick (Carr Green)	132.46	145.1	144.4
King George V. Park	142.50	159.6	166.2
Lightcliffe			
Southowram	130.88	—	—
Clifton	115.20	—	—

Clifton refers to 11 months only.

DEPOSITED ATMOSPHERIC POLLUTION, 1952.

	Wellholme Park				Carr Green				King George V. Park				Southowram Church				Clifton : Towngate			
	Rainfall Inches	Insoluble Solids	Soluble Solids	Total Solids	Rainfall Inches	Insoluble Solids	Soluble Solids	Total Solids	Rainfall Inches	Insoluble Solids	Soluble Solids	Total Solids	Rainfall Inches	Insoluble Solids	Soluble Solids	Total Solids	Rainfall Inches	Insoluble Solids	Soluble Solids	Total Solids
January ...	4.17	6.24	9.56	15.80	3.08	3.89	8.63	12.52	3.88	2.89	7.91	10.80	2.96	5.77	11.33	17.10				
February ...	0.99	5.91	4.05	9.96	0.65	2.34	3.47	5.81	1.27	3.53	4.24	7.77	0.62	2.22	3.98	6.20	0.77	3.19	5.14	8.33
March ...	1.61	7.93	5.78	13.71	1.62	6.77	7.84	14.61	1.83	5.82	5.58	11.40	1.66	3.98	2.98	6.96	1.55	6.06	5.53	11.59
April ...	2.08	8.00	5.31	13.31	1.94	3.95	5.95	9.90	1.99	7.34	4.59	11.93	2.13	3.12	5.43	8.55	1.70	7.28	5.20	12.48
May ...	1.41	6.27	4.65	10.92	1.56	4.20	5.98	10.18	2.11	7.02	5.37	12.39	1.56	5.40	3.18	8.58	1.45	4.97	3.69	8.66
June ...	1.93	6.44	2.72	9.16	2.21	1.93	4.51	6.44	1.88	1.69	4.62	6.31	1.97	3.28	2.95	6.23	1.96	4.35	4.02	8.37
July ...	1.20	7.63	4.88	12.51	1.40	8.80	4.30	13.10	0.83	4.17	3.18	7.35	1.04	6.96	7.69	14.65	1.14	5.60	4.94	10.54
August ...	2.84	6.27	5.11	11.38	2.60	9.66	3.43	13.09	3.36	15.77	4.30	20.07	2.96	3.64	4.50	8.14	2.06	5.50	4.22	9.72
September ...	2.34	8.23	5.97	14.20	2.05	4.44	8.87	13.31	2.88	2.79	5.86	8.65	2.39	4.54	15.24	19.78	1.96	5.17	5.01	10.18
October ...	4.01	7.30	8.16	15.46	3.67	4.71	7.50	12.21	4.32	12.64	12.11	24.75	3.90	4.97	7.95	12.92	3.87	4.35	7.90	12.25
November ...	1.72	2.85	3.95	6.80	1.79	1.58	6.81	8.39	2.22	1.66	6.21	7.87	1.97	1.96	8.55	10.51	1.70	2.27	6.95	9.22
December ...	1.04	2.85	5.31	8.16	2.00	4.75	8.15	12.90	2.33	4.31	8.90	13.21	2.18	2.78	9.48	12.26	2.12	3.62	10.24	13.86
Yearly Aggregate	25.34	75.92	65.45	141.37	24.57	57.02	75.44	132.46	28.90	69.63	72.87	142.50	25.34	47.62	83.26	130.88	20.28	52.36	62.84	115.20
Monthly Averages	2.11	6.33	5.45	11.78	2.05	4.75	6.29	11.04	2.41	5.80	6.07	11.87	2.11	3.97	6.94	10.91	1.84	4.76	5.71	10.47

Monthly Average for whole Borough :—

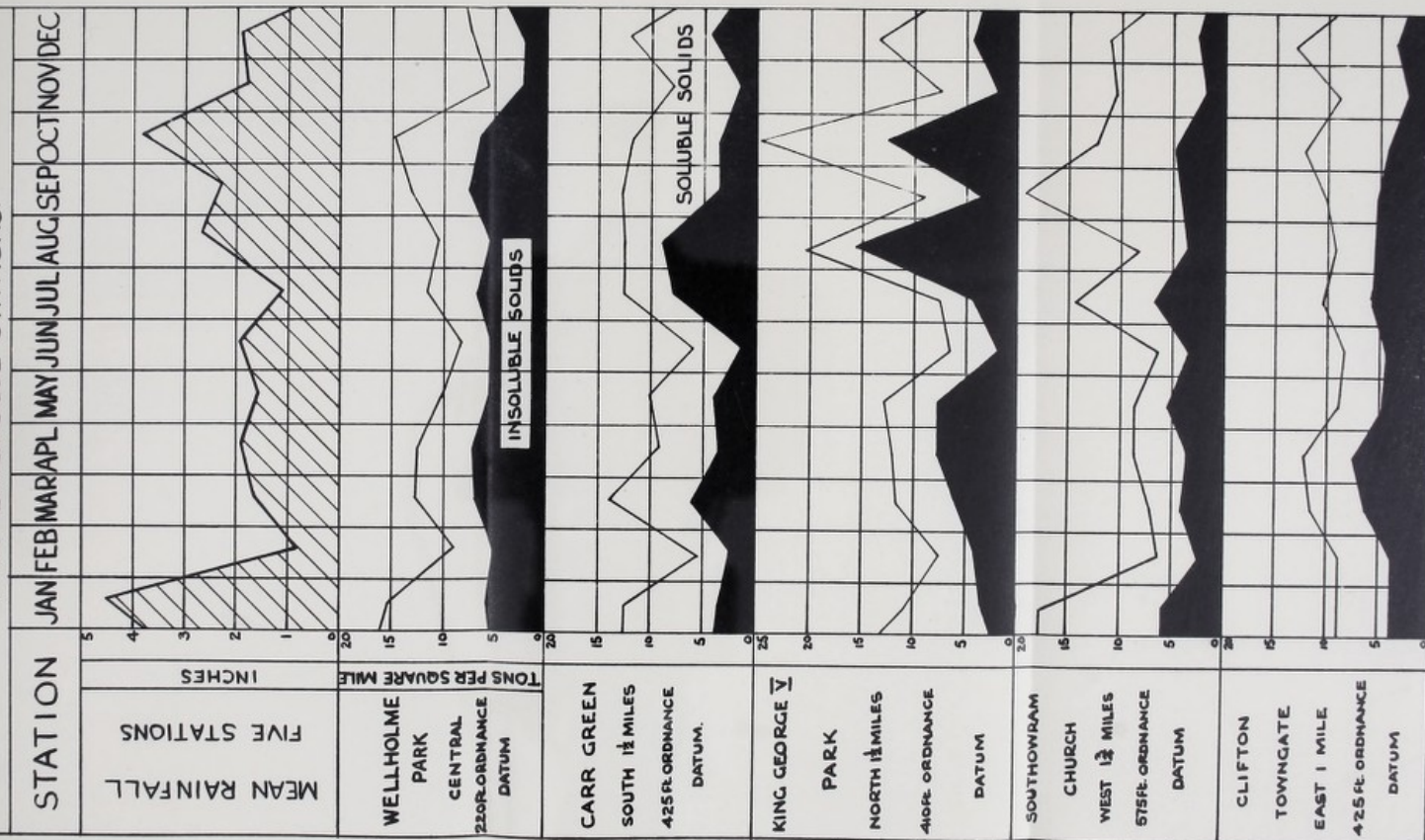
Rainfall in inches	...	...	...	...	...	2.10
Insoluble Solids	...	...	...	...	...	5.12
Soluble Solids	...	...	...	...	...	6.09
Total Solids	...	...	...	...	...	11.21

Total Annual Deposit for whole Borough : 134.58 tons per Square Mile.

STATION	Milligrams of S O — Lead Peroxide Method. 1952.													
	Jan.	Feb.	Mar.	Apr.	May	Jne.	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total Daily Av'ge	
Wellholme Park	2.05	1.08	0.75	0.80	0.82	0.52	0.56	0.48	0.95	1.62	1.31	1.57	1.04	
Carr Green	0.96	1.13	0.60	0.55	0.50	0.63	0.36	0.45	0.60	1.03	1.37	1.03	0.75	
King George V. Park ...	1.43	1.23	0.68	0.56	0.59	0.43	0.31	0.41	0.49	1.05	1.03	0.97	0.75	
Southowram Church ...	2.60	1.97	0.95	0.96	1.13	0.79	0.72	0.61	1.22	1.95	2.46	1.79	1.43	
Clifton : Towngate ...	3.32	2.36	1.11	0.86	1.05	0.97	0.56	0.82	1.45	2.12	2.61	2.21	1.62	
Total Daily Average ...	2.07	1.35	0.82	0.75	0.82	0.67	0.50	0.55	0.94	1.35	1.76	1.51	1.09	

Sulphur Pollution — Lead Peroxide Method. 1952.

MONTHLY ATMOSPHERIC DEPOSIT 1952. FIVE BRIGHOUSE STATIONS.



SEPTEMBER DEPOSITS

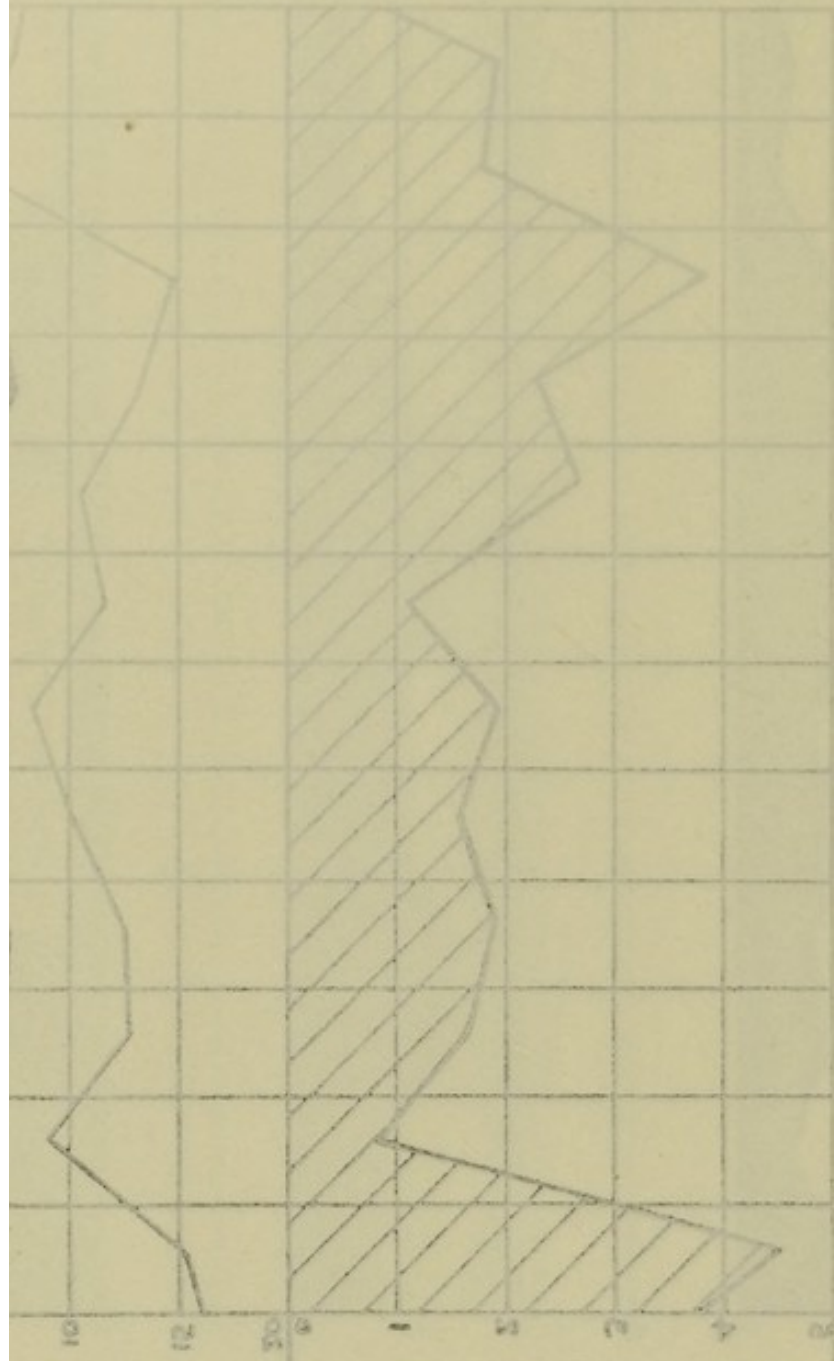
FIVE STATIONS

SEPTEMBER DEPOSITS

STATIONS

MEAN RAINFALL
FIVE STATIONS

MEAN RAINFALL
FIVE STATIONS



INCHES

STATIONS

FOOD INSPECTION AND SUPERVISION

Milk Supply.

At the end of the year there were on the register :—

Distributors resident in the Borough	6
Shops registered for sale of milk in sealed bottles	34
Distributors not resident in the Borough	9

Chemical Examination of Milk.

The work in connection with the sampling of milk is administered by the West Riding County Council's Inspector and myself, the County Council bearing the cost of sampling and also providing any legal assistance necessary.

108 samples were submitted for analysis all of which were formal samples.

12 samples were classified as Genuine although they were below the minimum standard for solids not fat.

96 remaining samples were all classified as Genuine.

	Total Solids.	Solids not Fat.	Milk Fat.
Board of Agriculture Standard ...	11.50	8.50	3.00
Average of 96 Genuine samples ...	12.55	8.67	3.88
Average of 12 Genuine samples ...	12.44	8.43	4.01

Bacteriological Examination of Milk.

During the year 301 samples of milk were taken in the Borough by the Officers of this Department for examination at the Public Health Services Laboratory, Wakefield, these were submitted for examination by the Phosphatase, Methylene Blue and Turbidity Tests with the following results :—

				Methylene Blue Test.			Phosphatase Test.		
				Sat.	Unsat.	Total.	Sat.	Unsat.	Total.
DESIGNATED MILKS.									
1. Tuberculin Tested	...	...	...	33	6	39	73	—	73
2. Pasteurised	...	...	...	72	3	75			
3. Sterilised	...	...	...	12	—	12			
UNDESIGNATED MILKS.									
1. Accredited	...	...	...	39	5	44	73	—	73
2. Ordinary	...	...	...	41	5	46			
			197	19	216				
							Turbidity Test.		
							Sat.	Unsat.	Total.
1. Sterilised	...	...	...				12	—	12
Totals			...	197	19	216	85	—	85

Biological Examination of Milk.

			No. of Samples free from tubercular bacillus.	No. of Samples found Tuberculous.	Total.
Accredited Milk	...	...	10	1	11
Undesignated Milk	...	...	9	—	9
Totals	...		19	1	20

With regard to the sample of milk adversely reported upon by the Bacteriologist an inspection of the farm premises revealed that the whole herd had been disposed of prior to restocking the farm with Tuberculin Tested cattle.

Meat Inspection.

There is one Ministry of Food Slaughterhouse situated in the Borough, where slaughtering takes place. The area served by the slaughterhouse is the Borough area and the Elland district, the population served by the same being approximately 50,000.

The whole of the meat inspection is carried out by your Officers and particulars of the animals slaughtered are given in the following table :—

Month.			Cows.	Beasts.	Sheep.	Pigs.	Calves.	Total.
January	...	...	24	96	342	24	—	486
February	...	...	25	55	610	35	—	725
March	...	...	16	128	408	137	—	689
April	...	...	19	84	475	105	—	683
May	...	...	13	90	270	112	—	485
June	...	...	8	43	357	83	—	491
July	...	...	23	166	335	112	—	636
August	...	...	30	271	731	49	—	1,081
September	...	...	51	327	1,111	—	96	1,585
October	...	...	64	160	1,510	61	106	1,901
November	...	...	64	78	824	27	59	1,052
December	...	...	30	94	600	127	40	891
Totals	...		367	1,592	7,573	301	872	10,705

The following are the details of the visits paid under this heading during the year to :—

Regional Slaughterhouse	.....	.....	.....	.....	380
Food Shops	.....	.....	.....	.....	572
Food Preparing Premises	.....	.....	.....	.....	416

The following unsound food was condemned and surrendered from the shops :—

English Meat

72 lbs. Pork

6 lbs. Bacon

Imported Meat

15 lbs. Beef

15 lbs. Mutton

Fish

69 stone of Crabs
15 cwt. Mussels

67 $\frac{3}{4}$ st. Cod Fillets

Other Foods

556 Shell Eggs
16 pkts. Pudding Mixture
198 pkts. Biscuits
200 Sponge Puddings

91 pkts. Oatcakes
150lbs. Dessicated Coconut
3 portions Gruyere Cheese

Tinned & Bottled Goods

2 lb. Jars Gooseberry Jam.
37 tins Cherries.
64 tins Plums.
4 tins Ham (large).
2 tins Carrots.
13 tins Rabbit.
86 tins Peaches.
8 tins Chopped Pork.
7 tins Banana Pieces.
2 tins Salmon Grade I.
2 tins Salmon Grade II.
5 tins Salmon Grade III.
35 tins Pineapple.
7 tins Pears.
104 tins Evaporated Milk.
20 tins Skimmed Milk.
7 tins Condensed Milk.
61 tins Tomatoes.
24 tins Luncheon Meat.
3 tins Lobster.
4 tins Sweetcorn.
5 tins Ox Tongue.
1 Jar Honey.
2 tins Spaghetti.
1 tin Vitacup.

6 tins Processed Peas.
9 tins Apple Puree.
5 tins Stewed Apple.
1 tin Bilberries.
8 tins Apricots.
10 tins Mandarin Oranges.
1 tin Beef and Ham Paste.
6 tins Sausages.
11 tins Veal.
1 Jar Gooseberries.
19 tins Beans in Tomato.
2 tins Prunes.
6 tins Strawberries.
6 tins Raspberries.
6 tins Chicken.
2 tins Grapes.
3 tins Braised Kidney.
7 tins Grapefruit.
1 tin Herrings in Tomato.
14 tins Fruit Salad.
24 tins Steak.
10 tins Beef Loaf.
4 tins Mulligatawny Soup.
1 tin Mushroom Soup.
1 jar Blackberry Jam.

CARCASSES INSPECTED AND CONDEMNED.

					Cows.	Bovines.	Calves.	Sheep & Lambs.	Pigs.
Number Slaughtered	...	...	...	...	367	1592	301	7573	872
Number Inspected	...	...	...	...	367	1592	301	7573	872
ALL DISEASES EXCEPT TUBERCULOSIS:									
Whole carcasses condemned	...	...	...	...	—	—	8	4	5
Carcasses of which some part or organ was condemned	...	...	...	...	299	655	1	194	16
Percentage of the number inspected affected with disease other than tuberculosis	...	...	...	...	81.4%	41.1%	2.9%	2.6%	2.4%
TUBERCULOSIS ONLY:									
Whole carcasses condemned	...	...	...	...	9	5	2	—	8
Carcasses of which some part or organ was condemned	...	...	...	...	190	221	—	—	31
Percentage of the number inspected affected with tuberculosis	...	...	...	...	54.2%	14.1%	0.6%	—	4.4%

**LIST OF UNSOUND MEAT CONDEMNED AND SURRENDERED AT THE MINISTRY OF
FOOD SLAUGHTERHOUSE, GIVING WEIGHTS AND CAUSES OF CONDEMNATION IN
MONTHLY ORDER.**

Disease.	Jan. lbs.	Feb. lbs.	Mar. lbs.	Apr. lbs.	May lbs.	June lbs.	July lbs.	Aug. lbs.	Sep. lbs.	Oct. lbs.	Nov. lbs.	Dec. lbs.	Totals lbs.
Actinomycosis ...	—	—	28	—	40	—	—	29	32	38	—	—	167
Acute Fever ...	—	—	—	—	—	—	—	61	—	—	—	—	61
Angiomatosis ...	17	35	29	16	18	—	31	64	41	86	138	30	505
Bruising ...	—	33	—	—	—	—	17	—	40	8	—	—	98
Bacterial Necrosis ...	—	—	—	—	—	—	—	—	17	—	8	—	25
Cirrhosis ...	268	218	69	110	182	64	440	739	1122	817	424	466	4919
Distomatosis ...	—	8	3	—	5	—	6	16	97	132	79	47	393
Dropsy ...	—	—	—	—	—	—	—	—	—	108	—	46	154
Emaciation ...	—	—	—	—	—	—	—	—	—	50	35	—	85
Endocarditis ...	—	—	—	—	—	—	—	—	—	—	6	—	6
Fatty Degeneration ...	—	—	—	—	—	—	—	—	—	14	—	—	57
Haemorrhage ...	—	—	—	129	—	—	—	—	43	—	—	—	129
Immaturity ...	—	—	—	—	—	—	—	—	37	31	50	—	118
Inflammatory Condition ...	—	14	63	—	—	—	—	—	48	—	—	—	125
Mastitis ...	71	85	47	110	41	63	114	347	370	492	543	250	2533
Multiple Abscesses ...	32	29	38	28	39	91	91	160	187	94	81	38	908
Moribund ...	—	—	—	112	—	—	—	—	—	—	—	—	112
Pneumonia ...	—	—	—	12	—	—	—	—	—	—	—	—	12
Pyæmia ...	—	—	—	—	—	—	—	—	—	34	—	—	34
Pericarditis ...	—	—	—	—	—	—	—	—	—	—	5	—	5
Septicaemia ...	—	—	—	—	—	—	—	—	—	—	55	389	444
Suffocation ...	—	—	—	—	—	—	—	—	—	—	—	59	59
Swine Erysipelas ...	—	—	—	—	—	—	—	109	—	—	—	—	109
Tuberculosis ...	2261	2026	1594	2669	488	1346	1019	3228	3266	2478	2239	1467	24081
Tumours ...	—	—	—	—	—	—	—	—	—	—	—	50	50
TOTAL WEIGHT 15 Tons, 14 cwts., 0 qrs., 27 lbs.													35189

Bacteriological Examination of Food other than Milk.

24 samples of food other than milk were submitted to the Public Health Laboratory during the year. These included samples of dressed crab, mussels, sausage and pie meat and three tins of food submitted after case of suspected food poisoning.

In the case of suspected food poisoning the Laboratory report was that the organisms isolated were most probably contaminants, as they appear in very small numbers even after culture. The food had been eaten by only one person and consequently no serious outbreak occurred.

The samples of dressed crab and mussels were taken from the manufacturers' premises and in all cases except one proved satisfactory. The one unsatisfactory report showed the presence of a heavily mixed flora of bacteria the principle organisms being staphylococcus aureus B. Coli and proteus vulgaris. Specimens were obtained from all persons handling the food and one employee with a slight cut on the finger was found to be the carrier. This person was stopped from handling the food until such time as a negative specimen was obtained.

An interesting sample submitted to the analyst, was representative portions from a three tier wedding cake which when cut at the wedding reception showed evidence of mould. The analyst reported as follows ; Fungal growth to approximately 1 inch depth. Mycelium ramifying through this layer of cake between top of cake and bottom of almond paste. Non pathogenic members of the mucorales and moniliales group present. It is quite probable that the cake was exposed to contamination prior to icing and was then stored at a temperature suitable to fungal growth.

FOOD AND DRUGS ACT, 1938

Sausages and Cooked Meats.

There are 31 premises registered under the provisions of Section 14 for the preparation or manufacture of sausages or potted, pressed, pickled or preserved food intended for sale, regular routine inspections were made of the same throughout the year, and the importance of good hygiene stressed.

In several instances structural alterations were made and generally speaking the standard of buildings and equipment is satisfactory.

Ice Cream.

11 applications were received during the year to retail ice cream, iced lollies from shop premises making a total of 72 premises now registered.

There are 2 ice cream manufacturers in the Borough where the heat treatment process of manufacture is carried out. Regular routine inspection of these premises revealed that conditions were satisfactory the firms still being anxious to co-operate with us.

A total of 153 samples of ice cream were submitted for the bacteriological examination by the Methylene Blue Reduction Test, particulars are given below :—

Produced.	No. of Samples.	Grade I.		Grade II.		Grade III.		Grade IV.	
		No.	%	No.	%	No.	%	No.	%
In Borough ...	22	19	86.38	1	4.54	1	4.54	1	4.54
Outside Borough	131	101	77.10	21	16.03	5	3.81	4	3.06
Total ...	153	120	78.44	22	14.37	6	3.93	5	3.26

The 22 samples of Ice Cream produced in the Borough were obtained direct from the manufacturers premises.

97 samples of "iced lollies" were submitted for Bacterial Examination all of which were reported as showing No. Coliforms in 3/3 one millilitre amounts.

Of these 97 samples 72 were of local manufacture and 25 were manufactured outside the Borough.

It must be noted that of the 97 samples of "iced lollies" 46 were of the wrapped variety and made by the larger ice cream manufacturers whilst the remaining 51 samples were sold to the public in an unwrapped condition and came from the small shop-keeper making his own supplies.

Considerable attention and time was again devoted to all food shops, food manufacturing premises, licensed houses and clubs in the Borough during the year and in many instances substantial structural improvements were secured. The classification of the various food shops, food manufacturing premises, licensed public houses and clubs are as follows :—

Bakers and Confectioners	26
Cafes and Canteens	11
Grocers and General Mixed Stores	93
Greengrocers	38
Retail Fishmongers	3
Wholesale Fishmongers	4
Fried Fish Fryers	39
Sweet and Ice Cream Retailers	26
Butchers	42
Sweet Manufacturers	1
Condiment Manufacturer	1
Tripe Dresser and Retailer	1
Flour Miller	1
Licensed Public Houses	55

Licensed Clubs	.....	.....	.....	.....	.....	24
Ice Cream Manufacturers	.....	.....	.....	.....	.....	2
Wholesale Delicatessen	.....	.....	.....	.....	.....	1

WEST RIDING COUNTY COUNCIL (GENERAL POWERS) ACT, 1951.

(1) Section 76: Registration of Food Hawkers.

Applications were received for the registration of 19 vehicles for retailing foodstuffs within the Borough. All vehicles were duly registered and strong representations were made to the owners to provide an adequate supply of hot water, soap and towels. Vehicles registered included :—

Greengrocery:

14 motor vehicles.

3 Horse drawn vehicles.

Grocery:

2 motor vehicles.

(2) Section 120 : Registration of Hairdressers and Barbers.

Applications were received for the registration of 35 establishments. Inspections were made at all of the premises and a good standard of hygiene was found to exist and the following were registered.

Gents

11

Ladies

22

Ladies & Gents

2

Byelaws were made for the purpose of securing —

- (a) Cleanliness of premises registered under this section and of the instruments, towels, materials and equipment used therein ; and
- (b) the cleanliness of persons employed in such premises in regard to both themselves and their clothing.

SLAUGHTER OF ANIMALS ACT, 1933.

20 persons are licensed to slaughter animals under the Slaughter of Animals Act, 1933.

INFECTIOUS DISEASE AND DISINFECTION.

63 visits were paid during the year to cases of infectious disease. 18 disinfections were carried out after infectious disease.

PESTOLOGY.

The furniture and effects from 2 houses affected with vermin were treated with H.C.N. prior to removal to new Council houses.

1 house was treated for cockroaches, 1 house was treated for bugs, 9 houses were treated for flea infestation, 2 houses for flies, and 3 houses were treated for wasp infestation with either Gamexane or D.D.T.

5 houses were treated with formaline at request of tenant after a death had occurred at the same.

SANITARY INSPECTION OF DISTRICT.

Total number of Inspections	10,460
Bakehouses Inspected	212
Butchers' Shops Inspected	230
Caravans Inspected	19
Canal Boats Inspected	1
Complaints Investigated	366
Dairies and Milkshops	20
Drainage Inspections	47
Diseases of Animals Act :—	
Visits	19
Dwellinghouses Inspected :—	
Dwellinghouses Inspected and Recorded	27
Housing Acts—Overcrowding Survey	109
Public Health Acts	780
Dwellinghouses Re-inspected	
Housing Acts — Re-inspections	145
Public Health Acts	2,657
Disinfections	22
Disinfestations	23
Drains tested with water	2
Drains tested with smoke	48
Drains tested with colour	136
Factories Inspected	239
Food Hawkers	21
Food Shops	572
Food Preparing Premises	416
Licensed Premises	51
Hairdressers and Barbers	80
Hydrogen Cyanide Regulations :—	
Premises treated	2
Premises inspected	2
Ice Cream Premises Inspected:—	
Manufacture	54
Retail	199

Infectious Diseases	63
Markets Inspected	216
Offensive Trades :—	
Fish Frying Premises	123
Fish Meal Premises	35
Tripe Boiling Premises	4
Pet Animals Act, 1951 :—	
Inspections	6
Prevention of Damage by Pests :—	
Inspections	562
Re-inspections	385
Public Cleansing Service	924
Public Conveniences	426
Rag Flock and Other Filling Materials Act :—	
Inspections	11
Shops Act	85
Smoke Observations	387
Slaughterhouse—Regional	380
Works in Progress	393

SUMMARY OF SANITARY IMPROVEMENTS EFFECTED. PUBLIC HEALTH ACTS, 1875—1936.

Brigthouse Corporation Act, 1907.

Interior of Houses.

Ventilation Shafts repaired or renewed	3
Ventilation provided	5
Fireplace fixtures renewed and repaired	13
Ceilings Replastered	13
Walls Replastered	18
Glazed sinks provided in place of stone sinks	20
Sink waste pipes repaired and renewed	11
Sash cords renewed	5
Burst water pipes repaired	22
Sink waste pipes made to discharge over trapped gullies	1
Defective wooden partition renewed or repaired	1
Additional light provided	1
Hot water cylinder repaired	1
Cellar door renewed or repaired	1
Defective draining board repaired	1
Chimney flues repaired	8
Water gaining access to cellar abated	6
Sewage gaining access to cellar abated	11
Window frames renewed or repaired	10
Defective doors repaired or renewed	3
Floors repaired	10

Grease traps provided	1
Firebacks renewed or repaired	1
Defective oven repaired or renewed	1
Water gaining access to living room abated	1

Exterior of Houses.

Eavesgutters renewed or repaired	98
Rainwater pipes disconnected from drain	7
Decayed pointing renewed	45
Leaky roofs repaired	74
Rain water pipes renewed or repaired	29
Mastic pointing to windows renewed	6
Walls cement rendered	1
Walls repaired	2
Chimney stacks rebuilt	1
Walls rendered with 'Pudlo'	1
Putty pointing renewed	1
Coal store rebuilt	1
Chimney stacks repointed	8
Defective chimney pot renewed	1

Yards and Outbuildings.

Paving relaid	1
Offensive accumulations removed	6
Animals kept in such a state as to be a nuisance abated	2

Drainage.

Drains repaired and renewed	35
Drains cleansed from obstruction	103
Inspection chambers provided	9
Inspection chamber covers renewed	5
Drains connected to sewer	1
Cesspool constructed	1
Additional gullies provided	5
Rodding eye provided	1

Sanitary Conveniences.

Dirty sanitary conveniences cleansed	3
Flushing cistern repaired	7
W.C. pedestal renewed	5
Additional w.c.'s provided	1
Privies converted to fresh water closets	4
Pail closet converted to fresh water closet	1
Privies abolished	4
W.C. seat repaired	1

House Refuse Accommodation.

Dilapidated dustbins renewed	244
Additional dustbins provided	5
Defective dustbins provided in default	1

Food Preparing Premises

New concrete floors provided	2
Ventilation provided	2
Walls of food storage room cleansed and limewashed	1
Walls of food storage room painted with washable paint	2
Walls of bakehouse painted with washable paint	4
Ceiling of bakehouse painted with washable paint	4
Shop walls and ceiling painted with washable paint	2
Walls of preparation room re-painted with washable paint	9
Walls cement rendered	15
Ceilings underdrawn	8
New glazed sinks provided	5
Ceilings of preparation room painted with washable paint	9
Instantaneous supply of hot water provided	10
Plaster walls replastered	1
Plaster ceilings repaired	5
Walls and ceiling of preparation room thoroughly cleansed	5
Protective passage constructed and painted with washable paint	1
Central heating boiler repaired	1
Gas fire oven provided	1
Impervious floor provided	6
New preparation bench provided	2
External coal store provided	1
Shutter to display case provided	1
Notice as to sex provided for w.c.	1
Water supply provided	1
New shop fittings provided	1
New shop front provided	1

Factories.

Conveniences provided for males and females	8
Conveniences cleansed	8
Conveniences limewashed	4
Conveniences labelled as to sex	5
Artificial light provided	5
Premises drained to sewer	3
Door fastener provided	3
Intervening ventilated space provided	2
Additional w.c.'s provided	1
Insanitary conveniences abolished	1
Roof to sanitary conveniences repaired	1
W.C. pedestal renewed	1

Licensed Premises.

Conveniences provided for males and females	5
Stainless steel sink unit provided	3
Artificial light provided	1
Instantaneous supply of hot water provided	1
Walls of beer cellar cleansed	1

Urinals repaired	2
W.C. repaired	1
Dangerous building demolished	1
Flushing facilities provided to urinal	2
W.C. pedestal renewed	1
Cellar floor re-laid	1
Prevention of Damage by Pests Act, 1949 :—	
Premises proofed against rodents	2

HOUSING STATISTICS, 1952

1. Inspection of dwelling houses during the year.

(1) (a) Total number of dwelling houses inspected for housing defects (under Public Health and Housing Acts)	807
(b) Number of inspections made for the purpose	916
(2) (a) Number of dwellinghouses (included under sub-head (1) above), which were inspected and recorded under the Housing Consolidated Regulations	27
(b) Number of inspections made for the purpose	76
(3) Number of dwellinghouses needing further action :—	
(a) Number considered to be in a state so dangerous or injurious to health as to be unfit for human habitation	10
(b) Number (excluding those in sub-head (3) (a) above), found not to be in all respects reasonably fit for human habitation	10

2. Remedy of the defects during the year without service of formal notices.

Number of defective dwellinghouses rendered fit in consequence of informal action by the Local Authority or their Officers	429
--	-----

3. Action under Statutory Powers during the year.

A. Proceedings under Sections 9, 10 and 16 Housing Act, 1936.

(1) Number of dwellinghouses in respect of which notices were served requiring repairs	—
(2) Number of dwellinghouses which were rendered fit after service of formal notices :—	
(a) By owners	—
(b) By Local Authority	—

B. Proceedings under Public Health Acts.	
(1) Number of dwellinghouses in respect of which notices were served requiring defects to be remedied	46
(2) Number of dwellinghouses in which defects were remedied after service of formal notices :	
(a) By owners	42
(b) By Local Authority in default of owners	—
C. Proceedings under Sections 11 and 13 of the Housing Act, 1936.	
(1) Number of representations, etc. made in respect of dwellinghouses unfit for habitation	3
(2) Number of dwellinghouses in respect of which demolition orders were made	3
(3) Number of dwellinghouses demolished in pursuance of Demolition Orders	—
D. Proceedings under Section 12 of the Housing Act, 1936.	
(1) Number of separate tenements or underground rooms, in respect of which Closing Orders were made	1
(2) Number of separate tenements or underground rooms, the Closing Orders in respect of which were determined, the tenement or room having been rendered fit	1

4. Housing Act, 1936—Part IV—Overcrowding.

(a) Number of new cases of overcrowding reported during the year	2
(b) Number of cases of overcrowding relieved during the year	14
(c) Number of persons concerned	58

Field Head (Norwood Green) Clearance Area, 1952.

A Public Enquiry was held on Tuesday, 30th September, 1952 in respect of four houses forming the Field Head (Norwood Green) Clearance Area.

The enquiry was made necessary by reason of the tenants appealing, the owner making no appeal.

After the hearing of the necessary evidence the Inspector visited the property and after considering the facts of the same the Minister of Housing and Local Government confirmed the order.

PUBLIC CLEANSING SERVICE.

The Health and Cleansing Committee is responsible for the cleansing and disposal of Privy Middens, Dustbins, Cesspools and Pail Closets and for the collection and subsequent disposal of salvage, the cleansing and maintenance of Public Sanitary Conveniences, and the humane destruction of domestic animals.

The department is also entirely responsible for the maintenance and control of the Department Transport.

(1) Storage.

The following are types of receptacles in use at the 31st March, 1952 :—

Dustbins	10,797
Privy Middens	86
Pail Closets	186

The great majority of privy middens and pail closets are situate in areas where no public sewers or public water supplies are available.

(2) Refuse Collection Service.

The following table gives the number and types of receptacles cleansed, loads collected and tonnage :—

	1952/53	1951/52
Dustbins	404,227	353,770
Privy Middens	2,067	1,925
Pail Closets	9,955	9,690
Kitchen Waste Bins	27,905	26,134
Weight in Tons	8,176	8,970

3. Transport.

The following table gives the particulars of collection by the various vehicles :—

Vehicle.	T.	C.	Q.
S.D. Freighter 9	958	4	0
S.D. Freighter 19	1,793	19	3
S.D. Freighter 18	1,756	2	2
Bedford 21	367	7	2
Dennis 14	2,017	1	3
Bedford 16	261	6	2
Morris 15	281	6	3
Austin 17	50	15	0
Ford 20	519	2	3
Morris 22	84	0	0
S.D. 23 Fore & Aft	34	4	0
Scrap Drive	52	8	3
Total	8175	19	1

LETHAL CHAMBER.

187 dogs, 219 cats and 57 kittens were humanely destroyed in the electrical lethal chamber and the chloroform lethal chamber, provided by the Royal Society for the Prevention of Cruelty to Animals.

REFUSE DISPOSAL.

Two methods of refuse disposal are in operation in the Borough, namely mechanical separation and controlled tipping.

Kitchen Waste is separately collected from 523 communal bins, and 344 tons 15 cwt. were delivered under direction from the Ministry of Agriculture to the Halifax Corporation.

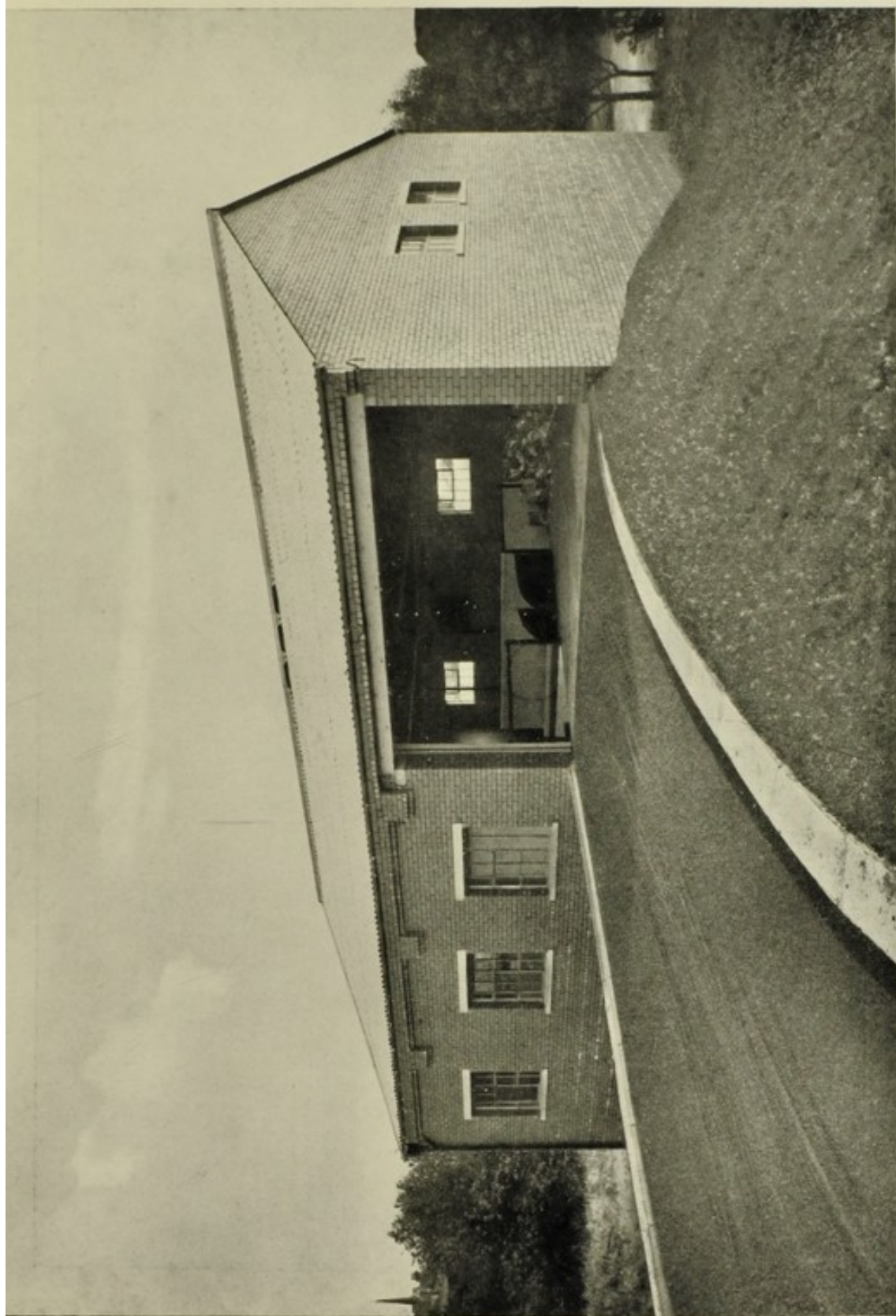
The amounts disposed of and the method of disposal are as follows :—

	T.	C.	Q.	
1. Kitchen Waste—				
Delivered to Halifax Cleansing Department for processing	344	15	0	4.0%
2. Mechanical Separation—				
Refuse delivered to Refuse Disposal Works ...	4,684	0	3	55.0%
Special Scrap Metal Drive	52	8	2	
3. Controlled Tipping—				
Bailiff Bridge Tip	2,950	5	0	
Southowram Tip	388	0	0	4.6%
	8,419	9	1	

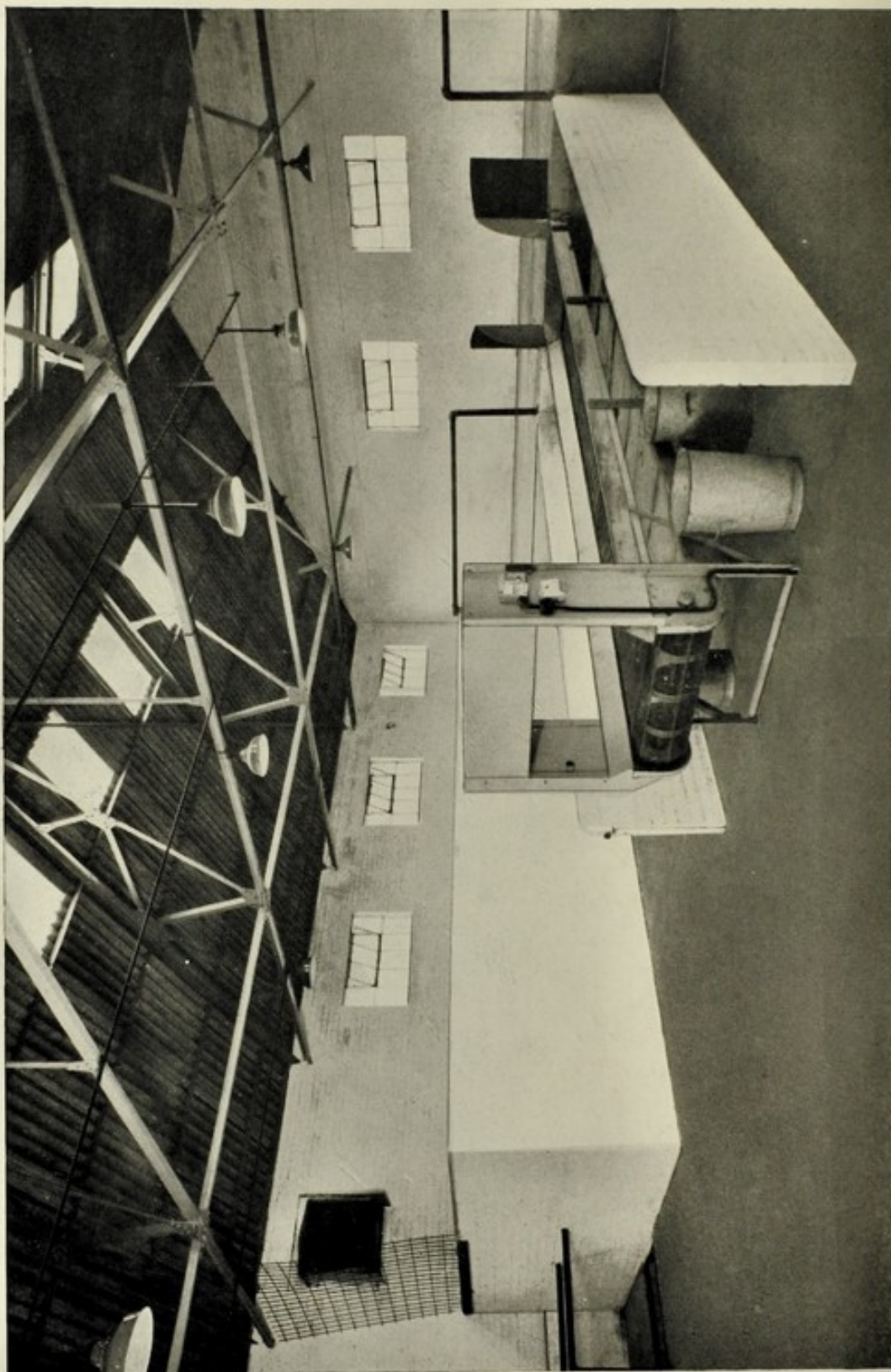
The two controlled tips at Bailiffe Bridge and Marsh Lane Southowram have again been well maintained. We are fortunate in this Borough by possessing ample screened dust from your works to provide cover at the tips.

A portion of Bailiff Bridge Tips was prepared and ploughed for sowing a crop of rye and is, at the time of writing this report, growing well. This scheme had the approval of the Ministry of Agriculture who have approved a grant of 50% of the cost involved. It is anticipated that the scheme will be further developed in future years.

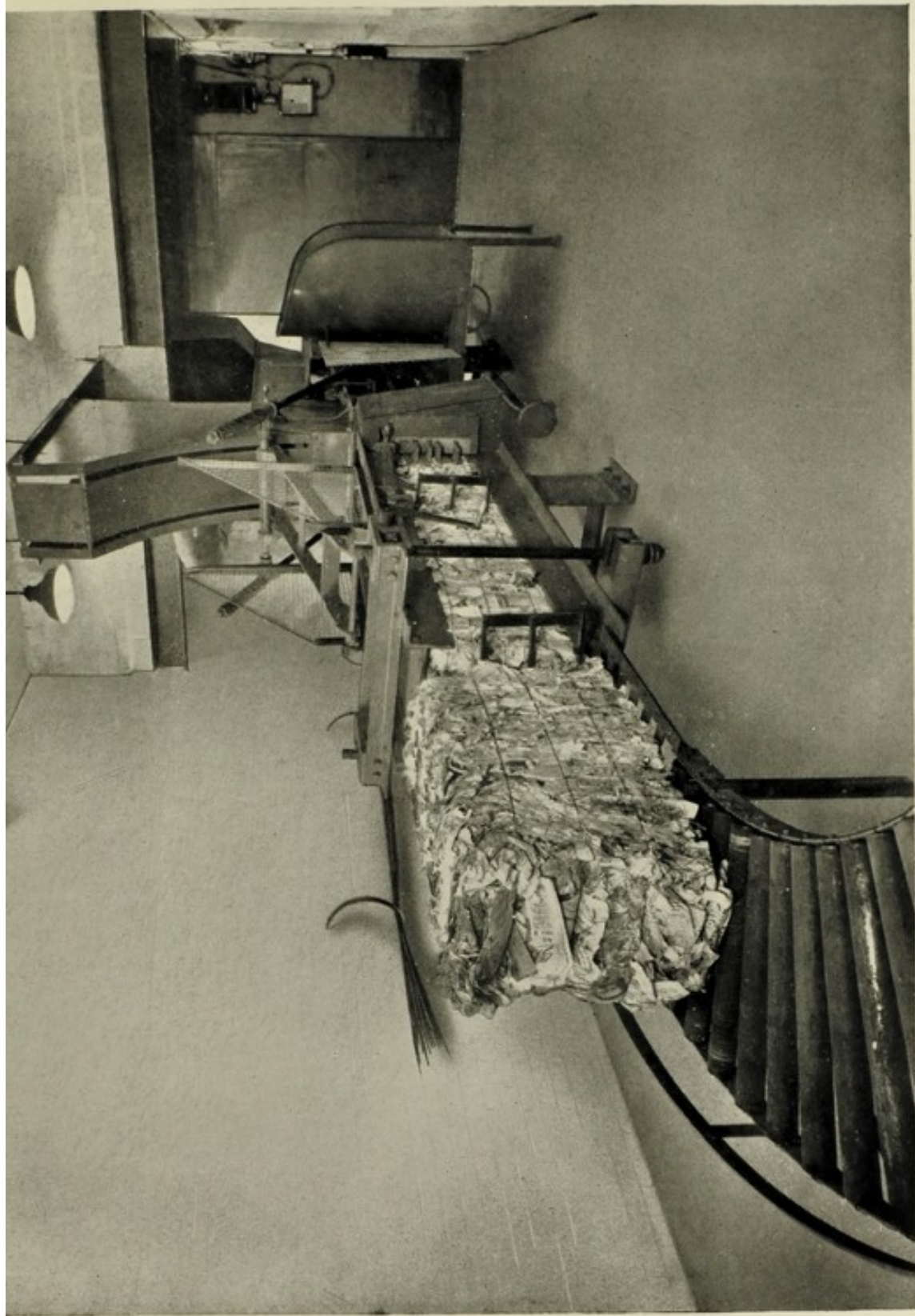
1952 saw the successful completion of the new waste paper sorting and baling machinery, the building being completed in August, 1952. On October 18th, 1952, the plant was officially opened by J. C. Dawes, Esq., C.B.E., lately Inspector of Public Cleansing and Salvage to the Ministry of Health, the works being open to the public later that day. We are indeed fortunate to possess such faci-



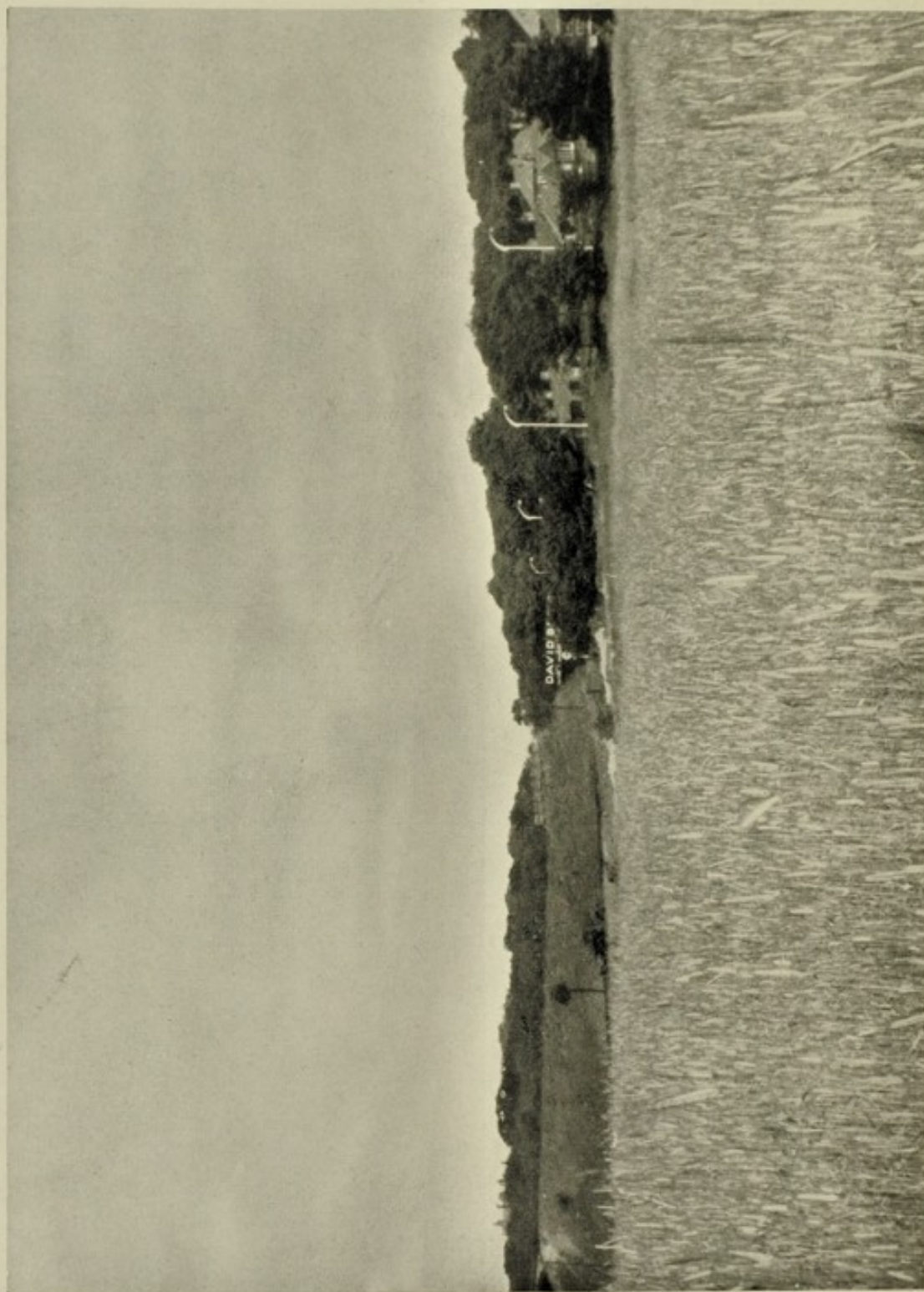
PHOTOGRAPH OF EXTERIOR OF WASTE PAPER PREMISES



PHOTOGRAPH OF INTERIOR OF PAPER GRADING ROOM



PHOTOGRAPH OF PAPER BALING ROOM



PHOTOGRAPH DEPICTING RYE GROWING AT BAILIFF BRIDGE TIP, JUNE, 1952

lities and there is no doubt that the Borough is now well equipped to deal with the commodity on a proper basis and consequently our future contract for the sale of graded waste paper is assured.

It is unfortunate, however, that the prices of waste paper were again reduced, but the loss in income was not so great as would have been the case, had not your Council possessed such facilities for efficient grading.

The new tin baling equipment was brought into use in August, 1953 and the greatly increased revenue for this type of material is reflected in the salvage revenue. Further with such modern type of machinery there is a definite saving in labour costs.

A very successful scrap metal drive was launched in October and no less than 52 tons of ferrous scrap was obtained. The revenue obtained from the sale of both ferrous and non-ferrous scrap during the drive was just over £285, a very handsome financial proposition for the Borough, as well as providing needy scrap for industrial purposes.

I must now record my thanks to the offices of the Joint Scrap Survey Committee of the British Iron and Steel Federation for their assistance in providing handbills, posters, cinema slides, and loud-speaker vans which certainly assisted us in securing such good results.

For the first time in the history of the Department I am glad to record that the Health and Cleansing Committee made an inspection of the works and tips in August and I hope this may lead to the same being an annual event. I feel sure the committee were well satisfied with the inspection and certainly better able as a result to reach decisions on future policy.

**DETAILS OF REFUSE DISPOSAL AND SALVAGE COSTS,
1st APRIL, 1952 to 31st MARCH, 1953.**

Refuse Disposal and Salvage					£	s.	d.
Wages	.....	.....	.....	.....	3,365	9	10
Superannuation	.....	.....	.....	.....	90	12	11
National Insurance	.....	.....	.....	.....	113	6	5
Rents, Rates, Insurance	.....	.....	.....	.....	165	16	3
Repairs	.....	.....	.....	.....	188	12	5
Plant, Tools, etc.	.....	.....	.....	.....	176	16	7
Lighting, Water and Electricity	.....	.....	.....	.....	144	3	4
Loan Charges, etc :—							
Sinking Fund	.....	.....	.....	.....	40	0	0
Interest	.....	.....	.....	.....	85	11	6
Protective Clothing	.....	.....	.....	.....	37	2	10
Miscellaneous	.....	.....	.....	.....	37	13	6
Road Works	.....	.....	.....	.....	157	11	9
Salvage Purchased	.....	.....	.....	.....	27	13	11
Extraordinary Expenditure :—							
Paper Baling Machinery	.....	.....	.....	.....	1,432	2	0
Scrap Metal Baler	.....	.....	.....	.....	1,200	12	10
New Road Works	.....	.....	.....	.....	414	10	2
					<hr/>		
Gross Costage	.....	.....	.....	.....	7,677	16	10
Revenue from Salvage Sales	.....	.....	.....	.....	6,619	2	7
					<hr/>		
Net Cost	.....	.....	.....	.....	£1,058	14	3
					<hr/>		

DEPARTMENTAL REVENUE.

The following is a detailed list of the Department's revenue obtained during the year :—

	T.	C.	Q.	£	s.	d.
(a) Refuse Collection :—						
Trade Refuse Charges				141	18	9
(b) Refuse Disposal :—						
Trade Refuse Charges				192	9	9
Scrap Metal Segregation Allowance ...				102	1	4
(c) Salvage :—						
Baled Paper and Strawboard	460	0	0	4,141	0	9
Kitchen Waste	344	15	0	1,151	3	9
Textiles	46	13	2	477	13	4
Black Scrap	67	5	1	300	0	8
Baled Tins	195	18	0	842	13	1
Non Ferrous Metals	3	10	3	284	10	10
Bones	1	9	3	11	18	0
Screened Cinder	287	18	2	73	18	0
Screened Dust	74	0	0	1	18	0
Cullett	18	4	3	46	1	0
Bottles and Jars	39	10	0	103	6	6
Rubber		15	0	1	0	0
Sundries				47	5	4
(d) Mechanical Transport :—						
Transport Charges etc.				210	0	0
(e) Miscellaneous :—						
Sale of Dustbins				434	12	0
Lethal Chamber Receipts				30	12	0
Rents, Easements etc.				1	6	0
Totals ...	1,550	0	2	£8,595	9	1

BOROUGH OF BRIGHOUSE—CLEANSING DEPARTMENT
DETAILS OF PUBLIC CLEANSING COSTS FOR THE
YEAR ENDING 31st MARCH, 1953.

Item.	Refuse- Collection and Kitchen Waste			Nightsoil and Cesspools Collection			Total		
	£	s.	d.	£	s.	d.	£	s.	d.
Wages	5843	9	1	208	8	3	6051	17	4
National Insurance	184	7	1	13	11	0	197	18	11
Superannuation	209	9	5	15	4	0	224	13	5
Driver's Wages	3038	8	11	217	5	3	3255	14	2
National Insurance	86	14	2	13	11	0	100	5	2
Repairs, Tyres, etc.	482	1	0	50	14	9	532	15	9
Petrol, Oil, etc.	1482	8	2	101	19	6	1584	7	8
Licences and Insurance	417	15	11	30	0	0	447	15	11
Waste Food Bins	72	15	3				72	15	3
Dust Bins	392	8	10				392	8	10
Tools, Implements, etc.	6	9	8				6	9	8
Protective Clothing	44	3	4	4	7	6	48	10	10
Disinfectants				42	10	3	42	10	3
Cesspool Emptying				33	12	5	33	12	5
Sundry Expenses	31	4	6				31	4	6
New Motor Van	668	6	7				668	6	7
Gross Cost	12960	1	11	731	3	11	13691	5	10
Revenue	1937	14	6	—	—	—	1937	14	6
Nett. Cost	11022	7	5	731	3	11	11753	11	4

BOROUGH OF BRIGHOUSE—CLEANSING DEPARTMENT.
PUBLIC CLEANSING COSTS FOR THE YEAR ENDING
31st MARCH, 1953.

Item.	Particulars.	Collection	Disposal	Totals
		£	£	£
	REVENUE ACCOUNT			
1	GROSS EXPENDITURE :			
	(i) Labour	6,319	3,644	9,963
	(ii) Transport	6,175	—	6,175
	(iii) Plant, equipment, land and buildings	—	3,848	3,848
	(iv) Other items (including £37 paid to other local authorities)	466	185	651
	(v) Total gross expenditure ...	12,960	7,677	20,637
2	GROSS INCOME (including £27.13.11 received from other local authorities)	1,937	6,619	8,556
3	NET COST	11,023	1,058	12,081
4	Capital expenditure met from revenue (included above) ...	668	3,046	3,714
	UNIT COSTS	s. d.	s. d.	s. d.
5	Gross cost per ton, labour only	15 5.5	8 8	24 1.5
6	Gross cost per ton, transport only	15 1.25	— —	15 1.25
7	Net cost (all expenditure) per ton	26 11.5	2 6	29 5.5
		£	£	£
8	Net cost per 1,000 population	361	35	396
9	Net cost per 1,000 premises ...	864	83	947

OPERATIONAL STATISTICS.

10	Area (statute acres)—land and inland water	7,875 acres
11	Population at 30th June, 1951	30,420 persons
12	Total refuse collected (tons)	8,176 tons
13	Weight (cwts.) per 1,000 population per day (365 days in the year)	14.7 cwts.
14	Number of premises from which refuse is col- lected	12,760
15	Average haul (miles) by collection vehicle to disposal point	1½ miles
16	Frequency of collection	12½% daily
17	Kerbside collection, if practised, expressed as estimated percentage of total collection	—%
18	Total refuse disposed of (tons)	8,419 tons
19	Methods of Disposal :—	Percentage
	(a) Crude Tipping	—
	(b) Controlled tipping	41%
	(c) Direct incineration	—
	(d) Separation and incineration	59%
	(e) Miscellaneous	
	Pulverisation	—
	Barging to sea	—
	Composting	—
	(f) Other methods (state nature)	—
		100

20 Salvage and Trade Refuse. Analysis of income and tonnage :

	Income (included in Item 2)	Tonnage Collected
Salvage :	£	Tons
(a) Kitchen Waste	1,051	345
(b) Scrap Metal	1,427	266
(c) Waste Paper	4,141	460
(d) Other Salvage	713	464
Trade Refuse	333	202

21 Remarks. Refuse Disposal Cost includes the purchase of the following items during the year :

Paper Baling Machinery	£1432
Tin Baling Machinery	£1200
New road works	£ 414

PUBLIC SANITARY CONVENIENCES.

The Department is responsible for the cleansing and maintenance of all Public Conveniences.

The following is a complete list of Public Conveniences in the Borough :—

Situation.	Accommoda- tion for Females.	Accommodation for Males.
Back Bonegate	5 W.C.'s	5 W.C.'s 9 urinal stalls.
Bradford Road	2 W.C.'s	1 W.C. 4 do.
Bramston Street	2 W.C.'s	1 W.C. 4 do.
Birds Royd Lane	Nil.	1 W.C. 4 do.
Bus Station	4 W.C.'s	3 W.C.'s 6 do.
Mill Lane	Nil.	Nil. 4 do.
Crowtrees Lane	Nil.	Nil. 3 do.
Dusty Miller Inn, Halifax Road	Nil.	1 W.C. 3 do.
Whitehall, Hipperholme	Nil.	Nil. 3 do.
Stray, Lightcliffe	2 W.C.'s	2 W.C.'s 3 do.
Bailiff Bridge	1 W.C.	1 W.C. 3 do.
Clifton Road	Nil.	Nil. 3 do.
Rydings Park	3 W.C.'s	2 W.C.'s 3 do.
Rastrick Library	Nil.	Nil. 2 do.
Wellholme Park	4 W.C.'s	2 W.C.'s 6 do.
Lane Head Recreation Ground	2 W.C.'s	2 W.C.'s 1 do.
King George V. Memorial Park	1 W.C.	1 W.C. Nil.

The cost of the service for the year ending 31st March, 1953, was as follows :—

	£	s.	d.
Wages	840	5	8
National Insurance	34	6	10
Superannuation Contributions	70	10	7
Rents and Insurance	15	4	2
Heating, Lighting and Cleansing	213	16	9
Repairs	164	13	4
Toilet Requisites	33	8	0
Loan Charges—Sinking Fund	87	0	0
Interest	43	12	7
 Gross Cost	 1502	 17	 5
Income and Rents	213	19	11
 Nett Cost	 £1288	 17	 6

During the year a modern Public Convenience for both sexes was brought into operation at the omnibus station. This convenience was the first in the Borough to incorporate automatic turnstiles at the entrances in lieu of individual locks. This method at a busy convenience has proved most successful and has avoided much of the petty damage which has been caused in the past.

Modernisation of the Gentlemen's convenience in Rydings Park was completed during the year with an intensive programme of painting to the external fabric of all conveniences.

There is still far too much wilful and unnecessary damage caused to Public Conveniences and it is almost unbelievable to what depths a certain small minority of the Public sink when Conveniences are not manned by a full time attendant.



Brighouse:
Smith, Hodgson & Co. (Printers) Ltd
Park Row