

**[Report 1954] / Medical Officer of Health, Conisbrough U.D.C.**

**Contributors**

Conisbrough (England). Urban District Council.

**Publication/Creation**

1954

**Persistent URL**

<https://wellcomecollection.org/works/featnucv>

**License and attribution**

You have permission to make copies of this work under a Creative Commons, Attribution license.

This licence permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited. See the Legal Code for further information.

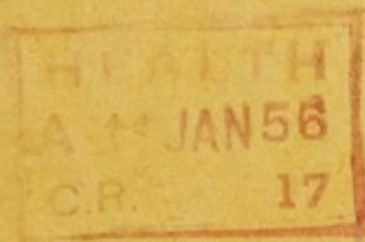
Image source should be attributed as specified in the full catalogue record. If no source is given the image should be attributed to Wellcome Collection.



Wellcome Collection  
183 Euston Road  
London NW1 2BE UK  
T +44 (0)20 7611 8722  
E [library@wellcomecollection.org](mailto:library@wellcomecollection.org)  
<https://wellcomecollection.org>

*Library*

Conisbrough Urban District Council



# REPORT

ON THE

## Health of the District

DURING THE YEAR ENDING

DECEMBER 31st, 1954

by

DR. JOHN LEIPER, M.B.E.

Medical Officer of Health

together with the

Report of the Chief Sanitary  
Inspector

Mr. R. E. INGLEBY.





Conisbrough Urban District Council

---

# REPORT

ON THE

## Health of the District

DURING THE YEAR ENDING

DECEMBER 31st, 1954

by

DR. JOHN LEIPER, M.B.E.

Medical Officer of Health

together with the

Report of the Chief Sanitary  
Inspector

Mr. R. E. INGLEBY.



# CONISBROUGH URBAN DISTRICT COUNCIL

---

## MEMBERS, 1954

### **Chairman of the Council:**

Councillor T. DAVEY, J.P.

### **Vice-Chairman of the Council:**

Councillor G. CHESHIRE

### **Chairman of the Public Health Committee:**

Councillor R. H. SHEPHARD

### **Councillors:**

J. T. E. COLLINS

P. E. DYSON

H. GOMERSALL

G. GUEST

T. HILL

I. HOUGHTON

A. E. TYAS

J. PRENDERGAST

(County Councillor)

D. ROBERTS, J.P.

(County Alderman)

R. SCURFIELD

D. SHELDON

H. WILLIAMS

### **Medical Officer of Health:**

JOHN LEIPER, M.B.E., M.B., Ch.B., M.R.C.S.,  
L.R.C.P., D.P.H.

### **Deputy Medical Officer of Health:**

BARBARA R. A. DEMAINE, M.B., Ch.B., D.P.H.

### **Chief Sanitary Inspector:**

R. E. INGLEBY, A.R.S.I., M.S.I.A., R.P.C.

Certified Inspector of Meat and Other Foods

### **Additional Sanitary Inspector:**

K. C. McCUTCHEON, Cert. S.I.B., M.S.I.A.  
(left 31.8.1954)

S. J. MAYO, A.R.S.I., M.S.I.A.  
(appointed 1.11.1954)

## **DIVISIONAL HEALTH STAFF**

Employed in the Conisbrough Urban District

### **Divisional Medical Officer:**

Dr. J. LEIPER

### **Deputy Divisional Medical Officer:**

Dr. BARBARA R. A. DEMAINE

### **Assistant County Medical Officer:**

Dr. HELEN F. LINDSAY

### **Obstetrician:**

Dr. J. C. MACWILLIAM

(Joint Appointment with Regional Hospital Board)

### **Child Health Specialist:**

Dr. C. C. HARVEY

### **Speech Therapist:**

MISS M. FISH

### **Mental Health Social Worker:**

Mrs. F. H. REDMAN

### **Mental Health Home Teacher:**

Mrs. P. M. WINSTANLEY

### **Health Visitors and School Nurses:**

Mrs. L. ELLIOTT, Miss M. T. LEONARD, Miss M. O'CONNOR

Miss A. D. WILLOUGHBY

### **Midwives:**

Mrs. M. LAMBERT, Miss G. RANDALL, Mrs. F. E. WALL

### **Home Nurses:**

Miss K. M. A. BILLEQUEZ (Relief), Mrs. W. P. CAUDLE,

Mrs. R. FAIRMAN

Mrs. M. N. BATTY (Part-time)

Mrs. H. A. MARRIOTT (Part-time)



# **ANNUAL REPORT**

## **of the MEDICAL OFFICER OF HEALTH**

### **FOR THE YEAR 1954.**

---

To the Chairman and Members of the Conisbrough Urban District Council.

Mr. Chairman and Gentlemen,

I have the honour to present to you this, my last Annual Report as your Medical Officer of Health, and in these circumstances it is perhaps not unnatural that I should look back over the past seven years, during the time I have been the Medical Officer of Health to your Authority.

I have in mind an extract from my Annual Report for 1948:-  
“The year has been one of great social events and changes which will be reflected shortly in your annual statistics. My appreciation of the health situation in your district is that you are now on the threshold of a new era in social medicine.”

During the seven years it is observed that the infant death rate has fallen from 58.8 in 1948 to 30.0 in 1954, and in 1953 it was as low as 16.6 per 1,000 live births. During the seven years only one maternal death has been recorded.

In the three years preceding and including 1948 there were 38 deaths from pulmonary tuberculosis, and in the six years following 1948 there were only 38 such deaths. However, the number of new cases of pulmonary tuberculosis has risen sharply since 1948. These cases, generally, are found earlier than previously—often through the examination by the family doctor, sometimes by contact tracing of notified cases, and also following the visit of the Mass Radiography Unit to the district.

It is gratifying to see that the actual clearance of old slum property has started, and that provision is being made for this process to be carried on in the next few years until the problem is solved.



I wish to stress the need for the protection of children under one year of age against diphtheria. If this disease is to be kept away from the district, more young children at eight months of age should be protected against it than are at present, either at the family doctors' surgery or at the child welfare centre. Also I am disturbed by the very few children who are being vaccinated in infancy. Smallpox is a disease which has occurred as an outbreak in this county in the last year or so and also with modern quick travelling, it can, and is, imported unwittingly to us. Many more healthy children about four months of age should be vaccinated than are being vaccinated at the moment.

Although the percentage of aged persons (men over the age of 65 and women over the age of 60) is only 7.4 of the whole population (the average being about 11 per cent. in the county as a whole), it is nevertheless opportune to consider the provision of even more homes for aged persons as an integral part of future housing estates.

The personal health services have, I think it will be agreed, developed rapidly during the last few years, especially the work of the Home Nurses, whose nursing attention, particularly of the aged sick, is appreciated by all. 17,000 home nursing visits were made by District Nurses in your district, the highest number of visits in any district in the Division.

The Health Visiting Service has also developed greatly, so that now the Health Visitor is the Family Social Worker whose work is of a selective nature, i.e. to visit where it is necessary to offer advice and help, whilst keeping to a reasonable minimum the number of visits made to families in which there are no medico-social problems. More of the Health Visitors' time is now taken up with visits to the aged and the after-care of tuberculous patients where there is complete liaison with the chest physicians at the Chest Clinic at Mexborough.

The Midwives continue to render the community a great service and steps are being taken to see if low calorie high protein diet during pregnancy will help to minimise the incidence of premature births and thus solve the greater part of the problem of prematurity. Because of the appointment of Dr. J. C. MacWilliam as Obstetrician jointly with the Local Health Authority and the Sheffield Regional Hospital Board, complete liaison has been obtained during the year between the Montagu Hospital and the local health authority's ante-natal clinics with beneficial results to expectant mothers.



During the year close co-operation has been maintained between the Public Health Department and my colleagues in general practice, practising in the district, whose care and attention to their patients cannot be overestimated; also between the Public Health Department and the local hospitals in respect of the care and after-care of patients in the various hospitals in which residents in the district have been in-patients.

I should like to conclude this introduction by stating how much I have appreciated working with Mr. Ingleby whose help on environmental and indeed many social problems has been invaluable, and also the friendly co-operation which I have received from Mr. Edwardson, the Clerk of your Council, as indeed I have had from all officers.

I wish to thank my own staff for their loyalty and hard work during the year. The help and co-operation I have received from Dr. B. R. A. Demaine has indeed been splendid, and in leaving the district I knew that the work of safeguarding the public health would be surely and efficiently maintained.

I would also like to thank the Chairman and Members of the Council for all the help and support I have received from them during the tenure of my appointment as Medical Officer of Health.

I am,

Ladies and Gentlemen,

Yours faithfully,

JOHN LEIPER,

Medical Officer of Health.

## SECTION A

### NATURAL AND SOCIAL CONDITIONS OF THE AREA

Area (in acres) ... ..	1,593
Registrar General's Estimate of Resident Population mid-1954 ... ..	16,640
Number of inhabited houses (31st Decem- ber, 1954) ... ..	4,724
Rateable Value ... ..	£63,678
Net Product of a Penny Rate ... ..	£240
Height above sea level (in feet) ... ..	25-275

Conisbrough lies some five miles south-west of the centre of Doncaster on the south bank of the River Don. The main industry is deep-seam coal mining, which, it is estimated, accounts for over 50 per cent. of the employment in the area. Transport and engineering industries are the second main users of labour.

The main historical feature of the district is the Castle, immortalised in Sir Walter Scott's "Ivanhoe," and reputed to have been founded by Hengist in the fifth century.

The general housing provision in Conisbrough consists of a mixture of old property erected probably before 1850 in the vicinity of the Church and the Castle, colliery houses in Denaby Main (established as a result of the sinking of the Denaby Main Colliery in 1866) where the density of population is between 120 and 140 persons per acre, and the modern estates of new Council houses and houses erected by the Coal Industry Housing Association in Conisbrough, which are well situated and with good amenities.

A further 293 houses have been occupied since the 31st December, 1953, and in all a total of 752 houses have been inhabited since 1946. Correspondingly the population of your district is estimated to have increased by 60 from the 31st December, 1953, and by 560 over the population in 1946.

There was again an increase in the rateable value amounting to £7,000 over 1946, and the net product of a penny rate has increased by £30 since the same year.



Full details of the above statistics since 1947 are included in the Table below:—

	1947	1948	1949	1950	1951	1952	1953	1954
Area (in acres)				1,593				
Registrar General's estimate of mid-year population ..	16,190	16,530	16,680	16,660	16,450	16,500	16,580	16,640
No. of inhabited houses ..	4,002	4,080	4,100	4,187	4,244	4,346	4,431	4,724
Rateable Value (£'s) ..	56,306	57,213	58,964	58,964	59,420	60,281	61,993	63,678
Net product of a penny rate (£'s)	210	215	218	221	226	227	232	240

### VITAL STATISTICS FOR 1954

	Males	Females	Total
Live Births: Legitimate ... ..	138	150	288
Illegitimate ... ..	6	6	12
	<u>144</u>	<u>156</u>	<u>300</u>
Stillbirths ... ..	8	7	15
Deaths of Infants under 1 year of age	5	4	9
Deaths (all ages) ... ..	102	75	177
Birth Rate per 1,000 of the estimated resident population:			
(Crude) ... ..	...	18.0	
(Corrected) ... ..	...	17.3	
	(Comparability factor: 0.96)		
Death Rate per 1,000 of the estimated population:			
(Crude) ... ..	...	10.6	
(Corrected) ... ..	...	13.8	
	(Comparability factor: 1.30)		
Stillbirths per 1,000 Live and Still Births ...		47.6	

## Deaths from Puerperal Causes:

				Death rate per 1,000 total (live and still) Births
Pregnancy	Childbirth,	Abortion	Deaths	
...	...	...	Nil	—

## Death Rate of Infants Under One Year of Age

All Infants per 1,000 live births	...	...	...	30.0
Legitimate infants per 1,000 legitimate live births	...	...	...	27.8
Illegitimate infants per 1,000 illegitimate live births	...	...	...	83.3

## Live Births

The total number of live births (300) recorded during 1954 is 2 less than in 1953, when 302 live births were registered, and this figure continues to be lower than the average number of live births recorded in Conisbrough since the end of the last war.

The birth rate for your District, after correction, is 17.3 per 1,000 of the estimated resident population, and despite the fall in the number of births, this rate is higher than that for England and Wales in 1954, which was 15.2.

There were 2 fewer illegitimate births notified during the year than in 1953.

## Stillbirths:

A total of 15 stillbirths were registered in the District, and this is the highest number since 1943, when 20 stillbirths were recorded.

Consequently the stillbirth rate per 1,000 live and still births has risen in 1954 to 47.6 compared with a rate for the District of 32.1 in 1953, and a rate for England and Wales as a whole of 23.4.

## Deaths:

One hundred and seventy-seven deaths of persons of all ages were registered in the Conisbrough Urban District during 1954, representing an increase of 19 over the figure for 1953. The number is the highest recorded since 1951, when 187 deaths were notified.

The corrected death rate per 1,000 estimated population for Conisbrough Urban District during 1954 was 13.8, and this compares with a rate of 11.3 per 1,000 home population for the country as a whole.



The main causes of death were as follows:—

Diseases of the Heart and Blood Vessels	...	99
Malignant Disease	... ..	25
Pneumonia and Bronchitis	... ..	15

These three categories accounted for 139 of the 177 deaths, i.e. over 77 per cent., and diseases of heart and blood vessels alone accounted for more than 50 per cent. of all deaths.

I am pleased to note, however, a reduction in the number of deaths from malignant diseases, 25 being registered in 1954 compared with 33 the previous year.

A Table summarising the details of deaths from Malignant Diseases since 1949 is appended:—

### DEATHS FROM CANCER

	1949	1950	1951	1952	1953	1954
	M. F.	M. F.	M. F.	M. F.	M. F.	M. F.
Malignant Neoplasm, Buccal cavity and Oesophagus (M)	— —	— —	— —	— —	— —	— —
Malignant Neoplasm Uterus (F) .. .. .	— 2	— —	— 2	— —	— 4	— 1
Malignant Neoplasm Stomach and Duodenum .. ..	7 3	7 2	4 3	6 1	3 6	4 1
Malignant Neoplasm Breast ..	— 1	— —	— —	— 2	— 1	— 2
Malignant Neoplasm Lung, Bronchus .. .. .	— —	2 —	7 —	2 —	4 —	3 2
Malignant Neoplasm all other sites (inc. Leukaemia and Aleukaemia) .. ..	7 5	8 11	3 5	11 8	7 8	9 3
TOTALS .. .. .	14 11	17 13	14 10	19 11	14 19	16 9

† Deaths from malignant neoplasm of lung and bronchus were not shown separately prior to 1950 and for the year 1949 they are included in "malignant neoplasm, all other sites."

I am again pleased to record that no deaths resulted from Whooping Cough or from Measles during the year. There were, however, 4 deaths of children under 2 years of age from Gastritis, Enteritis and Diarrhoea.

Four deaths were attributable to Pulmonary Tuberculosis, a decrease of 1 on the number for 1953, and as there were again no deaths from other forms of Tuberculosis, it is encouraging to note that measures which have and are being taken to prevent the spread of this disease are meeting with some success.



The following Table details the deaths from all causes registered in your District during 1954:—

### DEATHS FROM ALL CAUSES DURING 1954

Cause of Death					M	F	Total
1.	Tuberculosis, respiratory	...	...	...	2	2	4
2.	Tuberculosis, other	...	...	...	—	—	—
3.	Syphilitic disease	...	...	...	—	1	1
4.	Diphtheria	...	...	...	—	—	—
5.	Whooping Cough	...	...	...	—	—	—
6.	Meningococcal infections	...	...	...	—	—	—
7.	Acute Poliomyelitis	...	...	...	—	—	—
8.	Measles	...	...	...	—	—	—
9.	Other infective and parasitic diseases	...	...	...	—	—	—
10.	Malignant neoplasm, stomach	...	...	...	4	1	5
11.	Malignant neoplasm, lung, bronchus	...	...	...	3	2	5
12.	Malignant neoplasm, uterus	...	...	...	—	1	1
13.	Malignant neoplasm, breast	...	...	...	—	2	2
14.	Other malignant and lymphatic neoplasms	...	...	...	8	3	11
15.	Leukaemia, aleukaemia	...	...	...	1	—	1
16.	Diabetes	...	...	...	—	1	1
17.	Vascular lesions of nervous system	...	...	...	16	12	28
18.	Coronary disease, angina	...	...	...	13	7	20
19.	Hypertension with heart disease	...	...	...	2	2	4
20.	Other heart disease	...	...	...	19	23	42
21.	Other circulatory disease	...	...	...	1	4	5
22.	Influenza	...	...	...	—	—	—
23.	Pneumonia	...	...	...	2	1	3
24.	Bronchitis	...	...	...	10	2	12
25.	Other diseases of respiratory system	...	...	...	1	—	1
26.	Ulcer of stomach and duodenum	...	...	...	—	—	—
27.	Gastritis, Enteritis and Diarrhoea	...	...	...	1	3	4
28.	Nephritis and Nephrosis	...	...	...	1	1	2
29.	Hyperplasia of prostate	...	...	...	—	—	—
30.	Pregnancy, childbirth, abortion	...	...	...	—	—	—
31.	Congenital malformations	...	...	...	1	—	1
32.	Other defined and ill-defined diseases	...	...	...	4	4	8
33.	Motor vehicle accidents	...	...	...	—	—	—
34.	All other accidents	...	...	...	11	3	14
35.	Suicide	...	...	...	2	—	2
36.	Homicide and operations of war	...	...	...	—	—	—
Total from all causes					102	75	177

For comparison the following Table records the number of deaths registered in the area and the Crude Deaths Rate since 1944

Year	Est. Mid-yr. Population	Total No. of Deaths	Crude Death Rate
1944	15,390	173	11.2 per 1,000
1945	15,520	205	12.5 "
1946	15,860	151	9.3 "
1947	16,190	211	13.0 "
1948	16,530	170	10.3 "
1949	16,680	161	9.6 "
1950	16,660	182	10.9 "
1951	16,450	187	11.4 "
1952	16,500	157	9.5 "
1953	16,580	158	9.5 "
1954	16,640	177	10.6 "

### Infant Mortality and Stillbirths

There were 9 deaths of infants under one year of age in the Conisbrough Urban District during 1954, representing an increase of 4 deaths over the lowest ever-recorded figure of 5, in 1953.

Correspondingly the Infant Death Rate for your District per 1,000 related live births rose from 16.6 in 1953 to 30.0 in 1954. Even so, apart from 1953 the number is the lowest recorded in any other year.

The Infant Death Rate of 30.0 per 1,000 related live births compares with an Infant Mortality Rate of 25.5 per 1,000 related live births for the country as a whole, 28.3 for the aggregate of the Urban Districts in the West Riding, and 28.0 for the Administrative County of the West Riding.

Since Divisionalisation in 1949, the Infant Mortality Rate in your District has been as follows:—

1949	—	30.9
1950	—	39.2
1951	—	46.8
1952	—	31.0
1953	—	16.6
1954	—	30.0

(All per 1,000 related live births)

Bearing in mind the statistically low number of births on which this rate is based there will naturally be sudden variations in the Infant Death Rate, and a better picture of the situation can be obtained by taking statistics over a number of years. I am, therefore, including the following Table, which compares the Still Birth Rate and the Infant Death Rate for Conisbrough in the six years prior to 1949 and the corresponding period since 1949:—



## CONISBROUGH

Period	Number of Live Births	Number of Still Births	Number of Deaths of Infants Under 1 year	Still Birth Rate per 1,000 live and Still Births	Inf. Death Rate per 1,000 reltd. Live Births
Six years 1943-1948 (inclusive)	2,316	71	150	29.7	64.7
Six years 1949-1954 (inclusive)	1,912	64	62	32.3	32.4

From the above it will be seen that the Infant Death Rate has just been halved, whereas the Still Birth Rate has actually risen. To try and reverse this trend in the Still Birth Rate, Dr. J. C. MacWilliam, the Obstetrician in charge of the Ante-Natal Clinics in this Division has undertaken a good deal of research into the diet of the expectant mother, and suitable diet sheets have been prepared for distribution at the Ante-Natal Clinics.

The following Tables show the causes of death of the 9 infants who died under 1 year of age during 1954, their age at death, and the time of the year at which the deaths occurred. It will be noted that 4 of the infants died in the first week of life.

### INFANTS UNDER ONE YEAR OF AGE, 1954

Cause of Death	AGE AT DEATH									
	Weeks				Months					Total
	Under 1	1-2	2-3	3-4	1-2	2-3	3-6	6-9	9-12	
Congenital Malformation					1					1
Atelectasis	1				1					2
Pneumonia and Bronchitis						1	1		1	3
Prematurity	3									3
<b>TOTAL</b>	<b>4</b>				<b>2</b>	<b>1</b>	<b>1</b>		<b>1</b>	<b>9</b>



## INFANT DEATHS

January	...	...	...	...	...	—	}	First
February	...	...	...	...	...	—		Quarter
March	...	...	...	...	...	1		1
April	...	...	...	...	...	1	}	Second
May	...	...	...	...	...	—		Quarter
June	...	...	...	...	...	—		1
July	...	...	...	...	...	—	}	Third
August	...	...	...	...	...	1		Quarter
September	...	...	...	...	...	1		2
October	...	...	...	...	...	1	}	Fourth
November	...	...	...	...	...	—		Quarter
December	...	...	...	...	...	4		5

### Maternal Mortality

I am again pleased to report that no maternal deaths occurred in your District during 1954, and indeed only 1 such death has been registered in the Conisbrough Urban District during the last 7 years.

Finally I have tabulated a comparison of the rates and statistics for Conisbrough Urban District with those for the aggregate of Urban Districts in the West Riding and for the Administrative County of the West Riding as a whole, and it will be seen that with only one or two exceptions the rates for your District compare very favourably.

# CONISBROUGH URBAN DISTRICT.

District	Estimated Home Population (Middle 1954)	Births			Deaths			Deaths under 1			Still Births		
		M.	F.	Total	M.	F.	Total	M.	F.	Total	M.	F.	Total
Conisbrough U. ...	16,640	144	156	300	102	75	177	5	4	9	8	7	15
Aggregate of Urban Districts in the West Riding ...	1,162,000	8837	8203	17040	7667	7078	14745	287	196	483	248	217	465
Administrative County of the West Riding ..	1,600,000	12494	11670	24164	9959	9120	19079	401	276	677	335	307	642

## CRUDE RATES PER 1,000 POPULATION

DISTRICT	Total Live and Still Births	Births	Deaths	Infective and Para. Dis. excl. Tub. but incl. Syph. and other V.D.	Tuberculosis Respiratory	Tuberculosis Other	Tuberculosis All Forms	Cancer	Vascular Lesions of the Nervous System	Heart and Circulatory	Respiratory Diseases	Maternal Mortality	Infant Mortality	Stillbirth
Conisbrough U. ...	315	18.0	10.6	0.06	0.24	—	0.24	1.50	1.68	4.27	0.96	—	30.0	47.6
Aggregate of Urban Districts in the West Riding ...	17,705	14.7	12.7	0.07	0.18	0.01	0.19	2.12	2.03	4.88	1.27	0.80	28.3	26.6
Administrative County of the West Riding ..	24,806	15.1	11.9	0.08	0.16	0.02	0.18	2.01	1.84	4.54	1.22	0.89	28.0	25.9

\* Rate per 1,000 live and stillbirths.

† Rate per 1,000 related live births.



## **SECTION B.**

### **1. General Provision of Health Services for the Area**

Full particulars of the Public Health Officers of your Authority are printed at the beginning of this Report for easy reference.

#### **(a) Laboratory Facilities**

The Medical Research Council Laboratory at Wakefield, under its medical director, Dr. L. A. Little, provides facilities for the bacteriological examination of specimens for infectious diseases, water samples, milk tests, and ice-cream samples, and is freely available to Divisional Medical Officers for advice on Public Health matters.

Use is also made of the Laboratory for the examination of blood samples sent from expectant mothers, to determine the amount of Haemoglobin in the blood, and an increased use of the Laboratory has been made during this past year in view of Dr. MacWilliams's inquiries into diet and iron deficiencies.

Grouping of blood for Rh factor etc. is undertaken for all mothers attending Ante-Natal Clinics, and samples for this purpose are despatched to the Regional Blood Transfusion Centre at Sheffield, where the Medical Director is Dr. C. C. Bowley.

#### **(b) Ambulance Facilities**

The ambulance facilities are controlled by the County Ambulance Officer, and your Area is provided with service by ambulances based on the Depot at "Dunford House," Wath-upon-Deane, and the Sub-Depot at Bentley.

#### **(c) Nursing in the Home**

At the 31st December, 1954, the Home Nursing Staff in Conisbrough and Denaby Main consisted of 2 Queen's Nurses and 2 Part-time State Registered Nurses. One of the Queen's Nurses was authorised to use her private motor car in the course of her duties. A further Queen's Nurse resident in your Area provided relief for the Nurses in Conisbrough, Denaby Main and part of Mexborough.

In the whole of this Medical Division during 1954 District Nurses made 43,198 visits, the highest in any year since Divisionalisation and, of this large total, the Nurses employed in Conisbrough and Denaby Main made 17,889 visits.

The following are the number of visits made by Home Nurses to patients in the Conisbrough Urban District during the last 5 years:—

1950	—	14,080
1951	—	17,384
1952	—	14,761
1953	—	16,553
1954	—	17,889

A total of 894 cases were nursed in the Conisbrough Urban District during the year, and the following Table classifies the age groups and the types of cases concerned, i.e. medical, surgical, infectious diseases, tuberculosis, and maternal complications:—

AGE GROUPS			CLASSIFICATION					TOTAL
0-5	5-65	65+	M.	S.	I.D.	T.B.	M.C.	
107	571	216	635	233	2	6	18	894

The following Table shows, under the same headings, the number of visits paid to these cases:

AGE GROUPS			CLASSIFICATION					TOTAL
0-5	5-65	65+	M.	S.	I.D.	T.B.	M.C.	
1205	7773	8901	4095	2490	11	124	190	17,889

An interesting point from this Table is that nearly half the visits made were to patients over 65 years of age, although the number of cases in this age group represents only a quarter of the total. These figures reflect how, with the shortage of beds in Chronic Sick Hospitals, the work of the Home Nurse coupled with the provision of a Home Help, has met the situation with regard to the care of aged persons.

Other figures available to me also show that 122 of the cases received between them 8,500 visits, and this indicates that at least one-seventh of the patients on the registers of Home Nurses during the year were semi-permanent.



There were more visits made by Home Nurses in the Conisbrough Urban District in 1954 than in either of the other two Districts in the Medical Division, and only 3 other Divisions in the West Riding County, had higher totals of Home Nursing visits than Division 30. In fact an average of 704 visits were made by Home Nurses per 1,000 of the population in the District.

It is hoped to appoint another Queen's Nurse to your District early in 1955 and she will occupy the house which was provided by the National Coal Board for this purpose on a tied-tenancy agreement.

#### **(d) Treatment Centres and Clinics**

##### **Child Welfare Centre Miners' Welfare Hall, Gardens Lane, Conisbrough**

Monday: 9.30 a.m. to 12 noon—Minor Ailments Clinic  
 2.00 p.m. to 4.30 p.m.—Infant Welfare Clinic  
 Tuesday: 2.00 p.m. to 4.30 p.m.—Ante-Natal Clinic  
 Thursday: 2.00 p.m. to 4.00 p.m.—Minor Ailments Clinic—  
 first and third weeks of the month

##### **Child Welfare Centre, Church Road, Denaby Main**

Monday: 9.30 a.m. to 12 noon—Ultra Violet Ray Clinic  
 Tuesday: 9.30 a.m. to 12 noon—Minor Ailments Clinic  
 1.30 p.m. to 4.30 p.m.—Infant Welfare Clinic  
 Wednesday: 9.30 a.m. to 12 noon—Ante-Natal Clinic  
 Thursday: 9.30 a.m. to 12 noon—Minor Ailments Clinic  
 1.30 p.m. to 4.30 p.m.—Ultra Violet Ray Clinic

In addition to the above-named sessions, classes are held twice weekly on Tuesdays and Fridays by the Mental Home Teacher, for the training of mentally deficient children.

Ophthalmic Clinics are held regularly about every 3 weeks at the Denaby Main Child Welfare Centre and dental treatment for expectant and nursing mothers and treatment for school children is provided throughout the week at the Dental Centre, which is under the care of Miss M. H. Platford.

#### **(e) Infant Welfare Clinics**

The following attendances were made at the Infant Welfare Clinics in your District during 1954:—

##### **Infant Welfare Centre, Church Road, Denaby Main**

Total number of children who attended during the year ...	324
Total number of attendances during the year ... ..	2,451



## **Infant Welfare Centre, Gardens Lane, Conisbrough**

Total number of children who attended during the year ...	253
Total number of attendances during the year ... ..	2,830

From the above it will be noted that 577 children made 5,281 attendances at the Child Welfare Centres during the year, and the following Table compares the number of attendances of children under 1 year of age and over 1 year of age at the Centres from 1949 onwards:—

	1954	1953	1952	1951	1950	1949
(a) Under 1 yr of age	3,759	3,873	3,674	3,788	3,688	4,013
(b) Over 1 yr of age	1,522	1,839	1,794	2,040	1,863	2,421

There was a slight decrease in the number of attendances at the Clinics during 1954, and this corresponds to the slight decrease in the number of births registered during that year compared with 1953.

At the end of June, the Local Authority was given the responsibility for the distribution of welfare foods previously issued by the Ministry of Food, i.e. National Dried Milk, orange juice, vitamin tablets and cod liver oil, and during the latter half of 1954 over £1,000 worth of orange juice and National Dried Milk were sold throughout distribution centres in the Division as a whole.

The Ultra-Violet Ray Lamp at Denaby Main Child Welfare Centre was again well used during the year, and 189 children attended the 73 sessions held.

### **(f) Ante-Natal Clinics**

Details of the times of the Ante-Natal Clinics sessions held at Denaby Main and Conisbrough Child Welfare Centres are included in the Table in the preceding paragraph (d), and Dr. J. C. MacWilliam was in medical charge.

Attendances were again high at both Clinics. At Denaby Main a total of 175 expectant mothers attended at some time during the year, and 849 attendances were recorded in all.

At Conisbrough Ante-Natal Clinic 139 expectant mothers made 569 attendances throughout the year.

The total number of patients attending and the number of attendances made dropped slightly on the figures recorded for 1953, but it is estimated that between eighty and ninety per cent. of all expectant mothers in your Area attended the Ante-Natal Clinics provided by the Local Authority.



Where an expectant mother was booked into the Montagu Hospital, Mexborough, arrangements were made as far as possible to avoid needless attendances at both the Local Authority and the Hospital Ante-Natal Clinics.

At these Clinics particular attention has been paid during the year to the diet of the expectant mother, and a great amount of research has been made by Dr. MacWilliam into this question. As a result, suitable diet sheets have been compiled and issued to patients attending the Clinics. Large issues were also made of tablets containing iron and calcium preparations.

It is hoped to establish during 1955 an Ante-Natal Relaxation Class at Denaby Child Welfare Centre, similar to the one now in operation at Mexborough Child Welfare Centre. Meanwhile during 1954 several mothers from Denaby Main attended classes at Mexborough.

The premises used as a Clinic at Conisbrough are not suitable for the establishment of a class there.

#### **(g) Chest Clinics**

The nearest Chest Clinic for patients from the Conisbrough District is situated at Whateley House, Cemetery Road, Mexborough, and during 1954 this Clinic was under the medical charge of Dr. F. C. N. Holden, Dr. R. L. Sadler and Dr. M. Maguire.

As the routine visiting of families where there was a known case of Tuberculosis was gradually handed over to the All-Purpose Health Visitor during the year, arrangements were made for these Health Visitors to attend in turn at the morning clinics held at Whateley House. Her duties were to maintain liaison between the Medical Staff of the Chest Clinic and the Public Health Department, which is responsible for the prevention of spread of the disease.

#### **(h) Venereal Disease Clinic**

Treatment and diagnostic clinics for Venereal Diseases are available at Rotherham, Doncaster, Sheffield and Barnsley.

#### **(i) General Hospital Services**

The general hospital services are provided generally by the Montagu Hospital, Mexborough, the Royal Infirmary at Doncaster, Fullerton Hospital Denaby Main, Moorgate General Hospital, Rotherham, and Beckett Hospital, Barnsley.



### **(j) Infectious Diseases Hospitals**

Cases of infectious diseases arising in your District and requiring hospital isolation were admitted during the year to Doncaster Isolation Hospital or to the Kendray Isolation Hospital at Barnsley. Accommodation for these cases was adequate and no difficulty was experienced over the admission of any case during the year.

### **(k) Maternity Hospitals.**

The Maternity Block at the Montagu Hospital Mexborough provided the main accommodation for maternity cases from the area where after investigation it was considered desirable that an institutional confinement should be arranged. During 1954 there were 518 births to mothers normally resident in the whole of this division in Hospitals and Maternity Homes, and 357 of these took place in the Montagu Hospital, Mexborough. The majority of the other Institutional cases from Conisbrough were confined in the Western Hospital, Balby, and 4 cases at Listerdale Maternity Home, Wickersley.

## **2. MENTAL HEALTH.**

The following are details of mental health patients in the Conisbrough Area during 1954:—

Training—I attending Doncaster Occupation Centre  
11 attending Group Training Classes  
10 being given home tuition

Institutions and Vacancies—Vacancies are required for 7 defectives resident in your district.

West Riding Patients—35 under Statutory Supervision  
10 under Voluntary Supervision  
2 under Guardianship

Hospital Board Patients—I on Licence  
6 After-care Patients

### **Mental Health—General**

In 1954 more progress was made in the Mental Health Service in this Division than in previous years, but the greatest need is still for an Occupation Centre large enough to meet the requirements of the whole of this Division. Such a Centre would undoubtedly ease the demands made for Institutional care in the District.

Group Training Classes are held twice weekly at the Denaby Main Child Welfare Centre as follows:—

Tuesday—10 a.m. to 12 noon  
Friday—2 p.m. to 4 p.m.



Taking the Division as a whole these Group Classes are still expanding, and most of the children newly ascertained are in attendance: Large numbers of children of all ages are being trained with a good deal of success.

Sixty-five children and some adults are receiving training in the whole of this Division, either at home or in group classes.

### After-Care Service

The After-Care Service has expanded greatly in 1954. Excellent co-operation exists in your Area between the Regional Hospital Board's Officers, Psychiatric Clinics and the Mental Health Social Worker. A total of 38 visits were made to after-care cases in the whole of this Division, and of this number 24 requested that the Mental Health Social Worker provide them with after-care service. Ten of these cases were resident in your Area. All school leavers who were found to be employable but who were in need of further supervision after leaving school were helped to find suitable employment by the Mental Health Social Worker in liaison with the Youth Employment Service.

The following Table sets out the position with regard to all patients being supervised under the Mental Deficiency Acts in the Conisbrough Urban District. The figures in brackets are the corresponding figures for 1953:—

### MENTAL DEFICIENCY ACTS, 1913-38

	Div. 30	Conisbrough U.D.
1. No. of defectives ascertained during 1954	15 (8)	4 (2)
Total No. of defectives ascertained ..	137 (141)	48 (49)
2. No. under Guardianship .. .. .	6 (6)	2 (2)
No. under Statutory Supervision ..	105 (110)	35 (37)
No. under Voluntary Supervision ..	26 (25)	10 (10)
No. on licence from Institution .. ..	2 (3)	1 (2)
3. No. awaiting Institutional Vacancies ..	20 (22)	7 (7)
No. attending Doncaster Occupation Centre .. .. .	8 (9)	1 (2)
No. being home trained .. .. .	30 (30)	10 (8)
No. attending Group Training Classes ..	35 (35)	11 (12)
Reports made for Regional Hospital Boards (Institutional Patients) .. .. .	31 (17)	10 (6)
After-care patients (Mental Hospital) under Section 28 of the National Health Service Act .. .. .	24 (13)	6 (2)

Numbers in brackets are corresponding figures for 1953



### **3. Maternity and Child Welfare**

#### **(i) Health Visiting**

At the 31st December, 1954, there were 2 fully qualified Health Visitors and 2 Assistant Health Visitors employed in the area of your Authority, 2 of whom were authorised to use their private motor cars on official business.

During the year Health Visitors for the whole of this Division made 40,861 visits to 2,312 households and attended 1,573 clinic sessions. Of this total the Health Visitors in your District alone made 10,694 visits in all, and 6,890 of these were made to children under 5 years of age.

The total visits to children under one year of age was over 3,600.

The work of the Health Visitor, however, is becoming more and more that of an adviser to the family as a whole and, in this connection, 3,439 visits were made by Health Visitors in the Conisbrough Urban District to other cases, i.e. families where Home Helps are employed, and aged people.

In addition, 1954 was the first year in which Health Visitors in Conisbrough took over the duties of visiting families in which there was a case of Tuberculosis, and 365 visits were made to these cases.

Nearly 200 visits to schools in connection with medical inspections, cleanliness surveys and special visits were made during 1954, and 180 home visits were paid to families where there were infectious diseases, when advice on the care and isolation of the patient was given.

During 1954 a special effort was made to increase the co-operation between the Health Visitor and the General Practitioners throughout the West Riding County Area as a whole. This co-operation has always been very evident in your District, but to ensure that the best possible liaison was being obtained, personal introductions were arranged between each Health Visitor and the Family Doctors practising in the Area. Where practicable, a telephone has been installed at the home address of the Health Visitor so that the Doctors can get in touch with her after normal duty hours if this is essential.

Much of the work of the Health Visitor consists of the supervision of those families where a social problem exists, and in this connection the Health Visitors' reports and advice were most helpful at quarterly meetings held by me throughout the year of a Committee which correlates information regarding children who may be neglected or ill-treated in their own homes.



## **(ii) Domiciliary Midwives**

Three Midwives were employed in Conisbrough during 1954, and holiday relief was provided for them by a fourth Midwife resident in Mexborough. All were in possession of motor cars for use in the course of their duties.

The Midwives in your District accepted 228 new bookings from expectant mothers during 1954, and 158 cases were delivered on the District during this period.

A total of 3,009 ante-natal visits at the homes of these patients were made by the Midwives, 2,120 of which were made to expectant mothers who were to be confined at home, and 889 to patients who had been booked for hospital confinement.

Additionally 2,745 visits were made to mothers after their home confinement and 288 visits to mothers following discharge from hospital before the fourteenth day after the birth of the child.

There was continued close relationship and co-operation between the General Medical Practitioners and the Domiciliary Midwives during the year.

## **Gas and Air Analgesia**

Of the 158 mothers who were confined at home in Conisbrough and Denaby Main during the year, 133 received Gas and Air Analgesia, i.e. 84 per cent. This compares with a ratio of 76 per cent. during 1953.

The percentage of expectant mothers receiving Gas and Air Analgesia in the Division as a whole is 79 per cent, and in the West Riding Administrative County, 61 per cent. The position, therefore, in this respect in your District is considered to be satisfactory.

In addition to the above, 44 expectant mothers were given injections of Pethidine during labour.

## **Applications for Institutional Confinement**

A total of 133 applications were received from expectant mothers for admission to Hospital or Maternity Homes for their confinements during 1954. Of these, 98 were booked. The Montagu Hospital, Mexborough, accepted 77 patients, the Western Hospital, Balby, 17, and Listerdale Maternity Home, Wickersley, 4—all from Conisbrough and Denaby Main.

The shortage of beds in Maternity Units continued, and it was thus necessary to continue a system of grading applications into priority groups, depending on medical, obstetric or environmental conditions.

## **4. Vaccination and Immunisation**

Immunisation sessions in the medical charge of Dr. H. F. Lindsay are held at the Child Welfare Centres in your District as follows:—



Child Welfare Centre, Gardens Lane, Conisbrough—  
Monday, 2.00 to 4.30 p.m.

Child Welfare Centre, Church Road, Denaby Main—  
Tuesday, 2.00 to 4.30 p.m.

Facilities are available each week during these sessions for the immunisation of children against Diphtheria and vaccination against Smallpox. Additionally all Family Doctors in the District will immunise children against Diphtheria and vaccinate them against Smallpox free of charge.

To maintain the present satisfactory position whereby there have been no cases of Diphtheria in your District for some years, it is considered essential to secure the immunisation of not less than 75 per cent. of all babies before their first birthday. Without this protection there may well be an outbreak comparable to the one reported in the Midlands during 1953, where 38 cases were reported and 3 children, who had not been immunised, died.

It is disturbing to note, therefore, that only 44 per cent. of all children under 5 years of age in the Conisbrough District have been immunised. Bearing in mind that over 86 per cent. of all children of school age in the Area are immunised, there is obviously no opposition to immunisation on the part of parents, and the conclusion must be drawn that apathy is the main obstacle to be overcome, for when children can be immunised at school without any inconvenience to the parent, the consent is readily obtained.

It will also be noted from the following Tables that only 13 children under the age of 15 years were vaccinated against Smallpox during 1954. Unless, therefore, there is an increase in the number of children vaccinated against Smallpox in infancy, there must always remain the possibility of an outbreak of this disease, especially in these days of fast air transport. Most adolescents, especially boys, must be vaccinated eventually, and primary vaccination in infancy is much less likely to be followed by complications, besides giving protection during early life.

In contrast to the poor response from parents for the immunisation of their children against Diphtheria, the scheme introduced for immunisation against Whooping Cough has drawn a good response, and indeed mothers are anxious for their babies to be immunised. No doubt the familiarity of Whooping Cough accounts for this. Nevertheless the effect of Whooping Cough on a child cannot be compared with the deadliness of Diphtheria.

The following Table gives details of statistics relating to Diphtheria immunisation and vaccination in your District for the year ended 31st December, 1954:—



STATISTICS RELATING TO DIPHTHERIA IMMUNISATION AND VACCINATION  
FOR THE YEAR ENDED 31st DECEMBER, 1954

DIPHTHERIA IMMUNISATION

Urban District	No. of children Immunised in 1954			Booster Doses in 1954	No. of Children Immunised at any time up to 31.12.54			Estimated mid-year population in 1954			Percentage Rate		
	under 5 yrs.	5-14 years	Total		under 5 yrs.	5-14 years	Total	under 5 yrs.	5-14 years	Total	under 5 yrs.	5-14 years	Total
Conisbrough U.D. . .	112	266	378	266	562	2862	3424	1258	3320	4578	44.7	86.2	74.7

VACCINATION

Conisbrough U.D.	Under 1 yr. 1954	1-4 years 1950-53	5-14 years 1940-49	15 years and over	Total
Primary . .	4	7	2	2	15
Re-Vaccination . .	—	—	—	1	1

## 5. SECTION 28. PREVENTION OF ILLNESS—CARE AND AFTER-CARE

### Hospital After-Care

During 1954, Miss D. M. E. Goldthorpe, a Health Visitor, continued to attend the Montagu Hospital, Mexborough, for the purpose of arranging hospital after-care for cases due to be discharged.

In all, 103 sessions at the Hospital were attended by the Liaison Health Visitor, and an approximate time of 209 hours were involved. Requests were received from the hospital authorities for background reports relating to 215 patients, of which 154 were completed and returned to the hospital.

Miss Goldthorpe interviewed 78 patients, 41 of whom required some assistance after their discharge, and all these were dealt with satisfactorily. In all, a total of 246 patients were referred for after-care on discharge from hospital, and the Public Health Department were able to take action in all but 4 of these cases. The action in the majority of the 242 cases consisted of assistance and advice by the Health Visitor, and other assistance was provided as follows:—

Assisted by Midwife	...	2 cases
Assisted by Home Nurse	...	33 cases
Home Help provided	...	13 cases
Rehabilitation arranged	...	4 cases
Referred to Convalescent Homes	... ..	2 cases
Transferred to Hospitals or Homes for Chronic Sick	...	10 cases

In addition, nursing equipment was provided for 2 patients.

The interests of the patients assisted by this After-Care Service ranged from premature babies to the aged and infirm and the blind, deaf, dumb, cripples, etc.

Good co-operation between the Liaison Health Visitor and the Medical and Nursing Staff at the Montagu Hospital has been maintained throughout the year and the scheme has ensured that the maximum value of hospital treatment is maintained after the patient returns home.

## 6. SECTION 47. NATIONAL ASSISTANCE ACT, 1948

Section 47 of the National Assistance Act, 1948, provides for the removal to an Institution of any person who is unable to devote to himself or herself, and is not receiving from other persons, proper care and attention.



During 1954 it became necessary for the first time to take action under this Section for the removal of an aged spinster in your District who was physically handicapped and living in insanitary conditions. The case had been under supervision for 2 years, but despite the provision of a Home Help and assistance from a neighbour, no improvement could be made in the conditions. The old lady was, therefore, removed on a Court Order to the Western Hospital, Balby, where she settled down quite comfortably.

## 7. HOME HELP SERVICE

One hundred and twenty-six families in the Conisbrough District were provided with assistance through the Home Help Service during 1954. This represents an increase of 25 cases over 1953 and an increase of 39 cases on the figure for 1950. The following Table indicates the categories of patients assisted in 1954, with comparative figures for the previous 4 years:—

	1954	1953	1952	1951	1950
Illness and care of children of school age ... ..	15	14	13	22	25
Tuberculosis ... ..	2	2	5	1	1
Lying-in and care of expectant mothers ... ..	5	5	9	14	28
Aged sick and infirm ... ..	104	80	63	52	33

The greatest demand for the Service, therefore, arises in the homes of the aged sick and infirm, and it will be noted that the number of cases in this category has risen threefold since 1950. As explained earlier in this Report, however, the continued shortage of beds for chronic cases and the fact that more and more people are living to older ages means that the demands on the Home Nursing Service and the Home Help Service in the homes of aged persons must continue to rise, as these two agencies are probably the only means of providing the necessary care and attention for the aged.

In this Medical Division as a whole during 1954, an average of 55 part-time Home Helps were employed to the extent of approximately 60,000 hours, and they attended 457 households.

## 8. SCHOOL HEALTH SERVICE

During 1954, the work of the School Medical Service has been carried out as follows:—

Routine inspections of: (1) Entrants; (2) Junior Leavers; (3) Senior Leavers.



Periodic Inspections also for:—

- (1) Pre-nursing candidates for entrance to Technical School
- (2) Children prior to holiday in camp.
- (3) Children requiring general anaesthetic for dental treatment.
- (4) College entrants
- (5) Handicapped children

**A Paediatric Clinic** is held monthly at the Child Welfare Centre, Mexborough. These give the opportunity of the School Medical Officer to discuss difficult cases with the Paediatrician, and the interchange of data and investigation lead to more accuracy in diagnosis.

**Ultra Violet Ray Clinics** are held twice weekly, the numbers attending varying with the incidence of illness and the weather conditions. One hundred and eighty-nine children were treated at the 73 sessions held at Denaby Main Child Welfare Centre during the year.

**Ear, Nose and Throat**—All cases referred to the Ear, Nose and Throat Surgeon have been examined, but there are still cases on the hospital list awaiting treatment.

**Eye Clinics**—These have been held in a three-weekly rota, but there is a considerable waiting list for examination. It is disappointing to find that many children come to school without the glasses after they have been obtained.

**Diphtheria Immunisation**—During the Summer Term only booster doses were given. Unfortunately the percentage of entrants immunised was so low that parents during routine inspection were asked to sign the cards when present at the examination. This gave a good response and all Infants' Schools in the Conisbrough Area were visited.

Although there have been no cases of Diphtheria in the District, it cannot be too strongly urged that infants should be immunised before their first birthday so that they are protected in their most vulnerable years, and also more time could be given in school time to more examinations.

### **Handicapped Children**

These include the children who are blind, deaf, spastic, epileptic, crippled and mentally sub-normal. The problem is not in the actual numbers of these children but because of the responsibility which they involve. The increasing emphasis of recent years upon the advisability of keeping these children at home has added to their responsibility.



The greatest independence compatible with the handicap is essential to the full development of the handicapped child, and to achieve this the continuing and intelligent co-operation of the parents is essential.

**Infestation of Heads**—Far too many cases attend clinics for this reason. It is a serious reflection on the attitude of girls due to leave school that they should be so lacking in social sense and personal pride.

**Child Guidance Clinics**—Behaviour problems still made up the largest number of cases sent for advice and treatment, and teachers fully appreciate the help and co-operation given in these clinics.

**Speech Therapy**—Each district has averaged 50 clinics per year with very satisfactory results. Unfortunately, the Speech Therapist left at the end of the year and has not yet been replaced.

It has been said that the basis of success in the School Health Service is the understanding watch kept over the child in health as well as in sickness. To achieve this object there must be whole-hearted co-operation between the School Medical Officer, the Health Visitor, the Teacher and the Parent, and as School Medical Officer I would like to thank the Health Visitors and Teaching Staff for their ungrudging and valuable help, and the Parents for their continued interest and understanding.

## SECTION C

### PREVALENCE AND CONTROL OVER INFECTIOUS DISEASES

#### (i) Notifiable Diseases other than Tuberculosis

The following Tables list the infectious diseases and the age groups in which they occurred which were notified during 1954:—

#### CONISBROUGH

#### INFECTIOUS DISEASES

#### Notifiable Diseases (other than Tuberculosis) during 1954

Diseases	Total Cases Notified	Cases After Correction	Cases Admitted to Hospital	Deaths
Scarlet Fever .. ..	20	20	8	—
Whooping Cough .. ..	2	2	—	—
Measles .. ..	44	44	1	—
Puerperal Pyrexia .. ..	7	7	4	—



## INFECTIOUS DISEASES (CORRECTED) 1954

### Age Distribution—Conisbrough

Age	Scarlet Fever	Whooping Cough	Measles	Puerperal Pyrexia
1—5 years ..	6	1	27	—
5—14 „ ..	14	1	17	—
15—44 „ ..	—	—	—	7

It will be seen that there were remarkably few notifications during the year, the majority of them being Measles, of which 44 cases were notified. This total compares with a figure of 217 cases notified in 1953.

Twenty cases of Scarlet Fever were also notified during the year, and there were 11 cases fewer than in 1953. It was necessary to admit 8 cases to hospital because the home conditions were not suitable for bedroom isolation.

The third highest number of infectious diseases notified was Puerperal Pyrexia, when 7 cases were notified, 4 of which occurred in hospital. In this group there was one more notification than in 1953.

I am pleased to record that there were no notifications of Diphtheria, Food Poisoning and Acute Poliomyelitis in your District during the year under review. Only 2 cases of Whooping Cough were notified compared with 39 in 1953, and it is anticipated that with the more intensive use of the scheme of immunisation against Whooping Cough, that the incidence of this disease will fall in future years.

It will also be noted that with the exception of the cases of Puerperal Pyrexia notified, all other infectious diseases were in the under 14 age group.

### (ii) Tuberculosis

Twenty-seven fresh cases of Tuberculosis were notified in the Conisbrough Urban District during 1954, 25 of which were Pulmonary Tuberculosis. This represents an increase of 8 over the number of cases notified last year, but is about the average for the number received during recent years. It will be noted from the Tables that the majority of the notifications of Pulmonary Tuberculosis are in the 16 to 25 age group, both for males and females.



Four deaths were recorded from Pulmonary Tuberculosis during 1954, a decrease of 1 on last year's figures, and the same number of deaths as occurred in 1952, the lowest ever recorded.

For information the following Tables detail the number of deaths and notifications of Tuberculosis in the Conisbrough District since 1945:—

### DEATHS FROM TUBERCULOSIS

Year	Conisbrough U.D.	
	Pulmonary	Non-Pul.
1954	4	—
1953	5	—
1952	4	—
1951	5	2
1950	11	1
1949	9	1
1948	10	3
1947	15	2
1946	13	—
1945	7	2

### NOTIFICATION OF TUBERCULOSIS (NEW CASES)

#### CONISBROUGH URBAN DISTRICT

Year	Conisbrough U.D.	
	Pulmonary	Non-Pul.
1954	25	2
1953	17	2
1952	27	2
1951	19	2
1950	24	5
1949	17	7
1948	15	7
1947	12	3
1946	16	3
1945	8	1

The age ranges in which the new cases and deaths occurring during 1954 are tabulated below:—

**TUBERCULOSIS—NEW CASES AND MORTALITY  
DURING 1954  
NEW CASES**

Age Periods				Pulmonary		Non-Pulmonary	
Years				M.	F.	M.	F.
0—1	..	..	..	—	—	—	—
1—5	..	..	..	—	1	—	—
6—15	..	..	..	1	—	—	—
16—25	..	..	..	4	5	—	—
26—35	..	..	..	—	—	1	—
36—45	..	..	..	1	2	—	—
46—55	..	..	..	2	1	—	—
56—65	..	..	..	5	1	—	—
66 and over	..	..	..	2	—	—	1
TOTALS				15	10	1	1

**DEATHS**

Age Periods				Pulmonary		Non-Pulmonary	
Years				M.	F.	M.	F.
0—1	..	..	..	—	—	—	—
1—5	..	..	..	—	—	—	—
6—15	..	..	..	—	—	—	—
16—25	..	..	..	—	—	—	—
26—35	..	..	..	1	1	—	—
36—45	..	..	..	—	—	—	—
46—55	..	..	..	—	—	—	—
56—65	..	..	..	1	1	—	—
66 and over	..	..	..	—	—	—	—
TOTALS .. ..				2	2	—	—

During 1954 vacancies in Sanatoria in respect of female cases were obtained more easily than for male patients, and in the latter case there is probably two to three months waiting period.

Extra nourishment in the form of 2 pints of milk a day was granted to 48 patients in Conisbrough under the scheme administered by the County Council, and in addition 4 persons suffering from Tuberculosis were supplied with beds and/or bedding to facilitate bedroom segregation from other members of the family.



Arrangements were continued during 1954 for the vaccination with B.C.G. vaccine of children living in households where there was a known case of Pulmonary Tuberculosis, and 6 children in your District were so vaccinated during 1954, making a total of 25 children who have been given the added protection of B.C.G. vaccination against contracting Tuberculosis since the scheme started.

It is hoped to offer B.C.G. vaccination to school children over 13 years of age during 1955, with the consent of their parents.

In the Conisbrough Urban District during 1954 it was arranged that the work of visiting families where a case of Tuberculosis resided should be handed over from a specialised Tuberculosis Visitor to the All-Purpose Health Visitor. Consequent upon this, the Health Visitors in the District made a total of 365 visits to these households.

Additionally they attended, in turn, clinic sessions at the Chest Clinic, Whateley House, Cemetery Road, Mexborough, where they were able to consult with the Medical Officers in Charge, Drs. F. C. N. Holden, R. L. Sadler and M. Maguire, regarding the best steps to be taken for the future care of the patient and their families.

Close co-operation between your Medical Officer, the Staff at the Chest Clinic and the District Sanitary Inspectors was maintained throughout the year, and in an effort to improve this, regular meetings of the Health Visiting Staff and the Medical Staff of the Chest Clinic were arranged and held in the Child Welfare Centre, Mexborough.

In December, 1954, the South Yorkshire Mass Radiography Unit, whose headquarters are the Western Hospital, Balby, made visits to the Miners' Welfare Hall, Conisbrough, and the Baths Hall, Denaby Main, and the following are details of the Surveys:—

#### **SURVEY—MINERS' WELFARE HALL, CONISBROUGH**

	Males	Females	Total
Total radiographed ... ..	682	666	1,348
Passed on miniature film ... ..	627	638	1,265
Recalled for large film ... ..	43	26	69
Failed to attend for large film ...	3	—	3
Passed on large film ... ..	12	13	25
Recalled for medical interview after large film ... ..	28	13	41
Recalled for medical interview without large film ... ..	12	2	14
Referred to Chest Clinic ... ..	24	8	32
Referred to Own Doctor ... ..	16	6	22
"No action" cases after interview...	—	1	1



## SURVEY—BATHS HALL, DENABY MAIN

	Males	Females	Total
Total radiographed ... ..	697	543	1,240
Passed on miniature film ... ..	635	526	1,161
Recalled for large film ... ..	48	17	65
Failed to attend for large film ...	2	—	2
Passed on large film ... ..	13	7	20
Recalled for medical interview after large film ... ..	32	10	42
Recalled for medical interview without large film ... ..	14	—	14
Referred to Chest Clinic ... ..	17	7	24
Referred to Own Doctor ... ..	30	3	33

Arrangements were made, in line with current policy, for school children to attend over the age of 13 years, with the consent of their parents, and 415 school children attended for mass X-ray at the Conisbrough and Denaby Main centres. Additionally the Teachers, Canteen Staffs and Caretakers at the schools who are in direct contact with children were invited to attend, and in all about 78 of the School Staffs attended.

The following Table gives details of the abnormalities and diseases discovered during the Surveys in Conisbrough and Denaby Main:—

	Conisbrough	Denaby Main
Total X-rayed ... ..	1,348	1,240
Tuberculosis—Active ... ..	5	4
Inactive ... ..	5	7
Chronic bronchitis and emphysema ...	4	1
Pneumonia (non-tuberculous) ... ..	3	2
Bronchiectasis ... ..	4	4
Pulmonary fibrosis (non-tuberculous) ...	5	2
Pneumoconiosis ... ..	18	24
Basal fibrosis ... ..	—	1
Cardiovascular lesions—acquired ... ..	5	7
Miscellaneous ... ..	5	3

Due to the atrocious weather at the time when the Surveys were undertaken, the response from the public was not so high as when the Unit attended in 1952, but these visits do give the population an opportunity of having an X-ray clearance, and if treatment is required this can be commenced before the condition becomes too advanced.



## CONISBROUGH URBAN DISTRICT COUNCIL

---

### ANNUAL REPORT OF THE SANITARY INSPECTOR FOR THE YEAR ENDING 31st DECEMBER, 1954.

---

To the Chairman and Members of the Conisbrough Urban District Council.

Mr. Chairman and Gentlemen,

It is once again my pleasant duty to present this, my ninth report upon the work performed by my department during the year.

My thanks are extended to the Council for the help and consideration they have given to me during the year, also my thanks are extended to the Medical Officer of Health, Dr. J. Leiper, and his staff, and my own staff, who have given me their co-operative efforts during the year. My assistant at the commencement of the year, Mr. K. C. McCutcheon, obtained another appointment and was succeeded by Mr. S. J. Mayo in November, 1954.

I think the most startling news was that our Medical Officer of Health, Dr. J. Leiper, had obtained the position of Deputy County Medical Officer of Health to the West Riding of Yorkshire, and was to relinquish his post at the end of the year. I am sure that the Council and myself extend to him our good wishes for his success in his new appointment, and we realise that the County's gain is the Urban District's loss. His acting successor, for the time being, is Dr. B. R. A. Demaine, who was his deputy, and with her we have very cordial relations, but it would appear that the County's future policy for a Divisional Medical Officer is the further amalgamation of County Districts and we can only wait and see the outcome of the County's proposals regarding this matter.

The major matters affecting public health within the urban district have arisen from new legislation which has come into effect during the year. This has had the effect of re-introducing private slaughtering which had been centralised since the outbreak of hostilities. The Housing Repairs and Rents Act, 1954, could be stated as being the means by which a landlord who looks after his property will receive a better remuneration therefrom than hithertofore. A National policy with regard to the elimination of slum property and the fact that local authorities must submit



proposals within the next six months as to the methods they propose to adopt to overcome this problem. The Food and Drugs Amendment Act, 1954, will again bring a considerably higher standard with regard to food hygiene when it is fully implemented. The full shock of this legislation has not yet been felt in all its spheres, but local slaughtering, with its evening slaughtering spread over a considerable period of the week certainly makes a daily demand on the time of the inspectorial staff. The provisions with regard to rent increases have certainly come very much to the notice of the general public who are demanding certificates of disrepair.

The new definition as to what constitutes "A Fit House," in my opinion, will not be as easy to administer as its predecessor, particularly as the additional standard in the old Act of the building byelaw standards being acceptable cannot now be used. Taking a broad view of housing, the position would appear to be easier than for some years past particularly as the National Coal Board has completed their new estate which, together with the Council's efforts during the year, will go a long way in alleviating this problem.

### **INSPECTORIAL STAFF**

#### **Senior Sanitary Inspector and Public Cleansing Officer:**

R. E. INGLEBY, A.R.S.I., M.S.I.A., R.P.C.

#### **Additional Sanitary Inspectors:**

K. C. McCUTCHEON, Cert.S.I.B., M.S.I.A.

S. J. MAYO, A.R.S.I., M.S.I.A.

#### **Clerical Assistant and Pupil Sanitary Inspector:**

H. L. CHESHIRE

#### **Chief Clerk: MRS. R. WILLIS**

Mr. McCutcheon left the employ of the Council at the end of August having obtained a more lucrative appointment with the Harpenden Urban District Council. In view of the number of advertisements for Additional Sanitary Inspectors, the Council would appear to have been lucky in obtaining the services of Mr. S. J. Mayo, A.R.S.I., M.S.I.A., so quickly.

The salaries of the Senior Sanitary Inspector and the Additional Sanitary Inspector are contributed to by grants from the Ministry of Health.



## **WATER SUPPLIES**

The supplies to this district are obtained from deep wells, the water being obtained from the Doncaster and Tickhill Joint Water Board and the National Coal Board, domestic supplies being delivered to the houses out of the rising service mains in the majority of cases. A small service reservoir, situate in Conisbrough does supply one part of the district, whilst Denaby receives its supply direct from the National Coal Board who are the water Authority for that area.

Supplies had to be curtailed slightly during the summer period of this year.

The Doncaster and Tickhill Joint Water Board are seeking power to raise monies to sink a further bore hole, and it is proposed that the Board be reconstituted. The authorities receiving water from this supply are to form, if they so desire, part of the reconstituted Board, and eventually the new Board will take over the whole of the supply of water to the Urban Districts and responsibility for maintaining such a supply. The Council are favourably disposed to this suggestion and it is anticipated that part of this changeover will operate next year and the full commitments in the not too distant future.

### **Purification**

The National Coal Board supply receives a softening treatment; this also includes a chlorination and filtration treatment prior to distribution. Further treatment by the Local Authority is not undertaken. Doncaster and Tickhill Joint Water Board supply does not receive any treatment.

### **Bacteriological and Chemical Analysis**

Twenty-four samples of water were submitted for analysis this year by the Local Authority and the National Coal Board, 20 for bacteriological analysis and 4 for plumbosolvency analysis. One bacteriological sample was classified as unsatisfactory, three were classified as doubtful, and the remainder were satisfactory, as also were the four samples taken for plumbosolvency analysis.

### **Drains and Sewerage**

The sewers to the Windmill Farm Site are still being extended, and the Coal Industry Housing Association should have completed the drainage to their estate before the year is out.



## Closet Accommodation

There are at the present time within the district the following forms of sanitary conveniences:—

Privies with covered middens	...	...	7
Tubs or Pail Closets	...	...	2
Water Closets	...	...	5,682
Waste Water Closets	...	...	27

Unfortunately, the most undesirable type of conveniences are situate considerable distances from the sewers in the district, and in some cases the level of the convenience is below the level of the sewer.

## Rivers and Streams

Further requests have been received from the Rivers Board regarding the inability of the Denaby Sewage Works to cope with the quantity of sewage being delivered which is gaining access to the River Don and fouling same.

## Smoke Abatement

Council further considered the industrial smoke problem in the area, the principal problem still being the amount of emission of smoke from the colliery chimneys. As was anticipated, the increased underground workings, the further development of the mines in the area, together with the demand for more mechanical power per man employed without any increased principal power unit, resulted in the boilers having to undertake more work still than during last year. Consequently, smoke observations revealed at times, a thirty-minute black smoke emission during the period of thirty minutes. The Medical Officer of Health, Dr. J. Leiper, stressed this point, and the possible danger to public health, to the Council, and it was decided to call a further meeting again with the Coal Board officials to obtain a solution to the problem, if possible.

A meeting was held on the 12th May, 1954, and after considerable discussion during which the point of view of the Council with regard to the danger to health from the emissions of smoke for long periods and the National Coal Board Officials' views as to the cost of improvements which, in their opinion, would be for an interim period only until full electrification from the national grid system could be obtained thereby causing excessive expenditure which had not been budgeted for and which would appear to be contrary to the National Coal Board's policy for the time being, were considered. It was eventually decided that the local National Coal Board officials were not in a position to offer any solution to this problem. The Council then pressed the matter to the Minister of Fuel and Power, and a copy of the information was sent to the Minister of Housing and Local Government.



The result of the appeal to the Minister was, from the Council's viewpoint, not very helpful, Council being informed that the Minister could not interfere with the National Coal Board's policy.

One can only hope that electrification will form an earlier part of the local National Coal Board's Development policy than had been anticipated previously.

With regard to the emissions of smoke from the Brickyard chimneys. It was ascertained that during the year provisions to diminish this smoke by providing alternative power to certain of their equipment which was previously worked by steam from the boilers, was being undertaken and would be most helpful with regard to the diminution of this source of industrial smoke.

The domestic smoke problem is a matter which will gradually resolve itself. The main property owners, the Council and the National Coal Board, are installing modern firegrates in their older property, and of course, all new houses are equipped with this amenity, and this, it is hoped, will reduce the domestic smoke emissions.

The readings from the deposit gauges are as follows:—

			Total Water-Insoluble Matter (Tons per sq. mile)	SO <sub>4</sub> (Tons per sq. mile)	Total Solids (Tons per sq. mile)
January	...	...	—	—	—
February	...	...	12.48	3.02	20.87
March	...	...	17.55	3.49	27.49
April	...	...	12.85	1.85	17.69
May	...	...	11.44	3.56	20.54
June	...	...	9.09	2.38	15.67
July	...	...	9.30	3.36	18.42
August	...	...	9.66	3.66	18.29
September	...	...	5.60	2.11	10.64
October	...	...	7.52	2.52	13.96
November	...	...	5.77	2.35	12.32
December	...	...	9.76	3.02	17.08

It will be noticed from these figures that there is a high acid content in the atmosphere within this area besides a large dirt content. These two features mean extra expense in property repair and more rapid deterioration, and considerable extra labour on the housewife's part in her endeavours to keep a clean home.

## Sanitary Inspection of the District

During the year the following inspections were made. These are grouped under three headings:—General Inspections as to complaints, etc.; matters appertaining to housing and house letting; and matters appertaining to food.

General inspections as to complaints, etc. ... ..	3,351
Matters appertaining to housing and house letting ... ..	901
Matters appertaining to food ... ..	1,089
General inspections as to complaints etc.	

### Inspection of:—

Water Supply ... ..	8
Drainage ... ..	117
Fried Fish ... ..	1
Tents, Vans and Sheds ... ..	6
Factories ... ..	33
Workshops ... ..	4
Outworkers ... ..	1
Bakehouses ... ..	4
Public Conveniences ... ..	1
Theatres ... ..	4
Refuse Collection ... ..	53
Refuse Disposal ... ..	47
Rats and Mice ... ..	2,209
Atmospheric Pollution ... ..	104
Shops ... ..	7
Schools ... ..	9
Miscellaneous Sanitary Visits ... ..	380
No Entry ... ..	149
Hairdressers ... ..	3
Enquiries re Infectious Diseases ... ..	48
Disinfections ... ..	10
Investigations re Food Poisoning ... ..	153

---

3,351



The following statement shows the nuisances abated and the defects rectified during the year, but does not record any repairs to Council's own property:—

### List of Nuisances, etc., abated

#### Drainage:

Obstructions removed and drainage repaired	...	...	8
Drainage relaid or renewed or extended	...	...	3
New gullies provided	...	...	2
Rainwater drainage repaired or renewed	...	...	58
Sink waste pipes repaired	...	...	5
Insanitary sinks replaced	...	...	11
W.C.'s repaired	...	...	10
Insufficient W.C. accommodation	...	...	1

#### Repairs to premises

Chimneys rebuilt or pointed	...	...	20
Roofs repaired	...	...	95
External walls repaired and/or pointed	...	...	144
Ceiling Plaster repaired	...	...	103
Wallplaster repaired	...	...	149
Defective flues repaired	...	...	3
Fire Ranges and Coppers repaired	...	...	77
Internal floors repaired or replaced	...	...	70
Repairs to stairs, handrails, doors, windows and internal wooden fittings	...	...	161
Insufficient and/or defective ventilation	...	...	25
Insufficient lighting	...	...	13
Repaired yards, etc.	...	...	16
Unsatisfactory water supply	...	...	7
Burst water pipes repaired	...	...	16
Verminous premises	...	...	4
Rodent infested premises visited	...	...	54
Miscellaneous matters	...	...	192

---

1,247

### Housing

An indication of the work done in connection with this subject can be obtained from the following statistics:—

Number of dwelling houses in the district	...	4,724
Number of back-to-back houses included in above	...	Nil

1.	Inspection of dwelling houses during the year	
(1)	(a) Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts) ... ..	279
	(b) Number of inspections made for the purpose	622
(2)	(a) Number of dwelling houses (included under sub-head (1) above), which were inspected and recorded under the Housing Consolidated Regulations ... ..	9
	(b) Number of inspections made for the purpose	18
(3)	Number of dwelling houses needing further action:—	
	(a) Number considered to be in a state so dangerous or injurious to health as to be unfit for human habitation ... ..	3
	(b) Number (excluding those in sub-head (3) (a) above) found not to be in all respects reasonably fit for human habitation ... ..	3
2.	Remedy of defects during the year without service of formal notices.	
	Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their officers ... ..	50
3.	Action under Statutory Powers during the year:—	
	A Proceedings under Section 9, 10 and 16 Housing Act, 1936:	
	(1) Number of dwelling houses in respect of which notices were served requiring repairs ... ..	Nil
	(2) Number of dwelling houses which were rendered fit after service of formal notices:—	
	(a) By owners ... ..	Nil
	(b) By Local Authority in default of owners	3
	B Proceedings under Public Health Acts:	
	(1) Number of dwelling houses in respect of which notices were served requiring defects to be remedied ... ..	23
	(2) Number of dwelling houses in which defects were remedied after service of formal notices:—	
	(a) By Owners ... ..	15
	(b) By Local Authority in default of owners	Nil



C Proceedings under Sections 11 and 13 Housing Act, 1936:

(1) Number of representations, etc., made in respect of dwelling houses unfit for habitation ...	14
(2) Number of dwelling houses in respect of which Demolition Orders were made ... ..	13
(3) Number of dwelling houses demolished in pursuance of Demolition Orders ... ..	2
(4) Any action under Sections 10 and 11 of the Local Government (Miscellaneous Provisions) Act, 1953 If so, what? ... .. 1 Closing Order	

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 ... ..	3
(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 ... ..	Nil

4. Housing Act, 1936—Part IV—Overcrowding

(a) (1) Number of dwellings overcrowded at the end of the year ... ..	not known
(2) Number of families dwelling therein ...	not known
(3) Number of persons dwelling therein ...	not known
(b) Number of new cases of overcrowding reported during the year ... ..	4
(c) (1) Number of cases of overcrowding relieved during the year ... ..	4
(2) Number of persons concerned in such cases...	12

5. New Houses

Number of new houses provided during the year:—

By the Local Authority:—Permanent Type ... ..	84
Temporary Type ... ..	Nil
By Private Enterprise ... ..	222

## 6. Housing Act, 1949

Any action in connection with:—

- |  |     |     |     |     |     |
|--|-----|-----|-----|-----|-----|
| (a) Section 4—Advances for purpose of increasing housing accommodation                                 | ... | ... | ... | ... | Nil |
| (b) Section 20—Grants to persons other than local authorities for improvement of housing accommodation | ... | ... | ... | ... | Nil |

234 Inspections were made in connection with the re-housing, and the exchange of houses between council tenants and the taking in of lodgers.

## Eradication of Bed Bugs

Seven cases of infested premises were encountered during the year, and in all cases this condition has been eradicated.

## Tents, Vans and Sheds

Number in the district—5.

## FACTORIES

### 1. Inspections for purposes of provisions as to health.

Premises	No. on Register	Inspection	Written Notices	Occupiers Prosecuted
(1) Factories in which Secs. 1, 2, 3, 4 and 6 are to be enforced by local authority .. .. .	12	8	Verbal 1	Nil
(2) Factories not included in (1) in which Section 7 is enforced by local authority .. .. .	35	32	—	—
(3) Other premises in which Sec. 7 is enforced by the local authority (excluding out workers' premises) ..	—	—	—	—
<b>TOTAL</b> .. .. .	<b>47</b>	<b>40</b>	Verbal 1	—



2. Cases in which defects were found.

Particulars	Found	Remedied	Referred to H.M. Inspector	Referred by H.M. Inspector	No. of cases in which prosecutions were instituted
Want of cleanliness (S.1) ..	—	—	—	—	—
Overcrowding (S.2) ..	—	—	—	—	—
Unreasonable Temperature (S.3) ..	—	—	—	—	—
Inadequate Ventilation (S.4) ..	—	—	—	—	—
Ineffective drainage of floors	—	—	—	—	—
Sanitary Conveniences (S.7)					
(a) Insufficient ..	—	—	—	—	—
(b) Unsuitable or defective	1	1	—	—	—
(c) Not separate for sexes ..	—	—	—	—	—
Other offences against the Act (not including offences relating to outwork)...	—	—	—	—	—
<b>TOTAL ..</b>	<b>1</b>	<b>1</b>	<b>—</b>	<b>—</b>	<b>—</b>

### FOOD

The following is a list of inspections made on matters appertaining to Food:—

Inspection of slaughtering	...	...	...	...	270
Stalls and Hawkers	...	...	...	...	14
Meat Inspections	...	...	...	...	216
Butchers' Shops	...	...	...	...	59
Canteens	...	...	...	...	7
Dairies	...	...	...	...	3
Fish Shops	...	...	...	...	4
Food Preparing Premises	...	...	...	...	14
Grocers	...	...	...	...	78
Greengrocers, etc.	...	...	...	...	10
Ice Cream	...	...	...	...	18
Market Stalls	...	...	...	...	296
Street Hawkers	...	...	...	...	15
Food and Drug Sampling	...	...	...	...	8
Miscellaneous matters and condemnations	...	...	...	...	77
					<u>1,089</u>

### Milk Supply

The total number of persons retailing milk in the area is 47. The majority are selling sterilised milk from the general mixed business premises. Supplementary Dealers' Licences for the sale of milk are as follows:—

Milk (Special Designation) (Raw Milk) Regulations, 1949:

Tuberculin Tested Milk	...	...	1
Tuberculin Tested Milk Accredited			1

Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949-53:

Pasteurised Milk	...	...	...	4
Sterilised Milk	...	...	...	3

Thirty-nine samples of milk were submitted to the Public Health Laboratory Service for examination with regard to their keeping qualities, etc. These were found to be satisfactory.

### Meat and Other Foods

With the advent of slaughtering in the district again, it was found that a number of the old private slaughterhouses had either been used for other purposes or allowed to get into a decrepid state. A meeting was held between the butchers and the Local Authority and temporary licences to slaughter were issued to five butchers. Two of these butchers failed to carry out improvements and eventually three slaughterhouses only are now in use.

Because of the irregular hours of slaughtering, and the butchers concerned slaughtering to suit their own business, meat inspection in slaughterhouses ranges from Sunday to the following Saturday. If this could be arranged to be undertaken at the beginning of the week much valuable time could be saved.

	Cattle, excl'dg. cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed (if known)	86	64	2	383	240
Number inspected ..	86	64	2	383	240
<b>All diseases except Tuberculosis—</b>					
Whole carcasses condemned	Nil	Nil	Nil	Nil	Nil
Carcasses of which some portion or organ was condemned .. ..	5	3	Nil	13	4
Percentage of the number inspected affected with disease other than tuberculosis .. ..	5·8 %	4·69 %	Nil	3·39 %	1·67 %
<b>Tuberculosis only—</b>					
Whole carcasses condemned	1	Nil	Nil	Nil	Nil
Carcasses of which some part or organ was condemned .. ..	7	2	Nil	Nil	2
Percentage of the number inspected affected with tuberculosis .. ..	9·3 %	3·12 %	Nil	Nil	0·83 %



## Ice Cream, etc.

The number of samples taken was 18 and classification was as follows:—

Grade 1	Grade 2	Grade 3	Grade 4
17	1	Nil	Nil

Hawking of this commodity has considerably reduced although week-end hawking is still encountered.

There are 39 shops licenced with the local authority to sell ice cream. It is notable that two shops have given up selling this commodity.

## Food Poisoning Outbreaks

Eighteen cases of suspected dysentery were notified and eleven cases were confirmed. Excreta samples were taken from fifty one persons who were suspected or contacts with the cases concerned and thirteen of these were confirmed. The principal infection was sonne dysentery (*shigella sonnei*).

One Denaby Main family which was affected suffered for nearly three months. It appeared that as fast as clearance was obtained of the children, the parents were affected and re-infection occurred a number of times and vice versa.

There were no deaths from this cause during the year.

## Clean Food Campaign

No campaign has been officially launched by the Council regarding this matter.

## Seizure of Unsound Food

It has not been found necessary to take legal action under the above provisions of the Food and Drugs Act, 1938, but the following quantities of food have been surrendered and condemned during the year:—

30 Tins Rasberries	1 Tin Pork in gravy
2 Tins Pineapple	4 Tins Pork Luncheon Meat
3 Tins Grapefruit	12 Tins Luncheon Meat
8 Tins Apple Slices	3 Tins Goose Breast
2 Tins Oranges	27½lbs. Sausages
2 Tins Strawberries	23 pkts. Forcemeat
39 Tins Plums	3 Tins Minced Beef Loaf
4 Tins Apricots	12½lbs. Corned Beef
2 Jars Pears	16¾lbs. Pork Luncheon Meat
44 Tins Prunes	1 Tin Stewed Steak
2 Tins Pears	13½lbs. Cooked Ham

2 Tins Peaches  
 10 Tins Fruit Salad  
 2 Tins Cherries  
 187 Tins Tomatoes  
 13 Tins Beans  
 1 Tin Spaghetti  
 4 Tins Beef and Carrots  
 20 Tins Peas  
 4 Jars Piccalilli  
 1 Jar Red Cabbage  
 3 Tins Carrots  
 1 Tin Spinach  
 3 Tins Pilchards  
 7 Tins Shrimps  
 6 Jars Fish Paste  
 2 Tins Sardines  
 1 Tin Salmon  
 2 Tins Crawfish  
 1 Tin Hake

54½lbs. Bacon  
 2 Tins Corned Beef  
 12lbs. Jellied Veal  
 4 pkts. Pudding Mixture  
 2 pkts. Vita Wheat  
 1 Jar Mincemeat  
 28¼lbs. Cheese  
 3 cartons Chocolate Spread  
 58lbs. Dried Milk  
 26 pkts. Jellies  
 1 Tin Sweetened Milk  
 37 Tins Unsweetened Milk  
 46 pkts. Processed Cheese  
 1 Jar Onions  
 6 Tins Soup  
 13 Jars Mayonnaise  
 5lbs. Jam  
 3 Jars Marmalade  
 21lbs. Cod Roe

## Rodent Control

The following is a brief summary of the premises inspected and treated and the density of the infestations:—

Premises Treated	Visits Paid	Rat Infestation		Mice Infestation	
		Major	Minor	Major	Minor
1,865	2,209	58	152	3	136 —

Estimated kill of rats was 1,019 and bodies recovered 656.

In the case of mice the estimated kill is unknown, bodies recovered 388.

It would appear that the Council have the matter of Rodent Control well in hand, and that the co-operation of the public with regard to this nuisance can be said to be a hundred per cent. within the urban district. One may add that this co-operation is most helpful in dealing with the matter, and the recourse to sterner measures for the treatment of premises, which was previously experienced, has now passed.

## PUBLIC CLEANSING

### Collection

As was anticipated last year, this service had to be supplemented with extra labour towards the end of the year. This was primarily due to the rapidly expanding housing programmes of both the Council and the National Coal Board.



Private landlords are still extremely opposed to the provision of new dustbins to their properties when the existing ones become decrepit. This negative attitude is resulting, in certain cases, in a variety of receptacles being used for the retention of garbage, and in other cases this is now being indiscriminately dumped, thereby causing extra labour by the workmen in cleaning up.

Although the Council considered the law with regard to the replacement of dustbins as leaving much to be desired, this problem is growing and is causing some dissension among the staff engaged upon this work.

Replacement of staff is again a more difficult proposition than has been the case hitherto. More lucrative employment is not hard to obtain with the building trade in this area which appears to be enjoying boom time conditions. The result is that one can seldom obtain the type of man who embodies the qualities most desirable for this service.

### **Disposal**

The estimated weight of refuse deposited on the Sheffield Road Tip is 9.474 tons. This has been satisfactorily dealt with by the new Diesel Angledozer, and together with the recovery of earth for future covering has worked most satisfactorily.

The treatment of the crickets on the tip last season had the desired result of keeping this nuisance within bounds, and after the treatment, no complaints were received from the adjoining property.

## HOUSE REFUSE COLLECTION AND DISPOSAL

Total Cost of Collection and Disposal of the Town's refuse  
is as follows:—

	£	s.	d.
Refuse Collection and Disposal	...	...	9,230 12 0
Salvage	...	...	713 12 0
Net Cost	...	8,517	0 0

Est. Pop.	No. of weekly Collections House Trade	Method of Collection	Method of Disposal	Collection and Disposal Costs							
				Total Cost	Total Tons (est.)	No. of Houses	Cost per ton	Cost per house	Cost per 1000 houses	Cost per head of population	Cost per 1000 head of population
16,640	1	One 7 cu. yds. and One 10 cu. yds. One 15 cu. yds. The service was supplemented by another vehicle for 2 days per week	Controlled Tip.	£8517	9474	4724	17/11 <sup>3</sup> / <sub>4</sub> d	£1.80	£1,800	10/2 <sup>3</sup> / <sub>4</sub> d	£511



## Salvage

Salvage revenue has increased on last year's figure and with the present demand for more waste paper as the result of a more active market for board, prices should harden and still further revenue will be forthcoming. The rag trade, however, does not show this same possibility but appears to be remaining steady after the recent slump. The total value of all salvage sold was £713 12s. od.

I am, Sirs,

Your Obedient Servant,

R. E. INGLEBY,

Senior Sanitary Inspector.





---

Dearne Valley Printers,  
Wath-upon-Dearne

---