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Dearne Urban District Council.

# REPORT

ON THE

## Health of the District

DURING THE YEAR ENDING DECEMBER 31st, 1955.

by

Dr. BARBARA R. A. DEMAINE
Acting Medical Officer of Health

together with the

Report of the Chief Sanitary Inspector

Mr. G. H. ALLEMBY



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### THE DEARNE URBAN DISTRICT COUNCIL

Members of the Public Health Committee, 1955.

### Chairman:

Councillor J. NOBLE.

### Vice-Chairman:

Councillor S. M. TIERNEY

### Councillors:

Mrs. E. A. CHAMBERS W. FAWCETT

Mrs. A. OSGUTHORPE J. HARRIS

Mrs. J. VINCE C. KNIGHTON

E. AUSTWICK R. M. L. LOWMAN

D. BRYAN J. T. MORRISEY

G COPELAND F. WARBOYS

### Acting Medical Officer of Health:

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

### Chief Sanitary Inspector:

G. H. ALLEMBY, C.R.San.I., M.S.I.A., Cert. Insp. of Meat and other Foods, Cert. R S.I. Smoke Inspector, Shop Acts Inspector,

### **District Sanitary Inspectors:**

W. WEBSTER, C.S I.B., M.S.I.A., A.R.S.H.

T. DUFFY, C.S.I.B., M.S.I.A., A.R.S.H., Cert. Insp. of Meat and other Foods.

### DIVISIONAL HEALTH STAFF

Employed in the Dearne Urban District

Acting Divisional Medical Officer: Dr. B. R. A. DEMAINE

Assistant County Medical Officer:
Dr. H. F. LINDSAY

### Obstetrician:

Dr. J. C. MACWILLIAM (Joint appointment with Regional Hospital Board)

Child Health Specialist: Dr. C. C. HARVEY

Mental Health Social Worker: Mrs. F. H. REDMAN

Mental Health Home Teacher: Mrs. P. M. WINSTANLEY

### Health Visitors and School Nurses:

Miss D. M. E. GOLDTHORPE

Miss B. M. HUTTON

Mrs. N. NOBLE

Miss M. O'CONNOR

Mrs. E. POCKLINGTON

### Midwives:

Mrs. G. M. CORLEY (Relief)

Mrs. M. F. HILL

Mrs. H. E. HILLERY

Mrs. E. SANDS

Mrs. E. STOTT

Mrs. R. WILLIAMS

### Home Nurses:

Mrs. M. BROOKS

Mrs. M. HERRING

Mrs. S. SHEEHAN (Relief)

Mrs. K. ROEBUCK

### The Dearne Urban District Council

# ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH FOR THE YEAR 1955.

Divisional Public Health Offices, Council Offices, Adwick Road, Mexborough.

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

Ladies and Gentlemen,

I have the honour to present the Annual Report for 1955, during which period I was your Acting Medical Officer of Health.

During the year steady progress has been maintained, and there are some points to which I would like to give special mention.

Housing has gradually improved with the speeding up in building, but there still remains many instances of over-crowding, and buildings in a bad state of disrepair. The Council's policy has been carried-out to the letter, in that priority has been given to tenants from slum clearance areas, and to active cases of Tuberculosis. Cases of illness which have been accentuated by housing defects have received special consideration, but not given overriding priority. Every case for priority has been thoroughly investigated before submission to the appropriate Committee.

It is gratifying to note that there is now a decrease in the number of deaths from Tuberculosis within the last 10 years. The number notified for 1955 represents a decrease of 15 on the cases notified for 1954. The numbers certainly justify the line taken in housing priorities, and it is to be hoped that working along similar lines in the future, that the number of cases will be further reduced.

Unfortunately much house property which is privately owned is in a state of disrepair. The Local Authority can put up the rents of Council houses, but the amount allowed to private owners is not sufficient to allow for the necessary repairs to be carried out. This was brought forward in the Housing Repairs and Rents Act, 1954, but more incentive is needed.

The Ladycroft Slum Clearance is well in hand, and official representation was made in July for a further 22 houses in George Street, Thurnscoe. This order has now been confirmed, so further work will be carried on. In August a Five Year Plan was submitted to the Ministry, and this will be followed through as new houses become available.

Another problem in this district is Smoke Pollution. Emission of excessive smoke implies an inefficient use of fuel. The Beaver Report estimated this waste at about 10 million tons a year in England and Wales. Within the last few years there have been 1000 extra N.C.B. houses in the Dearne all having supplies of Home Coal. These chimneys are often going all day and night, and Smoke Pollution has increased rather than decreased. Serious consideration will have to be given to this problem in the future, so that gas or electricity be considered to replace the coal to which the coal-miner is entitled.

Another increasing problem is the care of the aged. Institutional care is limited even in cases of dire need, but the ideal is to aim to deal with the aged in their own homes.

The Home Nursing Service and Home Help Service have both played very valuable parts, but often it is difficult to give the necessary service, due to limited establishment, and difficulty in finding staff.

The difficulties will increase, for as a nation we are living longer due to control of diseases which took a heavy toll over a decade ago. Many old people now are not enjoying life to the full, on occount of loneliness, and there is a great field for service here on the part of voluntary workers. Your district is particularly well catered for in Clubs for the aged, but many old people are too shy and retiring to avail themselves of these Clubs, but would appreciate an occasional visit from members of Voluntary Associations.

The Midwifery service has been excellently maintained and no deaths occurred from Puerperal Causes during the year, but the Infant Death Rate of 29.5 is higher than the figures for England and Wales which are 24.9.

Dr. J. C. MacWilliam holds the appointment of Joint Obstetrician with the Local Authority, and Sheffield Regional Hospital Board, and this liaison is very helpful and satisfactory for the mothers.

The Health Visitors are expanding their services to include cases of Tuberculosis and also all members of the community who require help and advice. Their efforts are held in high esteem by the General Practitioners and the public.

Again I would put forward a plea to have children immunized for Diphtheria at their first birthday. From the Statistics, you will observe that the overall rate is 75%, but 93% is done between the ages of 5 and 11, so that the figure of 37% for infants is very disappointing.

The World Health Organisation points out, that it is at the age of 4 years that Diphtheria generally represents the most serious threat to the health of children. In 1948, the number of deaths from Diphtheria was 156. In 1955 they were reduced to 11, justification indeed, for carrying out a campaign of immunization against this disease.

One most formidable problem at present is the world wide distribution of Poliomyelitis. Not only is the incidence increasing, but there is still failure to control, and resulting disability. 10 million children in 5 different countries have already been vaccinated against Poliomyelitis with no ill effects, apart from the few in the United States which were traced to certain batches of faulty vaccine.

Quarantine of contacts is the obvious attack, and if children are excluded from school they must be excluded from parks and playgrounds as well, and if adults are quarantined, they must not go to work, nor to cafes and cinemas.

Compulsion is unpracticable, but pursuasion and public opinion could do a lot, and it is the difficult task of the Medical Officer to reconcile what is medically desirable, with what is socially justifiable.

During the year, there has been very close co-operation between the General Practitioners, Hospitals and the Public Health Department. Dr. Harvey, the Paediatrician, has given us valuable help and stimulation at the Clinics held in our own Department.

I would like to express my sincere thanks to Mr. G. H. Allemby and his Staff for the loyal co-operation and courtesy extended to me during the year, and also to the Heads of the other departments who have willingly offered their assistance at all times.

I am deeply indebted to my own office staff for their cheerful co-operation and hard work during a year which has had a background of uncertainty, and particularly to the Chief Clerk, Mr. Goddard, for his assistance in compiling this report.

In conclusion I would like to thank the Chairman and Members of the Council for the kindness and courtesy extended to me during the year.

I am,

Yours faithfully,

BARBARA R. A. DEMAINE,

Acting Medical Officer
of Health.

### SECTION A.

NATURAL AND SOCIAL CONDITIONS	OF 7	THE	AREA
Area (in acres)			3,888
Registrar General's Estimate of Resident Po	pulation	on	
mid-1955			26,620
Number of inhabited houses (31st December,	1955)		7,670
Rateable Value		£	108,973
Net Product of a Penny Rate			£392

The Registrar General's estimate of resident population in the middle of 1955 showed a further estimated increase of 1,000 in the population above the figure for 1954, and since 1950 there has been a total increase in the population of the Dearne of 2,380.

Unlike the years immediately preceding 1955, there were very few dwelling houses constructed during the year, and the number of inhabited houses at 31st December, 1955, shows no increase over the figure for 1954.

The Rateable Value is the highest recorded in any year and has increased by over £17,000 since 1950. The net product of a penny rate is also £60 higher than in 1950 and shows an increase of £5 over the figure for 1954.

### **SUMMARY OF VITAL STATISTICS FOR 1955**

SCHMART OF VITAL STATIST	ics re	JK 1933	
	Males	Females	Total
Live Births: Legitimate	292	231	523
Illegitimate	9	10	19
Stillbirths	5	11	16
Deaths of Infants under 1 year of age	8	8	16
Deaths of Infants under 4 weeks of age	3	4	7
Deaths, all ages	129	91	220
Birth Rate: Crude		20.4	
Corrected		19.5	
(Comparability factor 0.96)			
Death Rate: Crude		8.3	
Corrected		11.1	
(Comparability factor 1.34)			
The above rates are per 1,000 of the	ne estin	nated res	sident
population.			
Deaths of infants under 1 year per 1,000 re	egistere	ed Live	
Births			29.5
Stillbirths per 1,000 Live and Still Births			28.7

### Deaths from Puerperal Causes:

Pregnancy, Childbirth, Abortion

Nil

### Live Births:

There was an increase of 5 live births (legitimate and illegitimate) in 1955 compared with 1954, and the total number of registered live births (542) is the highest number recorded since 1947, when 566 births were notified. However, with the estimated increase of 1,000 in the resident population of the District, the adjusted Birth Rate of 19.5 is lower than the rate for 1954, which was 20.2. Nevertheless, the Birth Rate continues to be higher than that for England and Wales as a whole, which in 1955 was 15.0.

There were 3 more illegitimate births registered during 1955 than in 1954.

### Deaths.

A total of 220 deaths was recorded during 1955, 129 males and 91 females, showing a decrease of 16 compared with the year 1954. The main causes of death were as follows:—

Diseases of	Hear	and	Blood	Vessels	 107
Cancer					 35
Pneumonia	and B	ronch	nitis		 21

It is pleasing to note that deaths from Cancer decreased by 19 from a total of 54 in 1954. Seven of these were attributable to Lung Cancer, all being males. Details of deaths from Cancer (all sites) during the past 6 years are shown below:—

### **DEATHS FROM CANCER**

	1950		19	951	1952		1953		1954		1955	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Malignant Neoplasm, stomach	5	5	5	4	9	-	3	6.	6	10	3	2
Malignant Neoplasm, bronchus	4	-	8	-	4	-	5	-	4	3	7	-
Malignant Neoplasm, breast	-	1	-	-	-	8	-	4	-	2	-	4
Malignant Neoplasm, uterus (F) Other Malignant and Lymphatic Neoplasms including	-	-	-	2	130	3	-	2	-	2	-	4
Leukaemia and Aleukaemia	6	4	18	9	13	11	9	6	17	10	9	6
TOTALS	15	10	31	15	26	22	17	18	27	27	19	16

The number of deaths classified under the general heading Diseases of Heart and Blood Vessels increased by 6 over 1954, (when 101 deaths were recorded) and practically 50% of all deaths in the Area during 1955 were assignable to this cause.

It is also pleasing to note that there where no deaths from Diphtheria, Whooping Cough, Measles and Poliomyelitis. Perhaps the most significant point is that Respiratory Tuberculosis was the cause of only 1 death during 1955, and there were no deaths from other forms of Tuberculosis. When it is considered that in 1947 there were 22 deaths from Pulmonary Tuberculosis in the Dearne Area alone, the progress made is quite satisfying.

Nineteen deaths were caused by road accidents and all other accidents in 1955 and the need for more extensive education in road safety and prevention of accidents in the home is indicated.

The following Table lists the deaths from all causes during 1955:—

### **DEATHS FROM ALL CAUSES DURING 1955**

	Cause of Death	Males	Fem.	Total
1.	Tuberculosis, respiratory	1 '	_	1
2.	Tuberculosis, other	_	_	_
3.	Syphilitic disease	1	_	1
4.	Diphtheria	I LLAND	11-1	
5.	Whooping Cough	-	_	_
6.	Meningococcal infections	_	_	_
7.	Acute Poliomyelitis	-	-	_
8.	Measles	_	-	_
9.	Other infective and parasitic diseases	_	_	
10.	Malignant neoplasm, stomach	3	2	5
11.	Malignant neoplasm, lung, bronchus	7	_	7
12.	Malignant neoplasm, breast	-	4	4
13.	Malignant neoplasm, uterus	_	4	4
14.	Other malignant and lymphatic			
ender	neoplasms	9	6	15
15.	Leukaemia and aleukaemia	-	-	-
16.	Diabetes	2	-	2
17.	Vascular lesions of nervous system	20	14	34

		Males	Fem.	Total
18	Coronary diseases, angina	. 18	8	26
19.	Hypertension with heart disease	. 2	4	6
20.	Other heart disease	. 15	12	27
21.	Other circulatory disease	. 7	7	14
22.	Influenza	. —	-	-
23.	Pneumonia	. 2	-	2
24.	Bronchitis	. 13	6	19
25.	Other diseases of respiratory system	. 1	1	2
26.	Ulcer of stomach and duodenum	. 1	1	2
27.	Gastritis, Enteritis and Diarrhoea	. 1		1
28.	Nephritis and Nephrosis		3	4
29.	Hyperplasia of prostate	. 2		2
30.	Pregnancy, childbirth, abortion		_	
31.	Congenital malformations	. –	5	5
32.	Other defined and ill-defined disease	s 12	12	24
33.	Motor vehicle accidents	. 2	_	2
34.	All other accidents	. 7	1	8
35.	Suicide	. 2	_	2
36.	Homicide and operations of war	· Marines	1	1
	TOTALS	. 129	91	220

### Infant Mortality and Stillbirths.

Sixteen infants under the age of one year died during 1955, the same number as in the previous year. As, however, there was a corresponding increase of 4 in the number of live births, the Infant Mortality Rate fell slightly from 29.7 per 1,000 registered live births in 1954 to 29.5. This rate compares with the rate for England and Wales as a whole of 24.9 per 1,000 registered live births.

Ten years ago in 1945, 527 live births were registered, and there were 36 infant deaths in that year, so that the rate for your District has been halved in this period. A similar reduction cannot, however, be claimed in respect of the Stillbirth Rate, which in 1955 was 28.7 compared with a rate of 23.6 in 1954 and a rate of 17 in 1945.

Seven of the infants dying during the year were under one week of age, and 5 of these were premature babies. Next to Prematurity; Bronchitis and Pneumonia were the major causes of death, claiming the lives of 4 infants.

The following Table details the number of live births, stillbirths and deaths of infants under one year of age during the last 10 years:—

Year	Live Births	Still Births	Deaths of Infants under 1 year	Maternal Deaths
1946 1947	547	19	23	
1948	566 491	21	29 27	=
1949 1950	539 527	15	24 13	1
1951 1952	466 450	16	18	2
1953 1954 1955	477 538 542	10 13 16	14 16 16	=

Finally, the following Tables provide, for easy reference, the cause of death, the age at death, and the time of year at which the 16 infants died during 1955:—

### AGE AT DEATH

	Weeks			Months						
	Under 1	1-2	2-3	3-4	1-2	2-3	3–6	6-9	9-12	Total
Haemolytic Disease of the Newborn Prematurity Congenital Malforma-	1 5	-	H	_	=	-	=	=		1 5
tion Pneumonia and	1	-	-	-	-	-	-	-	-	1
Bronchitis	_	-	-	-	3	-	_	-	1	4
Gastro Enteritis	-	-	-	-	-	-	-	1	-	1
Meningitis	-	-	-	-	-	-	1	-	_	1
Convulsions	-	-	-	-	-	-	1	-	-	1
Birth Injury	1000	-	1	-	-	-	-	-	-	1
Dehydration	-	-	-	-	-	-	1	-	-	1

### Infant Deaths

		mant 1	Jeaths			
January		 			1 (	First
February		 			1}	Quarter
March	***	 			21	4
April		 			1)	Second
May		 			3	Quarter
June		 			-1	4
July		 			2)	Third
August		 		,	1 {	Quarter
September		 			-1	3
October		 			3)	Fourth
November		 		***	1 }	Quarter
December		 			1/	5

### SECTION B.

### General Provision of Health Services for the Area: Laboratory Facilities.

Dr. L. A. Little is in charge of the Medical Research Council Laboratory at Wakefield, where facilities exist for the bacteriological examination of throat swabs and faeces samples for infectious diseases, testing of water, milk and ice cream samples, etc.

Blood samples for investigation of Rh. factor and Kahn examinations are sent from Ante-Natal Clinics in the Division to the Regional Blood Transfusion Laboratory at Sheffield.

### Ambulance Facilities.

The Ambulance Service is under the control of the County Ambulance Officer and the local Depot is situated at Dunford House, Wath-on-Dearne.

### Midwifery and Maternity Services:

### (a) Institutional Midwifery.

In 1954 there were a total of 1,159 live births occurring in the Divisional Area. Forty-five per cent, or a total of 518 live and still births took place in Hospital. In 1955 there were 1,136 live and still births in the area, of which 431 were institutional deliveries, representing 38% of the total. Whilst the percentage of institutional deliveries has, therefore, fallen oven the past year, it should not be inferred that accommodation has not been adequate. Rather that there has been in the past a tendency to overbook, particularly at the Montagu Hospital, Mexborough, where the majority of cases from this Division are referred. There has, therefore not been the necessity in most cases to discharge patients from Hospital to the care of the Domiciliary Midwife before completion of the lying-in period.

The following is an analysis of institutional births occurring in the Divisional Area during the period 1st January to 31st December, 1955:—

		Live Births	Still Births
Born in Hospitals	 	386	20
Maternity Homes	 	9	THE REAL PROPERTY.
Nursing Homes	 	16	71111
		411	20

### (b) Domiciliary Midwifery.

The success of the Domiciliary Midwifery Service depends to a large extent upon harmonious relations between the General Practitioner and the Domiciliary Midwife, and in this respect we are fortunate in this Area in maintaining the good co-operation which exists.

It has been noted in the previous paragraphs on institutional midwifery that the percentage of institutional deliveries has fallen during 1955, and as there were only 23 fewer live and stillbirths than in 1954, the number of deliveries carried out by Domiciliary Midwives in the Area has increased. There were 705 domiciliary live and stillbirths in the Area and the Family Doctor was present at 59 deliveries.

In addition to her attendance at the actual birth of the child, the Domiciliary Midewife's duties include attendances at Ante-Natal Clinics, and ante and post-natal visits to patients in their own homes. These visits are in respect of the Midwives employed in the Dearne Urban District:—

		 3,677 482
		4,159
Natal	Visits	Muccai a Adhas
	LIGHT LIGHT LIGHT LIGHT	

Ante-Natal Visits

Hospital Cases ... ... 6,495

6,665

Twenty-seven hospital cases were discharged from Hospital prior to the fourteenth day to the care of Midwives.

The staff employed in the Dearne Urban District during 1955 consisted of 5 Midwives and 1 Relief Midwife, and additional assistance was provided in Bolton-on-Dearne by a sixth Midwife living in Mexborough.

### (c) Ante-Natal Clinics.

Sessions are held at the 2 Child Welfare Centres in your District as follows:—

Child Welfare Centre, Welfare Hall, Washington Road, Goldthorpe:—

Thursday, 2.00 p.m. to 4.30 p.m.

Child Welfare Centre, Central Hall, Houghton Road, Thurnscoe:—

Friday, 2.00 p.m. to 4.30 p.m,

Attendances during the year were:— Goldthorpe Ante-Natal Clinic:—

282 patients made 1,180 attendances.

Thurnscoe Ante-Natal Clinic: -

189 patients made 1,086 attendances.

Compared with 1954, there were approximately 69 fewer patients attending the Clinics, and total attendances fell by 160.

Dr. J. C. MacWilliam was in medical charge at the Clinics, and he has submitted the following observations on his work during the year:—

"At the present time the improved results in obstetrics appear to be mainly due to more enlightened ante-natal and intra-natal supervision and to a general improvement in the health of the mothers. This latter being due to better conditions in the home and to improved nutrition. The expectant mother no longer waits until the last weeks of pregnancy before seeking medical advice but avails herself early of the facilities for ante-natal care. In the past, supervision during pregnancy was confined to the detection of toxaemia, disproportion and malpresentation. This has now been outdistanced, and in modern practice the occasion is made an opportunity for raising the standard of health of the patient as a whole. Each expectant mother is encouraged to take up the free supply of Vitamins A & D and to buy the orange juice and a pint of milk daily at a greatly reduced price. At the County ante-natal clinics we supply routinely an iron preparation to correct the inadequate intake of iron in the diet. It is important to realise that a high haemoglobin level of the blood is equally necessary early in pregnancy as it is during labour and in lactation.

"In recent years great emphasis has been laid on the importance of nutrition during pregnancy and it is largely through our pre-natal clincs that the practical application of these nutritional principles can be taught. The instruction in diet and mothercraft is started at the patient's first visit to the clinic. There is evidence that the foundations of the nutrition of the infant are laid in pre-natal life and that the first three months of intrauterine life are specially important. We are, therefore, continuing to recommend a liberal mixed diet rich in protein and vitamin content but low in carbohydrates. The necessity for painstaking advice is now greater than ever.

During the war years the system of priorities ensured for the expectant mother her full and proper share of the essential foods. She should be advised how to buy, what to buy, and how to prepare the food bought.

"The relief of pain in labour will continue to be in the forefront of our minds. The administration of analgesic drugs even when supplemented by inhalational analgesia is not now considered adequate. This is because an anxious and unhappy patient is as miserable during labour as she is apprehensive before it. Therefore, the emotional reactions of the patient to her labour must concern us. Although there are many different methods of inspiring confidence in the patient (teaching her to relax or instructing her in the anatomy of pregnancy and labour are examples at present in vogue), it is an essential part of one's duty to dispel her anxieties and fears by adopting a kind and sympathetic attitude to her problems. It has been shown that relaxation and anatomy classes are not able to achieve anything that the kindness and sympathy shown to the patient in the ante-natal clinic and during labour cannot do. It should be emphasised that an important contribution is made to the patient's peace of mind by the promise of her practitioner or midwife that he or she will be present at the time of her labour and remain with her during delivery.

The entire Public Health Service must do their utmost to bring about a well-developed social conscience towards positive health. Preventive medicine begins with the expectant mother and her unborn child. The education required for preventive and social medicine is too big a problem to be left entirely to the Public Health Authority. They must be joined by the instructors of the Educational Department and produce a closely integrated effort and thereby create a climate where a more satisfactory measure of response will be obtained."

### (d) Analgesia.

Of the 380 cases confined at home in the Dearne Urban District during 1955, 301 mothers were given gas and air analgesia. One hundred and fifty-five additionally received injections of Pethidine. The percentage of mothers receiving analgesia was therefore 79%.

### Child Welfare:

### (a) Infant Welfare Clinics.

Infant Welfare Clinic sessions are held at the 2 Child Welfare Centres in the Dearne Urban Area as follows:—

Child Welfare Centre, Welfare Hall, Washington Road, Goldthorpe:—

Monday, 2.00 p.m. to 4.30 p.m.

Child Welfare Centre, Central Hall, Houghton Road, Thurnscoe:—

Monday, 2.00 p.m. to 4.30 p.m. Tuesday, 2.00 p.m. to 4.00 p.m.

Attendances at these sessions during 1955 are tabulated below, and figures are also included for the previous four years, for the purposes of comparison:—

GOLDTHORPE	1955	1954	1953	1952	1951			
Under 1 year of age	. 3,060	2,311	2,060	2,193	2,698			
Over 1 year of age	508	326	430	316	496			
469 individual children attended the above Clinic.								

THURNSCOE	1955	1954	1953	1952	1951
Under 1 year of age	 4,148	3,343	4,406	3,423	3,504
Over 1 year of age	 744	775	695	819	874

348 individual children attended the above Clinic.

It will be noted from the above figures that attendances in 1955 for children under one year of age are higher than in the previous 4 years, and it is pleasing to note that many of the new residents occupying houses provided by the Coal Industry Housing Association are making use of the facilities available. On the other hand it may be that a proportion of these attendances were for the sole purpose of obtaining welfare foods, which have been distributed by the Local Health Authority since the closure of the Ministry of Food Offices. During 1955 the following issues of welfare foods have been made from Child Welfare Centres in the Area and the Divisional Public Health Office:—

National Dried Milk	30,058 tins
Orange Juice	30,812 bottles
Cod Liver Oil	5,962 bottles
A and D Vitamin capsules	. 2,395 packets

In addition to these Ministry of Food welfare foods, large quantities of proprietary brands were sold at the Child Welfare Centres.

### (b) Health Visiting.

At one time the primary function of the Health Visitor was to ensure that infants and young children were maintained in good health, but her sphere of activities has now been enlarged to cover the whole family group. The Health Visitor must be a State Registered Nurse with training in midwifery and social welfare, so that she is very well qualified to take responsibility for health education and advise on a multitude of social problems under all circumstances and at all ages.

With more income available and the improvement in housing conditions, environmental health problems are decreasing and the Health Visitor has more time available for health education. Much of this can be done through group teaching at Clinics, but it is in the home of the parents where personal contact can best be obtained and where personal problems can best be discussed. Her advice is at the disposal of all the family if necessary, and in this way she can help the Family Doctor considerably.

In the Dearne District at the 31st December, 1955, 2 qualified Health Visitors and 3 Assistant Health Visitors were employed, and 2 of these Nurses were authorised to use their private cars on official business.

The following Table analyses the visits made by Health Visitors employed in the Dearne during the year.

648	No. of famili	es or households vis	ited fo	or the	first			
563	No. of Childr first tin	en under 5 years of a me this year during r	ge visi	ted fo	or the			
22	1	1st Visits Mothers  Re-Visits						
24		Re-Visits						
597		1st Visits Index						
4301	R	Re-visits						
1630	То	Total Visits 75 2						
1194	То	tal Visits	2-5 yrs.	Children, aged	HEALTH VISITING			
597 4301 1630 1194 546 3817 629	То	hold						
3817	То	Total Visits Othe Case						
629	Maternity	L.H.A.	CLINICS ATTENDED					
1		U.V.I.						
2	Parer	Parentcraft in Schools						
43	Chest	Chest						
68	Other	10 A CONTRACTOR OF THE PARTY OF						
254		Minor Ailments						
13	_	Special Defects						
129	_	Medical Inspections						
58	Clea	Cleanliness Surveys						
99		Special Visits						
282	_	Infectious Diseases						
10	_	ndicapped Pupils		H	SCHOOL NURSING			
4	_	ed, verminous, etc.		Home Visits	NG			
41		ther Visite		Visits				
51	O	ther Visits						

### (c) Illegitimate Children.

The difficulties arising from illegitimate pregnancy are many. The emotional stresses are much greater than those associated with an ordinary pregnancy, and the unmarried mother realises that her position in the community is not usually looked upon favourably. It is, therefore, essential that even greater sympathy and understanding must be extended to the unmarried mother and every effort made to ensure that the unborn child is properly cared for.

In dealing with these cases we are fortunate in this Area to receive the ready co-operation of the Diocesan Moral Welfare Committee and their Social Workers. During 1955, there were 19 illegitimate children born in the District and all these were followed up to ascertain that the child was being satisfactorily cared for.

### MENTAL HEALTH SERVICE:

The following patients were being supervised in your District under the Mental Deficiency Acts during 1955:—

Under	Statutory Supervision	55
Under	Voluntary Supervision	12
Under	Guardianship	2

The above figures include 2 Mental Health patients newly ascertained during the year.

In addition, after-care service was provided for 6 patients discharged from Mental Hospitals, and 3 other patients on licence from Institutions were supervised. Where possible, training facilities were provided for those patients considered to be suitable, and 6 patients from the Dearne Urban District attend Doncaster Occupation Centre daily. Fifteen attend Group Training Classes held as follows:—

Goldthorpe Child Welfare Centre: -

Monday, 10.00 a.m. to 12 Noon.

Thurnscoe Child Welfare Centre: -

Friday, 10.00 a.m. to 12 Noon.

Twelve persons were provided with training materials and given instructions in handicrafts at home.

The Mental Health Social Worker, whose duties include the supervision of ascertained patients and visits to patients discharged from Mental Hospitals also submitted 35 reports on home conditions in respect of patients resident in Institutions. Vacancies were found in Institutions for 3 patients from the Dearne Area during the year and a further case was admitted to hospital for short-stay accommodation. There is one case still requiring urgent institutional care.

### CARE AND AFTER-CARE:

### Home Nursing.

The 3 Home Nurses employed in the District during 1955 made 15,432 visits to patients. This is the highest number of visits in your District in any one year since 1948, and is nearly 500 more than in 1954, which was the previous busiest year.

A detailed analysis of these visits and type of cases is given below:—

### NEW CASES.

AGE	GRO	UPS		(	CLASSIFIC	CATION		
0-5	5-65	65+	Medical	Surgical	Infectious Diseases	Tuber- culosis	Maternal Compli- cations	Total
102	515	190	567	183	16	36	5	807

### VISITS.

AGE	GRO	UPS			CLASSIFI	CATION		
0-5	5-65	65+	Medical	Surgical	Infectious Diseases	Tuber- culosis	Maternal Compli- cations	Total
786	8245	5312	10357	2578	140	1208	60	14343

It will be noted that over a third of the total visits were made to patients over 65 years of age, and the case load in this age group is increasing with the general ageing of the population. It should also be remembered that as a rule these aged people usually require general care and daily toilet and the time spent at each visit is appreciably longer than in the average case. Consequently it is probably true to say that at least half the Home Nurses' time is spent in providing nursing care for aged persons, and there is no doubt that the Service they are at present receiving is only the minimum required to ensure their comfort.

Nurses have at their disposal for loan to patients a number of items of nursing equipment such as rubber sheets, bed-pans and bed rests, with the object of increasing the patients' comfort and simplifying the nursing procedure. Other major items of equipment such as wheel chairs, special beds, Dunlopillo cushions, spinal carriages, etc., have also been made available where these have been considered essential.

With the general shortage of Nurses for the Home Nursing Service, the life of the Home Nurse in recent years has been a busy one, and there has inevitably been a certain amount of sickness amongst the staff, resulting in further overwork of the Nurses employed.

### Hospital After Care.

It has been found that the most effective way to obtain liaison with the Hospital Service is to send a Health Visitor to visit the Hospital frequently to arrange the provision of (i) background reports for the use of the medical staff, (ii) assistance to patients whilst they are still in Hospital, and (iii) assistance after they are discharged.

Miss D. M. E. Goldthorpe, a Health Visitor from this Division, attends the Montagu Hospital, Mexborough, on Wednesday and Friday afternoons of each week to undertake these duties. That her assistance is frequently sought outside these hours by the medical and nursing staff at the Hospital is evidence of the success of this scheme.

A special point is made of keeping the Family Doctor of the patient informed as to the services being provided for the patient by the Local Health Authority consequent upon the visits of the Liaison Health Visitor.

The following Table, which summarises Miss Goldthorpe's work during the year, indicates the extent of the Hospital After Care Service as provided in this Area.

### SUMMARY OF WORK

Number of Sessions at the Hospital		99
Number of additional visits to the Hospital		1
Approximate total time spent at Hospital	176 h	ours
Background Reports provided for the Medical Staff		
Number of requests received from Hospital		161
Number completed and returned to Hospital		128
Assistance to Patients while in Hospital.		
Number of patients interviewed		54
Number of patients requiring assistance		53
Number dealt with satisfactorily before dischar		53
Number being dealt with on discharge and refer	red	206
for after-care		206
Number for whom help could not be afforded		1000
Assistance to Patients after leaving Hospital.		
(a) Number of patients referred to Divisio	nal	
Medical Officer for after-care upon discha from Hospital	rge	206
(b) Number where action has been taken		200
(c) Number where action has not been taken		6
(d) Number outstanding on completion of return	this	_
DETAILS OF WORK		
After-care Work-Details of Assistance afforde	d by	the
Health Department of the Area to which patie charged.	nt is	dis-
	o. of C	ases
Assisted by Midwife		_
Assisted by Home Nurse		39
Assisted by Health Visitor		149
Nursing equipment provided		1
Home Help arranged		14
Home visits by Liaison Officer		32

	No. of	Cases
Environmental investigation undertaken		153
Rehabilitation arranged		10
Referred to Convalescent Homes		2
Transfers to hospitals or homes for chronic	sick	2
Transfers to other hospitals		1
Follow-up visits		2
Category of Patients assisted.		
Baby—Premature up to $5\frac{1}{2}$ lbs,		7
Normal over $5\frac{1}{2}$ lbs		25
Children—12 months to 14 years		84
Adolescent—14 years to 18 years		2
Adult—18 years		35
Chronic Sick-Persons in need of nursing ca	are over	
a long period		40
Aged and Infirm—Any infirm from over 6	5 years	15
Handicapped—Blind; deaf and dumb; cripponess, injury or congenital deforming such other illnesses as are prescribed.  Minister under provision of Section the National Assistance Act	ties, or d by the n 29 of	

General Hospital Services are provided by the Montagu Hospital, Mexborough, Barnsley Beckett Hospital and Moorgate General Hospital, Rotherham.

### Home Help Service.

The equivalent of 28 full-time Home Helps were authorised to work in the whole of this Divisional Area during 1955. In your District a total of nearly 23,000 hours was worked at 146 households in the District, representing the equivalent of 10 full-time Home Helps and amounting to nearly one hour per year per head of the population. In view of the number of families requiring assistance it is not the policy to employ full-time Home Helps as such, and on an average 55 part-time women are engaged throughout the Division. This means, of course, that 2 part-time Home Helps can be employed in 2 households, where a full-time Home Help could naturally be only in attendance at one house.

Eighteen thousand, six hundred and thirty-two hours were worked by Home Helps attending chronic cases, the bulk of which are aged people, and this represents over 75% of the total hours worked. Whilst in such a developing service it is impossible to please everyone, the number of complaints are relatively few, and the service plays an important part in the welfare of the aged population, and it is possible that it will need to be expanded even more to cope with the problem of the aged during the next two or three years.

In 1950, 31 cases in the aged sick and infirm category were assisted compared with 116 in 1955.

The following Table shows the number of hours of home help provided and the number of cases assisted in the various categories during 1955:—

Chronic sick	 	18,632	hours	 116 cases
Tuberculosis	 	921	,,	 7 ,,
Maternity	 	1,208	,,	 10 ,,
Others	 	2,227	,,	 13 ,,

### SCHOOL HEALTH SERVICE

Owing to carrying out the duties of Divisional Medical Officer during 1955, I was unable to devote the necessary time to the schools in Mexborough and the Dearne. I was able to carry out the examination of school leavers for the Youth Employement Officer, and also Diphtheria immunisations and ascertainment of Handicapped Pupils. The routine examinations were carried out by Part-Time Assistants on four sessions per week. I was grateful for the help given by Dr. Margaret Harvey from May to July and by Dr. Edith Burton from September to December, and with the exception of B.C.G. vaccination, the work is now up-to-date.

Dr. H. F. Lindsay, Assistant County Medical Officer, has made the following observations on the work of the School Health Service during 1955:—

"This year has seen the introduction of the examination of the 7 to 8 years of age group, making four examinations in the life of the schoolchild. It has the great advantage in that it allows for assessment after the child has become really established in school life, and before any defect which may have arisen has become serious.

"The general health has been well maintained and the number of Physically Handicapped children is comparatively small. School dinners, milk and halibut oil capsules, along with better wages for the parents, have made the school child of today a very different entity to that of even immediate prewar years. Most look healthy and are well clothed. Unforunately in an industrial district there is still a minority of whom this is not true. Mostly this is due to being a member of a large family, or in some cases, through ignorance and mismanagement in the home.

"Minor Ailments. These are treated regularly in clinics, although the number requiring treatment is much smaller than formerly, largely due to better hygiene and the use of the new drugs.

"Ear, Nose and Throat conditions. Children referred to the Specialist have been carefully selected, but in spite of this the waiting time for operative treatment appears to be again extending.

'Defective Vision. The testing of cases of defective vision and the supply of any glasses required seem to have had less time lag than formerly. Many children have attended the Orthoptic clinic at Rotherham.

"Dental Service. This service is well used and it is to be regretted that the day still seems far distant when it can be offered to all school children.

Whether in the great increase in pocket money given to school children can be held responsible or not, the amounts of caries in the young child appeared very much worse this year.

"Paediatric Clinic. This monthly clinic continues to be appreciated as it allows for consultation with difficult cases and also a regular check-up of progress.

"Orthopaedic Clinic. Cases are referred when necessary; mostly these are cases of foot conditions or bad posture.

"Chest Clinic. Children found to have a positive tuberculin jelly test reaction are referred for a check-up. The liaison of the Health Visitor to both Chest Clinic and School Medical Services has proved of great advantage in the following up of contact cases.

"Head Hygiene. Unfortunately there is one pest, the head louse, in the eradicating of which we have not yet been able to obtain the full co-operation of some parents. There is a small hard core of offenders in most schools, but it is particularly distressing to find this among some of the older girls, including school leavers. No amount of hard work by the School Nurse seems to make any lasting improvement in this group, and one feels that re-infection must take place in the home. The flea which was once so much in evidence at school medical inspections was more easily banished than the head louse, perhaps partly due to modern hairstyles with the frizzy permanent wave.

"Educationally subnormal children. The provision for the education of these children still falls very short of the requirements. The progress of some of these children is retarded by frequent absences from school for the most trivial reasons. The parents of some children seem to value lightly the place provided in school for their children at much cost. Many of these children have failed to be able to read or write even as late as 9 or 10 years of age, and whilst they may not have an I.Q. sufficiently low to warrant a place in a special school, they do require special tuition which seems unobtainable in an ordinary school because of staffing difficulties.

"Immunisation against Diphtheria. This has continued during the year with the exception of the summer months.

Many school entrants have required full protective doses in spite of much pleading by Doctors and Health Visitors for the protection of the child in the vulnerable pre-school period.

"Juvenile Employment Bureau. The linking up between this office and the school medical service is of great value in the placing in suitable employment of children who are handicapped.

In conclusion I would like to express my appreciation of the great amount of work done and interest taken in these children by our Health Visitors and School Nurses."

## PREVALENCE AND CONTROL OVER INFECTIOUS DISEASES

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

Seven Hundred and Sixty-six cases of Measles were notified, and this was the highest number of cases reported for any particular infectious disease during the year. This outbreak resulted in the largest number of Measles case being notified since 1952.

Infections of Scarlet Fever totalled 84, a decrease of 19 compared with 1954, and an increase of 8 compared with 1953. Hospital isolation was arranged in the majority of cases. There were 36 cases of Whooping Cough compared with 51 in 1954, and the number of notifications in respect of this disease is falling gradually every year, possible due to the introduction of Whooping Cough vaccination.

In common with other districts in the Area, cases of acute Poliomyelitis increased, and in the Dearne 8 cases of Paralytic Poliomyelitis and 1 case of Non-Paralytic Poliomyelitis were confirmed. The first cases in the District appeared to occur in the Barnsley Area, and shortly afterwards cases were notified in Mexborough. Villages comprising the Dearne Urban District are directly served by bus services from both Mexborough and Barnsley and there are daily direct supplies of milk from Barnsley into the District. The worst period for notifications was during the three weeks immediately following the September St. Leger Race Meeting at Doncaster, when traffic was particularly busy and there were large crowds.

Routine preventive measures were taken as follows:-

On receipt of notification of a suspected case of Poliomyelitis, a visit was made to the house by a Sanitary Inspector and a Health Visitor, and all immediate child contacts were excluded from school for 3 weeks and home and garden quarantine recommended. Parent's of other child contacts were advised to call in their Doctor immediately should any child appear unwell, and additionally lists of contacts were supplied to General Practitioners in the Area. Disinfection of the house and school premises was carried out. In a very few cases it was necessary to recommend exclusion from work of adults who were immediate contacts of notified cases where their work brought them into contact with food for consumption by the public or if they were engaged in work associated with young children. Due to the generosity of their employers, adults so excluded suffered little financial loss. Immunisations were stopped, both in schools and clinics, and any unnecessary

gatherings or functions at school, such as Harvest Festivals and Jumble Sales were cancelled.

Very few of the cases resulted in any serious residual paralysis, and there were no deaths in any of the areas of this Division.

Four cases of Food Poisoning were notified, and in 2 cases the patients had eaten at the same cafe at a seaside resort. The Medical Officer of Health was duly informed.

Full details of notifications of infectious diseases received during 1955 and the age groups in which these cases occurred are shown in the following Tables:—

# INFECTIOUS DISEASES Notifiable Diseases (other than Tuberculosis) during 1955 DEARNE

Diseases			Total Cases Notified	Cases After Correction	Deaths
Scarlet Fever			84	84	-
Whooping Cough			36	36	-
Acute Poliomyelitis					
(Paralytic)			8	8	_
(Non-Paralytic)			1	766	-
Measles		***	766	766	_
Pneumonia	***		17	17	2
Erysipelas			5	5	-
Meningococcal Infecti	on		3	3	The state of
			4	4	_
Dysentery			1		

# INFECTIOUS DISEASES (CORRECTED) 1955 Age Distribution—DEARNE

	Fever	g Cough	Po	cute olio- elitis		а	80	occal		,	a um	Poisoning
AGE	Scarlet Fe	Whooping	Paralytic	Paralytic Non-	Measles	Pneumonia	Erysipelas	Meningococcal Infection	Puerperal Pyrexia	Dysentery	Opthalmia Neonatorum	Food Poi
	S	>	Ь	d'Z	N	P	H	IN	ПР	D	02	H
Under 1 year 1-2 years	2 8	4 9	3	1_	30 147	2 4	_	=	_	<u>-</u>	1	=
3-4 years	15 53	7 15	-		240 340	4	_	-	-	=	_	_
5–9 years 10–14 ve rs	5	1	1	=	8	_	_	2	_		_	1
15-24 years 25 and over	1	_	2	=	1	2 5	2 3	=	_	=	_	3
TOTAL	84	36	8	1	766	17	5	3	_	1	1	4

### Vaccination and Immunisation.

The continued absence of cases of Diphtheria is encouraging. The percentage of children immunised against Diphtheria under 5 years of age is, however, disappointing, only 37% or half of the desired minimum of 75% being immunised. Nevertheless, this is 7% higher than in 1954.

The percentage of children who have been immunised between the ages of 5 and 14 is 93%, and the overall rate is 75%.

If, however, parents could be convinced that infants should be immunised before their first birthday, their children would be protected in their most vulnerable years, and time which is at present taken up by Diphtheria immunisation in schools could be used for more medical examinations.

Sessions at which children may be immunised against Diphtheria and Whooping Cough and vaccinated against Smallpox are held at both the Child Welfare Centres in your Urban District as follows:—

Goldthorpe Child Welfare Centre—Monday 2 to 4 p.m.

Thurnscoe Child Welfare Centre— Monday 2 to 4 p.m.

Tuesday 2 to 4 p.m.

Additionally, each Family Doctor in the District can provide similar facilities entirely free of charge to parents.

# DEARNE URBAN DISTRICT COUNCIL

# STATISTICS RELATING TO DIPHTHERIA IMMUNISATION AND VACCINATION FOR THE YEAR ENDED 31st DECEMBER, 1955

# DIPHTHERIA IMMUNISATION

	Doses in under 5–14 under 5–14 under 5–14 under 5–14 otal 5 yrs. years Total 5 yrs. years Total	39 329 931 5052 5983 2526 5397 7923 36·8 93·6 75·5
		931
No. of Children immunised in 1955	under 5–14 Dose 5 yrs. years Total 195	509 939 328
	under 5 yrs. ye	Dearne U.D. 430 5

# VACCINATION

Total	44	6
15 years and over	14	8
5-14 years 1941-50	2	1
1-4 years 1951-54	13	-
Under 1 yr. 1955	15	1
Dearne U.D.	Primary	Re-Vaccination

A total of 44 persons were vaccinated for the first time against Smallpox during the year, 28 of whom were children under 4 years of age. This is also a disturbingly small figure, especially in view of the fact that Smallpox can so easily and quickly be imported into this country in these days of fast air travel.

### (ii) Tuberculosis.

Twenty-one cases of Tuberculosis (18 Pulmonary and 3 Non-Pulmonary) were reported during 1955, representing a decrease of 15 on the number of cases notified during 1954. This is the lowest number of new cases notified in any one year since 1946. Bearing in mind that Mass Radiography Surveys were conducted at the Welfare Hall, Goldthorpe, and at Barnburgh Main Colliery in March, 1955, and at St. Hilda's school-room in June, 1955, the Tuberculosis situation in the Dearne Area is particularly reassuring, in fact, reference to the Tables of diseases and abnormalities discovered during these surveys, which follow later in this report, show that only 4 active cases of Tuberculosis were discovered.

There was only 1 fatal case of Pulmonary Tuberculosis in the District during 1955, and this figure is easily the lowest ever recorded. The overall feature is, therefore, very satisfactory.

A considerable amount of contact tracing was undertaken by Health Visitors during the year, and there was close liaison between the Health Visitors and the Chest Physicians at the Chest Clinic at Mexborough, the Nurses attending there in turn each Thursday morning to talk over their cases with Drs. F. C. N. Holden and R. L. Sadler.

Thirty-three children who were known contacts of cases of Pulmonary Tuberculosis were vaccinated with B.C.G. vaccine at the Chest Clinic, making a total of 116 children in the Dearne District who have been given the added protection of B.C.G. vaccination since the scheme started. Additionally, over 80 patients suffering from active Pulmonary Tuberculosis were provided with extra nourishment in the form of two pints of milk daily, under the scheme administered by the County Council. Where necessary a bed and/or bedding was provided for patients, to effect bedroom segregation from other members of the family. The Doncaster and District Tuberculosis After-Care Committee also provided assistance to families in the way of clothing and additional items of extra nourishment where financial circumstances made this necessary. Your Council co-operated with me in the prevention of spread of Tuberculosis

by arranging re-housing of families where it was considered that environmental conditions were prejudicial to a good recovery of the patient.

The County Council also accepted financial responsibility for the maintenance of a patient from your District who was accommodated in a Tuberculosis Village Settlement for rehabilitation.

Tables follow showing details of diseases and abnormalities discovered during surveys conducted by the Mass Radiography Unit at the Barnburgh Main Colliery and the Welfare Hall, Goldthorpe, in March, 1955, and at St. Hilda's schoolroom, Thurnscoe, during June, 1955, also details of deaths and notifications of new cases of Tuberculosis since 1955, and analysis of the age groups of new cases and deaths notified during 1955:

### Radiography Survey—Barnburgh Main Colliery March, 1955

	Total radiographed 1254	
	Diseases and abnormalities discovered	
	Tuberculosis—Active 1	
	Tuberculosis—Inactive 12	
1.	Abnormalities of the bony thorax and soft tissues—congenital	1
5.	Bacterial and virus infections of the lungs	1
7.	Bronchiectasis	2
9.	Emphysema	2
10.	Pulmonary fribrosis—non-tuberculous	2
11.	Pneumoconiosis	31
13.	Benign tumours of the lungs and mediastinum	2
18.	Pleural thickening or calcification—non-tuberculous	1
21.	Acquired abnormalities of heart and vessels	5
24.	Cases who failed to attend for further film or clinical examinations	4

# Radiography Survey—Welfare Hall, Goldthorpe March, 1955

	Total radiographed 1432	
	Diseases and abnormalities discovered	
	Tuberculosis—Active Nil	
	Tuberculosis—Inactive 12	
1.	Abnormalities of the bony thorax and soft	
	tissues—congenital	1
7.	Bronchiectasis	5
9.	Emphysema	7
10.	Pulmonary fibrosis—non-tuberculous	4
11.	Pneumoconiosis	24
13.	Benign tumours of the lungs and mediastinum	7
18.	Pleural thickening or calcification—non-tuberculous	7
20.	Congenital abnormalities of heart and vessels	1
21.	Acquired abnormalities of heart and vessels	1
22.	Miscellaneous	1
24.	Cases who failed to attend for further films or clinical examinations	7
	clinical examinations	,
Ra	diography Survey—St. Hilda's schoolroom, Thurns June, 1955	coe
	Total radiographed 2135	
	Diseases and abnormalities discovered	
	Tuberculosis—Active 3	
	Tuberculosis—Inactive 21	
5.	Bacterial and virus infections of the lungs	5
7.	Bronchiectasis	5
9.	Emphysema	6
10.	Pulmonary Fibrosis—non-tuberculous	3
11.	Pneumoconiosis	62
18.	Pleural thickening or calcification—non-tuberculous	23
19.	Abnormalities of the diaphragm and oesophagus	1
	Acquired abnormalities of the heart and vessels	24

# Deaths from Tuberculosis (Registrar General's Figures)

**	Dearne U.D.				
Year	Pulmonary	Non-Pul.			
1955	1	-			
1954	7	1			
1953	7	1			
1952	5 9	_			
1951	9	2			
1950	15	_			
1949	13	2			
1948	20	1			
1947	22	1			
1946	17	1			
1945	16	2			

# Notifications of Tuberculosis (New Cases)

V	Dearne U.D.			
Year	Pulmonary	Non-Pul.		
1955	18	3		
1954	34	2		
1953	40	1		
1952	29	5		
1951	26	3		
1950	20	6		
1949	38	7		
1948	38	1		
1947	26	2		
1946	18	1		
1945	19	1		

# TUBERCULOSIS — DEARNE

# New Cases and Mortality during 1955

### **NEW CASES**

Age Peri	Age Periods Pulmonary				Non-Pulmonary		
Years			М	F	M	F	
0—1 1—5 6—15 16—25 26—35 36—45 46—55 56—65 66 and over	010000 010000 010000 010000 010000		- 1 2 1 3 4 1	- 1 2 2 - 1 -	- 1 - - -	- - - - -	
TOTALS			12	6	1	2	

# **DEATHS**

Age Perio	Age Periods Pulmonary				Non-Pulmonary			
Years		Years		Years M I		F	F M	F
0—1	******		_	_	_	_		
1-5			_	_	-	_		
6—15			-	_	_	-		
16—25			-	-	-	-		
26—35	******		1		W	-		
36-45			-	-		-		
46—55	******	******	-	_	-	_		
56—65	*****		-	-	-	-		
66 and over	******		-	-	g - m	-		
TOTALS			1		_	-		

### DEARNE URBAN DISTRICT COUNCIL

# REPORT OF THE CHIEF SANITARY INSPECTOR AND CLEANSING SUPERINTENDENT FOR THE YEAR 1955.

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

Ladies and Gentlemen,

I have pleasure to present details of the work carried out by the staff of my department in the form of the Annual Report for 1955. Steady progress has been made in most sections and particularly in slum clearance work. The general improvement in the state of repair of private house property considered possible as a result of the passing of the Housing Repairs and Rents Act of 1954 has not materialised. No doubt the financial incentive to landlords in the form of increased rent allowed under the Act after the expenditure of money on repairs has not proved too attractive A large number of houses are in need of some attention, the cost of repairs together with the continuing shortage of houses are mainly responsible for property sales when houses become vacant. Tenant owners of houses are more numerous in the Dearne today than in years past, many of the new owners showing a great pride and care for their property. Few new houses were constructed although plans have been made for the building of 114 houses at Thurnscoe and Highgate and 12 two bedroom bungalows at Bolton-on-Dearne

The emission of coal smoke from domestic and industrial chimneys continued undiminished. Before any great improvement in the emission of much domestic smoke can take place a scheme should be formulated whereby the supply of miners' concessionary or "home" coal is substituted by the provision of smokeless fuel. No open fireplace can burn soft, bituminous coal smokelessly.

The food supply of the area has had additional attention, special reference being made by your Inspectors to meat, meat products and ice-cream. Slaughterhouses and slaughtering of "food" animals have been the subjects of constant control—the quality of the cattle slaughtered being good.

In general the district has been well supplied with water which from periodical sample reports proved satisfactory.

The collection and disposal of house and industrial refuse was disturbed on occasions by circumstances outside my control. Shortage of staff, sickness, holidays and bad weather are now accepted as routine difficulties met with in the maintenance of this important service.

The shortage of tipping space for refuse disposal has been reported to you during the period under review and is a matter causing some concern.

The efforts of your Sanitary Inspectors during 1955 have once again been directed to the betterment of the environmental conditions affecting the general public and I am sure will assist in maintaining and improving public health.

### INSPECTORIAL STAFF.

Chief Sanitary Inspector:

G. H. ALLEMBY, C.R.San.I., Cert. Insp. of Meat and Other Foods, Cert. R.S.I. Smoke Inspector, Shop Acts Inspector,

District Sanitary Inspectors:

W. WEBSTER, C.S.I.B.

T. DUFFY, C.S.I.B., Cert. Insp. of Meat and Other Foods.

Clerical Assistant to the Sanitary Inspector:

Mrs. A. C. SPATE.

The Salaries of the Chief Sanitary Inspector and District Sanitary Inspectors are contributed to by grants from the Ministry of Health.

### SANITARY INSPECTION OF THE DISTRICT

During the year the following inspections were	ma	de:-
General inspections as to complaints, nuisances etc.		1,457
Inspections and re-inspections of verminous premises		36
Drains tested (smoke, colour, etc.)		17
Re-inspections as to compliance with notices etc.		726
Inspections as to works in progress		42
Contractors seen as to works		54

					F0
Owners seen as to works				 	58
Inspections in reference t	o infec	tious d	iseases	 	123
Smoke observations Inspections of :—				 	59
Grocers' Shops				 	88
General Shops				 	47
Fried Fish Shops				 	30
Bakehouses				 	51
Food Preparing Premises				 	135
Ice Cream Premises				 	71
Slaughterhouses and Lair	S			 	582
Markets				 	119
Food Hawkers				 	67
Tripe Shed, Maggot Face	tory			 	28
Allotment killed pigs				 	50
Piggeries				 	10
Premises re rodent infest				 	209
Refuse Tips				 	252
Factories				 	45
Cinemas				 	49
				 	22
Schools				 	7
Swimming Bath				 	5
Public Conveniences				 	183
Table Peak Miles				Y. N.	4,622
				-	1,022

### Notices.

Informal notices numbering 482 were issued in relation to matters arising from the inspections and in 70 cases formal notices were served.

At the end of the year, 298 nuisances and defects remained on the books and 2,066 had been remedied during the year.

### Legal Action.

Summonses were issued against two owners for non-abatement of nuisances at the following property:—

- 30, 32, Chapel Street, Thurnscoe (in this case fines were inflicted on the owner and payment of costs).
- 5, 7, 11, and 15, Elizabeth Street, Goldthorpe (owner paid the cost of the action).

Orders were made by the Court which resulted in the abatement of the nuisances.

### ACTION UNDER THE PUBLIC HEALTH ACTS

Inspections were made in connection with nuisances and defects at 930 houses while defects at 765 houses were remedied during the year; in connection with those remaining on the books further action is pending.

The following statement shows the nuisances abated and the defects remedied in and around dwellings other than Council-owned dwellings:—

### House Repairs.

House roofs repaired		53
Eaves spouts, fallpipes or vent shafts renewed, repaired or cleansed	2014	65
Fireplaces or ranges, repaired or renewed		49
Sink waste pipes and sinks, repaired or renewed		32
Floors repaired		59
Windows repaired		85
Internal walls and ceilings repaired		290
Doors repaired or renewed		26
Wash coppers repaired or renewed		2
Hot water systems repaired		4
Bath waste pipes repaired	4	2
Water supply improved		16
Hand rails provided to staircases		2
Ventilation provided to foodstore		1
Wash-hand basins renewed		2

Boundary walls repaired	5
Walls, external brickwork repointed	19
Chimneys repaired	18
Yard surfaces repaired or renewed	15
Outbuildings repaired	56
Ashbins renewed	418
Drains.	
Taken up and relaid	10
Opened and cleansed	102
Inspection chambers provided or repaired	10
Gullies cleansed or provided	8
Water Closets.	
Obstructions removed	15
Water supply pipes repaired	31
Cisterns repaired or renewed	27
Flush pipe joints repaired	9
Pedestals renewed	20
Apartments generally repaired	20
Outgo pipe joints repaired	2
des production of the producti	
Other Nuisances etc., abated.  Houses cleansed or rid of vermin	45
Accumulations of refuse removed	1
HOUSING	
The following statistics indicate the work done i	n con-
nection with housing during the year:  Number of dwelling houses in the District	7 670
Number of back-to-back houses included in above	Nil
1. Inspection of dwelling houses during the year	r.
(1) (a) Total number of dwelling houses inspected for	
for housing defects (under Public Health or Housing Acts)	1,054
(b) Number of inspections made for the purpose	

	Number of dwelling houses (included under sub-head (1) above), which were inspected and recorded under the Housing Consolidated Regulations	124
(1	Number of inspections made for the purpose	124
1	umber of dwelling houses needing further action:  Number considered to be in a state so dangerous or injurious to health as to be unfit for human habitation	24
(1	above) found not to be in all respect reasonably fit for human habitation	1,030
2.	Remedy of defects during the year without serv	rice
C	umber of defective dwelling houses rendered fit in onsequence of informal action by the Local authority or their officers	40
t	umber of defective dwelling houses (excluding hose shown in (a) above) in which defects were emedied as a result of informal action	671
A. I	Action under Statutory Powers during the year Proceedings under Sections 9, 10 and 16 Housing 2936:—	
A. I (1) N	Proceedings under Sections 9, 10 and 16 Housing	
A. I (1) N (2) N	Proceedings under Sections 9, 10 and 16 Housing 2936:—  umber of dwelling houses in respect of which	Act,
A. I (1) N (2) N	Proceedings under Sections 9, 10 and 16 Housing 2936:—  umber of dwelling houses in respect of which otices were served requiring repairs  umber of dwelling houses which were rendered fit	Act,
A. I (1) N (2) N (6) B. I	Proceedings under Sections 9, 10 and 16 Housing 2936:—  umber of dwelling houses in respect of which otices were served requiring repairs  umber of dwelling houses which were rendered fit fter service of formal notices:—  a) By owners  b) By Local Authority in default of Owners  Proceedings under Public Health Acts.	Act, Nil
A. I (1) N (2) N (3) B. I (1) N	Proceedings under Sections 9, 10 and 16 Housing 2936:—  Tumber of dwelling houses in respect of which otices were served requiring repairs  Tumber of dwelling houses which were rendered fit fter service of formal notices:—  a) By owners  b) By Local Authority in default of Owners	Act, Nil
A. H (1) N (2) N (3) (4) (5) (6) (7) (7) (8) (9) (9) (1) (1) (1) (2) (2) (3)	Proceedings under Sections 9, 10 and 16 Housing 2936:—  umber of dwelling houses in respect of which otices were served requiring repairs  umber of dwelling houses which were rendered fit fter service of formal notices:—  a) By owners  b) By Local Authority in default of Owners  Proceedings under Public Health Acts.  Sumber of dwelling houses in respect of which	Act, Nil Nil Nil
A. I (1) N (2) N (	Proceedings under Sections 9, 10 and 16 Housing 2936:—  Tumber of dwelling houses in respect of which otices were served requiring repairs  Tumber of dwelling houses which were rendered fit fter service of formal notices:—  a) By owners  b) By Local Authority in default of Owners  Proceedings under Public Health Acts.  Tumber of dwelling houses in respect of which notices were served requiring defects to be remedied tumber of dwelling houses in which defects were	Act, Nil Nil Nil

C.	Proceedings under Sections 11 and 13 of the Housing 1936, and the Housing Repairs and Rents Act, 1954.	Act.
(1)	Number of representations etc. made in respect of dwelling houses unfit for habitation	2
(2)	Number of dwelling houses in respect of which Demolition Orders were made	2
(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?	Nil
D.	Proceedings under Section 12 of the Housing Act, 19	36.
(1)	Number of separate tenements or underground rooms, in respect of which Closing Orders were made	Nil
(2)	Number of separate tenements or underground rooms, the Closing Orders in respect of which were determined, the tenement or room having been rendered fit	Nil
E.	Proceedings under Part III of the Housing Act, 1936 the Housing Repairs and Rents Act, 1954.	, and
(1)	Number of Clearance Areas represented during the year	1
(2)	Number of houses included in these areas	22
(3)	Number of persons to be displaced	81
(4)	Action taken during the year in respect of Clearance Areas:—	
	(a) by Clearance Orders, number made	1
	(b) by Compulsory Purchase Orders, number made	Nil
(5)	Number of houses in Clearance Areas demolished during the year	2
(6	Number of persons re-housed from houses demolished during the year	3

4. Housing Act, 1936—Part IV—Overcrowding.	
(a) (1) Number of dwellings overcrowded at the end of the year	66
(2) Number of families dwelling therein 12	24
(3) Number of persons dwelling therein 57	72
(b) Number of new cases of overcrowding reported during year	6
(c) (1) Number of cases of overcrowding relieved during the year	2
	17
5. New Houses.	
Number of new houses provided during the year:	
By the Local Authority—Permanent type	10
	Vil
By Private Enterprise	4
6. Housing Act, 1949.	
Section 4—Any action in connection with advances for purposes of increasing housing accommodation? N	Vil
7. Housing Act, 1949, as amended by Housing Repairs and Rents Act, 1954.	s
Grants to persons other than local authorities for improvement of housing accommodation. Any action during the year?	14
ACTION UNDER THE HOUSING ACTS	
Houses not in all respects fit.	
Under the Housing Consolidated Regulations, 1925, at the Housing Consolidated Amendment Regulations, 1932, 13 inspections of dwelling houses were made and particular recorded.	24
During the year 28 houses were made in all respects f	it.
The Housing Repairs and Rents Act, 1954.	
This Act which came into operation on the 30th Augu- 1954, enables landlords whose property is in good condition claim a "repairs" increase on the rent. The property must	to

in good repair, fit for human habitation and must be kept like this. The introduction of this legislation with the incentive to the landlord of increased rents was considered likely to effect very rapid improvement in house property. While no accurate figures are available to indicate how successful it has been, applications for "Certificates of Disrepair" by tenants since the inception of the scheme in 1954, 60; and 1955, 23—making a total of 83, implies that little use has been made of the Act's provisions. It is possible, in fact highly probable, that tenants may continue to live in defective property and be unwilling to complain knowing that once the landlord is compelled to carry out repairs he may give notice of increased rent. The principle underlying the Repairs and Rents Act is sound and deserves better use by landlords. Appended are details of Certificates applied for and the results of such application.

The same Act required all Local Authorities to submit to the Minister by the 30th August, 1955, their proposals for dealing under Parts II and III of the Housing Act of 1936 with houses which appeared to the Authority to be unfit for human habitation, and with any other houses which are, or in the opinion of the Local Authority, ought to be included in Clearance Areas. A list of dwellinghouses totalling 88 considered as likely to come within the scope of this provision was approved by you and submitted to the Minister.

	(A)	(B)
	Dwelling houses which have been the subject of a notice of repairs increase of rent under Part II of the 1954 Act	Dwelling houses which have not been the subject of a notice of repairs increase of rent under the 1954 Act but in respect of which permitted increases of rent are recoverable under Sec. 2 (1) (c) & (d) of the Increase of Rent and Mortgage (Restrictions) Act, 1920
No. of applications made	SUIT THE ASSESSED	E MURDLE
by tenants for Certifi- cates	23	a in a la manifest
No. granted	14	1
No. refused	9	Nil
No. of applications for		Judenice.
Revocation of Certifi- cates	36	1
No. granted	33	1
No. refused	3	Nil

There are at present 21 Certificates of Disrepair remaining in force.

# Clearance Areas—Section 25 Housing Act, 1936 (as amended).

Two dwelling houses (Nos. 42 and 44, High Street, Bolton-on-Dearne, subject of a Clearance Order dated 2nd December, 1953, were demolished during the year.

Representations were made to the Council in July, 1955, regarding 22 houses, numbered 62—104, George Street, Thurnscoe, being unfit and these were included in a Clearance Order. Objections being lodged by the owners of 11 houses a public enquiry was held at the Council Offices on the 11th January, 1956, by Mr. R. H. Heath, Inspector, Ministry of Housing and Local Government. Confirmation of the Order dated 21st March, 1956, has been received.

# Section 11 Housing Act, 1936 (as amended).

Reports were made to you concerning the unfit state of two dwellings, 85, Station Road, Bolton-on-Dearne and 16, High Street, Thurnscoe and after due consideration and the taking of necessary legal action Clearance Orders were made.

Demolition of dwellings dealt with under this Section of the Act included 15, Thornely Square, Thurnscoe (Demolition Order dated 2nd December, 1953) and 85, Station Road, Boltonon-Dearne (Demolition Order dated 13th July, 1955).

### Tents, Vans and Sheds.

Since the various unofficial caravan sites occupied up to 1954 were cleared there has been no permanently parked van in the area. Vans parked within the district from time to time and these were inspected and an intimation given to the occupier that no licensed sites for caravans existed within the District.

# SANITARY ACCOMMODATION

Type of Convenience & Receptacle	Bolton and Goldthorpe	Thurnscoe	Barnburgh	Total	1955
Water Closets Midden Privy	5,000	3,592	39	8,631	99 ·97 0 ·03
Total Closets	5,002	3,592	40	8,634	_
Ashbins Privy Pits	4,670	3,309	40	8,019 4	99·95 0·05

### Hairdressers or Barbers.

26 premises are registered as hairdressers under Section 120 of the West Riding County Council (General Powers) Act 1951. Routine inspections have been carried out, there being no serious contravention of the law.

### FOOD SUPPLY

### Meat, Milk and Other Foods.

The efforts of your Sanitary Inspectors have been directed towards further improvements in the handling of all food offered for sale for human consumption. Much of the meat is now slaughtered and dressed within your area. A fairly high quality of food animal is slaughtered, yet the incidence of tuberculosis amongst cows remains high (over one-third). In this respect a declaration by the Ministry of Agriculture, Fisheries and Food dated the 31st October, 1955, is worthy of note, that draft orders under Section 23 of the Food and Drugs Act, 1950, will provide for extensive areas of the County including the Dearne as "specified areas" in which, from an appointed day, milk of special designation only may be sold by retail ("pasteurised," "sterilised" or "tuberculin tested" milk). The appointed day was later made the 10th April, 1956.

### Food Premises.

There are within the area the following premises concerned in the storage, preparation and sale of food: Butchers 34, General Dealers 102, Greengrocers 20, Confectioners 11, Fried Fish and Chips 24, Bakeries 8, Off Licences 10, Public Houses 11, Clubs 12, Chemists 6. (See remarks later re Food Hawkers).

Of these premises 80 are registered for the sale of ice-cream under Section 14 of the Food and Drugs Act, 1938, while 3 are also registered to manufacture ice-cream and 4 to manufacture iced lollipops.

Under Section 14, Food and Drugs Act, 1938, 22 premises are registered for the preparation or manufacture of sausages or potted, pressed, pickled or preserved food intended for sale and 5 premises are licensed as slaughterhouses under Section 57.

(Note: The Food and Drugs Act, 1938, was superseded on the 1st January, 1956, by the new Food and Drugs Act of 1955).

Inspections and re-inspections of registered food premises totalled 135, 71 visits being paid to ice-cream premises and 64 visits to other registered food premises.

Further particulars respecting food sampling and details of food surrendered as unfit are set out later in this report.

The disposal of food found to be unfit for sale for human food has been either by burying it in the Council's controlled refuse tip or sale (by the owner) to a local Maggot breeding factory. In all cases very stringent precautions are taken to see that such food is properly disposed of.

Registration of Hawkers of Food and their Premises.

Section 76, West Riding County Council (General Powers)

Act, 1951.

At the year end twelve food hawkers were registered and also nine food storage premises used by hawkers. The types and character of the vehicles are somewhat mixed but in general a fairly high standard of cleanliness has been maintained.

### Public Markets.

The continuing prosperity in the coal industry has reflected itself in the popularity of the two markets—the Council-owned market at Goldthorpe and the private market at Thurnscoe. The foodstuffs offered for sale have been under fairly constant supervision. There is a tendency by some stall-holders to expose for sale large amounts of unprotected food and the attention of the business proprietors have been drawn to this matter.

The facilities for washing hands and equipment at the Thurnscoe Market are sadly lacking and appropriate action will have to be taken to obviate this weakness.

### Meat Inspection.

Your inspectors paid 582 visits to slaughterhouses and inspected the carcases and offal of 2,695 food animals. Details of the meat and offal found to be unfit for human consumption and the percentage of the incidence of disease etc. are recorded later. A system of meat inspection (Memo 3/Meat) issued by the Ministry of Food in 1952 has been adhered to rigidly. The five slaughterhouses re-licensed for use again since the 2nd July, 1954, have been constantly used without any serious nuisance.

# MEAT INSPECTION

Carcases and Offal inspected and condemned in whole or in part.

						And the second
and this reports	Cattle exclud- ing Cows	Cows	Calves	Sheep and Lambs	Pigs	Horses
Number killed (if known)	627	175	3	837	1,053	and The
Number inspected	627	175	3	837	1,053	-
All diseases except Tuberculosis and Cysticerci Whole carcases condemned	_	_		_	1	
Carcases of which some part or organ was condemned	53	27	_	25	23	_
Percentage of the number inspected affected with disease other than tuberculosis and cysticerci	8%	15%	_	3%	2%	_
Tuberculosis only Whole carcases condemned	-	1		in all a		-
Carcases of which some part or organ was condemned	56	60	_	_	27	
Percentage of the number inspected affected with tuberculosis	9%	34%	_	-	2%	
Cysticercosis Carcases of which some part or organ was condemned	3	_	_	_	-	
Carcases submitted to treatment by refrigeration	3	_		-	1 7 1	1
Generalised and totally condemned	1	-	-	-	-	7

In addition to the above, 50 "cottager" pigs were killed and inspected during the year.

# Meat Inspection.

The following list records the meat and offal rejected as unfit for sale for human food during the year.

### Beasts.

	142 pairs Lungs			 	1,698	lbs.
	82 Livers			 	1,149	lbs.
	56 Heads and Tongue	s		 	1,660	lbs.
	51 Mesenteries			 	510	lbs.
	7 Udders			 	70	lbs.
	2 sets Stomachs and I	Inte	stines	 	80	lbs.
	3 Hearts		Accessor	 Tuo: Un	12	lbs.
	9 Spleens			 	20	lbs.
	8 Kidneys			 	8	lbs.
	2 Tails		Spring Con	 dell.	8	lbs.
	5 Skirts (diaphragms)			 	10	lbs.
	3 Flank and Steak			 	198	lbs.
	2 complete Carcases			 	1,164	lbs.
Shee	p.					
	15 pairs Lungs				30	lbs.
	26 Livers			 		lbs.
	The reconstruction of the second			 - Julian	my/	
D:						
Pigs.						
	29 Heads and Tongue			 	290	lbs.
	15 pairs Lungs			 	45	lbs.
	24 Livers			 		lbs.
	14 Mesenteries			 	28	lbs.
				 		lbs.
	6 Spleens					lbs.
	4 Kidneys			 		lbs.
	1 portion of leg			 		lbs.
	1 complete Carcase			 	65	lbs.
			momar	1311		
			TOTAL	 	$7,184\frac{1}{2}$	lbs.
				-		

# Slaughterhouses and Slaughtering.

# Slaughter of Animals Acts, 1933-1954.

39 licences to slaughter or stun animals were issued to slaughtermen during the year. At the end of the year there were 39 licensed slaughtermen in the Dearne Urban District. Six of these licences restricted the slaughtermen to the killing of pigs only. No cases have come to notice of any cruelty to animals—slaughtering in the local slaughterhouses has been carried out in a humane manner.

### Slaughterhouses.

Five licensed private slaughterhouses have been used regularly without the creation of any nuisance. They are fairly old buildings which have been improved somewhat, most of them having limited accommodation. Application by a local butcher to use old slaughterhouse premises at the rear of 5A, Angel Street, Bolton-on-Dearne, was considered by the Council at the year end but was refused.

### **UNSOUND FOOD**

The food listed below was surrendered voluntarily	y : —	-
Tomatoes 12	20 t	ins
Meat	69 t	ins
Fruit 10	06 t	ins
Vegetables	57 t	ins
Milk	31 t	ins
Fish		
Cream	. 3 t	ins
Golden Syrup	. 1	tin
Soup	7 t	ins
Sausages 2	79 1	bs.
Cheese 3		
Bacon 1		
Cake	14 1	bs.
Prunes 2		
Corned Beef		-
Beef Suet		
Fishcakes		
Cooked Meat	92 1	bs.

#### MILK AND DAIRIES

### Registration of Distributors.

Tuberculin Tested

Sixty retail distributors of milk were on the register at the end of the year.

The Milk (Special Designations) (Pasteurised and Sterilised Milk) Regulations 1949 to 1953.

The number of Licences in force were: -

of and Washing Street	Dealer's Licenses	Supplementary Licenses
(a) Pasteurised Milk	 _	3
(b) Sterilised Milk	 4	2

# The Milk (Special Designation) (Raw Milk) Regulations, 1949-1954.

The number of Licences in force were:

Dealer's	Supplementary
Licenses	Licenses
 -	2

# Sampling of Milk. Biological Analysis—Presence of Tuberculosis.

Routine sampling of milk produced from cows in local cowsheds for presence of Tuberculosis was carried out during the year. 9 samples were taken, 7 of which were reported upon as negative and 2 as positive. In the case of the positive samples, details were forwarded to the Ministry of Agriculture, Fisheries and Food for the attention of their Veterinary Staff who took the necessary action to find the animals giving tuberculous milk.

### PUBLIC SWIMMING BATH

Two samples of water from the Public Swimming Bath, Thurnscoe were submitted to the Public Health Laboratory for examination, the results being as follows:—

Sample No.	Presumptive B.Coli in 100 ml. of water	p.H. value	Free Chlorine in 1,000,000 parts of water
1.	0	7.6	0.45
2.	0	7.7	0.40

The above samples were regarded as satisfactory.

### PUBLIC WATER SUPPLY

Following complaints of discoloured water from a house supply a sample taken showed it to contain 16 non faecel coli per 100 ml. (Intermediate Type 1). Two further samples were both reported as satisfactory and the supply continued to be so. During he warm sunny weather enjoyed in August complaints were received of the presence of foreign matter in drinking water from one area at Goldthorpe. On investigation it appeared that a small number of mosquito larvae had gained access to the water supply. The Dearne Valley Water Board was notified of the matter and in due course the trouble abated.

### ICE CREAM PREMISES

80 premises were registered at the year end for the sale of ice-cream, including 3 which were authorised also to manufacture ice cream and 4 to manufacture iced-lollies.

Six samples were submitted to the Public Health Laboratory for examination and provisional grading showed them to be satisfactory. Brief details of the samples are given in the table below:—

Sample No.	Place Taken	Date Taken	Results of Methylene Blue Test	Pro- visional Grade	Remarks
1	Shop	10.5.55	Not decolourised after 4 hours	1	Satisfactory
2	Shop	10.5.55	Not decolourised	1	Satisfactory
3	Shop	10.5.55	Decolourised in 4 hours	2	Satisfactory
4	Shop	10.5.55	No coliforms isolated —Iced Lollipop	35 - 25 Sum	Satisfactory
5	Shop	10.5.55	Not decolourised	1	Satisfactory
6	Shop	10.5.55	Not decolourised	1	Satisfactory

### INFECTIOUS DISEASES

Enquiries have been made into 104 cases of infectious diseases including 80 cases of Scarlet Fever, 10 cases of Acute Poliomyelitis, 7 cases of Gastro-Enteritis, 2 cases of Dysentery, 2 cases of Vincent's Angina and 1 case each of Cerebro-Spinal Meningitis, Food Poisoning and Salmonella Infection.

The distribution of these cases was 65 at Thurnscoe and 39 at Bolton-on-Dearne and Goldthorpe.

The cases at Thurnscoe comprised 58 cases of Scarlet Fever, 3 cases of Acute Poliomyelitis, and one case each of Cerebro-Spinal Meningitis, Vincent's Angina, Gastro-Enteritis and Salmonella Infection.

The cases at Bolton-on-Dearne and Goldthorpe comprised 22 cases of Scarlet Fever, 7 cases of Acute Poliomyelitis, 6 cases of Gastro- Enteritis, 2 cases of Dysentery and one case each of Food Poisoning and Vincent's Angina.

### CLEARANCE OF CHOKED DRAINS

79 owners have given general instructions to the Department to deal with blockages to drains and water closets as they come to notice.

76 drains were cleansed under this arrangement at a cost of 5s. 0d. to each owner.

### OFFENSIVE TRADES

The only trade termed "offensive" by law, an old established tripe dresser, has operated at Goldthorpe without nuisance. A thriving industry at Harlington deals with much material of an offensive nature in the production of maggots—it being a maggot factory. Regular visits of inspection have been paid to this trade, and where improvements have been needed the proprietor has responded quickly.

### SHOPS ACTS

135 visits were paid to shop premises, many minor infringements of the Shops Acts having been dealt with informally. Amendment of the law relating to shop hours with the deletion of many of the clauses relating to the sale of "exempted goods" is long overdue.

### **FACTORIES**

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 authorities	16	45	-	-
(2) Factories not included in (1) in which Section 7 is enforced by local authority	34	51		
(3) Other premises in which Sec. 7 is enforced by the local authority (excluding out workers premises)				
TOTAL	50	96	-	_

# Supply of Ashbins. Section 75, Public Health Act, 1936.

The Council's decision to provide and maintain dustbins where they become defective in lieu of requiring the owner or occupier to do so, was continued during the year.

This service is chargeable to the general rate of the district.

The ashbins supplied during the year were as follows: -

this stop, next parties only	1955	1954	1953
1. Bin renewals to privately owned houses	414	398	372
2. Bin renewals to Council houses	171	129	162
3. Bins provided to New Houses			
(a) Council houses—10			
(b) Private houses—4	14	431	640
Year's total	599	958	1,174

The cost of providing dustbins was £1,254 as compared with a total of £1,447 during 1954. Based on the total figure of approximately 8,000 ashbins within the Dearne, the annual renewal rate for the past three years averaged 550 bins. Over 1,000 dustbins of our total of 8,000 having been provided to new houses within the past three years suggests that future years will necessitate a somewhat higher number of receptacles being replaced. However the scheme has many advantages not least being the speed by which defective bins are replaced, also the gradual provision of standard type bins to the ultimate advantage of the workmen engaged on cleansing.

### RATS AND MICE DESTRUCTION

Fifty-three treatments were carried out by the Sanitary Department against rats and mice infestations on land and property in the District. Poisons used following pre-baiting include Arsenic, Zinc Phosphide and Antu. "Warfarin," used as a direct bait, is the main poison in operation at present.

Premises	Number of Treatments	Infestation	Type of Treatment
Private Houses  Block Control Sewers Business Premises Sewage Works Local Authority Buildings Schools  Refuse Tips Allotments Total	29 2 6 4 1 2 4 4 1	Rats and Mice Rats Rats Rats Rats Mice Rats and Mice Rats and Mice Rats Rats	Poison Poison Poison Poison Poison Poison Poison Poison

### Disinfestation.

Seven houses were treated during the year to rid them of bugs. The rooms were thoroughly sprayed with an insecticide and again at an interval of three weeks.

Fifty-three houses were treated to rid them of infestations with cockroaches.

Other infestations dealt with included: -

Flies 8 houses
Silverfish 1 house
Ants 2 houses
Red Mites 1 house
Moths 1 house
Bees 1 house

### PUBLIC CLEANSING

(Referring to year April, 1955 to March, 1956)

The scavenging of the area continued to be undertaken by four teams, although the staff was depleted during most of the year due to sickness. More time was lost than usual, the actual number of man-hours being:—

Certified Sickness ... 6,398 hours

Absent for other reasons... 2,713 hours

Total ... 9,111 man-hours

This is the equivalent of 4 men being absent (excluding holiday entitlements) for each working day throughout the twelve months.

With each team operated a Karrier Bantam Refuse Collecting Vehicle, a fifth vehicle being used separately to collect salvage on two days a week from the district's shops and business premises.

A new lorry was put into service on May 23rd so that a vehicle could be maintained as a spare in the event of breakdown or other emergency.

Weather conditions during one day in December and two days in February (1956) made it impossible to undertake the collection of refuse, consequently the men were engaged on snow removal to assist the Highways Department.

The workmen were again provided with protective clothing, the system being that after the initial issue of overalls, mitts and rubber boots, worn out clothing is handed in before new is issued.

The maintenance of a weekly collection of refuse was difficult during the winter period, some overtime having to be worked on Saturday afternoons.

For the sixth consecutive year no hired team labour was employed.

### Average Estimated Annual Yield of Refuse from each house.

Year	Thurnscoe	e	Goldthorpe and Bolton-on-Dearne
1950	 1 ton 7.84	cwts	1 ton 3.73 cwts.
1951	 1 ton 6.87	cwts	1 ton 4.18 cwts.
1952	 1 ton 5.20 d	cwts	1 ton 4.46 cwts.
1953	 1 ton 5.25	cwts	1 ton 5.00 cwts.
1954	 1 ton 8.85	cwts	1 ton 5.00 cwts.
1955	 1 ton 10.90	cwts	1 ton 5.36 cwts.

Loads are calculated at 21 tons each.

The majority of house-tenants are recipients of home coal, the sole reason for the exceptionally large amount of refuse. There is no real incentive to practice fuel economy, in fact it is often the reverse, the consequences being the smoke laden atmosphere and the refuse-laden dust bins!

### Labour—Staff Employed.

Four lorry drivers were engaged regularly on scavenging, one driver averaged two days a week on salvage collection. Twenty labourers were on the books as scavengers although sickness etc. usually resulted in four labourers only being allocated to each vehicle.

Two tipmen were occupied full-time on the Council's controlled tip.

Two men were engaged in the baling of waste paper, sorting of salvage and cleansing of public conveniences.

The Foreman supervised the work of the scavenging staff, carried out disinfection and disinfestation work, rodent control and cleansed all blocked drains of property where the owners have agreed to participate in the Council's scheme to liberate such blockages.

### REFUSE COLLECTION

The average number of premises on our weekly collection list for the past year was 7,902 for the district of Dearne, comprising 4,646 at Bolton-on-Dearne and Goldthorpe, 3,216 at Thurnscoe and 40 at Barnborough. The number of receptacles were 4,670 at Bolton-on-Dearne and Goldthorpe, 3,309 at Thurnscoe, and Barnborough (Green Lane) 40, making a total of 8,019 refuse receptacles.

### Trade Refuse.

Eighteen premises remained on the list for trade refuse removal and a small charge was made for the service. Collections made from some businesses consisted mainly of saleable salvage, paper, cardboard, etc., no charge being made in these cases.

Clinker and refuse have been removed regularly from all schools in the district.

### Collection Cost per House.

The annual cost of collecting refuse from each house and conveying it to the disposal site was £1 11s. 3d. last year's figure being £1 9s. 10d.

Wages rates rose in the 12 months April 1955 to March 1956 by £1 1s. 6d. per man.

At the year end a bin labourer's wage was £8 7s. 8d. for a 44 hour week.

The cost of collecting a bin, emptying and conveying the refuse to the tip was approximately 7d.

### DISPOSAL

Controlled tipping has been employed solely in the disposal of the district's refuse.

The Recreation Ground at Highgate Lane, Bolton-on-Dearne was handed over to the Council's Surveyor on 16th June, 1955 for completion. This involved re-levelling with top soil previously removed and seeding to form a recreation ground adjacent to the new school which is due for opening in September, 1956. The ground indicates what can be formed from the proper use of refuse given the money to complete the job. From a rough, unlevel, weed-ridden and part swamp area there should be formed a very satisfactory playing area.

9,794 tons of refuse had been deposited on this ground since tipping commenced on 1st July, 1953.

The need for suitable tipping sites has been brought to the Council's notice on many occasions. In 1954 it was considered possible to utilise portions of the old quarry of the disused Bolton Brickworks so that a part of the barren area might be brought into use. However further inspections during 1955 showed very extensive areas were flooded consequently controlled tipping on the site was deferred.

It will be seen that refuse has been dealt with at the Marsh Tip off Barnborough Lane, Goldthorpe and at the Lidget Wood Tip off Chapel Lane, Thurnscoe. The latter site is subject to fairly constant visits by trespassers and hardly a week has elapsed without a serious fire having been started. Lidget Wood tip is too accessible to the public although circumstances necessitate its continued use. The two extensive "cuttings" of the disused minerals railway line traversing part of the Dearne area—one in the Ingsfield Lane, Bolton district and the other in Chapel Lane, Thurnscoe, were considered suitable areas to utilise as controlled tips for the district's refuse but despite continued approaches to the owners regarding some such arrangement no progress could be reported at the year end.

The need for mechanical aid such as a "bull-dozer" in the levelling and consolidation of refuse on tips is worthy of some thought. If and when a tipping site becomes available giving some years of use the matter must have your consideration.

### SUMMARY OF LOADS

### Bolton-on-Dearne District.

(including Goldthorpe and Green Lane, Barnborough).

Imerading	Coldinorpe and Oreen Lane, Darie	OLUU	9 / .	
			Lorry	loads
	Marsh Tip, Goldthorpe			1,789
	Highgate Lane Recreation Ground			616
	Lidget Wood Tip, Thurnscoe			392
			88 _	1
				2,797
Thurnscoo	District.			
	Marsh Tip, Goldthorpe			1,319
	Highgate Lane Recreation Ground			603
	Lidget Wood Tip Thurnscoe			372
	Common Road Recreation Ground			21
	the product have what the court		-	
				2,315
	Grand Total		5,112	loads
	Expressed as tons (2½ tons per loa	d)	10,86	3 tons

In the history of the Dearne this is the largest amount of refuse collected and disposed of in one year.

### Salvage Incentive Bonus Scheme.

There was no bonus earned by the workmen during the period covered by this report.

### SALVAGE

(Year: 1st April 1955 to 31st March 1956)

The prices offered for the various grades of paper remained constant at £10 10s. 0d. per ton for Newspaper, £10 for Fibreboard and £8 for mixed waste.

The ratio of the various grades despatched per ton was approximately:— 13 cwts. mixed waste, 6 cwts. fibreboard, 1 cwt. newspaper.

### Materials salvaged and sold during the year

Quantity		Material				Sales		
Tns	Cwts	Doz				£	s.	d.
89	2	0	 Waste	Paper		783	10	9
	10	0	 Rags			12	0	0
1	0	0	 Scrap I	ron		5	0	0
	4	0	 String			1	4	0
		38	 Tins			1	18	0
101	2					-	-	-
90	16	38				£803	12	9
_		-				-	-	

Since the Salvage Scheme commenced in 1940, £11,179 has been received from the sale of 1,595 tons of materials and 11,591 dozen tins, bottles and jars.

### PUBLIC CLEANSING—COSTING RETURNS

The Public Cleansing costs herewith are reproduced from the table submitted to the Ministry of Housing and Local Government as required from Councils of County Boroughs and Metropolitan Boroughs and of non-county Boroughs and Urban Districts with populations exceeding 20,000.

# Cost Statement 1955-56

Revenue Account.	Collection	Disposal	Total			
1. Gross Expenditure:	£	£	£			
(i) Labour	7,844	1,929	9,773			
(ii) Transport	4,510	348	4,858			
(iii) Bin Maintenance etc.	1,254	42	1,296			
Total gross expenditure	13,608	2,319	15,927			
2. Gross Income	24	816	840			
3. Net Cost	13,584	1,503	15,087			
Unit Costs.	Public Cla		Obstor			
Gross cost nor ton labour only	s. d.	s. d.	s. d.			
Gross cost per ton, labour only Gross cost per ton, transport only	14 5 8 3	3 6	17 11 8 10			
Net cost (all expenditure) per ton	24 9	2 9	27 6			
and coperation of per ton		ow min	2, 0			
	£	£	£			
Net cost per 1,000 population	510	56	566			
Net cost per 1,000 premises	1,719	190	1,909			
Operational Sta	tistics					
10. Area (statute acres)—land and in		3 88	& acres			
	mana watt	5,00	o acres			
11. Population at 30th June, 1955 (Registrar General's Estimate)						
12. Total refuse collected (Tons) 10,954 tons						
13. Weight (cwts.) per 1,000 population per day 22.54 cwts.						
14. Number of premises from which refuse is collected						
15. Premises from which collection is made weekly 100%						
16. Average haul, single journey to final disposal point 2 miles						
17. Kerbside collection, if practised						
18. Total refuse disposed of (tons)						

- 19. Methods of disposal (Salvage excluded)—
  Controlled tipping 100%
- 20. Salvage. Analysis of income and tonnage:

Salvage:		Income	Tonnage Collected
		£	Tons
Scrap Metal		 7	1
Waste Paper		 784	89
Other Salvage		 13	1
	Totals	804	91
ten at the same	1 Otals		
21. Trade Refuse		 36	450

### Observations-Public Cleansing.

The area continued to show signs of growth and with it the amount of refuse increased. There has been no great change in the method of routine collection of house refuse. With a view to providing an incentive to the workmen to speed up collection work, also to provide against depleted manpower, a refuse collection bonus scheme was prepared and circulated to all the men. Later a meeting took place to consider the question but I am sorry that no agreement could be arrived at.

Wages rose during the year by an average of £1 1s. 6d. per week per man. In considering the cost of our scavenging service regard must be had to the exceptionally high yield of refuse.

The repair and general maintenance of the scavenging vehicles were undertaken by our own mechanic in the garage at the Thurnscoe depot. The arrangement has functioned very well and usually provides for a quick service—a matter of importance in the work of public cleansing.

### Final Remarks.

The year has been one of very steady progress in all the various aspects of public health work. New legislation is envisaged dealing with adoption and enforcement of measures to obtain cleaner air and food, matters in which my staff and I are deeply interested.

I take the opportunity of recording that every assistance in our work has been afforded by the Heads of other Departments and their staffs.

The District Sanitary Inspectors have again carried out their many and varied duties with efficiency.

It has been a pleasure to work with the acting Medical Officer of Health, Dr. B. R. A. Demaine, who took over the responsibility of that position in February 1955 and has been an energetic and very helpful officer throughout the year.

To the Chairman and Members of the Council my thanks are due for their help and support in our public health work.

I am,

Ladies and Gentlemen,

Yours faithfully,

G. H. ALLEMBY, Cert. R.S.I., M.S.I.A. Chief Sanitary Inspector and Cleansing Superintendent

July 1956.
Sanitary Inspector's Department,
Council Offices,
Bolton-on-Dearne.







TAYLORS, PRINTERS, WOMBWELL, YORKS.