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Contributors

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I



THE HEALTH OF BARNSELEY

1970



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1970



The Annual Report of the
Medical Officer of Health

The Annual Report of the
Principal School Medical
Officer

G. A. W. NEILL, O.B.E., O.St.J., T.D., M.D., D.P.H.

Barrister-at-Law

Medical Officer of Health

Principal School Medical Officer

THE HEALTH OF BARNET

1900



The Annual Report of the
Medical Officer of Health
The Annual Report of the
Principal School Medical
Officer

G. A. W. NELL, O.B.E., D.S.O., D.M.D., D.P.H.

London: Printed and Published by
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1901

FOREWORD

Our frailties are invincible, our virtues barren;
the battle goes sore against us to the going
down of the sun.

"Across the Plains" XI Pulvis et Umbra.

Robert Louis Stevenson, 1850—1894

This report for 1970 follows a pattern which has evolved over the years since the inception of the National Health Service. It is extremely unlikely that the reports for future years will follow this form. To date the reports have recorded the statistical information required by the various central government departments. They have acted by way of being an account to the Council of the stewardship exercised by their officers. They have described events and circumstances relating to the health of Barnsley more or less contemporaneously. They have told of the achievements and shortcomings of the Council's services for the ill and handicapped. Finally, they have provided a record of professional advice tendered to the Council.

The field covered by these reports has been wide and considerable effort has been expended to present the ever increasing variety of facts and opinions in a logical order and in a readable form.

On January 1st, 1971 a substantial portion of the services which over the years have been the subject of these reports were transferred to the Social Services Committee from the Health Committee. This was a consequence of the provisions of the Local Authorities Social Services Act, 1970. The Director of Social Services becomes the officer responsible to the Council for the functioning of these services. It would seem appropriate that he should be the officer to prepare an annual report to the Council on the manner in which they have functioned.

At the same time, the manner in which these services function can have a profound effect on the health of the community they serve. It is the statutory duty of the Medical Officer of Health to inform himself of circumstances affecting the health of his area and to report upon them to his authority.

The social worker and the medical practitioner do not always adopt the same approach to a given problem. It requires little imagination to envisage the kinds of difficulty and strain which could well beset the preparation of future health reports, after allowing for discretion and even elasticity of conscience. There is perhaps one way in which this might be avoided.

Each year a circular arrives from the Department of Health and Social Security requesting that the Annual Report should contain certain information. These circulars have, on occasions proved to be most helpful.

That to be issued in respect of the 1971 report offers the Department a unique opportunity for providing assistance and guidance. It is therefore hoped that in the preparation of this circular, the value will be appreciated of laying down precisely and unequivocally exactly the information required relative to the transferred services. If this is done it will go a long way to avoiding misunderstanding and friction. It will also be of great assistance in evolving the form which future reports will follow.

The doubts and apprehensions expressed here as to the content of future reports are symptomatic of the atmosphere of uncertainty and frustration which has pervaded the authority's health services throughout the year. References to this and its effects occur either directly or by implication in a number of places in this report.

No one would dispute that a reconstruction of the National Health Service to meet current social requirements is necessary and perhaps even overdue. However, the prolonged uncertainty as to the ultimate form the new structure will take, coupled with certain trends which are creeping into part of the administration of the present structure are reducing morale in the authority's service to a very low level.

During the period until Health Service reorganisation is effected, those officers who remain in the authority's service will attempt to minimise the effect on the community of this deterioration in morale. However, a limitation in services seems to be inevitable as these can not be carried on without an adequate staff. It would be quite indefensible to try to prevent those who now feel their material prospects threatened from seeking employment in fields where the future is more certain. At the same time, a service with a future limited to less than three years is unlikely to attract replacements of suitable calibre.

It is felt that this is the proper place to draw attention to this situation. The effects of continuing uncertainty are already apparent in the pages which follow. These effects will undoubtedly be more obvious in future reports.

The statistical information contained in Part I is much of the kind that is to be expected. The unusually low infant mortality figures are of interest and are most gratifying. It must be borne in mind that it may be several years before it is possible again to report such exceptionally satisfactory figures.

Part II dealing with epidemiology contains nothing of unusual interest. The resurgence of measles is worthy of note following problems in obtaining a supply of measles vaccine.

The social and personal services described in Part III follow the pattern of recent years. The increasing number of very old people in the community is putting noticeable pressure on the Home Nursing Service.

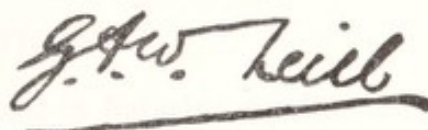
The Mental Health Service and the Care of the Handicapped described in Parts IV and V are services which were transferred to the Social Services Committee on 1st January, 1971. As might be expected in what was essentially a "marking time" year, there is little occasion for comment in either of these parts.

Part VI deals as usual with environmental hygiene. Perhaps with the concern now being shown about the problems of conservation of the environment, this part, which records much hard work, will be taken less for granted than in the past.

The statutory Annual Report of the Principal School Medical Officer is contained in Part VII. Here, as in recent years, the emphasis is once again on the work being done amongst the handicapped or potentially handicapped children.


The report is prepared in accordance with the direction and requests of the several central government departments and in compliance with the requirements of the various relevant statutory instruments.

It remains only to thank all those people whose efforts and goodwill have contributed to a successful year's work. It is also desired to express on behalf of all the staff appreciation of the many kindnesses and courtesies extended by the Mayor, Aldermen and Councillors.

A handwritten signature in dark ink, reading "G. H. W. Leitch", with a horizontal line underneath.

Medical Officer of Health and
Principal School Medical Officer

2nd August, 1971.



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PART 1

SOCIAL AND STATISTICAL INFORMATION

If I live to be old, for I find I go down,
Let this be my fate in a country town;
May I have a warm house with a stone at the gate,
And a cleanly young girl to rub my bald pate.
May I govern my passion with an absolute sway,
And grow wiser and better as my strength wears away,
Without gout or stone, by a gentle decay.

"The Old Man's Wish." H. Playford,
Theatre of Music, 1685, bk.i, p.50

Walter Pope, 1630-1714.

1. Geographical Situation: Latitude 53° 33"N.
Longitude 1° 29"W.
2. Elevation: 125 ft. to 575 ft.
3. Area of County Borough: 7,817 acres.
4. Population: (a) Census 1961 74,650
(b) Registrar General's estimate (1970 mid-year) 74,470
5. Density of Population: 9.52 persons per acre.
6. No. of inhabited houses: 25,326.
7. Rateable value at 31st December, 1970: £2,444,337.
8. Sum represented by a penny rate: £9,700.

SOCIAL CONDITIONS

The information relating to employment in Barnsley supplied each year by the Barnsley Employment Exchange indicates that during 1970 there was a negligible decrease in the number of persons without work. These figures, as well as the individual families concerned are being kept under observation. Although it would be unwise at this juncture to jump to conclusions, it is not anticipated that unemployment will have as marked an effect on the health of the community as it did some years ago. This, of course, is due to the development of comprehensive social security arrangements. The figures received relating to unemployment for 1970 are as follows:

		MEN		WOMEN		TOTAL	
		18 AND OVER		18 AND OVER			
		WU	TS	WU	TS	WU	TS
At 12.1.70	.. .. .	1,913	10	199	17	2,112	27
At 7.12.70	.. .. .	1,973	14	111	11	2,084	25

wu—wholly unemployed.

ts—temporarily suspended.

VITAL STATISTICS

Births:					MALES	FEMALES	TOTAL
Legitimate	..	..	..	..	673	672	1,345
Illegitimate	..	..	..	..	49	48	97
					722	720	1,442
Birth rate per 1,000 population					..	..	19.40
Adjusted by application of the area comparability factor of .98					..	..	19.00
Illegitimate live births (percentage of total live births)					..	..	7.00
Stillbirths:					MALES	FEMALES	TOTAL
Legitimate	..	..	..	..	7	13	20
Illegitimate	..	..	..	..	1	—	1
					8	13	21
Rate per 1,000 total births (live and still)					..	..	14.00
Total live and stillbirths					..	..	1,463
Infant Mortality:							
Infant deaths under 1 year of age					..	..	18
Infant Mortality Rates:							
Total infant deaths per 1,000 live births					..	..	12
Legitimate infant deaths per 1,000 legitimate live births					..	..	13
Illegitimate infant deaths per 1,000 illegitimate live births					..	..	—
Neo-Natal Mortality Rates:							
Deaths under 4 weeks per 1,000 total live births					..	..	9
Early Neo-Natal Mortality Rate:							
Deaths under 1 week per 1,000 total live births					..	..	8
Peri-Natal Mortality Rate:							
Still births and deaths under 1 week combined per 1,000 total live and stillbirths					..	..	23
Maternal Mortality:							
There was one maternal death registered in the County Borough during 1970.							

ANALYSIS OF PERINATAL MORTALITY

The total perinatal deaths (i.e. stillbirths plus deaths under 1 week of age) numbered 33. Of these deaths, 21 were stillbirths and 12, although born alive, subsequently died within one week of birth.

Deaths in the first week of life

Respiratory Distress Syndrome	..	..	..	..	..	..	1
Prematurity and Respiratory Distress Syndrome	..	..	..	..	..	..	1
Atelectasis and Extreme Prematurity	..	..	..	..	..	..	2
Intracranial Haemorrhage and Prematurity	..	..	..	..	..	..	1
Atelectasis and Prematurity	..	..	..	..	..	..	1
Extreme Prematurity and Anoxia	..	..	..	..	..	..	1
Haemolytic Disease of the Newborn	..	..	..	..	..	..	1
Cerebral Haemorrhage and Haemolytic Disease of the Newborn	..	..	..	..	..	..	1
Neonatal Asphyxia	..	..	..	..	..	..	1
Atelectasis, Extreme Prematurity and Cerebral Haemorrhage	..	..	..	..	..	..	1
Extreme Prematurity and Cerebral Haemorrhage	..	..	..	..	..	..	1

12

Stillbirths

Placental insufficiency	5
Placental infection	1
Ante-partum haemorrhage	3
Accidental haemorrhage	1
Anencephaly	3
Pulmonary atelectasis	1
Rh incompatibility	1
Hydrocephalus	1
Cause unknown	5
	<hr/>
	21
	<hr/>

ANALYSIS OF INFANT DEATHS: 1 week — 1 year

Bronchopneumonia	1
Active Tracheo-bronchitis	1
Acute Bronchitis and Gastro-enteritis	1
Asphyxia due to inhalation of regurgitated stomach contents	1
Bronchitis and Fibrocystic Disease	1
Extreme prematurity	1
	<hr/>
	6
	<hr/>

DEATHS:

Males	471
Females	405
	<hr/>
	876
	<hr/>
Crude Death Rate per 1,000 population	11.80
Adjusted Death Rate by application of area comparability factor of 1.20	14.20

Comment:

The death rate shows a negligible increase over 1969. In fact, the number of deaths was the same as in 1968—876. Table I shows comparisons with previous years.

Though there were two more illegitimate births, the illegitimacy percentage remained the same as in 1969 by reason of an increase over that year of 93 births.

The occurrence of one death attributable to pregnancy and childbirth has had an unfortunate effect on the maternal mortality figures for 1970.

However, the usual investigations were carried out into the circumstances and it would appear that the classification "unavoidable" would be a justifiable one in this case. The maternal mortality rate resulting from this one case works out at 0.68 per 1,000 live births.

Examination of the infant and perinatal mortality statistics shows these for 1970 to be highly satisfactory. The number of deaths of children under 1 year was 18. This is the lowest figure ever recorded for Barnsley. The resulting rate of 12 infant deaths per 1,000 live births is very substantially below the national average.

In previous reports attention has been paid to the suggestion that in the smaller population groups such as Barnsley, more reliable comparisons with other areas and with the country as a whole are possible when carried out with a "five years" average of the figure being studied. It is worthy of note that as a result of this exceptional figure for 1970, the five years average infant mortality figure for Barnsley is below the national average, though only fractionally (Table I).

Examination of the causes of death as detailed in Table II reveals little opportunity for comment. Deaths from lung cancer were 9 fewer than in 1969. Heart and circulatory causes of death show little alteration from year to year in the overall total, though variations occur in numbers attributed to the several members of this group. Taken as a whole, the figures in Table II are not unsatisfactory and indeed, very much what might be expected of a community such as Barnsley.

TABLE II
CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE DURING 1970 IN BARNSELY C.B.

[illegible]

PART I APPENDIX.
TABLE I
Vital Statistics
Barnsley County Borough compared with those for England and Wales for Twenty Years.

YEAR	TOTAL (EST.) POPULATION	LIVE BIRTHS			DEATHS			DEATHS UNDER 1 YEAR OF AGE			MATERNAL MORTALITY		YEAR
		NUM- BER	RATE PER 1000 POP. BARN- SLEY AD- JUSTED	RATE FOR ENGLAND AND WALES	NUMBER	RATE PER 1000 POP. BARN- SLEY AD- JUSTED	RATE FOR ENGLAND AND WALES	NUM- BER	RATE PER 1000 LIVE BIRTHS BARN- SLEY	RATE FOR ENGLAND AND WALES	RATE PER 1000 LIVE BIRTHS	RATE FOR ENGLAND & WALES	
1951	74890	1342	17.92	15.5	883	11.97	12.5	43	32	29	0.73	0.79	1951
1952	74730	1374	18.38	15.3	876	11.72	11.3	53	38	27.6	0.71	0.72	1952
1953	74740	1370	18.33	15.5	813	12.83	11.4	51	37.22	26.8	0.00	0.76	1953
1954	74850	1263	16.70	15.2	759	12.43	11.3	41	32.42	25.4	1.54	0.69	1954
1955	74760	1255	16.62	15.0	826	13.02	11.7	49	39.04	24.9	0.00	0.64	1955
1956	74830	1340	17.72	15.6	804	13.21	11.7	38	29.10	23.7	0.00	0.56	1956
1957	75360	1324	17.39	16.1	802	13.19	11.5	33	24.92	23.0	0.75	0.47	1957
1958	75580	1311	17.16	16.4	812	13.31	11.7	36	27.46	22.6	0.74	0.43	1958
1959	75400	1382	18.15	16.5	837	13.65	11.6	32	23.15	22.2	0.00	0.38	1959
1960	75450	1358	17.81	17.1	825	13.55	11.5	42	30.92	21.9	0.00	0.39	1960
1961	74590	1378	18.28	17.4	871	14.33	12.0	37	26.85	21.6	0.00	0.33	1961
1962	74910	1425	18.83	18.0	844	13.96	11.9	23	16.14	21.4	0.69	0.35	1962
1963	75000	1414	18.47	18.2	839	13.76	12.2	33	23.34	20.9	0.00	0.28	1963
1964	75260	1434	18.67	18.4	845	13.80	11.3	43	29.90	20.0	0.00	0.25	1964
1965	75500	1427	18.52	18.0	828	13.26	11.5	33	23.12	19.0	0.00	0.25	1965
1966	75760	1482	19.16	17.7	865	13.69	11.7	27	18.21	19.0	0.66	0.26	1966
1967	75910	1318	17.01	17.2	796	12.68	11.2	30	22.76	18.3	0.00	0.20	1967
1968	75220	1489	19.39	16.9	876	14.20	11.9	24	16.11	18.0	0.66	0.24	1968
1969	74880	1349	17.6	16.3	867	13.8	11.9	28	21.0	18.0	0.00	0.19	1969
1970	74470	1442	19.0	16.0	876	14.2	11.7	18	12.0	18.0	0.68	0.18	1970

PART II

EPIDEMIOLOGY

You shall see them on a beautiful quarto page, where
a neat rivulet of text shall meander through a
meadow of margin.

"The School for Scandal" I. i.
Richard Brinsley Sheridan, 1751-1816.

The total number of cases of infectious disease notified in Barnsley in 1970 was 918. This represented an increase over the previous year and was attributable to the prevalence of measles during the summer months. Notifications received afforded information regarding the following diseases.

Scarlet Fever:

73 cases were notified. Though this is double the figure for 1969, it was not a cause for concern. Reference to Table II will show that the incidence was spread fairly evenly over the year. There was therefore no reason to suspect that a source of infection of a particular strain of streptococcus had arisen.

Diphtheria:

Once again, no notifications in 1970.

Acute Meningitis:

5 notifications.

Measles:

There were 739 notifications. Reference to Table II will show that 615 of these were received during the four summer months. Development of measles immunisation will undoubtedly make incidences of the disease as high as in 1970 unlikely in the future. It is reassuring that the difficulties over reactions to the vaccine have been overcome and that supplies are now readily available.

The possibility of reactions following vaccination against measles have posed a very real problem in Barnsley where the community firmly believes that the disease is an inevitable and minor incident of normal childhood. In addition, there are parents who, if their child suffers a reaction, however slight, after any immunising procedure, refuse all further injections and persuade their friends to do likewise. Thus not only are difficulties encountered with the control of measles but vitally important protection against diphtheria and tetanus may well be withheld from an appreciable number of children. The fact that a child died from measles in Barnsley during 1970 emphasises the seriousness of the illness and the importance of prophylaxis against it. It would be most helpful if some or

all of the medico-fictional programmes put out by radio and television were to present in a dramatic form the dangers inherent in an attack of measles. This would probably be much more effective than any health education efforts launched under the auspices of real life members of the medical or nursing professions.

Infective Jaundice:

48 cases of this condition were notified, an increase of 14 over the previous year. Again it is difficult to assess the significance of these figures. It would seem that the incidence of this condition will call for careful observation during the next few years.

Whooping Cough:

20 notifications compared with 15 in 1969.

Dysentery and Food Poisoning:

30 cases of dysentery and 2 cases of food poisoning were notified.

The arrangements which have existed in Barnsley over the past fifteen years were continued whereby general practitioners advise the Health Department of cases of gastro-enteritis and the department then investigates these and reports the results to the doctor. Thus all notifications are fully confirmed bacteriologically. This is most valuable, particularly in dealing with the families of food handlers and in the detection of healthy carriers and sub-clinical cases. Tribute must here and now be paid to those general practitioners who loyally honour this arrangement, despite all the difficulties doing so entails.

Tuberculosis:

20 new cases of pulmonary tuberculosis and 3 cases of the non-pulmonary form were notified during 1970. Four persons died from the disease. (Table III).

The notifications show an increase of 8 over the record low number for 1969. This, however, ought not to be regarded as an increase in the incidence of the disease. Reference to Table IV shows that of these notifications, 14 were in respect of persons over 45 years of age. In such individuals the lesion is almost certainly one of long standing and notification indicates that a possible reservoir of infection has been detected and treatment for its elimination has been instituted.

Ever improving standards of hygiene, nutrition and housing have so increased the resistance of the younger generation to tuberculosis that cases amongst them today are due to repeated and massive exposure to doses of tubercle bacilli shed by a relative or close friend. Very often the individual who is shedding these bacilli is unaware that he or she is doing so. They have contracted tuberculosis in early life and because they have acquired some resistance to it, it has run a chronic and not very disabling course, the cough and sputum either being attributed to catarrh, "weak chest in the winter" or smoking.

The patient has thus learned to live with his condition and is usually blissfully unconscious that he is disseminating a dangerous infection in his immediate neighbourhood. His need for treatment is brought to light either because as a good citizen, he has submitted himself to routine mass x-ray or as a result of the "follow-up" investigations of the source of infection following the receipt of a notification. Modern treatment of tuberculosis is simple and effective so it is greatly to the advantage of even those with minor chest symptoms to submit themselves to investigation. If they have an infection they will get rid of the discomfort it causes them as well as ensuring that they are not spreaders of a dangerous and unpleasant disease. Thus, a moderate increase in notifications of tuberculosis amongst individuals past middle age is not an entirely unwelcome statistical phenomenon.

Venereal Diseases:

The figures for new cases attending Barnsley Special Treatment Centre and giving Barnsley addresses are:

Syphilis	..	..	..	..	..	..	..	..	..	1
Gonorrhoea	..	..	..	..	..	..	..	..	..	12
Other conditions	..	..	..	..	..	..	..	..	..	157

Once again the figures represent a decrease on the previous year and they either confirm that venereal disease has not become a serious problem in Barnsley or patients go elsewhere for treatment. Co-operation between the Health Department and the Special Treatment Centre could hardly be better. The standard of work done there is of an extremely high order and "follow up" undertaken by the authority's staff suggests that this is appreciated and that most infections in Barnsley people are treated at the Centre. The number of "other conditions" treated also suggests local confidence in the Centre.

Scabies:

Treatments carried out at the clinics during the year were as follows:

Children

Number treated	159
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Adults

Number treated	69
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PART II APPENDIX. TABLE 1.
Notifiable Infectious Diseases (excluding Tuberculosis) Age and Ward Distribution, as Corrected

NOTIFIABLE DISEASES		Number of cases notified in Barnsley in 1970						Total Cases in each Ward									Removed to Hospital						
		All Ages	Under 1 year	1 year and under 3 years	3 years and under 5 years	5 years and under 10 years	10 years and under 15 years	15 years and under 25 years	25 years and over	North Ward	South Ward	East Ward	West Ward	South-East Ward	South-West Ward	Central Ward	Ardley Ward	Monk Bretton Ward	Carlton Ward	Home Cases	Kendray Hospital	Barnsley District Gen. Hosp.	Other Hospitals
Scarlet Fever	73	1	5	22	26	14	3	2	7	2	5	2	3	—	1	3	31	19	73	—	—	—	—
Whooping Cough	20	2	2	3	11	2	—	—	6	—	4	—	—	—	—	5	3	2	19	1	—	—	—
Measles	739	51	249	212	222	2	2	1	54	16	14	60	74	31	5	171	177	137	733	6	—	—	—
Acute Meningitis	5	—	1	2	2	—	—	—	—	1	1	—	—	—	—	—	1	2	—	3	2	—	—
Dysentery	30	1	7	3	12	3	1	3	7	1	—	3	—	1	—	3	2	13	27	3	—	—	—
Food Poisoning	2	—	—	—	—	1	—	1	—	—	—	—	—	—	—	—	—	2	2	—	—	—	—
Infective Jaundice	48	—	1	4	10	21	6	9	4	2	3	1	6	9	—	8	10	5	43	1	3	1	—
Malaria	1	—	—	—	—	—	—	1	—	—	—	1	—	—	—	—	—	—	—	1	—	—	—
TOTALS	918	55	265	246	283	43	12	14	78	22	27	67	83	41	6	190	224	180	897	15	5	1	1

TABLE II. Notifiable Infectious Diseases (excluding Tuberculosis)
Table showing monthly prevalence during the year 1970.

NOTIFIABLE DISEASES	JAN.	FEB.	MARCH	APRIL	MAY	JUNE	JULY	AUG.	SEPT.	OCT.	NOV.	DEC.	TOTAL
Scarlet Fever ..	2	6	5	5	9	9	5	—	7	5	13	7	73
Whooping Cough ..	—	1	—	—	1	3	1	—	4	1	3	6	20
Measles ..	1	1	4	48	143	158	171	143	54	9	1	6	739
Acute Meningitis ..	2	—	—	—	—	—	1	—	1	1	—	—	5
Dysentery ..	3	1	2	8	2	6	4	2	—	1	1	—	30
Food Poisoning ..	—	—	—	—	2	—	—	—	—	—	—	—	2
Infective Jaundice ..	9	15	5	4	4	4	1	1	1	2	1	1	48
Malaria ..	1	—	—	—	—	—	—	—	—	—	—	—	1

TABLE III
Tuberculosis—Notifications and Deaths
For 15 years

YEAR	PULMONARY			OTHER FORMS OF TUBERCULOSIS			TOTAL TUBERCULOSIS DEATH RATE
	NOTIFIED	DIED	DEATH RATE PER 1000 LIVING	NOTIFIED	DIED	DEATH RATE PER 1000 LIVING	
1956	62	11	0.14	8	—	0.00	0.14
1957	56	7	0.09	6	3	0.04	0.13
1958	38	8	0.10	6	1	0.01	0.11
1959	28	3	0.04	4	1	0.01	0.05
1960	32	6	0.08	3	—	0.00	0.08
1961	22	5	0.07	2	1	0.01	0.08
1962	25	18	0.24	3	—	0.00	0.24
1963	35	5	0.07	2	—	0.00	0.07
1964	23	3	0.04	1	1	0.01	0.05
1965	24	5	0.06	3	—	0.00	0.06
1966	17	5	0.06	3	—	0.00	0.06
1967	23	5	0.06	5	1	0.01	0.07
1968	21	4	0.05	2	1	0.01	0.06
1969	12	7	0.09	4	1	0.01	0.10
1970	20	4	0.05	3	—	0.00	0.05

TABLE IV
Tuberculosis—New Cases and Deaths 1970
Classified into Age Groups

AGE PERIODS	NEW CASES				DEATHS			
	PULMONARY		NON-PULMONARY		PULMONARY		NON-PULMONARY	
	M.	F.	M.	F.	M.	F.	M.	F.
0—1 years	—	—	—	—	—	—	—	—
1—2 ..	—	—	—	—	—	—	—	—
2—5 ..	—	1	—	—	—	—	—	—
5—10 ..	—	—	—	—	—	—	—	—
10—15 ..	1	1	—	—	—	—	—	—
15—20 ..	—	—	—	1	—	—	—	—
20—25 ..	—	—	—	—	—	—	—	—
25—35 ..	—	1	—	1	—	—	—	—
35—45 ..	2	—	—	—	1	—	—	—
45—55 ..	3	1	1	—	—	—	—	—
55—65 ..	8	—	—	—	1	—	—	—
65—75 ..	2	—	—	—	1	—	—	—
75 and over	—	—	—	—	1	—	—	—
Totals ..	16	4	1	2	4	—	—	—

PART III

SOCIAL AND PERSONAL HEALTH SERVICES

National Health Service Acts, 1946-52

National Assistance Acts, 1948 and 1951

Ingratitude, thou marble-hearted fiend,
More hideous, when thou showe'st thee in a child,
Than the sea-monster.

"King Lear" I. ii.
William Shakespeare, 1564-1616.

HEALTH CENTRES

National Health Service Act, 1946, S.21

The Health Centre at Littleworth Lane provides purpose designed branch surgery accommodation for two groups of general practitioners. That at Laithes Lane, Athersley provides similar facilities for three groups. A full range of the authority's own services is also accommodated at both Centres.

Branch surgery accommodation is provided for one group practice at New Street Clinic and for another group practice at the clinic in adapted premises at Monk Bretton.

In addition, the authority has a purpose designed clinic at Hunningley Lane, Ardsley and has premises adapted for clinic purposes in Gawber Road and at Carlton.

CARE OF MOTHERS AND YOUNG CHILDREN

National Health Service Act, 1946, S.22

The services provided under this section at the end of 1970 were available at:

1. The Medical Services Clinic, New Street.
2. Clinic, Laithes Lane, Athersley.
3. Clinic, Littleworth Lane, Lundwood.
4. Clinic, Hunningley Lane, Stairfoot.
5. Carlton Clinic, Carlton.
6. The Old Council Offices, Monk Bretton.
7. Jordan House, Gawber Road.

BARNSELEY, ATHERSLEY, STAIRFOOT, LUNDWOOD AND CARLTON ANTE-NATAL CLINICS

Ante-Natal and Post-Natal Clinics:

Ante-Natal Clinics:

	BARNSELEY	ATHERSLEY	STAIRFOOT	LUNDWOOD	CARLTON]	TOTAL
1. No. of sessions held during year	52	49	52	47	26.5	226.5
2. No. of women who attended during the year	148	120	129	95	73	565
3. No. of new cases included in the above	139	99	99	71	62	470
4. No. of attendances made during the year	807	483	450	332	420	2,492

Post-Natal Clinics:

No Post Natal clinics were held during the year.

Note:

Of Barnsley's 148 Ante Natal Cases 18 were transferred to Barnsley General Hospital.

Of Athersley's 120 Ante Natal Cases 7 were transferred to Barnsley General Hospital.

Of Stairfoot's 129 Ante Natal Cases 7 were transferred to Barnsley General Hospital.

Of Lundwood's 95 Ante Natal Cases 12 were transferred to Barnsley General Hospital.

Of Carlton's 73 Ante Natal Cases 4 were transferred to Barnsley General Hospital.

Barnsley, Athersley, Stairfoot, Lundwood, Carlton, Jordan House & Monk Bretton Infant Welfare Clinics

INFANT WELFARE		BARNESLEY	ATHERSLEY	STAIRFOOT	LUNDWOOD	CARLTON	JORDAN HOUSE	MONK BRETTON	TOTAL
1.	No. of sessions held during year at centres	148	99	100	52	26.5	102	50	577.5
2.	No. of children who first attended at a centre during the year and at their first attendance were under 1 year of age	399	271	221	143	51	127	135	1,347
3.	No. of children who attended during the year and who were born in:—								
	1970.. . . .	356	260	178	128	42	103	130	1,197
	1969.. . . .	344	211	168	121	29	116	106	1,095
	1968-65	357	198	163	93	33	165	158	1,167
4.	Total No. of children who attended during the year	1,057	669	509	342	104	384	394	3,459
5.	No. of attendances during the year made by children who at the date of attendance were:—								
	0-1 years.. . .	3,309	2,329	1,871	1,300	456	1,252	1,357	11,874
	1-2 years.. . .	897	554	459	249	112	421	376	3,068
	2-5 years.. . .	317	217	189	103	33	176	136	1,171
6.	Total No. of attendances made during the year	4,523	3,100	2,519	1,652	601	1,849	1,869	16,113

Note:—Of Barnsley's 1,057 Infant Welfare cases, 46 attended the Paediatric clinic at New Street Clinic, and made 77 attendances in 40 sessions. In addition 91 school children made 197 attendances at the Paediatric Clinic at New Street Clinic. 148 children were referred to Specialists during the year.

Dental Care of Mothers and Young Children 1970:

Mr. G. White, L.D.S., Chief Dental Officer, reports:

1. Expectant and Nursing Mothers

The gradual fall in demand for treatment in this category over the past few years was reversed this year with a large increase in the number of teeth conserved. Patients requesting dentures, however, showed a further decrease which, when considered in conjunction with an increase in teeth extracted is unexpected, but accounted for by an abundance of emergency visits by patients.

2. Children under 5 years of age

It is pleasing to report that the fears expressed last year concerning the treatment of this very important age group, due to the departure of the authority's dental auxiliary were unnecessary. This has largely been due to the way in which Mr. Nteka has endeared himself to these newcomers to dental treatment. Indeed the increase in the number of fillings is proportionately twice as great as extractions. This is a welcome sign but unfortunately, extraction is still very much the rule rather than the exception as it could and should be. There can be no doubt that fluoridation of Barnsley's domestic water supply would significantly reduce the rate of dental decay and it is essential that the Health Committee give this matter further consideration.

The statistics for 1970 are presented as follows:

Dental Services for Expectant and Nursing Mothers and Children under 5 years—statistics for 1970:

A. Attendances and Treatment:

Number of Visits for Treatment During Year:

	CHILDREN 0-4 (INCL.)	EXPECTANT AND NURSING MOTHERS
First Visit	148	54
Subsequent Visits	117	68
Total Visits	265	122
Number of Additional Courses of Treatment other than the First Course commenced during year	—	—
Treatment provided during the year:		
Number of Fillings	106	51
Teeth Filled	103	45
Teeth Extracted	293	136
General Anaesthetics given	91	20
Emergency Visits by Patients	79	21
Patients X-Rayed	1	3
Patients Treated by Scaling and/or Removal of Stains from the teeth (Prophylaxis)	20	10
Teeth Otherwise Conserved	6	—
Teeth Root Filled	—	1
Inlays	—	—
Crowns	—	—
Number of Courses of Treatment Completed during the year	37	10

B. Prosthetics		CHILDREN 0-4 (INCL.)	EXPECTANT AND NURSING MOTHERS
Patients Supplied with F.U. or F.L. (First Time)	..	3	
Patients Supplied with Other Dentures	.. ..	3	
Number of Dentures Supplied	.. ..	9	
C. Anaesthetics			
General Anaesthetics Administered by Dental Officers		4	
D. Inspections			
Number of Patients given First Inspections During Year	.. ..	81	29
Number of Patients in A and D above who required Treatment	.. ..	57	29
Number of Patients in B and E above who were offered treatment	.. ..	56	29
E. Sessions			
Number of Dental Officer Sessions (i.e. Equivalent Complete Half Days) devoted to Maternity and Child Welfare Patients:			
For Treatment	.. ..	42	
For Health Education	.. ..	—

Orthopaedic Clinic:

The report of the work at the orthopaedic clinic for children under school age during the year is as follows:

Visits of Orthopaedic Surgeon	.. ..	12
New patients seen	.. ..	83
Re-examinations	.. ..	121

Relaxation Classes: (carried out by midwives):

	NEW STREET	ATHERSLEY	STAIRFOOT	LUNDWOOD	TOTAL
Sessions	.. 97	52	47	42	238
New patients	.. 141	39	59	36	275
Total attendances	814	212	334	212	1,572

Children requiring appliances have obtained these through the Beckett Hospital, Barnsley.

Psychiatric Services:

A Child Psychiatrist who conducts Child Guidance Clinics at the Education Authority's Centre is available to advise the medical and nursing staff on general and individual problems of emotional development and behaviour. Both mental health officers who are allocated to work in the child guidance team are State Registered Nurses and hold the Health Visitor's Certificate. They are also responsible for all mental health work amongst handicapped children of all ages.

Other Specialist Services:

The Consultant Ear, Nose and Throat Surgeon, the Ophthalmologist and the Paediatrician, who hold consultant clinics for school children are available for and see children under school age. When the authority is able to obtain the services of a speech therapist these are available for children under 5. Unfortunately, this post has been vacant since 1st September, 1968 and the post of audiology technician became vacant shortly thereafter.

Nursing Homes:

There are no nursing homes in the County Borough.

Homes for Mothers and Babies:

"*Ad hoc*" arrangements for expectant mothers were made with voluntary bodies in 10 cases during the year. This compares with 10 in 1969.

The "At Risk" Register

This was maintained throughout the year following the arrangements described in previous reports. The children on the register were kept under constant review and every effort was strained to ensure that as soon as a child was found to qualify for removal from the register, it was erased from it. Only if this is done can entry on the register fulfil its purpose.

In addition to the register maintained for children at risk for purely physical reasons is the "Special at Risk" register which was also continued. This contains the names of those children who are born into a few families whose history has shown that children born into them are at "special" risk for one reason or another, usually because the family is of the "problem" type or because there have been infant deaths in the family before. The risk here is not that the child should eventually prove to be handicapped but that there is a special risk—usually right from the beginning—that this child in such a family may die if special care and attention are not given. Some illegitimate births come into this category also. Families placed on this "special at risk" register are given very special attention designed towards avoiding "avoidable" risks to children born into such families. In fact most of them are on the register referred to in the section of this report which deals with "children likely to be neglected in their own homes."

At Risk Children

Remaining on the register at 31.12.70.

Simply at risk	..	..	..	..	..	..	..	..	237
Special at risk register	..	..	..	..	..	..	..	..	210

Congenital Deformities

The arrangements for the collection of information of children born with congenital deformities were continued throughout the year. Information is received from all sources concerned with new born children, the hospitals, general practitioners, midwives and health visitors as well as from the consultant paediatrician. This information is correlated to the list of classified malformations and is submitted to the Department of Health and Social Security.

Children reported to have congenital malformations in 1970—14.

Family Planning

Following receipt of Ministry of Health Circular No. 5/66, consideration was given by the authority as to the most satisfactory method of providing family planning advice for women requiring this for medical reasons. The Barnsley Branch of the Family Planning Association was already providing facilities in the town for those who sought it from them and a fee was chargeable. Discussions took place with the Association and an annual grant of £250 has been made on the understanding that cases specifically referred by the authority would be advised without cost.

This arrangement, whilst it has worked well could not by any means recompense the Family Planning Association for the services provided. Discussions were therefore initiated with the Association towards the end of the year with a view to concluding a full agency arrangement with payment based on a per case basis. These discussions were successfully concluded early in 1971 and the appropriate provision has been made in the authority's financial estimates for the year 1971/72.

Distribution of Welfare Foods

As in the past the practice was continued of making available certain proprietary brands of dried milk and other proprietary diet supplements at a reduced price. This concession is, of course, subject to the preparation being recommended by a member of the medical staff. The total receipts resulting from these transactions in 1970 amounted to £4,537 12s. 11d., (£3,550 17s. 2d. in 1969).

The health authority undertakes the distribution of the various welfare foods and diet supplements provided by the Department of Health and Social Security, in continuation of the scheme previously operated by the Ministry of Food from local food offices. The organisation described in previous reports has operated well and no difficulties in working it were encountered.

WELFARE FOODS

	BARNESLEY	ATHERSLEY	STAIRFOOT	LUNDWOOD	JORDAN HOUSE	MONK BRETTON	TOTAL
Free Issues							
DRIED MILK							
Total cost to the committee:							
1969	NIL	NIL	NIL	NIL	NIL	NIL	NIL
1970	NIL	NIL	NIL	NIL	NIL	NIL	NIL
Receipts for the year:							
1969 Dried Milk..	£1,453 11 9	£447 7 9	£459 6 7	£285 16 11	£522 2 0	£382 12 2	£3,550 17 2
Welfare Foods ..	£962 13 2	£243 1 6	£216 8 4	£144 19 8	£195 19 8	£158 3 6	£1,920 15 10
1970							
Dried Milks	£1,820 12 6	£656 11 1	£667 14 4	£540 10 8	£382 19 6	£496 4 10	£4,537 12 11
Welfare Foods	£920 16 8	£247 13 4	£193 3 2	£159 14 4	£137 11 2	£202 19 10	£1,861 18 6

WELFARE FOODS

	NATIONAL DRIED MILK										
	COD LIVER OIL		VITAMIN A & D TABLETS		ORANGE JUICE		FULL CREAM			HALF CREAM	
							Free	Paid	Full Price	Free	Paid	Full Price
BARNSELY	189	328	34	559	867	6,624	98	687	1,543	—	3
ATHERSELY.. ..	27	103	4	129	148	1,260	121	232	542	—	—
STAIRFOOT	68	56	3	138	171	1,934	72	77	161	—	—
LUNDWOOD	19	72	2	138	87	887	76	143	341	—	—
JORDAN HOUSE ..	16	87	—	155	64	1,360	7	35	110	—	—
MONK BRETTON ..	—	127	—	43	4	1,952	1	63	207	—	—
	319	773	43	1,162	1,341	14,017	375	1,237	2,904	—	3

Comment:

The figures for clinic attendances offer little, if any material for fresh comment. The services offered at the clinics remained unchanged and the demand for them has not altered to any material extent for several years past. The inability of the authority to recruit a speech therapist is most regrettable and the vacancy for an audiology technician is hardly less so. Barnsley is by no means alone in facing the problem the shortage of members of the "professions supplementary to medicine" poses. In fact, on one occasion Barnsley's advertisement for a speech therapist announced only one of thirty-eight similar vacancies. In these circumstances it would appear that the presence of a series of speech therapists covering a period of 10 years represented most unusual good fortune.

In view of the national shortage of these most essential members of the Health Service it would seem as if the organisations of employing authorities would be advised to re-examine the arrangements for training, the conditions of employment and above all, the financial prospects which are offered to them.

It is interesting to note that the number of requests for accommodation in Mother and Baby Homes remained the same as in 1969.

The most promising feature of this part of the report is the decision on the part of the authority to extend with the assistance of the Association, activities in the field of family planning.

MIDWIFERY

National Health Service Act 1946, S.23

At the end of 1970, 8 midwives, 4 of them approved teacher midwives were in post. Details relating to the staff are contained in the list at the back of this report.

The Non-Medical Supervisor of Midwives is the Authority's Chief Nursing Officer. The Deputy Non-Medical Supervisor, Miss Abbott, left the authority's service in August to take another appointment. Owing to the reorganisation of the management structure of the authority's nursing services, a deputy non-medical supervisor had not been appointed by the end of the year. Administration of the service in the absence of the Chief Nursing Officer was, as an interim measure undertaken by the Senior Midwife.

Medical Aid

Medical aid was summoned in accordance with the provisions of Section 14(1) of the Midwives Act 1951 as follows:—

- | | |
|---|----|
| 1. Where the medical practitioner had arranged to provide the patient with maternity services under the National Health Service | 12 |
| 2. Other | 2 |

Domiciliary Midwifery and Institutional Confinement

During 1970 in Barnsley:—

- 1 woman who had not booked a doctor was attended by a domiciliary midwife.
- 68 women who booked a doctor were attended by municipal midwives and a doctor was present during labour.
- 11 women who booked a doctor were attended by municipal midwives and a doctor was present at delivery.
- 21 women who booked a doctor were attended by municipal midwives and a doctor was present at labour and at the time of delivery of the child.
- 264 women who booked a doctor were attended by municipal midwives and a doctor was not present at either labour or delivery of the child.
- 957 women who were confined in hospital were discharged before the 10th day of the puerperium. They were attended between the time of discharge and the 14th day by domiciliary midwives provided by the health authority (781 in 1969).
- 4,513 visits were paid to women who were discharged from hospital before the 10th day of the puerperium.
- 5,817 visits were paid by midwives during the puerperium (up to the 14th day) to patients delivered at home (5,883 in 1969).
- 74 post-natal visits were paid by midwives (after the 14th day).
- 2,680 ante-natal visits were paid to women in their own homes by the authority's midwives (2,157 in 1969).
- 430 other visits were made by midwives.
- 368 attendances at ante-natal clinics were made by midwives.
- 1,510 attendances were made by expectant mothers to ante-natal classes including relaxation exercises (held by midwives).
- Number of miscarriages attended—6.

Analgesia supplied

Entonox (Nitrous Oxide 50% and Oxygen 50%)
The Tecota Mark 6 Inhaler
Pethidine Hydrochloride
Dechloralphenazone tablets.

Supervision of Midwives

During the year home visits were made to inspect equipment, check the registers and confirm the safe storage of drugs supplied.

Monthly meetings were held to give and receive current policy and information appertaining to midwifery.

Both the hospital and maternity home were visited with full co-operation of the respective matrons who discussed the whole range of midwifery and extended invitations to see the maternity department.

Test for Congenital Dislocation of Hip

The test is carried out on all babies by the midwives. One case was diagnosed during the year.

Obstetric Emergency Service

The obstetric team was called out 7 times as follows:—

Retained placenta	.. .. .	3
Ante-partum haemorrhage	.. .. .	3
Breech presentation	.. .. .	1

Midwifery Education

Second Part Midwifery Training:

19 pupil midwives completed their domiciliary training (3 months)

15 were successful and were entered on the Roll of Midwives.

Obstetric Course:

18 student nurses received the 5-day domiciliary course.

Observation visits

22 student nurses spent one day observing various aspects of domiciliary midwifery as part of their introduction to community care.

Post-Graduate Courses

Members of the midwifery staff attended courses in accordance with the requirements of the Central Midwives Board. Other midwives attended a Mothercraft and Relaxation Course and Sisters Study Days. One midwife commenced on a day release course for the Tutor Midwifery Diploma for one academic year.

Health Education

Courses consisting of 8 classes each were held during the year for mothercraft and relaxation. Midwives and health visitors gave the talks.

Screening the Newborn for Phenylketonuria

The Guthrie Blood Test for Phenylketonuria was adopted as the standard screening procedure on 1st April, 1970 after the successful conclusion of discussions with the hospitals and general practitioners. The scheme adopted ensures that no baby escapes screening and that there is

no duplication of tests. One positive finding (confirmed by re-test) was received. The follow-up of this demonstrated the effectiveness of the arrangements made at the time of the introduction of the scheme.

Peri-natal Survey

Members of staff took part in this survey which was under the joint auspices of the National Birthday Trust Fund and the Royal College of Obstetricians and Gynaecologists.

Comment:

Statistics relating to the work of the midwives show little material variation when compared with 1969. The most significant figure is the increase in the number of women discharged from hospital before the 10th day of the puerperium.

The opening of the new maternity wing of the Barnsley District General Hospital took place too late in the year to have any marked effect on the statistics. There is little doubt, however, that the alterations in maternity hospital arrangements will be reflected in the figures for future years.

The authority's midwives continue to play their part in conjunction with the hospital in the education of midwives and in the instruction in domiciliary obstetric care of student nurses. This is an important aspect of the work of the service.

HEALTH VISITING SERVICE

National Health Service Act, 1946, S.24

The figures showing the number of visits made by health visitors during 1970 as compared with those of the two previous years are as follows:

	1968	1969	1970
Children under 5 years visited for the first time ..	6471	5789	6068
Children under 1 year: 1st visit	1415	1287	1366
Total	6144	6121	6374
Children between 1 and 2 years visited	4407	4877	5243
Children between 2 and 5 years visited	9580	8283	9387
Total number of visits made to children under 5 years	20131	19281	21004
Expectant Mothers: 1st Visit	609	540	655
Total Visits.. .. .	999	864	1072
Neonatal Death Enquiries	26	32	21
Stillbirth Enquiries	24	40	17
Visits to Tuberculous Households	385	308	365
Visits re non-Tuberculous chest conditions	274	182	157
Gastro-Enteritis enquiries	1959	1200	861
Ineffective visits	5824	3711	4578
Total Households visited	25953	20272	22858
Geriatric visits (to persons aged 65 and over)	4233	4465	5500
Visits to the mentally disordered	113	86	154
Visits to chronic sick persons under 65 years of age..	893	601	812
Hospital after-care visits	153	179	163
Social and Moral Welfare visits	1314	922	1257
Visits to problem families	2580	1756	1708
Visits to households re infectious diseases	2409	1849	998

On 31st December, 1970, the staff in post was as follows:

Superintendent Health Visitor and School Nurse	1
Senior Health Visitor and School Nurse	4
Area Health Visitor and School Nurse	10
State Registered Nurse	1
State Enrolled Nurse	6
Student Health Visitor (Leeds University)	1

Certain staff changes took place during the year and these are indicated in the staff list at the end of the report.

The work of the health visitors during 1970 followed the pattern of recent years. Visiting amongst infants and young children fluctuated with the birth rate and a continuously increasing demand was recorded from amongst the elderly. Not only are more visits being paid to the "over 65's" but the time spent on each visit tends to increase if a useful assessment of abilities and needs is to be made.

Classes in mothercraft have been carried out throughout the year and these are combined with relaxation classes held by the domiciliary midwives. These are valuable in enabling the health visitors to establish a relationship with expectant mothers without the necessity for carrying out ante-natal visits in the home. These to some extent achieve little more than duplication of the work done by the midwife.

A great deal of educational work was also done by the health visitors during the year by contact with groups within the community, by individual discussion and in their capacity as school nurses. Mention of the latter activities is made in that part of the report dealing with School Health.

Co-operation between General Practitioners and the Health Visiting Staff:

In previous years, references have been made to the very great difficulties which lie in the way of direct attachment in the classical form in Barnsley, the principal one of these being the manner in which the practices of the various groups of doctors are geographically distributed over the County Borough area. Despite this, every effort is made to maintain as close as possible a contact between the practitioners and the service even if this can only be achieved informally. In 1970 liaison was continued along these lines. This liaison was facilitated when the purpose designed surgery suites at Athersley and Lundwood Health Centres became available. It was thus possible for a health visitor to be available on the premises whilst the surgery sessions were in progress.

Arrangements for follow-up of Hospital Cases by Health Visitors:

Mention of this is made in that part of the report devoted to Care and After-Care and it would seem that this is where such arrangements should be described. However, the greater part of medico-social work in the community is done on behalf of the local health authority by the health visitor and mention of these arrangements is made here in compliance with Circular 1/71.

Close contact is maintained between the Medical Officer of Health and the Superintendent Health Visitor. Lists of patients discharged and the requirements of any special cases are forwarded as and when necessary. The Medical Officer also receives copies of "out-patient and discharge letters" from the Consultant Paediatrician where follow-up appears necessary in the case of children attending local hospitals. In the case of geriatric patients, their problems are reviewed each week at a case conference between the Consultant Geriatrician and the health authority's staff.

In addition to this, a senior health visitor attends every hospital paediatric clinic in Barnsley as well as other hospital out-patients where her services are likely to be required. This includes chest hospitals and clinics, geriatric clinics and the special treatment clinic. In all, the health visiting staff attended some 204 hospital sessions during the year.

Comment:

The work of this Service during 1970 followed the trends established over several of the previous years. This calls for little in the way of comment. Each year, the effect of the increased number of aged people in the community becomes more apparent and the time can not now be far distant when the elderly will be claiming more of the health visitor's time than the very young. This is not perhaps greatly out of line with the present trend of social development.

The increasing degree of interest and importance which is being accorded to children by the community is having its effect. The mass media under the stimuli of popular demand are providing information on health and hygiene which is having a surprising degree of impact upon the parents of young children. They frequently seek advice on the interpretation of facts they have picked up on radio, television or from the papers. It is therefore not so necessary for the health visitor to press home the lessons of preventive paediatrics—she is now sought out and asked about them.

This in turn leaves her with more time to devote to the older members of the community. They are less receptive to communication in the modern idiom. With them therefore the health visitor's training as an impartor of knowledge and an assessor of need can be employed to its full advantage.

HOME NURSING SERVICE

National Health Service Act, 1946, S.25

The figures for the past five years are as follows:—

	1966	1967	1968	1969	1970
Cases	2,031	1,919	1,890	2,016	1,935
Visits	36,461	34,992	40,226	42,597	44,139
Whole-time nurses	16	16	16	16	16
Part-time nurses				3	3

An analysis of the cases nursed during the year is as follows:—

TYPE OF CASE	NUMBER OF CASES	NO. OF VISITS PAID TO THESE PATIENTS
Tuberculosis	2	21
Influenza	3	16
Pneumonia	37	492
Maternal Complications	10	36
Erysipelas	2	21
Miscarriage	2	18
Carcinoma	118	3,299
Burns and Scalds	13	202
Diabetes	42	3,662
Post-operative	215	3,098
Bones and Joints	90	3,518
Eye, Ear, Nose and Throat	68	303
Cerebral Haemorrhage	85	2,686
Cardiac	92	2,299
Circulatory	310	6,654
Chest, other than pneumonia	254	6,139
Skin	54	1,582
Others	538	10,093
	<hr/> 1,935	<hr/> 44,139

Patients in the above figures who attended clinics:—

Visits only 3,238

Types of injections given:

Insulin	27	3,021
Penicillin	171	687
Streptomycin	19	478
Diuretic	32	636
Haematinic	105	1,183
Sedative	34	637
Others	408	10,065
	<hr/> 796	<hr/> 16,707

Night Service:

	NUMBER OF CASES	NO. OF VISITS PAID TO THESE PATIENTS
Cases visited between 8.00 p.m. and 6.00 a.m. (included in the above figures)	131	1,159
Night care cases	20	34

Age Groups Nursed:

Under 5 years	121	474
5-15 years	59	341
16-65 years	695	14,591
Over 65 years	1,060	28,733

Discharges:

Convalescent	560
Hospital	261
Died	191
For other causes	437

Classification of cases nursed:

Medical	1,361
Surgical	336
Tuberculosis	2
Maternal complications	13
Others	223

Chiropody Sessions:

No. of sessions	196
No. of patients	451
No. of attendances	1,435

Bathing Sessions (held at Handicapped Persons Centre):

No. of sessions	139
No. of patients	704

Management Structure of the Authority's Nursing Services

In accordance with the request contained in the Department of Health and Social Security Circular 13/70, a review of the authority's nursing services was carried out. This was considered in relation to the recommendations contained in the Report of the Working Party on Management Structure of Local Authority Nursing Services. The Council accepted the principles set out by the working party and decided that the recommendations should be implemented.

Accordingly in November, Mrs. M. E. L. Goody, Superintendent Home Nurse and Non-Medical Supervisor of Midwives, being suitably qualified was appointed Chief Nursing Officer and arrangements put in

hand whereby assimilation of other members of the authority's senior nursing staff into the new structure could proceed without delay.

Apart from this the changes in staff which took place during the year are, as is the usual practice, recorded in the staff list at the end of the report.

Report of the Chief Nursing Officer on the Home Nursing Service:—

The statistics relating to the Home Nursing Service indicate that, as in recent years and despite increasing geriatric hospital facilities, the majority of patients who were nursed in the community were over 65 years of age. When the number of new patients is examined it will be seen that though there is a small overall decrease in the figure, the proportion classified as geriatric is higher. Although the number of visits simply to give injections has fallen, the total number of nurses visits is up by over 1,500. With more geriatric patients calling for more involved nursing procedures at each visit, this represents a greater increase in the work load than would appear from a casual examination of the figures.

Again, patients social and family conditions contribute to the nurses burdens in a manner which may not be immediately apparent. Thus nursing care may be required by one of an elderly couple living on their own. The other one is quite often unable to lift the patient or do so many of the things which are done ordinarily by the patient's relatives. Indeed it is not unknown for the nurse to find the patient's elderly spouse also to be in need of care. In circumstances such as this it may become necessary for the nurses to visit in pairs.

Recruitment and establishment problems have been more strongly emphasised by the increase in the work load than in previous years. Absences due to sick and maternity leave, vacancies and arrangement of holidays have all contributed to the increasing pressures on the service. On this account it is becoming urgently necessary to find a means of increasing the flexibility of the authority's establishment of nurses. This should be aimed at the recruitment and training of suitable nurses when these are available rather than attempting to do so only after vacancies have occurred.

A particular problem of this kind has been the inability to recruit a second male nurse. There is more than sufficient urological nursing and the care of heavy male patients to occupy the whole of the time of two male nurses. With only one in post, a strain is placed on the service in arranging off duty and leave, particularly when exceptionally heavy or difficult cases are involved.

Despite these several problems and difficulties, the staff has combined to provide the quietly efficient service which has come to be accepted as traditional in Barnsley.

In the early part of the year arrangements were made for the Home Nursing Service to undertake the provision of bathing sessions for the elderly handicapped at the Handicapped Persons Centre in Moorland Avenue where there is a purpose-designed bathroom. A mobile Mecanoids Ambulift was obtained to facilitate those whose locomotory functions are impaired. It was thought at the outset that very considerable encouragement might be necessary to induce patients to make use of these sessions. However, before the end of the year it was found necessary to ration attendance and even to institute a waiting list. The patients are transported to the Centre in small groups by the Handicapped Services minibus and light refreshments are available for those waiting their turn in the bathroom.

Thus, the bath sessions are taking on the function of a social occasion for a proportion of the patients. In addition, the nurses are forming a much closer relationship with the Social Services Department.

1970 saw the rise of new and increased interest in nurse education within the authority's service. A scheme was developed and approved whereby pupil nurses at the Barnsley and District General Hospital were enabled to take an integrated course allowing them to obtain both the assessment for State Enrolment and the assessment for the certificate in home nursing for S.E.N's. of the Queen's Institute of District Nursing. Eighteen pupil nurses successfully completed this integrated course. In addition, four S.E.N. members of the Health Visiting Service obtained the Queen's Institute Certificate and the special qualification of the Institute in Public Health Nursing.

The training of State Registered Nurses for the National Certificate in Home Nursing was continued as in the past and two members of the authority's staff obtained the certificate.

These results are most gratifying. They show that despite the pressures experienced during the year, the Service has maintained the tradition of increasing and expanding the educational opportunities available to the nursing profession. This reflects great credit on the members of the staff who have undertaken instructional duties.

Night Nursing

The arrangements whereby night nursing visits are undertaken on a rota system by the staff were continued throughout the year without incident.

Night Care Service

Concentrated skilled nursing care at night by a specially assigned nurse was afforded to 20 patients for various reasons. Most of these cases were terminal.

Home Nursing Clinics

Attendances at these fluctuated at all the Health Centres except New Street. A home nursing clinic is made available at the latter to accommodate patients whose times of attendance for treatment may be dictated by their hours of work. Full advantage was taken of this facility during the year.

Rehabilitation Aids and Loans

Each year this service has to meet an increasing demand. Despite additional new equipment and replacement of worn out items, a waiting list seems to have become inevitable. Part of this problem arises from "Loss of equipment". There are a number of reasons for this which might be summarised as "frailty of human nature" on the part of the recipients. Various methods have been instituted to keep track of loans but to be effective, the time these consume raises the question of how far they are an economic proposition. This disappearance of loans can only be regarded as yet another manifestation of the lack of social responsibility said to be so prevalent at present.

Linen, Loan and Laundry Service

The increase in geriatric patients cared for resulted in this service being utilised to the full in 1970, without the accustomed remission in demand during the summer months.

Bathing Sessions

At the sessions already mentioned held three mornings per week at the Handicapped Persons Centre in Moorland Avenue, 704 patients attended. The installation in October of the mobile Mecanoids Ambulift enabled the sessions to become available to patients with a much wider range of severe handicaps.

Chiropody

The extension of this service when an additional part-time chiropodist became available enabled more patients to receive treatment more quickly. However, the arrangement whereby assessment is carried out by a member of the nursing staff was continued. Thus the chiropodists are free to deal with those patients whose feet call for more than simple nursing procedures.

Provision of Equipment for Incontinent Patients

This is provided for patients of all ages where it is necessary. There has been a large increase in the demand for incontinence pads.

Other Equipment

Disposable syringes and pre-packed sterile dressings are now used exclusively in the Service. Extensions of the principle of using "disposables" were tried out and some of these were adopted.

Post-graduate Courses

Two district nursing sisters attended the practical instructors course.

Loans—Statistics—1970

The following figures relate to the loan of sick room requisites to those nursed at home during 1970:

ARTICLES LOANED	LOANED	STILL ON LOAN
	DURING YEAR	AT END OF YEAR
Air rings	58	41
Wheelchairs	68	34
Mackintosh sheets	23	33
Bed cradles	22	25
Crutches (pairs)	30	11
Urinals	90	94
Bed pans	162	85
Bed rests	95	66
Sorbo beds	28	21
Draw sheets	85	54
Bedsteads	31	24
Cots	1	—
Pulley and fittings	8	9
Commodes	68	76
Walking aids	47	80
Walking sticks	13	19
Wooden bath seats	10	22
Lavatory seats	4	4
Fracture boards	28	31
Bath rails	2	8
Nightgowns	—	2
Large sheets	2	2

ARTICLES LOANED	LOANED DURING YEAR	STILL ON LOAN AT END OF YEAR
Bath mats	25	40
Toilet frames	1	1
Seat unit	1	—
Cot side	1	1
Rollator walker	1	1

Visits made by staff to check on loans—253

Articles laundered—15,711.

VACCINATION AND IMMUNISATION

National Health Service Act 1946, S.26

Vaccination against Smallpox:

AGE AT DATE OF VACCINATION	NUMBER VACCINATED	NUMBER RE-VACCINATED
0-3 months	—	—
3-6 months	1	—
6-9 months	1	—
9-12 months	1	—
1 year	348	—
2-4 years	32	3
5-15 years	21	15
Over 15 years	69	204
TOTAL	473	222

Immunisation against Diphtheria (in combination)

CHILDREN BORN IN YEAR	NO. OF CHILDREN COMPLETING COURSE OF PRIMARY INJECTIONS IN 1970	NO. RECEIVING RE-INFORCING DOSE IN 1970	TOTAL
1970	24	—	24
1969	798	9	807
1968	216	27	243
1967	16	6	22
1966-1963	122	820	942
Others under 16 years	4	4	8
Others over 16 years	—	4	4
TOTAL	1,180	870	2,050

Immunisation against Whooping Cough (in combination) number completing Primary Course

YEAR OF BIRTH	NUMBER OF CHILDREN
1970	24
1969	785
1968	209
1967	16
1966-1963	13
Others under 16 years	—
Others over 16 years	—
TOTAL	1,047

Vaccination against Measles

YEAR OF BIRTH	NUMBER OF CHILDREN
1970	—
1969	202
1968	303
1967	120
1966-1963	563
Others under 16 years	8
Others over 16 years	—
TOTAL	1,196

Vaccination against Rubella

YEAR OF BIRTH	NUMBER OF CHILDREN
1970	—
1969	—
1968	—
1967	—
1966 to 1963	—
Others under 16 years	594
Over 16 years	—
TOTAL	594

Immunisation against Tetanus

A total of 1,197 children received a course of immunisation against tetanus, either combined with other antigens or against this condition alone.

A further 35 persons over the age of 16 years were also immunised against this disease.

The Casualty Department at Beckett Hospital is provided with a record of all persons immunised against tetanus.

Immunisation against Poliomyelitis

	NO. GIVEN 3 DOSES DURING THE YEAR	NUMBER WHO AT 31.12.70 HAD RECEIVED	
		1 DOSE ONLY	2 DOSES
Children born 1970	8	151	272
Children born 1969	820	63	172
Children born 1968	224	19	25
Children born 1967	27	18	9
Children born 1966-1963 ..	193	18	24
Children under 16 years ..	19	2	1
Others over 16 years	47	17	17
	1,337	288	520

No. of individuals given reinforcing doses of Oral Vaccine during the year—894.

No Salk type injections were given during the year.

Immunisation against Anthrax

2 Abattoir employees were given a reinforcing dose of anthrax vaccine and 2 further employees completed a primary course during the year.

Yellow Fever

As in the past, these injections are given at the Medical Services Clinic, New Street, Barnsley. A fee of £1.05 is charged and an International Certificate of Vaccination supplied. Injections were as follows:—

Adults	151
Children	46
	<u>197</u>

Vaccination and Immunisation Facilities

All expectant and nursing mothers, infants, toddlers and school children can receive immunisation or vaccination against any of the diseases included in the authority's programme at any of the appropriate doctor's sessions held in any of the authority's clinic premises. If, of course, the medical officer in charge finds some contra-indication for carrying out the procedure, the patient will be advised accordingly. In addition to these arrangements, the special sessions for immunisation and vaccination were continued at New Street Clinic throughout the year.

Comment:

The statistics for 1970 relating to immunising procedures are very much what might be expected in a year in which no "scare" occurred. There is a small but welcome increase in the number of children completing the primary course against diphtheria/tetanus. Measles vaccination shows an increase over the previous year and this should be even greater in future years now that the difficulties in the supply of vaccine have been overcome.

With a suitable vaccine becoming available during the year, immunisation against Rubella was introduced and offered through the schools to girls in the appropriate age groups. The response to the offer was most satisfactory. There is every reason to hope that this will become a routine procedure in all schools attended by girls. It will be most interesting to see if the expected effect in reducing the number of children born with congenital abnormalities will be achieved. As the actual procedure is simple and does not appear to be accompanied by any unpleasant reaction, it should be readily acceptable and unlikely to affect the acceptance rates for other procedures.

AMBULANCE SERVICE

National Health Service Act 1946, S.27

The following report has been received from the Chief Fire and Ambulance Officer:—

Arrangements with other Authorities

This authority continues to work most amicably with the Ambulance Service of the West Riding County Council.

By arrangement infectious diseases, emergency and maternity cases are removed from certain parts of the county territory to hospitals within the County Borough. A proportion of these discharges from hospitals within the Borough are returned into the West Riding.

The financial arrangements made in 1969 were reviewed during the year and a slight adjustment made.

Other Authorities:

With authorities other than the West Riding County Council, an approved scale of charges for ambulance transport undertaken by one authority on behalf of another is laid down. These charges are reviewed from time to time.

Authority to order ambulances

Requests for the Ambulance Service are not normally accepted from the general public, only from—

Doctors

Hospitals

Other Authorised persons.

Emergency cases, i.e. street or works accidents and maternity cases are accepted from any source.

Return of ambulance patients conveyed

This return is shown on a monthly basis, sub-divided into ordinary calls undertaken for patients within the County Borough and for similar calls undertaken on behalf of other authorities.

Figures for 1969 are given for comparison.

Return of Ambulance Patients Conveyed.

MONTH	COUNTY BOROUGH				WEST RIDING AND OTHER AUTHORITIES				GRAND TOTALS					
	ORDINARY		EMERGENCY		TOTALS		ORDINARY		EMERGENCY		TOTALS			
	1969	1970	1969	1970	1969	1970	1969	1970	1969	1970	1969	1970		
JANUARY ..	2449	2230	223	249	2672	2479	47	64	53	83	100	147	2772	2626
FEBRUARY..	2004	2135	192	196	2196	2331	75	66	76	68	151	134	2347	2465
MARCH ..	2011	2092	201	231	2212	2323	75	70	65	76	140	146	2352	2469
APRIL ..	2228	2297	213	219	2441	2516	64	51	46	76	110	127	2551	2643
MAY ..	2159	2204	192	211	2351	2415	44	25	46	66	90	91	2441	2506
JUNE ..	2244	2714	204	215	2448	2929	67	55	43	45	110	100	2558	3029
JULY ..	2140	2289	211	229	2351	2518	64	47	46	55	110	102	2461	2620
AUGUST ..	1970	2090	184	229	2154	2319	63	39	47	74	110	113	2264	2432
SEPTEMBER	2185	2179	181	209	2366	2388	44	28	49	57	93	85	2459	2473
OCTOBER ..	2360	2462	217	217	2577	2679	50	32	54	58	104	90	2681	2769
NOVEMBER	2337	2513	193	188	2530	2701	52	40	72	66	124	106	2654	2807
DECEMBER..	1977	2482	257	248	2234	2730	68	31	85	84	153	115	2387	2845
TOTALS ..	26064	27687	2468	2641	28532	30328	713	548	682	808	1395	1356	29927	31684

Details of Patients Conveyed

In the year under review, the Ambulance Service has been called upon to deal with 31,684 ordinary patients, compared with 29,927 in 1969. This shows an increase of 1,757 ordinary patients carried.

The number of patients carried on behalf of the West Riding County Council and other Authorities shows a decrease of 39 patients.

To hospitals etc., within the Borough:

Beckett Hospital	..	..	..	..	..	7,341
Barnsley General Hospital	..	..	..	..	..	2,539
Pindar Oaks	..	..	..	..	..	84
Kendray Hospital	..	..	..	..	..	1,459
New Street Clinic	..	..	..	..	..	318
Queens Road Clinic	..	..	..	..	..	3,131
Mount Vernon	..	..	..	..	..	540
Others	..	..	..	..	..	139

To Hospitals out of the Borough:

Wakefield	..	..	..	..	..	103
Wath	..	..	..	..	..	155
Penistone	..	..	..	..	..	120
Leeds	..	..	..	..	..	38
Sheffield	..	..	..	..	..	3,061
Mexborough	..	..	..	..	..	8
Huddersfield	..	..	..	..	..	44
Doncaster	..	..	..	..	..	26
Others	..	..	..	..	..	26

To Home Addresses within the Borough from:

Beckett Hospital	..	..	..	..	..	5,484
General Hospital	..	..	..	..	..	735
Kendray Hospital	..	..	..	..	..	157
New Street Clinic	..	..	..	..	..	311
Queens Road	..	..	..	..	..	2,135
Mount Vernon	424
Others	236

To Home Addresses out of the Borough:

West Riding	1,356
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House to house removals (Borough)	18
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Journeys made—Patients not conveyed	1,696
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					31,684
Mentally retarded children	8,116
Midwives	39
Geriatrics	7,428
					<hr/> 47,267

During the year, 7,349 journeys were made to convey the 57,267 patients, an average of 6.4 patients per journey, a slight increase on the average for the previous year.

Mentally Retarded Children

Mentally retarded children are taken by coach to and from the Centre each day. During 1970 the coaches made 428 journeys and carried 8,116 patients.

Geriatrics

988 journeys were made to carry the 7,428 patients to and from the Day Hospital at Kendray.

Vehicles

Two ambulances were replaced during the year.

Coronary Ambulance

The Coronary Ambulance has now been in service for a full year and during this period the vehicle covered 4,812 miles and conveyed 422 patients. Whilst it is not possible to state specifically how many lives have been saved by this service, it is reasonable to assume that all the patients have benefitted from the prompt specialised treatment they received and no doubt, many owe their lives to this prompt attention.

There is little question that the first year's working alone has proved beyond doubt that there is a definite need for this type of specialisation within the Ambulance Service.

Establishment

	AUTHORISED 31.12.70	ACTUAL 31.12.70
Sub Officer	1	1
Leading Drivers	4	4
Amb. Driver/Attendants	24	24
	<hr/> 29	<hr/> 29

Mileage

During the year, the fleet covered 157,696 miles on ambulance duties comprising of:—

Ambulance	72,767
Coach	80,117
Coronary Ambulance	4,812

For comparison purposes the figures for previous years were as follows:—

1964	145,196
1965	134,057
1966	129,800
1967	133,314
1968	138,595
1969	143,757
1970	157,696

Communications

Calls for the Ambulance Service, by Doctors, Members of the Public, and other authorised persons are received on Barnsley 3366 and in emergency cases through the '999' system.

Direct lines are in use between the Control Room and the Barnsley General and Beckett Hospitals.

Short Wave Radio

It is difficult to imagine how the Ambulance Service ever functions efficiently without the use of Short Wave Radio. This equipment has now become an essential priority with the ever-increasing need for Ambulance Transport, and without it the cost of running the Service would certainly escalate at a much greater speed.

All the Ambulance Vehicles are fitted with the latest transistorised equipment which provides excellent communication facilities.

Conveyance of Midwives

The service continues to place a vehicle at the disposal of the Medical Officer of Health for the conveyance of Midwives, weekdays from 5.30 p.m. to 9.00 a.m., the following morning and Saturdays from 12 noon until the following Monday at 9.00 a.m.—also Public and Bank Holidays.

During 1970, 39 requests for transport by the midwives were dealt with.

Medical Officer of Health, Mental and Home Nursing

By arrangement with the Medical Officer of Health, the Control Room staff can contact with a minimum of delay, at the request of a medical practitioner at weekends or Bank Holidays the services of the Medical Officer of Health, a Mental Welfare Officer or the Chief Nursing Officer.

Liaison with Hospitals

Liaison continues to be excellent with the Hospital Management Committee. Mr. Nunn, Mr. Garret, Mr. Depledge and Mr. Wood continue to co-operate in every way and help to keep ambulance requirements to a minimum.

Equipment

All ambulances are equipped with Resuscitation Apparatus and 6 'Minutemen' are now part of the modern equipment.

Blue flashing lights and sirens or two-tone horns are fitted to all ambulances to ensure speedier and safer transport of emergency cases, certain vehicles are fitted with safety straps for both personnel and patients.

Ambulance Service Accommodation

All vehicles are housed at the Ambulance Garages, Broadway; the Emergency Ambulance and the Coronary Ambulance occupy bays in the Fire Station Appliance Room.

Training

3 Ambulance Driver/Attendants attended the West Riding County Council Training Centre at Cleckheaton for the 6 weeks residential training course—all men satisfactorily completed the course and received certificates of competence.

PREVENTION OF ILLNESS, CARE AND AFTER-CARE

National Health Service Act 1946, S.28

The general overall arrangements made by the authority under this section of the Act were continued during 1970. Co-operation and co-ordination of effort between health visitors, home nurses, home helps, handicapped persons services, as well as with the welfare, housing and mental health services were maintained. Pooling of the information about those who are likely to be in need of assistance of a medico-social nature proved to be beneficial. In this way the health visitors were able to get on with the job of bringing to light cases requiring help whose need had hitherto been unknown to the health service.

Prevention of Illness—Tuberculosis

On the occasion of the Sheffield Mass Radiography Unit's 1970 visit, 463 fewer people availed themselves of the opportunity offered. This lack of interest in tuberculosis on the part of the community can not but delay its ultimate eradication. Mass x-ray offers the best opportunity of eliminating unsuspected reservoirs of infection and at the same time improving greatly the comfort of those who are infected. To this simple procedure must be accorded much of the credit for the satisfactory figures in Part II of this report. It is therefore a very great pity that the attendances for mass x-ray have not been 10,000 instead of a mere 5,000. If only twice as many people would have sufficient interest to present themselves each year, the total disappearance of tuberculosis from Barnsley would be greatly hastened.

Attendances were as follows:

MINIATURE FILMS:					MALES	FEMALES	TOTAL
General Public	..	..	..	..	1,638	1,735	3,373
Booked Groups	..	..	..	..	421	466	887
School Children	..	..	..	..	263	338	601
Doctors Patients	..	..	..	..	23	2	25
Total Miniature Films					2,345	2,541	4,886
Large Film Recalls	..	..	..	..	88	63	151
Total Attendances at Unit					2,433	2,604	5,037

Patients referred to:

	MALES	FEMALES	TOTAL
Chest Clinic	25	12	37
Re-check at Barnsley Town Hall in one year	3	—	3
Patient's own doctor	121	46	167

	PATIENTS REFERRED TO CHEST CLINIC PROVISIONAL DIAGNOSIS		OTHER ABNORMALITIES DISCOVERED	
	MALE	FEMALE	MALE	FEMALE
Active Tuberculosis	1	2	—	—
Inactive Tuberculosis	4	5	—	—
Malignant Neoplasms	1	2	—	—
Non-Malignant Neoplasms ..	—	—	—	—
Metastases	1	—	—	—
Lymphadenopathies	—	—	—	—
Sarcoids	—	—	—	—
Heart Disease	—	—	8	16
Pneumoconiosis	4	—	21	—
Pneumoconiosis with P.M.F.	1	—	—	—
Pleural Effusion	—	—	—	—
Acute Inflammatory Lesions	8	2	4	2
Bronchitis and Emphysema ..	1	—	26	7
Bronchiectasis	1	1	—	—
Unilateral Emphysema	—	—	—	—
Emphysematous Bulla	1	—	—	—
Post Inflammatory Fibrosis ..	1	—	1	1
Interstitial Fibrosis	—	—	—	—
Thyroid Enlargement	—	—	—	—
Eventration of the Diaphragm	—	—	—	—
Hiatus Hernia	—	—	1	1
Honeycomb Lung	—	—	—	—
Spontaneous Pneumothorax ..	—	—	—	—
Benign Tumour	—	—	—	—
Pleural Thickening	—	—	1	1
Old Healed Tuberculosis ..	1	—	3	4

In addition to mass x-ray, the Health Visiting Service carries out continuous follow-up of notified and suspected cases and their contacts. This is done by liaison visits to the Chest Clinic and to Wathwood Hospital. Special attention is paid to ensure that B.C.G. vaccination is made available to children of families in whom the existence of tuberculosis has been confirmed. In circumstances where any community group is in close contact with a known carrier of the disease, arrangements are made for special investigations to be carried out including tuberculin testing and where appropriate, special x-ray examination.

Vaccination against Tuberculosis—B.C.G.

The arrangements already in existence for vaccination against tuberculosis were continued during 1970. The work done is under the supervision of the Chest Physician and x-ray control is applied to those children who have been vaccinated.

The figures for vaccination during the year are as follows:—

A. Contacts (Circular 19/64)

Number Skin Tested	..	..	..	..	88
Number Positive	..	..	..	..	4
Number Negative	..	..	..	..	79
Number Positive	..	..	..	..	79

B. School Children and Students (Circular 19/64)

Number Skin Tested	..	..	..	..	750
Number Positive	..	..	..	..	84
Number Negative	..	..	..	..	630
Number Vaccinated	..	..	..	..	619

SCHOOL	SKIN TESTED	FOUND POSITIVE	FOUND NEGATIVE	VACCINATED
Barnsley and District Holgate Grammar	75	13	61	61
Broadway Grammar	102	5	93	93
Charter County Secondary ..	60	7	45	38
E. Sheerien County Secondary	189	24	160	159
Littleworth County Secondary	60	5	52	51
Oaks County Secondary ..	74	5	64	63
Raley County Secondary ..	95	15	73	72
St. Helen's County Secondary	48	2	43	43
St. Michael's County Secondary	41	8	33	33
Total	744	84	624	613

Venereal Disease

The incidence of venereal disease has already been discussed in Part II of this report. How far "closed community" conditions have contributed to this or how far other circumstances which might well suggest themselves in the case of Barnsley have played their part is not at all clear. In such cases where infection has been confirmed, contact tracing presents no serious difficulty because of the very close liaison which exists between the Special Treatment Centre and the Health Visiting Service. The only problems encountered have arisen in the persuasion of a few persistent defaulters to continue their treatment to a satisfactory conclusion.

Follow-up by the Health Visiting Service is most valuable in providing indications as to where educational projects relating to venereal disease might be very discreetly launched. Such projects take the form of talks to small groups both in the community and as part of more general health education in the schools. Where it appears to be advisable some of this work is undertaken by the medical staff as well as by the health visitors.

Having regard to the fact that no material increase in the incidence of venereal disease has been recorded in Barnsley over a period of some years, it would appear that these arrangements are meeting local need adequately. At the same time, in view of the situation elsewhere, the local statistics are being kept under constant observation.

Screening Clinics—Cervical Cytology

The authority's cervical cytology clinics were concentrated at New Street during 1970. Until 16th June women attending were given the "smear test" for carcinoma of the cervix uteri only. Following 16th June all attending were given a full "screening examination."

Attendances were as follows:

Up to 16th June—Cervical smears only	.. ..	450
After 16th June—Full screening examination	.. ..	399
		—
		849
		—

Out of those who attended, 2 had positive cervical cytology findings and 1 had a suspicious result. These were referred to their general practitioners who in turn arranged for them to be seen by a consultant gynaecologist. Two women were found to have lumps in the breast. They were referred also to their own general practitioner. Women on oral contraceptives are advised to attend each year—others every three years.

The increase in attendances over the previous year is welcome. However, it would seem that the women at greatest risk—those over 35 with two or more children, belonging to Social Classes IV and V—are most reluctant to attend. The authority's staff are well aware of this and are constantly sowing the seeds of health education on this very stony ground.

Care and After-Care Geriatric Patients and Chronic Sick

The Superintendent Health Visitor reports as follows:—

"Every effort is made to ensure that the senior citizens in the town are visited, assessed and help introduced where and when necessary. The Meals on Wheels Service is in great demand and is appreciated very much by the recipients who are almost all housebound and unable to cook for themselves.

"Due to longevity and the changing pattern of social attitudes towards ageing relatives, a great overload of work is placed upon local health authority services and it is only by the closest surveillance and co-operation of health visitors, home nurses, handicapped persons services, housing and welfare services, together with services of the home help organisers and mental health officers that many of the elderly and chronic sick in Barnsley are able to enjoy a reasonably comfortable life. Many of these people and their relatives are relieved of much anxiety and distress. The acute shortage of hospital beds gives rise to the provision of almost full time assistance from the various domiciliary services in a number of cases.

"The day hospital has proved extremely useful in support of the patients who would very often require constant care and attention at home.

"Voluntary agencies continue to give material assistance. The free coal scheme supported by the Women's Standing Conference and ably administered by Miss E. I. Mitchell is a tremendous help during the colder months and is called upon when an emergency arises. Over 200 people were helped with coal during the winter."

Hospital After-Care

Once a week a senior health visitor visits the medical social worker at the hospital to discuss the discharged patients or those for discharge. The immediate follow-up of the patient on discharge from hospital is then done by the health visitor allocated to the area in which the patient resides. Thereafter steps are taken to ensure that full use is made of the resources of the authority's services such as home nursing and home help. Where necessary, adequate communications are ensured between all those concerned with the patient.

After-Care of the Tuberculous

The great part of this work is undertaken by the Health Visiting Service. Notified and known tuberculous patients are visited in their homes and arrangements for any possible contacts within the family or at their place of employment are made for them to attend the Chest Clinic. Close liaison with the Consultant Chest Physician and his staff is necessary to ensure that patients or contacts who default are followed up by the health visitors and persuaded to attend for examination and to ensure that they receive the necessary drug therapy and laboratory tests.

Environmental reports on all Wathwood Hospital admissions and newly notified tuberculous patients are prepared. Each case is dealt with individually.

Babies born at Barnsley District General Hospital with a family history of tuberculosis now receive B.C.G. vaccination before being transferred home.

Meals on Wheels

The Meals on Wheels Service inaugurated in 1969 was continued throughout the year. The meals are prepared in the kitchen of the Adult Training Centre. They are distributed as individual portions on disposable foil trays in specially designed heated containers. Thus the whole service is provided directly by the authority.

During 1970, 8,138 meals were served.

Chiropody

The arrangements for treatment continued as in previous years. The chiropodist, Mr. Aldam, attended for 3 sessions per week. A second chiropodist, Mr. Parry was appointed and commenced duty on 16th June, 1970 to attend for 2 sessions per week. All treatments are carried out at the Medical Services Clinic, New Street, Barnsley for old age pensioners, expectant and nursing mothers and handicapped persons.

A nurse from the Home Nursing Centre is in attendance at all chiropody clinics. The home nurses are instructed that where foot care can be regarded as a normal nursing procedure, it will be carried out by them. The chiropodists are skilled members of a "profession supplementary to medicine" and their services should be reserved for those whose condition warrants it. Adequate nursing care to the feet should ensure that minor disabilities, such as over-long toe nails in the aged are prevented before chiropody is necessary.

Number of treatment sessions—196.

CATEGORY	NO. OF PATIENTS TREATED	FIRST VISIT	OTHER ATTENDANCES	TOTAL
Expectant Mothers . .	—	—	—	—
Old Age Pensioners . .	430	101	1,268	1,369
Handicapped Persons	21	4	62	66
	451	105	1,330	1,435

Health Education

The media of mass information are tending more and more to give attention to health matters and to stimulate interest in health. This is to be welcomed as it is much more likely to be effective than the earlier forms of health education which were largely based on experience gained in commercial advertising.

In Barnsley "advertising" methods of health education were abandoned long ago and educative effort has been concentrated on the personal approach to the individual. This policy was continued throughout the year. Thus, where any individual or group of individuals have shown any interest in any aspect of health the opportunity to stimulate that interest further was always taken. Such opportunities present themselves to various members of the staff but the health visitors encounter them most often. Even on the most ordinary of routine visits some question asked allows of advice being given which is of an educative character. Visits to schools and contact with the teaching staffs are occasions on which health information may be imparted to those most likely to benefit from it. In addition to this, should any community group request the services of a speaker, particular care is taken to ensure that the most suitable member of the staff undertakes the assignment.

An annual contribution is made to the funds of the Health Education Council. From time to time, selections are made of exhibition material provided by that body for display in the clinics. Similar material offered by the General Dental Council is also used in the dental clinics.

HOME HELP SERVICE

National Health Service Act 1946, S.29

The Home Help Organiser reports as follows:—

“Unfortunately, 1970 began somewhat disastrously for the Home Help Service. During the first week of the year there was a steep rise in sickness amongst the home helps. Instead of the usual number of ten home helps being absent each week the number rose to 40. In one day alone, 16 home helps reported sick. This high rate of sickness was slow to decline and it was not until the beginning of February that the more normal rate of 16 off duty in one week was recorded.

“Not only were home helps affected, but many patients were also suffering from influenza and in need of extra assistance from the service. It was indeed fortunate that the organising staff of the department were not amongst the victims because, without a full staff, it would have been impossible to carry out the re-organisation of work schedules which were constantly having to be revised as more home helps reported sick and fresh requests were received for increased assistance for the more needy patients.

“It would seem that 1970 began and ended with unusual occurrences which affected the service. The “go slow” of electricity workers created difficulties for home helps who had to try to work by firelight or candlelight in the homes of old people during the dark mornings of December. However, their efforts were appreciated by the patients who seemed particularly glad to have the company of a home help during these power cuts.

“As in previous years, it must again be reported that the demand for home help service continued to increase. The total number of cases supplied with assistance in 1970 reached 1,012 which was an increase of 31 on the total number of cases assisted during 1969. The number of cases attended each week also rose from 783 in 1969 to 851 in 1970.

“New applications for the service numbered 349 but, only 252 of these applicants finally received assistance. Many refused to pay for the service or made private arrangements for domestic assistance, or received help from their families which had not previously been offered.

“Resignations amongst home helps again showed a decrease; only 18 resigned in 1970 which was a great improvement on the rather high figure of 32 reported in 1968. Again there was no lack of recruits to fill the vacancies which these resignations created.”

The work carried out by the Home Help Service is summarised in the following statistics.

Classification of cases attended in 1970

AGED 65 OR OVER ON 1st JANUARY, 1970	AGED UNDER 65 ON 1st VISIT IN 1970 CHRONIC SICK MENTALLY AND T.B. DISORDERED	MATERNITY	OTHERS	TOTAL
945	53	8	2	4
				1,012

Staff at 31st December, 1970:

Organiser

3 Assistant Organisers

136 permanent part-time Home Helps

19 casual part-time Home Helps

Patients carried forward from 1969 787

New applications investigated January/December 349

Waiting list as at 31st December, 1970 30

Number of visits, enquiries and investigations made by the
Organiser and Assistants during 1970 8,937**CARE OF THE AGED****National Health Service Act 1946, S.28****National Assistance Act 1948, S.21**

Reference has already been made in reporting on home nursing and health visiting to the increasing number of aged people in the community. This has also been discussed in previous reports when some aspects of the task of caring for them were outlined.

Experience during 1970 has emphasised what was perhaps already obvious that increased longevity means not just more over 65's in the community but many more very frail old folk, some over 80 and some even over 90. These people need care and this care must necessarily be of a more continuous, elaborate and sophisticated kind than that required by those who have not attained such venerable years. Furthermore the attainment of these years must to a greater or lesser extent be attributable to improvements in care now available.

It would seem then that it will not be long before an escalating situation will be reached in the care of the aged—survival resulting from better care calling for still better care for still greater numbers.

In Barnsley the possibility of this situation has not been overlooked and it is felt that the services are well equipped and organised to meet it though to do so, strong financial support will be necessary. The weekly case conference between the hospital Geriatric Department and the local authority services has continued to ensure a very high degree of co-operation and co-ordination. This is particularly apparent when dealing with the problem of "holiday" care. Short term hospital or residential accommodation as appropriate can be offered to old folk who are looked after by

their families in the community. This allows their relatives to have a break and often enables long term care to be continued in the community longer than would otherwise be the case. At the same time, co-ordination and selection allows of the best possible use to be made of hospital resources—for example the “holiday” period can be the opportunity for clinical assessment and thus avoid admission specially for this purpose.

In the early part of the year a study was made jointly with the Consultant Physician in Geriatrics into the ways hospital and local authority resources could be conserved by careful co-ordination. The results of this study were set out graphically on an exhibition panel. This panel was accepted by the King Edward Hospital Fund for London for display at the Geriatric Care Exhibition held at the Hospital Centre, Nutford Place, London. That the study was regarded as being of sufficient interest to merit a place in an exhibition of this kind is a matter of some satisfaction to the staffs of both the Barnsley hospitals and the local authority. It might also be said that it reflects quite creditably on the services available to the elderly in Barnsley.

The impression remained in 1970 as in previous years that some of the relatives of some of the elderly patients might well adopt a more sympathetic attitude towards them. These people ought to be prepared and able to accept a much greater share in the task of looking after their old folk. If they were to do this both the local authority and the hospitals could achieve a great deal more in caring for the aged in general. It would be well if relatives, before making demands on the authority's services would reflect on the quotation from “*King Lear*” to be found heading this part of the report.

REMOVAL TO SUITABLE PREMISES OF PERSONS IN NEED OF CARE AND ATTENTION

National Assistance Act 1948, S.47

National Assistance (Amendment) Act 1951

No case arose during the year in which it was found necessary to consider action under S.47 of the National Assistance Act, 1948.

CHILDREN NEGLECTED OR ILL-TREATED IN THEIR OWN HOMES

The arrangements whereby the Medical Officer of Health acts as co-ordinating officer in accordance with the Minister's suggestions as contained in Circular 48/50 was continued throughout the year. Meetings were held at appropriate intervals at which interested bodies and Corporation departments were represented. Information relating to all known individual families was circulated prior to the meetings and a full discussion took place on each case.

The preparation of this information and the greater part of the routine supervision of families in need of it is carried out by the health visiting staff who paid a total of 1,708 special visits for this purpose to 40 families.

These families are, of course, those which are described as "problem families" and their supervision presents the health visiting service with an extremely difficult task. In most cases the underlying cause is the subnormal intelligence of one or both parents. This prejudices their ability to accept normal responsibilities and to withstand the many temptations towards improvidence. These difficulties can well be aggravated when, in an attempt to encourage them, they are moved from slum dwellings to modern council property. They fail to appreciate the necessity for providing for the higher rent consequent upon the higher standard of accommodation, thus they tend to build up a load of debt which in turn reflects upon the care of the children. A great deal of work remains to be done in relation to these families including a reappraisal of the place they should be permitted to occupy in the structure of the community. Until this is done the local authority and its officers can do little more than apply to them all possible assistance and help in those places where it appears to be indicated. At the same time they must ensure that the fullest possible advantage is derived by the children from the modern system of education with a view to ensuring that they in turn do not reproduce problem families themselves.

The opportunity is taken here of acknowledging the assistance and co-operation in this work which is afforded by the probation officers and various voluntary bodies, notably the N.S.P.C.C. and the Salvation Army.

MEDICAL EXAMINATIONS

As in previous years, medical examinations for various purposes were carried out by the Corporation's medical officers (455 compared with 462 in 1969). The detail of the purposes of the examinations is as follows:—

Child Delinquents	80
Boarded-out Children	41
Candidates for Colleges of Education	89
Superannuation, Fitness for Employment	240
Fire and Ambulance Service Recruits	5

PART IV

MENTAL HEALTH

First clown: He that is mad, and sent into England.

Hamlet: Ay, marry; why was he sent into England?

First clown: Why, because he was mad: he shall recover his wits there; or, if he do not, 'tis no great matter there.

Hamlet: Why.

First clown: 'Twill not be seen in him there; there the men are as mad as he.

*"Hamlet" V I 150,
William Shakespeare, 1564-1616.*

The authority's Mental Health Services continued to function during 1970 very much as they did in previous years. The care of the mentally ill in the community was greatly facilitated by the opening in November of the Psychiatric Unit at the Barnsley District General Hospital and the establishment of an excellent relationship between the authority's officers and the staff of the Unit.

Despite this, at the end of the year a number of problems remained to be solved. Some of these were a legacy of the arrangement whereby Barnsley's mentally ill, though resident in the Sheffield Region had to be treated in a Leeds Region Hospital.

In the care of the mentally subnormal the work of the training centres progressed with its accustomed smoothness and the Council finally approved the expenditure of the necessary capital to provide a residential hostel of 20 places.

All this indicates that there will be much interesting and important work to be done in the field of mental health in Barnsley in the immediate future. In this work, understanding and communication between those directing the services for the mentally ill and subnormal in the hospitals and those directing the domiciliary services in the community is absolutely essential. Furthermore, circulars from the central government departments have urged just this kind of communication and co-operation. It is therefore extremely difficult to understand just at this juncture and in the particular circumstances prevailing in Barnsley the thinking behind the Local Authority Social Services Act 1970 and some of the delegated legislation authorised by it. No doubt improvement in co-ordination of some social services made necessary some legislative changes. However, to take the community care of the mentally afflicted from a department whose Chief Officer could communicate with full professional confidentiality with psychiatrists is something which is extremely difficult to comprehend.

No doubt in time a relationship may develop between psychiatrists and social workers but this relationship is not yet established. Its absence can not but at present add greatly to the difficulty of the task of building up the services for the mentally disabled in the country in general and in Barnsley in particular. It would seem therefore that the quotation from Shakespeare's *"Hamlet"* which heads this part of the report is exceptionally appropriate to the present situation.

(1) Administration

- (a) The duties of a Mental Health Sub-Committee are carried out by the Handicapped Persons Sub-Committee of the Health Committee. This sub-committee on which no co-opted members sit consists of 11 members, 5 of whom are women. The sub-committee meets monthly.

- (b) The number and qualifications of the staff:

The Medical Officer of Health

The Deputy Medical Officer of Health and

The Senior Clinical Medical Officer in Department are approved for the purpose of S.28 of the Mental Health Act, 1959.

The Health authority has an establishment of 3 mental health welfare officers and 2 mental welfare assistants.

Three mental health welfare officers and 1 mental welfare assistant were in post at the end of the year.

Two mental health welfare officers are State Registered Nurses and hold the Health Visitors Certificate and the other is a Registered Mental Nurse.

The Junior Training Centre was available as a whole time centre throughout 1970 for children under 16 suffering from mental subnormality. The Supervisor is in possession of the Diploma qualification of the National Association for Mental Health. There are in addition, one qualified assistant supervisor and 3 untrained assistant supervisors, one of whom is an S.E.N. The internal administration of the centre is carried out by the Supervisor under the direction of the Medical Officer of Health.

The Adult Training Centre is available as a whole time centre for persons over 16 suffering from mental subnormality. The manager is a Registered Mental Nurse and there is an assistant manager and 3 instructors. The administration of the centre is carried out by the manager under the direction of the Medical Officer of Health.

- (c) A Consultant Psychiatrist employed by the Regional Hospital Board continued to hold a clinic at Barnsley Beckett Hospital until the end of October when the psychiatric unit was opened at Barnsley District General Hospital. In December a second consultant was appointed for the Barnsley area. The mental health welfare officers attend at this clinic with patients as occasion demands. A consultant psychiatrist employed by the Regional Hospital Board attends at the Child Guidance Centre, Athersley for two sessions weekly and holds a clinic for adolescents at Kendray Hospital and at Barnsley District General Hospital once weekly. There are no officers jointly employed by the Local Authority and the Regional Hospital Board. After-care of patients discharged from psychiatric hospitals is carried out as required by the Deputy Medical Officer of Health and mental health welfare officers.

- (d) No duties are delegated to voluntary associations.

(2) Work undertaken in the community:

(a) Under Section 28 of the National Health Service Act 1946—

Prevention of Illness, Care and After-Care

This is done by visitation by the mental health welfare officers and also by the authority's health visitors. By this means, efforts are made to persuade patients to attend the psychiatric out-patients clinics held by the Regional Hospital Board. The mental health welfare officers usually go with them to ascertain the nature of the advice. In this way it is possible to ensure that adequate supervision and assistance is available in cases where preventive measures are likely to be of value.

(b) Under the Mental Health Act 1959—

I Mental Illness

The number of cases investigated by mental health welfare officers is shown in tabular form on page 62.

In addition to visits to patients requiring admission to hospital the mental health welfare officers also made 1,065 after-care visits to patients who had been discharged from hospital and 608 visits to patients who did not require admission to hospital.

II Mental Subnormality

The diagnosis and notification of new cases proceeded throughout the year in conjunction with the School Health Service for the care of young children and otherwise.

The mentally subnormal who remain in the community are supervised by the mental health officers and 860 visits to homes were paid for this purpose during the year. At present there are no cases under guardianship in the County Borough.

Training

The authority maintained a Junior Training Centre in Pitt Street. Sixty places were available. An Adult Training Centre of 80 places was available at Woodland Drive, Barnsley.

The Junior Training Centre

A total of 26 children attended the Junior Training Centre during 1970. The curriculum at the Centre meets the needs of all children. Outings are arranged to shops, markets, bus station, park and police station. The annual day's outing to Cleethorpes took place in June and 24 children and staff participated.

A Harvest Thanksgiving Service was held in October and was well attended by parents and friends. The gifts of fruit, vegetables and flowers were given by children and staff to aged people living in their own homes.

An Open Day was held in December when the children gave a Nativity Play. This was also well attended by parents and friends. The local authority's Christmas Party was held on 17th December and a visit was again arranged to the local pantomime.

One member of staff attended a refresher course at St. Margaret's College, Durham in July arranged by the National Association for Mental Health.

The Centre continues to provide practical training for students taking the Diploma Course for Teachers of the Mentally Handicapped and is recognised by the National Association for Mental Health for this purpose.

The staff of the Centre is shown in the staff list at the back of the report.

No. of children on register at 31.12.70:

Males	..	..	..	..	..	..	..	..	..	14
Females	..	..	..	..	..	..	..	..	..	12
Total	..	..	..	..	..	..	..	..	..	26

Dinners:

No. of children receiving and paying for dinners	..	..	18
No. of children receiving free dinners	..	..	8
Total number having dinners	..	..	26
No. of dinners provided and paid for	..	..	3,075
No. of dinners provided free for children	..	..	877
No. of dinners provided for staff (paid)	..	..	—
No. of dinners provided for staff (free)	..	..	410
Total no. of dinners provided	..	..	4,362
No. of $\frac{1}{2}$ pt. bottles milk delivered for children	..	..	4,830

The Adult Training Centre

The Manager reports:

"The three sections of the Centre—social education, domestic training and workshop—have continued to operate throughout the year. In particular the woodwork section has found its products in demand. As well as retaining existing contracts the centre was able to secure orders for very large quantities of wooden pallets and this has ensured employment for a large number of trainees. During the year 285 large packing cases, 1,359 wooden pallets and 46,200 plywood bases for jigsaw puzzles were delivered. In addition, the workshop turned out a number of garden sheds, greenhouse windows, doors and numerous other articles to individual orders.

"A party of 29 trainees accompanied by three instructors stayed at Scout Dike Camp from Monday, 7th September to Friday, 11th September. Again this was a most successful venture and on this occasion a more ambitious programme was attempted, including a full day's hike in which more than half the trainees took part. Two coach trips were arranged, one for a full day and one evening trip."

The staff of the centre is shown in the staff list at the back of the report.

Admissions:

13 trainees were admitted during the year.

Discharges:

There were 8 discharges during the year.

Attendances:

Total number on roll	..	..	..	..	..	..	46
Number of days open	..	..	..	..	..	..	240
Total attendances ..	..	..	..	..	..	..	8,714
Average attendance	..	..	..	..	..	..	30.9
Highest attendance	..	..	..	..	..	..	45
Lowest attendance	..	..	..	..	..	..	15

Total amount of money collected from trainees for meals and beverages—£1,052 2s. 6d. Total amount of cash collected from staff not on dinner duty—£69 17s. 6d.

Position regarding patients in Psychiatric Hospitals

**Number of patients known to be in Psychiatric Hospitals
on 1st January, 1970**

Mentally Ill

Mentally Ill				MALES	FEMALES	TOTAL
Storthes Hall Hospital, near Huddersfield	..	..	65	63	128
Stanley Royd Hospital, Wakefield	..	..	1	6	7
Menston Hospital, Ilkley, near Leeds	..	..	3	—	3
Runwell Hospital, near Wickford	..	..	1	1	2
Cheadle Royal Hospital, Cheshire (private patient)	..	—	—	1	1	
Rauceby Hospital, Adolescent Unit	..	..	2	—	2
Scalebor Park Hospital, Adolescent Unit	..	..	1	—	1
			73	71	144	

Subnormal and Severely Subnormal

Abnormal and Severely Subnormal									
St. Catherine's Hospital, Doncaster	..	..	..	..	40	41	81
Glenfrith Hospital, Leicester	..	..	..	..	2	—	2
Lisieux Hall Hospital, near Chorley	..	..	..	..	1	—	1
Balderton Hospital, near Newark	..	..	..	..	1	—	1
Aston Hall Hospital, near Derby	..	..	..	..	1	2	3
Ridgeway Hospital, Belper	..	..	..	..	1	—	1
Rampton, near Retford (Special Hospital)	..	..	..	..	2	—	2
St. Joseph's Home, Sheffield	..	..	..	..	—	1	1
Prudhoe and Monkton Hospital, Northumberland	..	..	..	..	1	—	1
Hollow Meadows Hospital, Sheffield	..	..	..	..	1	—	1
Cookridge Hall, Leeds (Epileptic Colony)	..	..	..	..	1	—	1
Whittington Hall Hospital, Chesterfield	..	..	..	..	—	1	1
Wales Court Hospital, Kiveton Park, Sheffield	..	..	..	..	—	1	1
Thundercliffe Grange Hospital, near Rotherham	..	..	..	..	1	1	2
St. Elizabeth's Home, Much Hadham, Herts.	..	..	..	..	—	1	1
Moss Side Hospital	..	..	..	..	1	—	1
					53	48	101		

Number of patients known to have been admitted to Psychiatric Hospitals during the twelve months ended 31st December, 1970

Mentally Ill	MALES	FEMALES	TOTAL
Barnsley General Psychiatric Unit—first admission ..	1	3	4
Barnsley General Psychiatric Unit—had previous admission	5	11	16
Storthes Hall Hospital—first admission	18	20	38
Storthes Hall Hospital—had previous admission ..	35	45	80
Storthes Hall Hospital—readmitted from extended leave	—	—	—
Stanley Royd Hospital—had previous admission ..	—	1	1
Shirle Hill Nether Edge Hospital, Sheffield, Adolescent Unit (under 16)—first admission	1	—	1
West Riding patient (admitted to Doncaster Royal Infirmary Psychiatric Unit)—had previous admission—	—	1	1
West Riding patients admitted to Storthes Hall Hospital from Beckett Hospital—first admission ..	2	2	4
—previous admission—	—	1	1
	62	84	146

Subnormal and Severely Subnormal	MALES	FEMALES	TOTAL
St. Catherine's Hospital, Doncaster—"Informal" ..	2	—	2
St. Catherine's Hospital, Doncaster—Section 60 ..	1	—	1
Thundercliffe Grange Hospital, near Rotherham ..	1	—	1
	4	—	4

Patients who have been admitted to hospital for a short stay period

	MALES	FEMALES	TOTAL
St. Catherine's Hospital	6	7	13
(repeated admission for short stay period) ..	—	2	2
	6	9	15

Number of patients known to have been discharged during the twelve months

Mentally Ill	MALES	FEMALES	TOTAL
Rauceby Hospital, Adolescent Unit	2	—	2
Barnsley General Psychiatric Unit	4	17	21
Storthes Hall Hospital	38	55	93
Stanley Royd Hospital	—	1	1
Storthes Hall Hospital (patients discharged on extended leave—Section 26)	1	2	3
West Riding cases from Storthes Hall Hospital ..	1	2	3
	46	77	123

Subnormal and Severely Subnormal			MALES	FEMALES	TOTAL
St. Catherine's Hospital	..	..	.. 2	1	3
			—	—	—

Deaths during the twelve months ended 31st December, 1970

Mentally Ill			MALES	FEMALES	TOTAL
Storthes Hall Hospital	..	..	.. 1	5	6

Subnormal and Severely Subnormal			MALES	FEMALES	TOTAL
St. Catherine's Hospital	..	..	.. 1	1	2
			—	—	—

Number of patients known to be in Psychiatric Hospitals on 1st January, 1971

	MALES	FEMALES	TOTAL
Barnsley General Psychiatric Unit	.. 3	—	3
Storthes Hall Hospital	.. 73	65	138
Stanley Royd Hospital	.. 1	6	7
Menston Hospital	.. 4	—	4
Runwell Hospital	.. 1	1	2
Cheadle Royal Hospital (private patient)	.. —	1	1
Shirle Hill, Nether Edge Hospital, Sheffield, Adolescent Unit	.. 1	—	1
	83	73	156
	—	—	—

Included in the number of patients in hospital on 1st January, 1971 are the following males who are over 65 years and females over 60 years of age:

	MALES	FEMALES	TOTAL
Storthes Hall Hospital	.. 17	36	53
Stanley Royd Hospital	.. —	4	4
Menston Hospital	.. 1	—	1
	18	40	58
	—	—	—

Subnormal and Severely Subnormal			MALES	FEMALES	TOTAL
St. Catherine's Hospital	..	..	.. 40	39	79
Glenfrith Hospital, Leciester	..	..	.. 2	—	2
Lisieux Hall Hospital, Nr. Chorley	..	..	.. 1	—	1
Balderton Hospital, Nr. Newark	..	..	.. 1	—	1
Aston Hall Hospital, Nr. Derby	..	..	.. 1	2	3
Ridgeway Hospital, Nr. Belper	..	..	.. 1	—	1
Rampton (Special Hospital)	..	..	.. 2	—	2
St. Joseph's Home, Sheffield	..	..	.. —	1	1
Cookridge Hall, Leeds (Epileptic Colony)	..	..	.. 1	—	1
Prudhoe and Monkton Hospital, Northumberland	..	..	1	—	1
Hollow Meadows Hospital, Sheffield	..	..	.. 1	—	1
Thundercliffe Grange Hospital, Nr. Rotherham	..	..	.. 2	1	3
Whittington Hall Hospital, Chesterfield	..	..	.. —	1	1
Wales Court Hospital, Kiveton Park, Sheffield	..	..	.. —	1	1
St. Elizabeth's Home, Much Hadham, Herts.	..	..	.. —	1	1
Moss Side Hospital	..	..	.. 1	—	1
Kenmore Cheshire Home, Cleckheaton	..	..	.. —	1	1
	54	47	101		
	—	—	—		

Number of Subnormal and Severely Subnormal under care and guidance

	MALES	FEMALES	TOTAL
Subnormal	69	56	125
Severely Subnormal	91	78	169
	<hr/> 160	<hr/> 134	<hr/> 294

Analysis of Visits to Patients

	MALES	FEMALES	TOTAL
No. of visits to patients after treatment in Psychiatric Hospitals, after-care visits	327	738	1065
No. of visits to patients reported mentally ill, pre-care visits	116	492	608
No. of ineffective visits	50	115	165
Visits made re patients in Psychiatric Hospitals and to patients on week-end leave	62	43	105
No. of Child Guidance visits	74	48	122
Visits made to subnormal and severely subnormal patients (including the educationally subnormal)	406	454	860
No. of ineffective visits	72	68	140
Persons interviewed in the office and the problem dealt with, thus obviating home visit	99	148	247
	<hr/> 1206	<hr/> 2106	<hr/> 3312

Number of patients returned to Psychiatric Hospitals having absconded while on "Compulsory Order"

	MALES	FEMALES	TOTAL
Mentally ill while on "Compulsory Order"	6	—	6
"Informal" (persuaded to return as unfit for discharge)	2	—	2
Patient aged 16 years from Towers Hospital, Leicester (placed in Storthes Hall Hospital overnight to await staff coming to return him to the Towers Hospital)	1	—	1
	<hr/> 9	<hr/> —	<hr/> 9

Analysis of County Borough cases investigated and dealt with by the Mental Health Officers during the year 1970

Mental Health Act 1959	MALES	FEMALES	TOTAL
Section 5—informal admission.			
First admission to Psychiatric Hospital	9	16	25
Additional admission to Psychiatric Hospital	22	35	57
First admission Adolescent Unit (under 16)	1	—	1
Section 29—Compulsory admission (emergency) for observation for a period not exceeding 72 hours.			
First admission to Psychiatric Hospital	8	7	15
Additional admission to Psychiatric Hospital	16	17	33

	MALES	FEMALES	TOTAL
Section 25—Compulsory admission for observation for a period not exceeding 28 days			
First admission to Psychiatric Hospital	—	—	—
Additional admission to Psychiatric Hospital	1	5	6
Section 26—Compulsory admission for treatment			
First admission to Psychiatric Hospital	—	—	—
Additional admission to Psychiatric Hospital	—	—	—
Re-admitted from extended leave ..	—	—	—
Section 60—By Order of the Magistrates Court—Mental Illness	2	—	2
Subnormal admission	1	—	1
Patient admitted for short stay period ..	1	—	1
	61	80	141

Number of patients on whom medical recommendations were completed in hospital

	MALES	FEMALES	TOTAL
Section 26	8	3	11
Section 25	1	—	1
	9	3	12

Guardianship Cases—None.

West Riding cases admitted to Psychiatric Hospitals from Beckett Hospital or Borough Police Station.

	MALES	FEMALES	TOTAL
Section 5—First admission to Psychiatric Hospital	1	1	2
Additional admission to Psychiatric Hospital	—	1	1
Section 29—First admission to Psychiatric Hospital	1	1	2
Additional admission to Psychiatric Hospital	—	—	—
Section 25—First admission to Psychiatric Hospital	—	—	—
Additional admission to Psychiatric Hospital	—	1	1
	2	4	6

Number of male patients over 65 years and female patients over 60 years of age (included in the analysis of County Borough cases) who were admitted to Psychiatric Hospitals during the year 1970

	MALES FEMALES TOTAL		
Section 5—First admission to Psychiatric Hospital	2	8	10
Additional admission to Psychiatric Hospital	1	13	14
Section 29—First admission to Psychiatric Hospital	1	4	5
Additional admission to Psychiatric Hospital	—	4	4
Section 25—First admission to Psychiatric Hospital	—	—	—
Additional admission to Psychiatric Hospital	—	1	1
Section 26—Admission from Extended Leave	—	—	—
Admission for short stay period	1	—	1
Admission while under Sec. 47 National Assistance Act	—	—	—
	5	30	35

Waiting List of Subnormal and Severely Subnormal Patients as at 31st December, 1970

	URGENT				NON-URGENT				TOTAL
	Under 16 years		16 years and over		Under 16 years		16 years and over		
	M	F	M	F	M	F	M	F	
Severely Subnormal:									
(a) "Cot and Chair"	—	—	—	—	—	—	—	—	—
(b) "Ambulant"	—	—	2	1	—	1	1	3	8
Subnormal	—	—	—	1	—	—	2	—	3
Total	—	—	2	2	—	1	3	3	11

Number of persons under Local Health Authority care at 31st December, 1970.

	Mentally ill				Elderly mentally infirm		Psychopathic				Subnormal				Severely Subnormal				Total
	Under Age 16		16 and over		M	F	Under Age 16		16 and over		Under Age 16		16 and over		M	F			
	M	F	M	F			M	F	M	F	M	F	M	F					
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)	
1. Total number	—	—	51	102	4	7	—	—	—	—	—	69	56	17	13	73	66	458	
2. Attending training centres or workshops	—	—	—	—	—	—	—	—	—	—	—	10	3	13	13	25	13	77	
3. Awaiting entry to tr'n'g centres or w'shops	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
4. Receiving home training	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
5. Awaiting home training	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
6. Resident in L.A. home/hostel	—	—	3	6	—	—	—	—	—	—	—	—	—	—	—	8	4	21	
7. Awaiting residence in L.A. home/hostel	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
8. Resident in other home /hostel	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1	2	
9. Boarded out in private household	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
10. Attending day hospital	—	—	2	7	—	—	—	—	—	—	—	—	—	—	—	—	—	9	
11. Receiving home visits and not included in lines 2—10:	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
(a) suitable to attend a training centre	—	—	—	—	—	—	—	—	—	—	—	7	7	1	—	18	17	50	
(b) others	—	—	46	89	4	7	—	—	—	—	—	52	46	3	—	21	31	299	
12. Number of children under age 16 attending training centres who have not been included in item 2 because they do not come within the categories covered in columns (1) to (18)	Male Female	
13. Number of persons included in item 6 who reside in accommodation provided under the National Assistance Act, 1948	10	
(OVER)																			

(OVER)

Number of persons referred to Local Health Authority during year ended 31st December, 1970

	Mentally Ill				Psychopathic				Subnormal				Severely Subnormal				Total
	Under Age 16		16 and over		Under Age 16		16 and over		Under Age 16		16 and over		Under Age 16		16 and over		
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
Referred by—	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)
(a) General Practitioners	—	—	13	28	—	—	—	—	—	—	—	—	—	—	—	—	41
(b) Hospitals, on discharge from in-patient treatment ..	—	—	17	41	—	—	—	—	—	—	1	1	—	—	1	—	61
(c) Hospitals, after or during out-patient or day treatment	—	—	3	12	—	—	—	—	—	—	—	—	2	1	—	—	18
(d) Local education authorities	—	—	—	—	—	—	—	—	5	6	—	—	2	6	—	—	19
(e) Police and courts	—	—	4	8	—	—	—	—	—	—	1	—	—	—	—	—	13
(f) Other sources	—	—	10	14	—	—	—	—	—	—	—	1	—	—	—	—	25
(g) Total	—	—	47	103	—	—	—	—	5	6	2	2	4	7	1	—	177

Number of patients awaiting entry to hospital, admitted for temporary residential care or admitted to guardianship during 1970

	Mentally ill				Elderly mental infirm		Psychopathic				Subnormal				Severely Subnormal				Total
	Under Age 16		16 and over		M	F	Under Age 16		16 and over		Under Age 16		16 and over		Under Age 16		16 and over		
	M	F	M	F			M	F	M	F	M	F	M	F	M	F	M	F	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)	
1. Number of persons in L.H.A. area on waiting list for admission to hospital at end of year:																			
(a) In urgent need of hospital care	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	2	1	4	
(b) Not in urgent need of hospital care . .	—	—	—	—	—	—	—	—	—	—	—	2	—	—	1	1	3	7	
(c) Total	—	—	—	—	—	—	—	—	—	—	—	2	1	—	1	3	4	11	
2. Number of admissions for temporary resi- dential care (e.g. to relieve the family):																			
(a) To N.H.S. hospitals	—	—	—	1	1	—	—	—	—	—	—	1	1	2	3	3	5	17	
(b) To L.A. residential accommodation	—	—	—	—	4	—	—	—	—	—	—	—	—	—	—	—	—	4	
(c) Elsewhere	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
(d) Total	—	—	—	1	5	—	—	—	—	—	—	1	1	2	3	3	5	21	
(OVER)																			

(OVER)

Number of patients awaiting entry to hospital, admitted for temporary residential care or admitted to guardianship during 1970—(continued)

	Mentally ill						Psychopathic						Mentally Handic'd						Severely Mentally Handic'd						Total																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																				
	Under age 16			16 and over			Under age 16			16 and over			Under age 16			16 and over			Under age 16			16 and over																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																							
	M	F	(1)	M	F	(2)	M	F	(3)	M	F	(4)	M	F	(5)	M	F	(6)	M	F	(7)	M	F	(8)		M	F	(9)	M	F	(10)	M	F	(11)	M	F	(12)	M	F	(13)	M	F	(14)	M	F	(15)	M	F	(16)	(17)																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																											
Guardian	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—</

PART V

THE HANDICAPPED

As for Doing-good, that is one of the professions which are full. Moreover, I have tried it fairly, and, strange as it may seem, am satisfied that it does not agree with my constitution.

Walden. Economy.

Henry David Thoreau, 1817-1862.

In Barnsley's Services for the Handicapped, 1970 took on the character of a pause or an interlude. In the years before there was the development that led to the opening of the Centre. In the years to come the care of the handicapped will be regarded as a social service rather than a health service by reason of the provisions of the Local Authorities Social Service Act, 1970.

When it was clear that administrative changes would take place as a result of the new legislation it became difficult to plan immediate development in view of the uncertainty as to the future. This uncertainty has to some extent been resolved by the recently published proposals for the reform of local government and certain recent orders relating to the social services.

As a result of this the objective for 1970 was to keep the services going, at the same time ensuring that standards were maintained. Despite this, several minor developments took place. The arrangement already mentioned whereby the home nurses hold bath sessions at the centre 3 times each week is one of these. This enables the more seriously handicapped to take advantage of the special facilities provided by the purpose designed bathroom.

As the services for the handicapped ceased to stand referred to the Health Committee of the Council from 1st January, 1971 it seems improbable that an account of them in the present form will appear in future reports. The development of these services has been a matter of very great interest and reporting on their growth each succeeding year has yielded considerable satisfaction. It remains to examine the details of the work done for the various categories of the handicapped during 1970.

WELFARE OF THE BLIND

The Barnsley County Borough provides blind welfare services for its residents. The West Riding County Council agency agreement which had been in existence for many years was terminated and that authority undertook the care of their own blind persons from 1st April, 1970.

Blind population as at 31.12.70.

The number of registered blind persons under the care of the department at the end of the year was as follows:—

Blind—196.

Partially sighted—98.

Prevention and Incidence of Blindness

Close liaison is maintained with the Ophthalmic Department of Beckett Hospital, Barnsley, especially concerning the follow-up of patients undergoing treatment or recommended for treatment or surgical operations. The home teachers of the blind establish a link between the blind persons concerned and the hospital authorities and systematically follow up all the cases admitted to the blind register or the register of partially sighted persons where hospital treatment is recommended on Form B.D.8. by the Ophthalmic Surgeon.

Arrangements are made for such persons who are 'not blind' within the definition of blindness laid down in the National Assistance Act 1948 but who are, nevertheless, substantially and permanently handicapped by congenitally defective vision or by an injury or illness affecting the eyes to be included in a special register under the classification of "Register of Partially Sighted Persons." Such persons are provided with the same welfare services as those available for blind persons.

Home Teaching Service

Home teachers of the blind visit blind persons in their homes to discover and ascertain the needs of new cases, teach Braille and Moon, organise social activities and other activities, arrange and teach pastime handicrafts and provide general welfare services for the blind. Similar welfare services are provided for partially sighted persons and as many partially sighted persons are subsequently certified blind, the officer is already well aware of the needs of these people. The registration of a person as blind within the meaning of the National Assistance Act involves additional financial help from the Department of Health and Social Security. This immediate financial benefit does not, of course, apply to persons who are classified as "partially sighted".

Braille and Moon classes, library for the blind services, talking book machines, wirelasses for the blind, handicraft classes and the many social activities including sports, excursions and parties for blind and partially sighted adults and children all continued during 1970.

WELFARE OF THE DEAF

The Corporation's scheme for the welfare of the deaf continued to be implemented during the year. However, the agency services provided for West Riding residents were terminated at the end of March and as in the case of the blind, the West Riding commenced the care of their own deaf on 1st April, 1970.

The welfare officer for the deaf continued to assist deaf and hard of hearing persons in all aspects of their welfare.

The registration of deaf persons with and without speech has been fully completed for some years and ascertainment and registration of further hard of hearing persons still continued. Owing to the increasing numbers of hard of hearing persons coming to the notice of the department and desiring registration, it has been necessary for the hard of hearing

register to be sub-divided between those hard of hearing persons requiring a full range of domiciliary visiting services and a subsidiary register which is known as the 'B' register for those hard of hearing persons who merely visit the department to avail themselves of a hearing aid repair or some other small service. By this means it is possible to retain the 'A' register for those who require a complete welfare service and statistically to contain the numbers at a realistic level.

Registration of the Deaf

The classification for the Registers of the Deaf and Hard of Hearing was set out in the then Ministry of Health Circular 25/61 and is as follows—

(a) Deaf without speech; (b) Deaf with speech; (c) Hard of hearing.

The difficulties with regard to the hard of hearing register have already been explained and the main register which is known as the 'A' register is the one which is quoted for statistical purposes in all annual returns to the Department of Health and Social Security. Registrations as at 31.12.70 were as follows:—

Deaf—70. Hard of Hearing—108.

Interviews, Domiciliary Visits and Interpretation

A monthly report is submitted to the Handicapped Persons Subcommittee showing the numbers of domiciliary, placement and interpretation visits paid by the officers in the department.

Assistance is requested by deaf and hard of hearing persons in connection with many matters and interpretation is provided on occasions such visits to doctors surgeries, clinics, hospitals, shops, schools, solicitors offices, estate agents offices, government and local authority departments and police courts.

Social Activities

Social evenings for all deaf persons are held on Tuesday, Thursday and Saturday evenings. Games, table tennis, billiards, snooker and darts are played and whist drives, cinema shows and bingo sessions and other entertainments are held.

The annual party for the adult deaf was held in the centre and from the sporting aspect of deaf welfare, members took regular part in teams playing snooker, billiards and darts organised by the Yorkshire Deaf Amateur Sports Association. In addition, members played in the Barnsley Indoor Games League at snooker, darts, whist, cribbage and dominoes and in the Barnsley Table Tennis League. Swimming sessions at the Barnsley Baths are held on Sundays in both winter and summer.

Spiritual Welfare

There are services in the chapel every Sunday which are attended by the deaf community.

North Regional Association for the Deaf

The North Regional Association for the Deaf covers all the Northern counties and county boroughs and is responsible for the promotion of the welfare of the deaf and hard of hearing through the local authorities and voluntary missions for the deaf in the northern areas. Two half-yearly meetings were held during the year by the Association.

Television Sets

The Royal National Institute for the Deaf appeal for money for the provision of television sets for elderly deaf persons who cannot afford this service. As a result of the money available in the Appeal Fund, the rentals for television sets are being paid for several deaf persons in this area.

CARE OF THE PHYSICALLY HANDICAPPED

The services provided for the general classes of the physically handicapped, which include the mentally disordered and epileptic persons, form part of the services provided on a comprehensive basis by the Handicapped Services Department of the Corporation. Throughout the year some intensive casework was undertaken by the Senior Welfare Officer, Social Welfare Officer and the Welfare Assistant. The aim is to do everything possible to enable handicapped people to live in the community, rather than in residential accommodation of any kind. This calls for the provision of whatever services are necessary in their own homes, e.g. domiciliary services, adaptations, etc. The Officer's main function is to establish and maintain the necessary contacts to help handicapped people in finding a solution to their personal difficulties, and in general to give support in whatever ways are most likely to increase rather than diminish their capacity to accept responsibility for the conduct of their own lives. The handicapped person's register is growing considerably longer; more and more people are being referred by medical practitioners, hospitals and other sources.

Registration

At the end of 1970 there were 427 registered physically handicapped persons as compared with 424 at the end of 1969. Applications from disabled persons residing in the County Borough area for placement on the Corporation's register are dealt with by one of the Welfare Staff who pays an initial visit and completes the necessary case record and provides assistance and guidance to disabled persons to help overcome their disabilities. Applications for registration as physically handicapped persons are examined before registration by the department. The registration of persons suffering from respiratory tuberculosis is not effected until a satisfactory certificate has been provided by the Chest Physician regarding the patient's condition.

The majority of all registered handicapped persons are housebound or otherwise incapable of work and require a full range of welfare services, particularly pastime handicrafts and social centre facilities. It is essential that regular domiciliary visits are maintained in these cases. Many of these persons require assistance, with regard to Social Security benefits, clothing allowances, supply and maintenance of wheelchairs through the Department of Health, home nursing equipment, domestic help service, gadgets and structural adaptations and other similar welfare services.

The number of persons on the register of physically handicapped at 31st December, 1970 was 427.

Employment of the Disabled

The scheme places a duty upon the council to assist any handicapped person in consultation with the Department of Employment and Productivity to secure suitable employment in open industry and sheltered employment. Close collaboration is essential with the Disablement Resettlement Officer of the Department of Employment and Productivity and it is found that many disabled persons have allowed their registration under the provisions of the Disabled Persons (Employment) Act 1944 to lapse. The difficulties of placing a severely disabled person in employment in open industry are great. Thirty-one disabled persons are now assessed as suitable only, either for sheltered workshop employment or as home workers. In some of these cases it is felt that the disabled person may have been unemployed for such a long time and his physical condition may have deteriorated to such an extent that he could not even undertake sheltered employment even if it were available. Seven disabled persons are already in employment at the Remploy Factory and five are employed in the Corporation's own workshops and catered for from the employment angle. The remaining disabled persons concerned urgently require workshop facilities.

Handicrafts

Handicraft classes are held at the Social Centre, Monday to Friday, for the generally handicapped. The craft instructors are in attendance and also give instruction to housebound handicapped.

Social Centre, Moorland Avenue

The various categories of handicapped people are settling down extremely well in the social centre. Social activities are held every evening and the following organisations are using the centre:—

- 'Darby and Joan Club'—handicapped people
- Barnsley and District Handicapped Persons Sports Association
- Barnsley and District Hard of Hearing Fellowship
- Barnsley Society for Mentally Handicapped Children
- Barnsley and District Deaf
- Barnsley and District Epileptics Association
- Barnsley and District Joint Blind Welfare Committee
- Disabled Persons Association
- Multiple Sclerosis Society
- Woodland Social Club (elderly people).

The bathing service was continued throughout the year and elderly handicapped people are bathed at the centre by qualified nursing staff on three mornings per week.

Adaptations

Under article 5/5 of the Scheme for the Provision of Welfare Services for Physically Handicapped Persons, the Corporation may assist handicapped persons in arranging for the carrying out of any works of adaptation in their homes or the provision of an additional facility designed to secure the greater comforts or convenience of such persons and if the Council so determine, defray any expenses incurred in the carrying out of any such works or in the provision of such facilities. During the year the Health Committee gave authority for several adaptations to be carried out for handicapped people.

Birthday Card Service

The Health Committee's scheme in relation to the issue of birthday cards to each registered blind, partially sighted, physically handicapped and deaf person on the registers continued during the year.

Issue of Car Badges

In accordance with the then Ministry of Health Circular 17/61, the Health Committee agreed to the scheme for the provision of car badges for severely disabled persons who came within the priorities listed in the circular. During the year further pairs of badges were issued to severely disabled persons.

Liaison with other authorities

The problem confronting physically handicapped persons in ordinary day to day living are many and varied and differing welfare services are required. Close liaison with many organisations is essential. Appropriate problems of need are referred for investigation to the Department of Social Security and in certain cases suitable assistance can be provided through particular voluntary associations which cater for the needs of that particular category of the handicapped. The help and co-operation which has been received from the officers of the Department of Health and Social Security in Barnsley in dealing with cases referred to them is gratefully acknowledged. In a district where coal mining is a stable industry, many severely disabled persons are registered within the Department as a result of industrial injuries in coal mines. The needs of paraplegic ex-miners and other severely disabled miners are the particular concern of the Coal Industry Social Welfare Organisation who provide paraplegic cases with assistance including a fortnight's holiday for the disabled person and his family, a free television set and also free supply of petrol for those using a motor propelled wheelchair. Close liaison is maintained with this Organisation through the medico-social workers who have their headquarters at Pontefract.

The supply of invalid motor chairs, electrically propelled chairs, folding and transit chairs, are dealt with by the Appliance Officer of the Department of Health and Social Security, Handsworth, Sheffield. Liaison is maintained with the Manager and appreciation is expressed for the help and assistance given at all times in dealing with the cases referred to him.

Marketing of goods made by physically handicapped persons

The increasing output of articles made at the handicraft classes by physically handicapped persons makes it an essential feature of the Corporation's scheme and disposal of handicraft goods has continued from the sales shop in the centre of town during 1970.

Organised Holiday Scheme

Some 90 handicapped people took part in the organised holidays at Blackpool from 20th May to 12th June, 1970. The participants were accommodated at the Clyde Private Hotel.

"COUNTY BOROUGH OF BARNSELEY LIGHT INDUSTRIES"

(Workshop for the severely disabled)

The Manager reports as follows:

"1970 was a very satisfactory year for Barnsley Light Industries. The main concern is, of course, to employ the maximum number of workers and the numbers are now approaching thirty. This is, to a degree, a measure of success because to increase the numbers by even one extra employee is a very difficult and indeed complex task. This is not because of the difficulties in obtaining work as such but of obtaining sufficient work at a remunerative level. This enables the effects of inflation and the consequent extra wages to be offset without placing further burdens on the rates. By any standards this is not easy with any largely unskilled workforce. The increase in workforce and decrease in cost per worker is total proof of the effort put in by all employees in the department.

"The work carried out has been of a widely ranging nature starting from an export order for the U.S.A. This rather complex packing, assembly and shipping order was most successful. The Purchasing Director of the American company paid a visit to express his great satisfaction in the way all aspects (production, delivery and office work) of the order had been handled. Incidentally, the total value of the exports was 75,000 dollars. Increases in productivity and the efforts of new recruits have meant that in addition to those very big orders, there has been expansion of injection moulding of plastics, thermo-forming of plastics and packing and assembly of games for J. Waddington Ltd.

"That the department stands on its own feet so well in a very competitive industrial world without the benefits of local or central government contracts, or indeed of any kind of captive market, and that the employees are fully engaged working to meet demands made on them by outside business is a source of pride. The morale of the workpeople is high for this reason. It is very demoralising for people who are keen to work for a living to believe that the work, when it is available is to fill in their time or because it is the law to employ them or, hard as it sounds, that they are given work for a charitable reason. The workpeople at Barnsley Light Industries are employed because other people need their output. This is of tremendous importance, mentally and physically, especially when the people employed have been in some instances without work for long periods. Some indeed had given up hope of earning their own living with all the personal, family and economic problems this hopelessness brings.

"In conclusion it is again emphasised that the object is to provide gainful employment for the maximum number of people. 1970 saw material progress in this."

PART VI

ENVIRONMENTAL HYGIENE

Oh, don't the days seem lank and long
When all goes right and nothing goes wrong,
And isn't your life extremely flat
With nothing whatever to grumble at!
"Princess Ida" Act II
William Schwenk Gilbert, 1836-1911

In this field the authority's services progressed along a well established pattern throughout the year. The Chief Public Health Inspector succeeded in maintaining his staff of inspectors at full establishment till November when a vacancy occurred. Despite this he was able to effect improvements in differing aspects of the functions of his service.

The year saw no major legislative changes affecting environmental hygiene. However, 1970 was declared European Conservation Year and accordingly, emphasis was placed on the elimination of the major forms of environmental pollution. The importance of environmental conservation was further stressed by the appointment by the Secretary of State for the Environment as a successor to the Minister of Housing and Local Government.

Problems arose during the year as in 1969 from the illegal parking of caravans by itinerants. The Caravan Sites Act 1968, Part II Commencement Order requiring the provision of sites came into force and received consideration from the Council. Its provisions did not make any easier the task of the Council in reducing the unpleasantness to which many peace-loving residents of the County Borough are subjected by some of the more aggressive and anti-social itinerants. For the peace of mind of those who live in an area which is unfortunate enough to attract illegally parked caravans, the reassurance given in last year's report is repeated. This was to the effect that the hazard to their health from the proximity of the itinerants is minimal. No doubt some of their practices and habits may appear to casual observers to be unattractive or even unpleasant. Nevertheless, a surprising number of normal house dwellers do things which are equally bizarre. Some of these, though they do not contravene any statute constitute a far greater hazard to health than the presence of the itinerants.

The withdrawal of labour by certain council workers in October caused the public considerable inconvenience. In Barnsley the departure of the workmen from the Water Pollution Control Works added outright concern by causing a hazard to the public health. It may be coincidental but it is difficult to ignore the fact that the opening of the new modern works some years ago marked the commencement in the decline of the incidence of dysentery in Barnsley and this has continued progressively since then. The news that untreated sewage might have to be diverted to the River Dearne was received with considerable apprehension. Discussions

were instituted with the manager of the works with a view to reducing this to a minimum. A scheme was prepared by him with the result that only on two occasions through the whole period of the withdrawal of labour did small quantities of untreated sewage reach the river.

From the point of view of the preservation of health, this was a matter of some satisfaction, together with the fact that the decline in the incidence of dysentery was apparently continued.

PROVISION OF NEW HOUSES AND STREETS

- (1) Number of houses built since the end of the war:

(a) Privately owned	.. .. .	2,822
(b) Council owned	.. .. .	7,067
- (2) Number of houses built during 1970:

(a) Privately owned	.. .. .	153
(b) Council owned	.. .. .	92

(3) Private Streets:

West Road (154 yards) was made up during 1970.

The following streets have been officially declared highways to be maintained at public expense:

Service Road, St. Paul's Church, Old Town
 Nelson Avenue
 Footpath from Minister Way to Monks Way
 Penrith Grove
 Northumberland Way
 Various footpaths between Cumberland Drive, Northumberland
 Way and Penrith Grove
 Shelley Drive (part)
 The Arcade (part)
 Livingstone Crescent (part)
 Russell Close
 Manor Gardens

WATER SUPPLY

The following information is supplied in accordance with the requirements of Department of Health and Social Security Circular 1/71.

1. Rainfall was recorded as follows:

Jordan Hill.. .. .	628 mm
Midhope Reservoir	1133 mm

2. Water Supply:

- (a) The water supply of the area has been of satisfactory quality and quantity.
- (b) Where there was evidence of contamination of the supply, flushing the affected main removed the contamination.
- (c) All the houses in the County Borough have a direct supply.
- (d) The fluoride content of the water varied between 0.1 and 0.2 m.g. per litre.

3. Regular examinations of both raw and treated waters were made in the Department's laboratory with control examinations by the Public Analyst at Sheffield. Results obtained were:

	<i>Royd Moor Supply</i>		<i>Ingbirchworth Supply</i>		<i>Midhope Supply</i>	
	RAW WATER	TREATED WATER	RAW WATER	TREATED WATER	RAW WATER	TREATED WATER
Number of Samples	44	138	65	138	45	135
Number of samples with presumptive coliform counts	34	—	59	—	31	—
Highest count	180+	—	180+	—	130	—

Of the 307 samples taken from the distribution system in the County Borough by the Department's staff six gave presumptive coliform counts. The public analyst examined 70 samples from supply and found one presumptive coliform sample which was non-faecal.

During the year the raw and treated waters were chemically examined on 9 occasions. The results can be seen in the table below.
(b) None of the treated waters are liable to have plumbo-solvent action.

BARNSELY CORPORATION WATER DEPARTMENT Summary of Chemical Analyses, 1970

	<i>Royd Moor Supply</i>		<i>Ingbirchworth Supply</i>		<i>Midhope Supply</i>	
	RAW WATER	TREATED WATER	RAW WATER	TREATED WATER	RAW WATER	TREATED WATER
Colour (Hazen)	10	<5	<5	<5	<5	<5
pH	4.0	8.5	6.6	6.9	4.7	8.0
Conductivity (umhos/cm) . .	212	189	180	206	109	115
Dissolved Carbon Dioxide . .	14.0	0.0	2.0	2.0	6.0	0.3
Chloride (p.p.m.)	26	26	28	28	17	17
Dissolved Oxygen (p.p.m.) . .	2.1	0.5	1.3	0.6	0.4	0.2
Total Chlorine (p.p.m.) . . .	—	0.50	—	0.20	—	0.25
Free Chlorine (p.p.m.)	—	0.07	—	0.06	—	0.14
Ammoniacal N (p.p.m.)	0.2	0.1	0.0	0.0	0.2	0.0
Albuminoid N (p.p.m.)	0.0	0.0	0.0	0.0	0.0	0.0
Nitrate N (p.p.m.)	0.4	0.6	1.7	1.6	0.4	0.5
Nitrite N (p.p.m.)	0.0	0.0	0.0	0.0	0.0	0.0
Total Hardness (p.p.m. CaCO ₃)	38	58	71	82	34	45
Temporary Hardness (p.p.m. CaCO ₃)	0	17	12	25	2	12
Permanent Hardness (p.p.m. CaCO ₃)	38	41	59	57	32	33
Iron (p.p.m.)	0.6	0.1	0.1	0.0	0.2	0.1
Manganese (p.p.m.)	0.2	0.1	0.1	0.0	0.2	0.2
Potassium (p.p.m.)	0.9	1.0	1.4	1.5	0.7	0.7
Sodium (p.p.m.)	25.2	27.7	10.9	11.7	6.6	6.7
Calcium (p.p.m.)	5.5	15.0	17.9	21.1	5.2	10.1
Magnesium (p.p.m.)	5.8	5.1	6.1	7.1	4.3	4.6
Aluminium (p.p.m.)	0.8	0.5	0.1	0.0	0.6	0.4
Silica Dioxide (p.p.m.)	6.8	6.7	5.0	5.0	6.3	6.3
Sulphate (p.p.m.)	58.3	64.0	43.0	43.5	31.1	21.1
Fluoride (p.p.m.)	0.1	0.1	0.2	0.2	0.1	0.2

Fluoridation of Water Supplies

In Department of Health Circular 1/71, a specific request was made for information as to the action taken by the Council with a view to the fluoridation of the public water supplies. No action was taken during 1970 in respect of fluoridation of water supplies.

SEWAGE DISPOSAL WORKS

Effluents from the small works at Carlton have been consistently very good in quality throughout the year. At the Lundwood works, sewages have been stronger than in previous years and as a result this had a deleterious effect on the effluent during November and December although on most occasions the quality was within Royal Commission Standard. During November a second clarification pond was commissioned and the two ponds are now giving tertiary treatment to a third of the dry weather flow.

Discharges of settled storm sewage direct to the river were minimal.

The number of sludge drying beds were inadequate for the total sludge production and alternative methods of dewatering were investigated by officers of the Corporation.

FOOD AND FOOD POISONING

A total of 2 cases of food poisoning were notified, in both of which *S.typhimurium* was the causal agent.

INSPECTION OF THE AREA

In accordance with the Public Health Officers' Regulations, 1959, Article 25(20) (S.R. & O. 1959, No. 962) the following tables and information have been submitted by the Chief Public Health Inspector.

Inspection of dwellinghouses for condition of repair and sanitary defects, various other premises for hygienic reasons, and other premises for the suppression of nuisances constitute a large part of the Public Health Inspector's duties.

The following Tables I and II give in statistical form details of this work. More detailed information is given under the different headings in the body of the report.

TABLE I

Total number of Inspections made	..	..	..	..	7,983
Total number of Reinspections made	..	..	..	..	3,751
Total number of Defects found	..	..	..	..	1,235
Total number of Defects remedied	..	..	..	..	1,049
Total number of Informal Notices served	..	..	..	..	379
Total number of Formal Notices served	..	..	..	..	101
Total number of Informal Notices abated	..	..	..	..	273
Total number of Formal Notices abated	..	..	..	..	53

TABLE II
SUMMARY OF INSPECTIONS MADE

Dwellinghouses:

NO. INSPECTED	INSPECTIONS	RE-INSPECTIONS
Re: Filthy Condition	2	126
Re: Verminous Condition	134	95
Re: Other Conditions	1735	2724
Re: Houses in Multiple Occupation ..	2	1
Re: Common Lodging Houses	6	3
Re: Tents, Vans and Sheds	80	67

Other Premises

INSPECTION OF

Dairies	13	—
Ice Cream Premises	105	3
Knackers Yard	32	1
Catering Premises	160	40
Food Preparing Premises.. .. .	55	18
Premises re. Diseases of Animals	498	—
Pet Animals Premises	3	—
Markets	43	—
Licensed Premises	38	12
Food Shops	585	127
Animal Boarding Establishments	8	6
Factories with Power	60	40
Factories without Power	1	—
Outworkers Premises	3	—
Bakehouses.. .. .	18	17
Hawkers Premises	107	3
Hairdressers Premises	26	2
Offices, Shops and Railway Premises ..	804	2
Cinemas and Theatres	12	—
Scrap Metal Dealers	33	—
Offensive Trades	34	—
Smoke Observations	383	—
Smoke Visits to Plant	137	1
Smoke Control Area Visits	1434	1
Premises re. noise complaints	139	—
Other Premises—Visits and interviews ..	411	57
TOTAL NUMBER OF DEFECTS FOUND ..	1170	65
TOTAL NUMBER OF HOUSES AFFECTED ..	664	72
TOTAL NUMBER OF OTHER PREMISES AFFECTED	146	4

A summary of nuisances abated and defects remedied in dwelling-houses and other premises is shewn in the statistical table appended below:

TABLE III

Dwellinghouses:

INTERNAL:

Floors repaired or renewed	19
Walls repaired or renewed	67
Ceilings repaired or renewed	44
Fireplaces repaired or renewed	29
Flues repaired or renewed	4
Windows repaired or renewed	47
Doors repaired or renewed	7
Staircases repaired or renewed	3
Sinks repaired or renewed	22
Waste pipes repaired or renewed	40
Hot water supplies repaired or renewed	5
Foodstores provided or improved	1
Baths provided or improved	15
Cleansed or limewashed	3
Freed from vermin	42
Damp conditions abated	106

EXTERNAL

Roofs repaired	18
Eaves spouts repaired or provided	33
Downspouts repaired or provided	8
Downspouts disconnected from drains	1
Walls repaired or repointed	10
Chimney stacks repaired or repointed	2
Doors repaired or renewed	1
Steps repaired or renewed	1
Yard paving repaired	7

Drains:

Cleansed	145
Repaired	84
Reconstructed	3
Self cleansing gullies provided	3

Inspection Chambers:

Built	2
Repaired or improved	3

Water Closets:

Provided in substitution of pail closet	1
Structure repaired or improved	18
Fittings repaired or improved	68

Waste Water Closets:

Abolished	2
-------------------	---

Pail Closets:									
Abolished .. .. .	..	..	..	..	..	..	..	..	1
Converted to water closet .. .. .	..	..	..	..	..	..	..	..	1
Ashbins:									
Renewed for houses .. .. .	..	..	..	..	..	..	..	..	44
Bakehouses:									
Cleansed or limewashed .. .. .	..	..	..	..	..	..	..	..	6
Premises improved .. .. .	..	..	..	..	..	..	..	..	5
Catering Premises:									
Premises improved .. .. .	..	..	..	..	..	..	..	..	39
Food Preparing Premises:									
Cleansed and limewashed .. .. .	..	..	..	..	..	..	..	..	7
Premises improved .. .. .	..	..	..	..	..	..	..	..	7
Food Shops:									
Improved .. .. .	..	..	..	..	..	..	..	..	63
Offensive Accumulations:									
Removed .. .. .	..	..	..	..	..	..	..	..	6
Licensed Premises:									
Improved .. .. .	..	..	..	..	..	..	..	..	1
Factories:									
Sanitary conveniences cleansed and limewashed .. .. .	..	..	..	..	..	..	..	..	3
Sanitary conveniences provided .. .. .	..	..	..	..	..	..	..	..	1
Intervening ventilated space provided .. .. .	..	..	..	..	..	..	..	..	1
Fittings repaired or renewed .. .. .	..	..	..	..	..	..	..	..	1
TOTAL DEFECTS REMEDIED .. .. .	..	..	..	..	..	..	..	..	1049
TOTAL HOUSES AFFECTED .. .. .	..	..	..	..	..	..	..	..	786
TOTAL OTHER PREMISES AFFECTED .. .. .	..	..	..	..	..	..	..	..	76

TABLE IV

This table gives details of inspections and reinspections of houses carried out under the Housing Acts, under the various headings.

	INSPECTIONS REINSPECTIONS	
Individual Unfit Houses:		
Houses inspected	5	1
Clearance Areas:		
Houses inspected	324	202
Overcrowding:		
Houses inspected	1	
Improvement Grants:		
Houses inspected	451	198
Housing Act, 1964—Section 19:		
Houses inspected re: representations ..	14	3

Disinfection and Disinfestation Cleansing of Verminous Persons

Disinfection

Terminal disinfection in the case of infectious diseases is not now carried out. Information is given to householders on cleansing and disinfecting their homes and effects.

Disinfestation

The following premises were treated during the year:—

- 57 Local Authority houses for bedbugs.
- 13 Local Authority houses for cockroaches.
- 14 Local Authority houses for redmite.
- 6 Local Authority houses for silverfish.
- 7 Local Authority houses for other purposes.
- 9 Privately owned houses for bedbugs.
- 1 School clinic was treated for cockroaches.

Cleansing of Verminous Persons

Five persons were cleansed by bathing at the cleansing station and their clothing steam disinfested.

Offensive Trades

There are two offensive trade premises requiring consent to establishment and the required consent was given during the year. The premises consist of:—

- 1 Tripe Boiler
- 1 Bone Boiler and Fat Extractor.

Nuisance caused by effluvia from the bone boiling premises was caused on a number of occasions and, although some of these were due to mechanical faults, a large number were caused by the operators not using all the devices provided for the proper functioning of the plant. Notice was served on the occupier to abate the nuisance and some improvement was effected. These premises require constant supervision.

HOUSING

Housing functions, particularly in the private sector, are one of the fundamental and most important duties of Public Health Inspectors. Under the general heading the various functions, such as slum clearance, repair and improvement of houses, reduction of overcrowding, are dealt with.

Slum Clearance

The following Clearance Areas were declared during the year:—

Snowdrop Terrace Clearance Area No. 190	16	houses
Prospect Street Clearance Area No. 191 ..	13	„
Prospect Street Clearance Area No. 192 ..	16	„
Prospect Street Clearance Area No. 193 ..	5	„
Somerset Street Clearance Area No. 194 ..	9	„
Somerset Street Clearance Area No. 195 ..	6	„
Somerset Street Clearance Area No. 196 ..	10	„

King Street Clearance Area No. 197	..	24	houses
King Street Clearance Area No. 198	..	33	„
King Street Clearance Area No. 199	..	3	„
Waltham Street Clearance Area No. 200	..	13	„
Summer Street Clearance Area No. 201	..	2	„
Rock Street Clearance Area No. 202	..	31	„
Pontefract Road Clearance Area No. 203		22	„
Hornby Street Clearance Area No. 204	..	22	„
Cresswell Street Clearance Area No. 205	..	7	„
Sarah Ann Street Clearance Area No. 206		4	„
Pontefract Road Clearance Area No. 207		12	„
Burton Bank Clearance Area No. 208	..	3	„
Newton Street Clearance Area No. 209	..	6	„
Hope Street Clearance Area No. 210	..	4	„
Greenfoot Lane Clearance Area No. 211	..	9	„
		<hr/>	
		270	
		<hr/>	

Individual Unfit Houses dealt with:

3 dwellinghouses were represented as unfit with a view to closing or demolition.

Unfit houses demolished in Clearance Areas

Shepherd Street Clearance Area No. 179	..	13	houses
Churchfield Terrace Clearance Area No. 183		12	„
Burton Road Clearance Area No. 186	..	14	„
Doncaster Road Clearance Area No. 187		8	„
		<hr/>	
		47	„
		<hr/>	

Individual Unfit houses closed or demolished

78 Carlton Terrace—demolished 1 house

Overcrowding

There is no overcrowding of dwellinghouses in the area. There is probably more under occupation than overcrowding of dwellinghouses in all sectors of the community, due to a sufficiency of dwellinghouses.

Improvement Areas Housing Act, 1969

The Barnsley Improvement Area No. 1, 1967 made under the Housing Act, 1964 was enlarged by the addition of a further 106 dwellinghouses and re-designated a general improvement area. This decision was agreed in principle, and the environmental improvement work is now being formulated. When this is completed the complete scheme with the written report will be submitted to the Council for consideration. It is hoped that this project will give valuable experience for the submission of future schemes.

Improvement of Dwellings outside Improvement Areas Housing Act, 1964: Section 19

14 representations were received from tenants requesting the Council to enforce the provision of standard amenities.

The following action was taken as a result of representations made:—

13 Preliminary Notices were served.

22 Immediate Improvement Notices were served.

15 houses were improved to the full standard.

1 Purchase Notice was received by the Council.

From the small number of representations made by tenants, it would appear that the requirements of this Section (19) of the Act are not known or that tenants are reluctant to require owners to provide standard amenities in their dwellinghouses.

Improvement Grants

The increased grant payments and the inclusion of the cost of certain repairs for the first time under the Housing Act, 1969, have increased the number of applications accordingly.

The following grants were approved during the year:—

117 Improvement (Discretionary) Grants

261 Standard Grants.

Improvements were carried out to the following dwellinghouses:—

105 Improvement (Discretionary) Grants.

238 Standard Grants.

The standard grant amenities provided comprised the following:—

208 Fixed Baths.

217 Wash Hand Basins.

209 Hot Water Supplies.

232 Internal Water Closets.

9 Sinks.

Over 3,000 dwellinghouses have now been improved since the inception of the scheme.

Sanitary Accommodation

Of the 26,064 dwellinghouses, 24,387 dwellinghouses or 93.5% had separate sanitary accommodation; 1,677 dwellinghouses or 6.5% had shared sanitary accommodation.

21,860 dwellinghouses or 84% had hot water and baths and 4,204 dwellinghouses or 16% had no hot water or baths.

Qualification Certificates

Rent Act, 1968: Housing Act, 1969

Owners of dwellinghouses which are subject to a controlled tenancy can, if the house is provided with all the standard amenities or if it is proposed to provide the amenities, and complies in other respects with the requirements of the Act, apply to the Council for a Qualification

Certificate. This will enable the owner to apply to the Rent Officer to fix a fair rent for the dwellinghouse and change the tenancy from a controlled tenancy to a regulated tenancy.

During the year applications were dealt with as follows:—

Number of applications received under Section 44(1)(where the dwelling already has the required amenities)	134
Number of applications received under Section 44(2)(where it is proposed to provide the standard amenities)	35
Number of Provisional Certificates granted	34
Number of Qualification Certificates granted	17
Number of Certificates refused	82

One owner appealed to County Court against the refusal of the Council to grant a Qualification Certificate. The judge upheld the Council's decision and the appeal was lost.

Houses in Multiple Occupation

There is no problem with multi-occupation, the number of dwelling-houses used for this purpose are very few and comply with the provision of the relevant Housing Acts. This is mainly due to a sufficiency of dwelling-houses both in the public and private sectors.

Caravans and Caravan Sites

There are no public or private Caravan sites in the district.

The Caravan Sites Act, 1968 (Part II) (Commencement) Order, 1970 was made during the year and brought into effect from 1st April, 1970 certain sections of the Caravan Sites Act, 1968.

A member of the Gypsy Council addressed a meeting of the Sanitary Committee during the year and stressed the need for providing a site for gypsies in the Borough.

There have been a number of cases during the year where itinerant gypsies have parked illegally on sites within the Borough and have had to be removed. There have been a number of meetings of the Caravan Co-ordinating Committee to deal with the question of illegal parking. At the close of the year no final decision had been taken to deal with this very difficult matter.

Common Lodging Houses

The one Common Lodging House in the Borough was re-registered during the year and the same keeper and deputy keeper were re-registered.

The premises are maintained in a satisfactory manner and the keeper co-operates with the Department in all matters that may arise affecting the lodgers. Most of the lodgers are permanently housed in these premises which cater for the needs of this type of person.

FOOD

Supervision of Food Premises

One specialist Public Health Inspector (Food Hygiene) deals with the supervision and inspection of food premises.

There is still appalling ignorance by food handlers of basic hygiene and it is only by constant supervision and education that this ignorance can be dispelled. Talks are given to food handlers in food shops and there is active co-operation by the employers in order to achieve a better standard of food hygiene.

A first course in Food Hygiene commenced at the local College of Technology and the specialist Public Health Inspector was given authority by the Council to lecture on some aspects of this course. At the end of the course persons sat for the Royal Society of Health examination to obtain a certificate in the hygiene of food retailing and catering. Fifteen persons were successful in passing the examination. This is a very creditable first performance and a further course with a larger number of students is now in session.

One prosecution for an offence against Regulation 10 of the Food Hygiene (General) Regulations 1960 was taken against the occupier of a retail shop. The occupier was fined £5.

Letters notifying contraventions of the Regulations were sent to occupiers with respect to the following premises:—

Retail food shops	29	letters sent
Wholesale warehouses	3	„ „
Manufacturing premises	11	„ „
Hotels and clubs	6	„ „
Cafes and restaurants	7	„ „
Canteens	3	„ „
Mobile shops	20	„ „
	<hr/>	
	79	„ „
	<hr/>	

List of Food Premises

TYPE OF PREMISES	NUMBER
Bakehouses	16
Breweries	1
Butchers shops	63
Catering Establishments	40
Clubs	48
Flour Confectionery shops	33
Food preparing premises	55
Fried Fish shops	60
Fruit and vegetable retailers	35
Fruit and vegetable wholesalers	3
Grocery and provision dealers premises	223
Hawkers food storage premises	45
Hotels and public houses	92
Ice Cream manufacturers	2
Ice Cream retailers	320
Milk depots and plants	2
Mineral water manufacturers	2
Off-licence premises	74
Premises from which milk is sold	180
School kitchens	26
Slaughterhouses	1
Sugar confectionery shops	66
Tripe boilers	1
Wet fish shops	3
Wholesale confectionery stores	2
Wholesale grocery warehouses	5
Works canteens	21

Improvements in Food Premises

PREMISES	WASH BASINS PROVIDED	HOT WATER SUPPLY PROVIDED	PREMISES CLEANSED AND RE-DECORATED	FIXTURES AND FITTINGS IMPROVED	PREMISES IMPROVED	FIRST AID EQUIPMENT PROVIDED	WATER CLOSETS PROVIDED
Food Preparing Premises	1	2	12	6	5		
Food Shops	6	4	15	11	13	1	1
Catering Establishments	4	3	12	11	8	2	
Licensed Premises . .	2	2	2				

Hawkers of Food and Food Storage Premises

Hawkers of food and their food storage premises are required to be registered with the Council, as required by the Barnsley Corporation Act, 1949.

17 hawkers were registered during the year.

3 hawkers' food storage premises were registered during the year.

At the end of the year there were on the register 140 hawkers of food and 49 food storage premises.

20 letters were sent to hawkers drawing their attention to contraventions of the Food Hygiene (Markets, Stalls and Delivery Vehicles) Regulations, 1966.

Knackers Yard

There is one premises licensed under the Food and Drugs Act, 1955. The premises were re-licensed during the year. These premises are only infrequently used and generally for moribund animals being brought in for disposal.

The premises have been kept in a cleanly state.

Milk Supply

Licensing of Milk Heat-Treatment Plants and Distribution Depots

One dealer's (Pasteurisers) Licence was granted.

One dealer's distribution depot is licensed.

One dealer's licence is in operation for the sale of ultra heat-treated milk.

131 dealer's licences are in operation for the sale of Pasteurised or Sterilised milk.

Registration of Distributors of Milk

130 persons are registered as distributors of milk.

Bacteriological Examination of Milk

Routine sampling of milk for bacteriological and biological examination, is carried out and the samples submitted to the Public Health Laboratory at Wakefield for examination.

One sample of untreated milk taken from a vending machine failed the methylene blue test. The producer was warned by letter.

No samples of untreated milk were taken for biological examination during the year.

The [following is a list of samples taken and the results of the subsequent examination:—

Methylene Blue Test

24 samples of Untreated Milk—22 satisfactory.
1 void.
1 unsatisfactory.
14 samples of Pasteurised milk—12 satisfactory
2 void.

Phosphatase Test

14 samples of Pasteurised milk—14 satisfactory.

Colony Test

1 sample of Ultra Heat Treated Milk—1 satisfactory.

Turbidity Test

4 samples of Sterilised Milk—4 satisfactory.

Brucella Abortus

23 samples of Untreated Milk—23 satisfactory.

Antibiotics

23 samples of Untreated Milk—23 satisfactory.

Bacteriological examination of ice cream

94 samples of ice cream were taken and submitted to the Public Health Laboratory for bacteriological examination with the following results:—

TYPE OF ICE CREAM	TOTAL SAMPLES	GRADE I	GRADE II	GRADE III	GRADE IV
Heat Treated	91	83	2	4	2
Cold Mix ..	3	1	—	1	1
	—	—	—	—	—
	94	84	2	5	3
	—	—	—	—	—

The samples in Grades I and II are satisfactory and the samples in Grades III and IV are considered unsatisfactory. The manufacturers of the unsatisfactory samples were informed and further investigation of their manufacturing processes were undertaken.

In addition to the ice cream samples, three lollipops were examined and no pathogens were isolated.

Special Examination of Food

A number of foods were examined, either chemically or bacteriologically, due to complaint by members of the public. Shewn below is a list of these foods, together with the result of the examination.

Custard Tarts—no pathogens isolated.
Self Raising Flour—a small number of beetles found.
Corned Beef (3 samples)—no pathogens isolated.
Fruit Pie—contained alfalfa seed pods.

Cooked Chicken—no pathogens isolated.
 Luncheon Meat—no pathogens isolated.
 Ostermilk (Dried Milk)—no pathogens isolated.
 Boiled Ham (5 samples) no pathogens isolated.
 Nuts —contained a number of small beetles.
 Meat Sandwich—Staphylococcus Hurens isolated (not typable).
 Roast Pork—no pathogens isolated.
 Bread from Sandwich—contained lubricating oil.
 Yoghurt—satisfactory.
 Yoghurt—contained a fruit beetle.
 Instant Coffee—contained glass fragments.

Food Poisoning Investigations

No outbreak of food poisoning occurred during the year.

Merchandise Marks Acts

Inspection of foods for the required marking of imported products is carried out during inspections of markets and shop premises. No infringements of the Act or Orders made thereunder were detected.

Meat and Other Foods

The slaughtering of animals for human consumption is carried out at the Public Abattoir. Meat inspection is performed by two full time Authorised Meat Inspectors.

No prosecutions were made during the year, but the following contraventions were dealt with:—

- (a) **Removal of sheep carcasses before inspection and stamping**
Owner warned by letter.
- (b) **Dirty clothing and person of slaughterman**
Verbal notice to cleanse hands and clothing.
- (c) **Dirty meat delivery vehicle**
Owner warned by letter to cleanse vehicle and discontinue the use for other purposes.

Animals Slaughtered and Inspected

Cattle	13,386
Sheep	33,315
Calves	108
Pigs	26,058
TOTAL	72,867

Fresh Meat Condemned at the Abattoir

Beef	2,736 lbs.
Beef Offal	45,761 lbs.
Mutton	897 lbs.
Mutton Offal	9,300 lbs.
Veal	357 lbs.
Veal Offal	163 lbs.
Pork	6,637 lbs.
Pork Offal	4,480 lbs.
	70,331 lbs.

31 tons 7 cwts. 3 qrs. 23 lbs.

TABLE V
Carcases and all Organs Condemned

ANIMAL	INFLAMMATORY DISEASES	BACTERIAL DISEASES	ACCIDENT
Cows	3	1	2
Sheep	12		
Calves	10	1	
Pigs	6	12	

TABLE VI
Carcases Partially Condemned

ANIMAL	BACTERIAL DISEASES	ACCIDENT
Cows	1	3
Pigs		1

TABLE VII
Various Organs Condemned as Unfit for Human Consumption

	HEADS	TONGUES	LUNGS	LIVERS	STOMACHS	KIDNEYS	HEARTS	SPLEENS	UDDERS	MESENTERIES & INTESTINES
TUBERCULOSIS										
Bullocks	—	—	2	—	—	—	—	—	—	—
Pigs	208	208	2	1	—	—	1	—	—	—
INFLAMMATORY DISEASES:										
Bulls	—	—	2	14	—	12	—	—	—	—
Bullocks	—	1	34	72	—	197	22	6	—	1
Heifers	—	—	13	12	1	53	5	1	—	1
Cows	—	—	18	201	2	147	13	1	129	3
Sheep	—	—	1	—	2	2	1	—	—	2
Pigs	—	—	6	5	8	1	5	—	—	8
PARASITIC DISEASES:										
Bulls	—	—	1	16	—	—	—	—	—	—
Bullocks	14	14	7	667	—	—	12	—	—	—
Heifers	3	3	1	175	—	—	5	—	—	—
Cows	5	5	9	362	—	—	—	—	—	—
Sheep	—	—	1302	2519	—	—	1302	—	—	—
Pigs	—	—	459	749	—	—	459	—	—	—
OTHER BACTERIAL DISEASES:										
Bulls	—	—	1	10	—	—	—	—	—	—
Bullocks	15	16	8	405	—	—	—	—	—	—
Heifers	2	2	—	121	—	—	—	—	—	—
Cows	4	4	1	77	—	—	—	—	—	—
Sheep	—	—	—	1	—	—	—	—	—	—

TABLE VIII
Analysis of Inspection of Meat

	Cattle (Excluding Cows)	Cows	Calves	Sheep and Lambs	Pigs
Number killed	10897	2489	108	33315	26058
Number Inspected	10897	2489	108	33315	26058
All diseases except Tuberculosis and Cysticerci					
Whole carcasses condemned ..		4	11	14	18
Carcasses of which some part or organ was condemned	1742	603	1	2691	912
Percentage affected with disease	15.9	24.4	11.1	8.1	3.5
Tuberculosis only					
Whole carcasses condemned ..	—	—	—	—	—
Carcasses of which some part or organ was condemned	2				208
Percentage affected with disease	0.02				0.8
Cysticercosis					
Carcasses of which some part or organ was condemned	35	4			
Carcasses refrigerated	5	1			
Generalised and totally condemned	—	—			

Cysticercus Bovis

The total number of cattle affected with *Cysticercus Bovis* was 45 (83 last year). This is the second year when a great reduction in the incidence of *Cysticercus Bovis* has been recorded. The affected animals comprised 31 bullocks, 9 heifers and 5 cows. The 6 viable cases comprised 4 bullocks, 1 heifer and 1 cow.

Bacteriological and Biological Examination of Meat

Biological examinations of the retro pharyngeal lymph glands of one bullock were carried out at the Ministry of Agriculture, Fisheries and Food laboratory, and the diagnosis of tuberculosis was confirmed.

Other Foodstuffs Condemned and Voluntarily Surrendered

Fresh meat from shops and stores		
Beef, Mutton and Pork	931 lbs.	
Fruit and Vegetables		
Cabbage	240 lbs.	
Fish		
Fresh fish	19 lbs.	
Other Foods		
Turkeys	134 lbs.	
Chickens	445 lbs.	
Bacon and Ham	30 lbs.	
Eggs	2 lbs.	
Cheese	15 $\frac{3}{4}$ lbs.	
Christmas Puddings	12 lbs.	
Ice Cream	331 lbs.	
Frozen Foods (various)	1,603	
Preserved Foods	9,462 lbs.	

Summary of Food Condemned

	TONS	CWTS.	QRS.	LBS.
Fresh meat from Abattoir ..	31	7	3	23
Fresh meat from shops ..		8	1	7
Fruit and Vegetables		2		16
Fish				19
Other Foods		8	2	17 $\frac{1}{2}$
Frozen Foods		14	1	7
Preserved Foods	4	4	1	26
Total ..	37	6	—	3 $\frac{3}{4}$

Food and Drugs

222 samples of foods and drugs were procured for chemical analysis by the Public Analyst. These comprised 48 samples of milk and 174 samples of other foods.

Milk

The average composition of the 48 samples of milk was 4.06% milk fat and 8.92% solids other than milk fat. All the samples were genuine and conformed to the Sale of Milk Regulations, 1939.

Ice Cream

3 samples of ice cream were taken for chemical analysis and all the samples were genuine, containing more than 5% fat as required by the Food Standards (Ice Cream) Regulations, 1959.

**Samples of Food and Drugs (other than Milk)
sent to the Public Analyst during 1970**

ARTICLE	TOTAL	GENUINE	NOT GENUINE	FORMAL		INFORMAL	
				GENUINE	NOT GENUINE	GENUINE	NOT GENUINE
Angel Dessert	1	1				1	
Apple Squash	1	1				1	
Apricot Custard	1	1				1	
Blackberry Jelly	1	1				1	
Blackcurrant Fruit Pie ..	1	1				1	
Butter	5	5				5	
Butter Candied Popcorn ..	1	1				1	
Beef Casserole	1	1				1	
Beef Spread	2	2				2	
Beef Flavour	1	1				1	
Brawn	1	1				1	
Buttermilk	1	1				1	
Baby Syrup	1	1				1	
Cheese	3	1	2		1	1	1
Cheese Spread	3	3				3	
Crab Paste	1	1				1	
Cream	15	14	1			14	1
Cream Cakes	2	2				2	
Chicken Fillets	3	3				3	
Coffee	2	2				2	
Cornflour	1	1				1	
Cough Linctus	2	2				2	
Crispbread	1	1				1	
Cream Dessert	2	2				2	
Coconut Drops	1	1				1	
Cornish Pasties	2	2				2	
Corn Relish	1	1				1	
Custard	2	2				2	
Caramel Delight and Cream	1	1				1	
Chocolate Fingers	1	1				1	
Christmas Pudding	1	1				1	
Cod Liver Oil	1	1				1	
Cut Mixed Peel	2	2				2	
Cream Trifles	1	1				1	
Condensed Milk	1	1				1	
Cake Topping	1	1				1	
Dripping	2	2				2	
Egg and Bacon Breakfast ..	1	1				1	
Evaporated Milk	1	1				1	
Fish Cakes	2	2				2	
Fish Paste	1	1				1	
Food Colours	1	1				1	
Glace Cherries	1	1				1	
Golden Syrup	1	1				1	
Grapefruit Juice	1		1				1
Honey	1	1				1	

Samples of Food and Drugs (other than Milk)
sent to the Public Analyst during 1970

ARTICLE	TOTAL	GENUINE	NOT GENUINE	FORMAL		INFORMAL	
				GENUINE	NOT GENUINE	GENUINE	NOT GENUINE
Ham and Beef Roll	1	1				1	
Ice Cream	3	3				3	
Junior Balsam	1	1				1	
Jam	2	2				2	
Liver and Ham Paste ..	1	1				1	
Liquid Paraffin	1	1				1	
Lucozade	1	1				1	
Lemon Flavouring	1	1				1	
Liver Salts	1	1				1	
Margarine	4	4				4	
Malted Milk	1	1				1	
Mussels	1	1				1	
Non-brewed Condiment ..	1	1				1	
Meat Pudding	1	1				1	
Orange Drink	4	4				4	
Orange Syrup	3		3		2		1
Pie (Meat)	19	18	1	1		17	1
Polony	1	1				1	
Potted Beef	1	1				1	
Piccalilli	1	1				1	
Parrish's Food	1	1				1	
Peanut Butter	1	1				1	
Rosehip Syrup	1	1				1	
Sausage	19	18	1	1		17	1
Savoury Ducks	2	2				2	
Sardine Spread	1	1				1	
Sausage Rolls	4	4				4	
Savoury Crisps	1	1				1	
Spirit of Nitre	1	1				1	
Shandy	2	2				2	
Shredded Beef Suet	2	2				2	
Soup	2	2				2	
Sage and Onion Stuffing ..	1	1				1	
Table Jelly	1	1				1	
Tongue Spread	1	1				1	
Tea	1	1				1	
Tongue and Turkey Meat	1	1				1	
Vinegar	1	1				1	
Yoghurt	2	2				2	
	174	165	9	2	3	163	6

PARTICULARS OF ADULTERATED SAMPLES OF FOODS OTHER THAN MILK

SAMPLE NO.	ARTICLE	ADULTERATION OR OFFENCE	REMARKS
359 Formal	Orange Syrup	Deficient in Oil 15.3%	See sample no. 460
424 Informal	Orange Syrup	Deficient in Oil 18.5%	See sample no. 460
441 Informal	Pork Sausage	Deficient in Meat 14.0%	Formal sample genuine.
443 Informal	Pork Pie	Deficient in Meat 17.9%	Formal sample genuine.
460 Formal	Orange Syrup	Deficient in Oil 18.5%	Manufacturer fined £5.
468 Informal	Cream Cheese (with Pineapple)	Deficient in fat 26.2%	See sample no. 512.
500 Informal	Double Devon Cream	Slightly deficient in fat	Letter of warning.
503 Informal	Grapefruit Juice.	Deficient in Vitamin C 90%	Letter of warning.
512 Formal	Cream Cheese (with Pineapple)	Deficient in fat 32.0%	Prosecution pending.

PROSECUTIONS FOR VARIOUS OFFENCES IN CONNECTION WITH FOOD

- CASE A: Sale of mouldy pie. Fined £10.
CASE B: Sale of chocolate affected with larvae. Fined £25.
CASE C: Sale of mouldy meat pie. Fined £20.
CASE D: Sale of a mouldy loaf of bread. Fined £10.
CASE E: Sale of a sandwich teacake containing a foreign substance. Fined £5.
CASE F: Sale of a carton of yoghurt containing an insect. Fined £20.
CASE G: Sale of a jar of coffee containing a piece of glass. Fined £30.
CASE H: Sale of a mouldy loaf of bread. Fined £25.
CASE I: Sale of orange syrup deficient in cod liver oil. Fined £5.
CASE J: Sale of unsound potted meat paste. Fined £15.
CASE K: Sale of a bottle of dandelion and burdock not of the substance demanded. Fined £10.
CASE L: Sale of mouldy sausage rolls. Fined £10.
CASE M: Sale of mouldy sausage rolls. Fined £100.

FOOD OFFENCES NOT PROSECUTED

- CASE A: Sale of a bottle of milk containing pieces of glass.
CASE B: Sale of orange syrup deficient in oil.
CASE C: Sale of frozen peas containing a slug.

AIR POLLUTION

Smoke Abatement

This year, being "Conservation Year", highlights pollution in all its various forms and pollution of the air by smoke ranks high in the list of environmental pollutants.

Smoke abatement is regulated mainly by the Clean Air Acts 1956 and 1968. Industrial premises, with two exceptions, are now operating without serious nuisance and of the two plants causing smoke nuisance, one is to be re-boilered during 1971 and the other plant is to be completely turned over to oil burning by 1972. New Regulations to the Alkali Act are expected during 1971 and these Regulations will include a tarmacadam plant which has been causing a dust problem.

Smoke Control Areas

Two Smoke Control Areas were confirmed by the Minister of Housing and Local Government during the year. These two Orders comprised Smoke Control Order No. 12 1969, originally the subject of one objection (subsequently withdrawn by the objector) and Smoke Control Order No. 14, 1969.

The Ministry of Housing and Local Government having intimated that no further smoke control orders will be confirmed until after April 1971, the Council decided that no further areas should be surveyed for the time being. This curtailing of smoke control because of the lack of smokeless solid fuel is another serious blow to the cause of smoke abatement and will inevitably take a longer period of time in which to complete the local authority's smoke control programme.

There are now 14 confirmed smoke control areas in the borough. 9 areas are in operation, three areas had the operative dates postponed from 1st July, 1970 to the 1st April, 1971 and two areas come into operation on the 1st April, 1971 and the 1st July, 1971 respectively.

It is assumed that the national shortage of solid smokeless fuel will be overcome during 1971 and the resumption of smoke control will again be undertaken. The smoke control area programme has been delayed a further two years due to the fuel situation.

The two smoke control orders which were confirmed during the year were:—

Barnsley Smoke Control Order No. 12, 1969

Confirmed 25th August, 1970.

Operative date 1st July, 1971.

Comprises 210 dwellinghouses and 4 other premises.

Area 38.6 acres.

Barnsley Smoke Control Order No. 14, 1969

Confirmed 9th March, 1970.

Operative date 1st April, 1971.

Comprises 98 dwellinghouses and 2 other premises.

Area 573 acres.

Clean Air Act, 1956

Notices of intention to install a furnace, under Section 3(3) was received in respect of 15 premises, and were approved.

No applications were received under Section 3(2) requesting prior approval by the Council.

Clean Air Act, 1968—Section 6

Applications for approval of chimney heights were received in respect of 15 premises and these applications were approved.

Colliery Spoilbanks

There was only one viable colliery within the Borough boundary, Wharncliffe Woodmoor 4 and 5 Pits. This colliery closed down during the year.

All the spoilbanks are inert and no nuisance from burning spoilbanks occurred during the year.

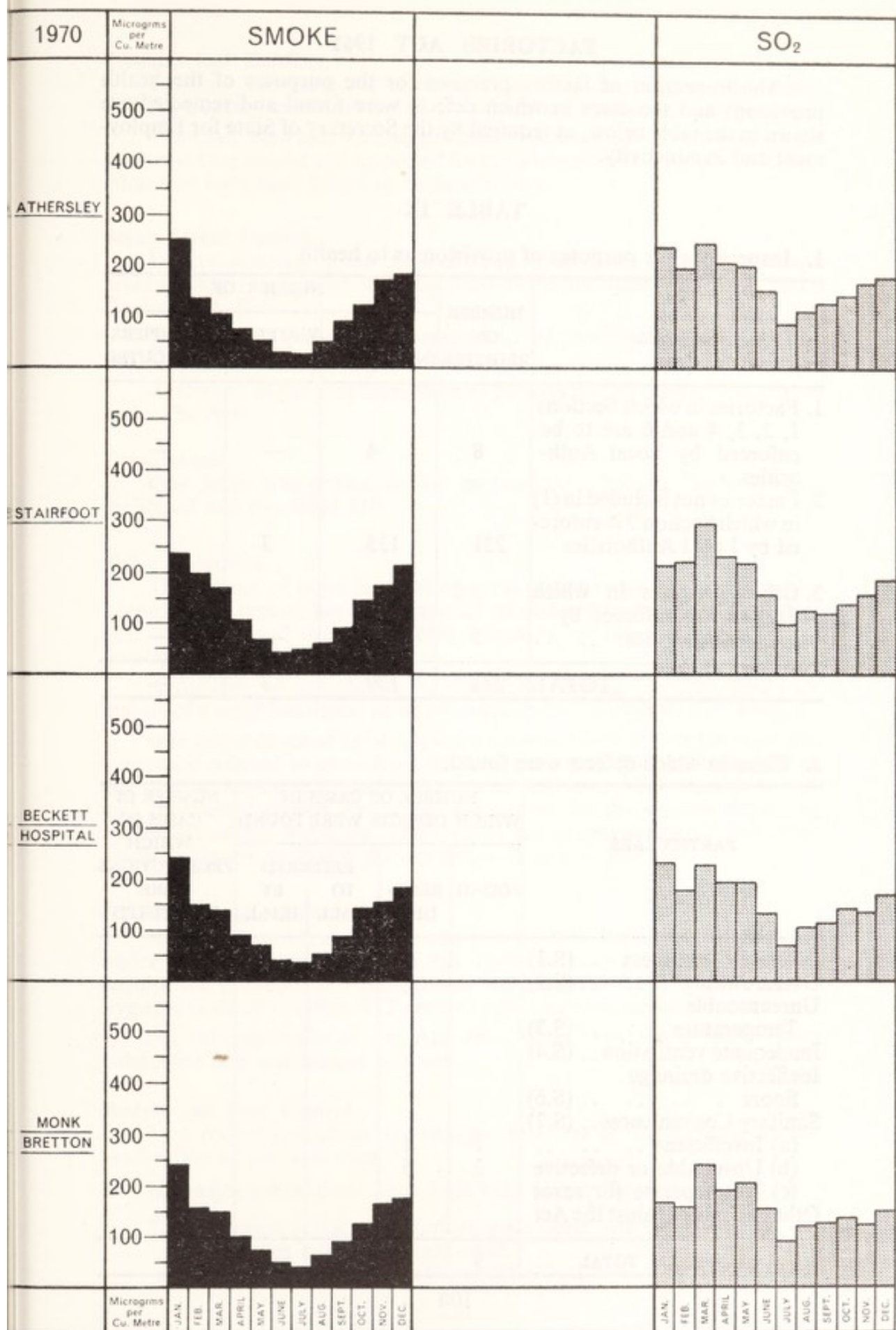
Air Pollution Records

Four smoke and sulphur continuous recording stations are maintained at Athersley, Stairfoot and Monk Bretton clinics and Beckett Hospital.

Smoke pollution continues to decline but was most marked at the Athersley station. Until 1969 this station had the highest recorded depositions of smoke but during 1970 there was a decrease of 56% compared with the average decrease of 20% at the other stations. This was due to the coming into operation in September 1969 of the Barnsley Smoke Control Order No. 4, 1967.

There is continued co-operation with the Warren Spring Laboratory of the Department of Education and Science, on the survey of air pollution.

A graph showing the smoke and sulphur recordings at each station is appended.



FACTORIES ACT 1961

The inspection of factory premises for the purposes of the health provisions and the cases in which defects were found and remedied are shewn in the table below, as required by the Secretary of State for Employment and Productivity.

TABLE IX

1. Inspections for purposes of provision as to health.

PREMISES	NUMBER ON REGISTER	NUMBER OF		
		INSPECTIONS	WRITTEN NOTICES	OCCUPIERS PROSECUTED
1. Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities.	8	4	—	—
2. Factories not included in (1) in which Section 7 is enforced by Local Authorities	231	135	3	—
3. Other premises in which Section 7 is enforced by Local Authorities	5	—	—	—
TOTAL	244	139	3	—

2. Cases in which defects were found.

PARTICULARS	NUMBER OF CASES IN WHICH DEFECTS WERE FOUND				NUMBER OF CASES IN WHICH PROSECUTIONS WERE INSTITUTED
	FOUND	REMEDIED	REFERRED TO H.M.I.	BY H.M.I.	
Want of Cleanliness .. (S.1)					
Overcrowding (S.2)					
Unreasonable Temperature (S.3)					
Inadequate ventilation .. (S.4)					
Ineffective drainage floors (S.6)					
Sanitary Conveniences .. (S.7)					
(a) Insufficient	1	1			
(b) Unsuitable or defective	2	5			
(c) Not separate for sexes					
Other offences against the Act					
TOTAL ..	3	6			

Cinemas and Theatres

The two cinemas in the town have been kept in a hygienic condition and the sanitary accommodation is suitable and sufficient.

The Civic Hall and various premises where occasional stage plays are performed are visited and inspected for cleanliness and sanitary accommodation and have been found to be satisfactory.

Scrap Metal Dealers

Persons carrying on the trade of scrap metal dealer together with their premises have to register with the local authority under the Scrap Metal Dealers Act, 1964.

Twenty-three persons with respect to 10 premises made application for registration during the year.

At the end of the year there were 93 persons and 47 premises registered under the Act.

Prosecutions

One dealer was prosecuted for carrying on a business without being registered and was fined £10.

Noise Nuisances

The subject of noise is receiving great attention as a potential health hazard and attention has been focussed on this matter during conservation year. The Council are subscribing members of the Noise Abatement Society.

A number of complaints were received during the year, but were mainly of a neighbourhood noise nuisance and were dealt with informally.

One major cause of noise nuisance was dealt with during the year. The complaint referred to noise from fettling operations during the night at an engineering works. A formal notice under the Noise Abatement Act, 1960 and the Public Health Act, 1936 was served on the owners requesting abatement of the nuisance. The owners are endeavouring to find other accommodation so that night working will be obviated.

Hairdressers and Barbers

Registration of hairdressers and barbers with the Council is required under the Barnsley Corporation Act, 1949. Byelaws made under this Act require the premises and the persons working therein to comply with a hygienic code of practice. 112 persons are registered under the Act.

No infringements of the Act were found and the premises were conducted in a satisfactory manner.

Rodent and Pest Control

Two rodent operatives are engaged full-time by the Council for the eradication of rats and mice.

No major infestations were dealt with during the year.

The following surface infestations were dealt with:—

Properties infested by rats—662.

Properties infested by mice—105.

Sewer Treatments

This treatment is carried out by direct poisoning by fluoracetamide. The number of sewer manholes treated during the year was 1,313.

Swimming Bath Water

The bath water at the Public Baths and School Baths is sampled and examined periodically for bacterial content and residual chlorine content.

Appended is a list of the samples taken and the result of the examination of these samples.

Public Baths, Race Street

Large Bath—25 samples taken	.. .. .	21 satisfactory
		4 unsatisfactory

Small Bath—21 samples taken	.. .. .	20 satisfactory
		1 unsatisfactory

<i>Raley School Bath</i> —16 samples taken	.. .. .	14 satisfactory
		2 unsatisfactory

<i>St. Helen's School Bath</i> —18 samples taken	.. .. .	16 satisfactory
		2 unsatisfactory

Rag Flock and Other Filling Materials Act, 1951

One manufacturing premises is registered under the provisions of the above Act.

13 samples of filling materials were procured and sent to the Prescribed Analyst for analysis. All the samples were genuine.

The materials examined were:—

Woollen flock	.. .. .	2 samples
Dacron	.. .. .	2 samples
Terylene	.. .. .	2 samples
Down	.. .. .	2 samples
Curled Poultry Feathers		2 samples
Feathers and Down	.. .. .	2 samples
Kapok	.. .. .	1 sample

Total	13 samples
-------	------------

Fertilisers and Feeding Stuffs Act, 1926

20 samples of fertiliser and 3 samples of feeding stuffs were obtained during the year and submitted to the Agricultural Analyst for analysis. All the samples conformed to the Act and Regulations made thereunder.

Feeding Stuffs Sampled

Layers Pellets	1 sample
Layers Mash	1 sample
Pig Meal	1 sample

—
3
—

Fertiliser Samples Taken

Sweet Pea Fertiliser	1 sample
Rose Fertiliser	1 sample
Sangral	1 sample
Tomato Fertiliser	1 sample
Foliar Feed Fertiliser	2 samples
Phostrogen	2 samples
Sulphate of Potash	2 samples
Bio Plant Food	2 samples
Sulphate of Ammonia	1 sample
Hoof and Horn Meal	1 sample
Dried Blood	1 sample
John Innes Base	1 sample
Liquinure General	1 sample
Clays All Purpose Fertiliser	1 sample
Liquid Tomovite	1 sample
Compure	1 sample

—
20 samples
—

Pet Animals Act, 1951

There are two premises licensed under the above Act. These premises were conducted in a satisfactory manner and have complied with the conditions of the licence.

Animal Boarding Establishments Act, 1963

Two premises are licensed as animal boarding establishments. The premises are conducted in a satisfactory manner.

Offices, Shops and Railway Premises Act, 1963

Premises requiring registration under the Act have all been inspected and most premises have received a third or fourth inspection.

Practically all the premises conform to the Act and Orders made thereunder, the contraventions found are mainly of a minor character and are quickly remedied after the occupiers are notified of the offence.

Both occupiers of premises and their employees are becoming more familiar with the requirements of the Act and this ensures greater co-operation with the local authority inspectorate.

There were no prosecutions during the year.

Registration

31 premises were registered during the year, comprising 13 offices, 15 retail shops, 2 wholesale shops and 1 catering establishment.

The total number of registered premises is 660. The reduction from last year is mainly due to large scale town centre redevelopment and smaller units dispensing with employed persons. The total premises classified under different heads was as follows:—

Offices	147
Retail Shops	424
Wholesale Shops and Warehouses	35
Catering Establishments	48
Fuel Storage Depots	6
	—
Total ..	660
	—

Inspections

The number of registered premises receiving one or more general inspections during the year was 498. The total number of visits for all purposes was 830.

Contraventions

No unusual happenings occurred during the above inspections and 62 letters (as informal notices) were served on the owners or occupiers drawing their attention to contraventions of the Act. A list of the class of premises and the letters sent out in each case is appended below:—

CLASS OF PREMISES	LETTERS SENT OUT
Offices	9
Retail Shops	45
Wholesale Shops and Warehouses	3
Catering Establishments	4
Fuel Storage Depots	1
	—
Total ..	62
	—

Contraventions of the various Sections of the Act under the different class of premises is shewn in Table X and a list of the contraventions remedied is also shewn in Table XI.

TABLE X
Contraventions found during the year

CONTRAVENTION	OFFICES	RETAIL SHOPS	WHOLESALE SHOPS AND WAREHOUSES	CATERING ESTABLISHMENTS	FUEL STORAGE DEPOTS	TOTAL
Cleanliness S.4	1	2	-	-	-	3
Temperature S.6	3	13	1	2	1	20
Ventilation S.7	1	3	-	-	-	4
Sanitary Conveniences S.9	4	36	2	1	-	43
Washing Facilities S.10	1	6	3	-	-	10
Supply of Drinking Water S.11	-	1	-	-	-	1
Accommodation for Clothing S.12	1	-	-	-	-	1
Floors, Passages and Stairs S.16	-	6	-	-	-	6
Fencing of Machinery S.17	1	2	-	-	-	3
First Aid Provision S.24	1	13	-	2	1	17
Information for Employees S.50	3	24	1	3	1	32
TOTAL	16	106	7	8	3	140

TABLE XI
Contraventions Remedied

CONTRAVENTION	OFFICES	RETAIL SHOPS	WHOLESALE SHOPS AND WAREHOUSES	CATERING ESTABLISHMENTS	FUEL STORAGE DEPOTS	TOTAL
Temperature S.6	1	11	-	1	-	13
Ventilation S.7	1	2	-	-	-	3
Lighting S.8	1	2	-	-	-	3
Sanitary Conveniences S.9	4	18	1	-	-	23
Washing Facilities S.10	5	3	-	-	-	8
Accommodation for Clothing S.12	-	1	-	-	-	1
Sitting Facilities S.13	-	1	-	-	-	1
Floors, Passages and Stairs S.16	1	9	-	-	-	10
Fencing of Machinery S.17	-	1	-	-	-	1
First Aid Provision S.24	2	9	-	-	-	11
Information for Employees S.50	-	18	1	1	-	20
TOTAL	15	75	2	2	-	94

Accidents

48 notifications of accidents were received and all were investigated. This is a slight decrease on last year's figures and is probably an indication of safer working conditions. The necessity to report all accidents is constantly brought to the notice of occupiers of premises.

One of the accidents reported was investigated on behalf of another authority because the injured person resided in Barnsley.

There were no fatal accidents during the year and of the 47 reported accidents 32 occurred in retail shops, 6 in wholesale shops or warehouses, 4 in offices, 4 in catering establishments and 1 in a canteen.

Eight of the accidents were of a serious nature involving fractures, open wound and crushing. In two of these cases the occupiers were requested in writing to take certain action to obviate similar accidents in the future.

TABLE XII
INJURIES FROM ACCIDENTS

TYPE OF ACCIDENT	MALES	FEMALES	YOUNG PERSONS	
			MALES	FEMALES
Bone fractures and dislocations	2		2	
Sprains and strains	5	6	1	1
Open wounds	5	5	4	2
Bruising	4	5	1	2
Burns and scalds			1	
Other injuries		1		
	—	—	—	—
Total	16	17	9	5
	—	—	—	—

TABLE XIII
MAIN CAUSES OF ACCIDENTS

TYPE OF ACCIDENT	MALES	FEMALES	YOUNG PERSONS	
			MALES	FEMALES
Power driven machinery	1			
Transport vehicle in motion			1	
Transport vehicle stationery	1			
Electrical	1		1	
Hand tools	3			
Falls from stairs	1	1		1
Falls from ladders		1		1
Falls from one level to another	1	3		
Falls on the same level	2	3	1	
Striking against an object	2	2	2	1
Handling goods	2	3	4	1
Struck by falling object		2		
Not otherwise specified	2	2		1
	—	—	—	—
Total	16	17	9	5
	—	—	—	—

Hoists and Lifts

61 inspections of hoists and lifts have been made. These inspections comprised 14 passenger, 29 goods and 18 service lifts. Notice was served on the occupier in one case to remedy serious defects in a passenger lift, and the repairs were carried out in a reasonable period. One owner was requested to enclose a passenger lift shaft and this was satisfactorily completed during the year.

Diseases of Animals Act, 1950

The provisions of the Act, together with a large number of Orders and Regulations made thereunder, are enforced by Inspectors appointed under the Act.

The main duties are carried out by Technical Assistants who attend the weekly sales of animals at the cattle market and issue any relevant licences that may be required.

There was no major outbreak of a notifiable contagious disease during the year and the duties were therefore of a routine character.

571 licences were issued under the Regulation of Swine Order 1950. 313 visits were made to premises where store pigs were removed under licence.

One visit was made to premises where cattle had been removed under licence from Northern Ireland.

Four cases were reported of dead pigs (one in pig lairage at Public Abattoir) and were treated as possible cases of anthrax, but were negative on examination. One dead cow was reported but proved negative anthrax on examination.

12 premises were licensed under the Diseases of Animals (Waste Foods) Order 1957.

No legal proceedings were taken during the year.

Drainage and Sanitation of Buildings

A sewer was provided in Wombwell Lane, Stairfoot and 12 houses on the conservancy system will now be able to be connected to the sewer. At the end of the year the owners had made application for improvement grants and it is probable that all these houses will be improved early in 1971.

Other Public Health Matters

Talks have been given by Public Health Inspectors on food hygiene, air pollution and environmental health to student teachers, school children, the Red Cross Society, and other bodies during the year and from the results of the talks it was found to be very worthwhile.

This method of public participation will be increased during the coming years and it is considered the best method of communicating to the public the various duties carried out by the Department.

PART VII

SCHOOL HEALTH

Do you know, Carter, that I can actually write my name in the dust on the table?

Faith, Mum, that's more than I can do. Sure there's nothing like education, after all.

"Punch" vol.cxxii, p.142. 1902.

As in other preventive health services which operate along orthodox lines, little occurred in the School Health Service in 1970 which calls for comment. Ever improving standards of living and environmental hygiene, combined with the National Health Service ensure that the child who is normal on entering school remains so with little or no assistance from the school medical officer. With the child who is not normal, however, the position is different. Recent advances in paediatric medicine and surgery have resulted in an increasing number of children born with severe congenital defects surviving to an age when arrangements must be made for their education. In a high proportion of these the disability is a physical one and the children are intellectually bright. A few have, in addition, some degree of mental retardation. These children are claiming an increasing amount of attention from the School Health Service and their supervision and care is providing the medical and nursing staffs with considerable interest and satisfaction.

The most numerous group amongst these severely handicapped children are those who have been treated for various degrees of spina bifida. The great success of the treatment for this condition is resulting in a marked increase in the number of children who are obliged to attend school in wheelchairs. These children may also be subject to greater or lesser degrees of incontinence, thus requiring special toilet, washing and changing arrangements.

For the present, Mount Vernon School provides basic facilities for the most severely disabled and for those who require a degree of nursing care. Already, however, the greater numbers of these are making themselves felt on the resources available there. The authority's proposal to build a modern purpose designed school for physically handicapped pupils of all ages is therefore extremely welcome.

With the facilities that this new school will make available, it will be possible to carry out a much fuller assessment of the physical capabilities of children with disabilities. This in turn will make it easier to attain the ideal of educating the handicapped pupil as far as possible alongside the normal child. The handicapped pupil can be taught to live with his disability and the effects of this teaching observed. If they are satisfactory, an assessment of ability to cope with the hazards of normal school life can be made. In this way it may be possible for the School Health Service to give a great deal more assistance to the handicapped child in leading a fuller life.

As in previous years, the School Health Service has experienced its problems in obtaining staff. Mention has already been made in another part of this report of the difficulties which have been experienced in recruiting speech therapists and audiology technicians. Medical staff are also difficult to attract to the school service. The departure of one medical officer in the previous year is reflected in the decrease when compared with 1969 in the numbers of children who received a routine medical examination. There seems to be little prospect of an improvement in this position so long as the present uncertainty as to the future of the School Health Service continues.

The position in the School Dental Service was reviewed in some detail in the report for 1968 and some suggestions for its amelioration were made. In last year's report concern was again expressed. The continued inadequacy of the service provided makes it necessary for attention once again to be directed to the shortage of dental officers in the service. There are at present two in post and at least four are necessary to provide even a minimal service. The plain fact is that remuneration in the School Dental Service is well below that in other branches of the dental profession. Instead of facing up to this, the Dental Whitley Council has suggested that authorities prop up a creaking service by offering "attractions" in addition to the Whitley salary. Some authorities have interpreted this suggestion very widely indeed and in doing so have met with some success in recruiting dentists. It would appear, however, that the "attractions" offered to bring school dental officers to Barnsley are insufficient and this is reflected in the figures in the pages which follow.

It would appear that there are two ways of approaching this recruitment problem. One would be a re-assessment of the possible "attractions" which might be offered. The other might be a request addressed to the Association of Municipal Corporations for a complete re-examination of the entire dental salary structure by the Whitley Council.

SCHOOL HYGIENE

The steady improvement in school hygiene continues in parallel with the development of the new housing estates and the clearance of the slum areas. Thus overcrowding is relieved in the older schools as the children from the rehoused families commence attendance at the new schools. It is not always easy to ensure that the correct number of school places in these new buildings keeps pace with the resettlement of the population, with the result that from time to time bottlenecks occur. Provided there is some elasticity in the central government decrees on expenditure on new schools, these bottlenecks tend to be of short duration and such overcrowding as may occur as a result of them is of little importance. In any case, overcrowding in new schools designed to conform to modern standards is not comparable as an evil to that which occurs in old schools which have outlived the standards to which they were built.

The practice whereby the head teacher and the school medical officer consult on problems of hygiene on the occasion of each medical inspection was continued and proved effective in dealing with day to day problems. Records of these discussions continued to be maintained.

MEDICAL INSPECTION

The total number of children examined at routine medical inspection was 1,313. Of these, 1,087 were born in 1962 or later and may be regarded as having been subject to entrant examinations. 1,055 fewer inspections were done than in 1969. Details of the age groups examined and the findings as to physical condition are set out in Table IA of the appendix to this part of the report. A total of 2,125 other inspections, including re-inspection were carried out compared with 2,413 in 1969.

The vision of all pupils in the entrant groups is tested within one year of entry. Vision tests are repeated thereafter at two year intervals through the child's school life. Vision tests are carried out in the first instance by the school nurse. Tests for colour vision are carried out on both girls and boys by the school medical officers when they have reached 14 years of age.

FINDINGS AT MEDICAL INSPECTION

The statistical summary of the physical condition as assessed at medical inspection is shown in Table II in the appendix to this part of the report.

The findings in relation to physical condition continued the satisfactory trend which has now come to be taken for granted. No child was classified as of unsatisfactory physical condition.

The total number of children found to require treatment for defects was 122 as against 208 in 1969. The details relating the various groups to medical inspection are set out in Table IA.

Uncleanliness

The number of individual children found to be infested with vermin was 283 compared with 429 last year. The number of inspections carried out was 34,756 or 1,010 more. Where a group of cases of infestation occur in a large school, the repeated inspections necessary for supervision readily increases the overall number of inspections done. It will also be noted that 33 cleansing notices were issued in 1970 compared with 54 in the previous year. Two cleansing orders were made.

Eye Defects

The number of children requiring treatment for defective vision (excluding squint) was 56 as compared with 80 in the previous year and 83 in 1968. Squint called for reference for treatment in a total of 5 cases—this compares with 13 cases in 1969. Other eye conditions accounted for a total of 2 cases requiring treatment—in 1969 the number was 1.

Reference to Table II shows the figures set out as to whether defects were present in "entrants", "leavers" or "others".

Orthopaedic and other defects

A detailed analysis of all defects and the action taken regarding them is shown in Tables II and III in the appendix to this part. In no cases are the figures unusual or excessive in relation to the numbers of children inspected in the various groups.

ARRANGEMENTS FOR TREATMENT IN 1970

Consultation Services

Medical Services Clinic, New Street, Barnsley

Ear, Nose and Throat Clinics

Thursday 10 a.m. to 12 noon.

Eye Clinics

Monday 9.30 a.m. to 12 noon.

Wednesday 2 p.m. to 4 p.m.

Friday 2 p.m. to 4 p.m.

Orthopaedic Clinics

Monthly—First Friday in each month except August.

School Medical Officers Consultation Clinics

Monday 9.30 a.m. to 11.30 a.m. 4.30 p.m. to 5.30 p.m.

Tuesday 2 p.m. to 4 p.m.

Friday 2 p.m. to 4 p.m.

Held in conjunction with Infant Welfare Clinics except Monday 4.30 to 5.30 p.m.

Dental Clinics

New Street—Monday, Tuesday, Thursday, Friday 9 a.m. to 12 noon. 1.30 p.m. to 5 p.m.

Athersley —Monday, Wednesday, Friday 9 a.m. to 12 noon. 1.30 p.m. to 5 p.m.

Stairfoot —Tuesday 9 a.m. to 12 noon. 1.30 p.m. to 5 p.m.
Thursday 1.30 p.m. to 5 p.m.

Lundwood —Wednesday 9 a.m. to 12 noon. 1.30 p.m. to 5 p.m.
Thursday 9 a.m. to 12 noon.

Orthodontics

Orthodontic patients were usually seen during routine conservation sessions by the individual Dental Officers.

Minor Ailments Clinics

BARNSELY —Medical Services Clinic, New Street, Barnsley.
Monday to Friday 9.30 a.m. to 11.30 a.m.

*ATHERSLEY —The Clinic, Laithes Lane, Athersley North, Barnsley
Monday 2 p.m. to 4 p.m. Wednesday 2 p.m. to 4 p.m.

*STAIRFOOT —The Clinic, Hunningley Lane, Stairfoot, Barnsley
Monday 9.30 a.m. to 11.30 a.m.
Wednesday 9.30 a.m. to 11.30 a.m.

*LUNDWOOD —The Clinic, Pontefract Road, Lundwood, Barnsley
Thursday 2 p.m. to 4 p.m.

*CARLTON —Old Highways Depot, Spring Lane, Carlton, Barnsley
Thursday 9.30 a.m. to 11.30 a.m.

*JORDAN HOUSE—Gawber Road, Barnsley.
Tuesday 9.30 a.m. to 11.30 a.m.
Thursday 9.30 a.m. to 11.30 a.m.

*MONK BRETTON—The Clinic, High Street, Monk Bretton, Barnsley.
Friday 9.30 a.m. to 11.30 a.m.

* Held in conjunction with Infant Welfare Clinics.

Speech Therapy)

Audiometric) There were no Speech Therapy or Audiology Clinics
Testing) held during 1970.

General Physical Condition

There is now no purpose in commenting upon the general standards of nutrition amongst pupils observed in the course of medical inspection. In Table IA, returns now made to the Department of Education and Science state the number of children whose physical condition was found to be satisfactory or unsatisfactory at inspection. In recent years the numbers recorded as unsatisfactory have steadily decreased. In 1970, no child inspected was classified as being of unsatisfactory physical condition. In a way this is not surprising. Such children as are of unsatisfactory physical condition—in this age of social services—almost invariably come from the “problem” type of family. In a community such as Barnsley where the problem families are well known to the health and social services, action is taken to ensure that adverse conditions are corrected long before they can affect a child’s physical condition sufficiently to justify the classification “unsatisfactory”.

At this point it must be borne in mind that the impression of the school medical officers is that there are very many more children whose general condition is likely to be prejudiced by parental over-indulgence than by economic deprivation. Furthermore, under existing legislation the authority has ample power to take statutory action to deal with the latter. In the present permissive society it is unlikely that there is anyone with sufficient courage to propose action—even in the best interests of the children themselves—to either control or curb the former. This position is extremely interesting. It will be observed most carefully and reported upon as the occasion presents itself.

School Meals

	1969	1970
Provided free	478,430	422,589
Provided at full cost	1,278,160	1,230,884

1,521,952 bottles of milk were supplied to children in schools.

Uncleanliness

Arrangements for the treatment of cases of uncleanliness continue as before. Cleansing and disinfecting facilities exist at New Street Clinic and are available for use at the parents’ request. They are also used by the school nurses when statutory action under the Education Act 1944, S.54(5) becomes necessary.

Minor Ailments

Reference to the clinic time table shows that the existing arrangements were continued during 1970.

Eye Diseases—Defective Vision and Squint

The highly satisfactory arrangements described in previous reports continue. A stable arrangement with the Sheffield Regional Hospital Board has allowed an increasing number of children to receive attention for eye defects.

The consultant clinic was held twice weekly at the New Street premises by the ophthalmologist appointed by the Sheffield Regional Hospital Board. The figures for the cases dealt with by him are shown in the appendix to this report, Table III.

Ear, Nose and Throat Defects

The Consultant Ear, Nose and Throat Surgeon to the Barnsley Hospital Group, continued to conduct two consulting sessions each week at the New Street Clinic. Examination of the number of cases treated shows a slight decrease when compared with last year.

Orthopaedic and Postural Defects

The existing arrangements for orthopaedic examination and treatment have been continued throughout the year.

The Orthopaedic Surgeon held sessions at New Street Clinic on 12 occasions and at these he saw 35 new cases and carried out 144 re-examinations.

Children requiring surgical appliances have continued to obtain these through the Beckett Hospital, Barnsley (see appendix, tables IIIC and V).

Child Guidance

Development of the Child Guidance Service continues along the lines outlined in previous reports. Particular efforts were made to co-ordinate certain aspects of the work of this service with the mental health work of the health authority by the attendance of mental health welfare officers at the Child Guidance Centre. Mention of this has already been made in the appropriate part of the report.

The annual report of the Consultant Child Psychiatrist, Dr. J. D. Orme, who is appointed by the Sheffield Regional Hospital Board and who carries out two sessions per week on the education authority's premises and one session per week at Kendray Hospital is as follows:—

“During 1970, the number of children seen at the Child Guidance Centre has been about the same as in previous years but the proportion of younger children has increased. This is partly due to more of the older children being seen at the clinic at Kendray Hospital (moved at the end of the year to Barnsley District General Hospital), but also to an increase in requests for help with infant school children and with pre-school children (often at the initial suggestion of a health visitor). At times there have been so many pre-school children attending that the clinic must have resembled a therapeutic nursery school. Treatment for children of this age needs very active involvement of mothers and possibly the whole family so discussion with parents is very important; the parents own troubles are sometimes reflected in the children's disturbances so the need to treat the whole family is then apparent.

“Discussions of individual cases and some general meetings about the service as a whole have continued with health visitors, student nurses, education welfare officers and child care officers. The uncertainties about

the future personal welfare services have undoubtedly had their effect in creating anxieties in some of the workers and, of course, the future position and role of the Child Guidance Service as a whole has yet to be decided. Nevertheless, the demands made upon the service are likely to increase and every opportunity for improving its effectiveness must be taken. Disturbances in children have their roots in many different aspects of their lives so treatment needs a team that is used to working together. It is hoped that this team approach will not be lost when new agencies for the care of children evolve."

Speech Therapy

The authority was unable to obtain the services of a speech therapist during 1970.

MOUNT VERNON SCHOOL

Mount Vernon Day Special School, formerly Mount Vernon Open Air School, caters for delicate and physically handicapped children.

Originally, its principle function was to provide surroundings in which undernourished children might, through good feeding and hygiene build up a resistance to the then prevalent infections and other results of malnutrition. During the years since the second world war, school meals, slum clearance, modern schools, more general prosperity and various social services have made the undernourished child a clinical rarity. There are, of course, still the children of problem families and those with mothers of low intelligence whose physique suffers from their parents' apathy or their intellectual inability to provide for their welfare. In such cases the Mount Vernon School can ensure that they receive more food and regular meals and a closer supervision of general physical development than is possible at an ordinary school. Such cases are fortunately few.

The school is more valuable as an assessment centre for children who suffer from physically handicapping defects and for children who are recovering from illnesses. The special facilities available—a school nurse always in attendance, the special feeding arrangements and close medical supervision—provide suitable conditions for the observations necessary to decide whether the patient will ultimately be able to go to an ordinary school.

The period for assessment is useful in itself in the case of children who are recovering from major illnesses. The regime at Mount Vernon School and the almost individual attention which the children receive provide a graduated transition from education in hospital to ordinary school. Whilst those whose handicaps are permanent are given the opportunity of mixing with children with disabilities differing from their own and with some with little disability at all, this often improves self-confidence and can even, in some cases, decide the issue in favour of an ordinary school in Barnsley instead of a special residential school.

As every effort must be made to ensure that where possible children remain within their own family circle, Mount Vernon School is performing a most valuable function in this direction.

The change of name of the school was intended to dispel the myth that all children in attendance are suspected of pulmonary tuberculosis. Generally speaking, this object has been successfully achieved. However, from time to time cases are encountered where the parents of a handicapped child are reluctant to accept the offer of a place in the school. Investigation fails to reveal any valid reason for this. The only possible explanation is that somewhere in the parents' mind, the idea persists that there is a social stigma attached to any institution which might in any way be associated with tuberculosis. It is appreciated that time honoured beliefs die hard. Nevertheless, they must not be allowed to deprive children of the form of education most suited to their needs.

Mention has already been made to the authority's proposal prepared during the year to replace Mount Vernon School with a new special school for physically handicapped pupils of all ages. During the year planning discussions were initiated between the authority and the various bodies interested. It is pleasing to report that these discussions were progressing in a most satisfactory manner at the end of the year.

SCHOOL DENTAL SERVICE

The following is the report on the School Dental Service during 1970 submitted by the Principal School Dental Officer, Mr. G. White, L.D.S.

1. Staffing and Clinics

The staffing position has remained unchanged during the year. Efforts to recruit full time dental officers and auxiliaries have been unsuccessful. Nevertheless, a comprehensive range of treatment is available at all five surgeries which is made possible only by a willingness on the part of the staff to do sessions in three or four clinics during the course of a week.

2. Attendance and Treatment

The general level of treatment remains the same as the previous year, the only significant increase being in the number of deciduous teeth extracted, with a corresponding increase in the number of general anaesthetics administered. Most of these can be accounted for as emergencies, i.e. toothaches, which show a 50 per cent increase over the previous year and may well be a reflection of the acute shortage of General Dental Service dentists practising in Barnsley, as many of these cases report that they have been unable to obtain immediate treatment from their usual dentist.

3. Orthodontics

The number of cases discontinued doubled this year but is still very low at six. Even so it is both annoying and bewildering that any parent, after requesting this expensive and difficult form of treatment for their child should then fail to ensure that he or she wears the appliance provided.

4. Prosthetics

The number of pupils fitted with dentures remains constant but unlike last year, there were no full upper or lower dentures fitted. They consisted mainly of part upper dentures replacing anterior teeth which could not be conserved, usually after an accident.

5. Anaesthetics

All anaesthetics are now administered by either one of the two consultant anaesthetists. This is the ideal towards which the Service has been moving over the past five years and ensures the greatest possible safety factor in what is the most hazardous procedure in dentistry.

6. School Inspections

The number of children inspected at school rose by over 1,000 and was accompanied by a fall in the number inspected in the clinics. This is a direct result of restriction of recall inspections and concentration on providing annual coverage for selected groups of primary schools. Although the recall system (whereby on completion of treatment an appointment card is filed and subsequently posted to the patient after six months) is gratifying to the dentist in that he regularly sees his conscientious pupils who require little or no treatment, it is of much greater importance to regularly inspect whole schools and thus reach the otherwise neglected cases.

7. Dental Health Education

Pressure of clinical work has prevented professional staff from active work in this field, apart from chairside instruction.

Towards the end of the year, a large supply of Gibbs tooth brushing kits, containing a plastic beaker, toothbrush and small tube of toothpaste was obtained and these were given to the younger children on completion of treatment.

8. General

The Principal Dental Officer attended meetings of the Northern Chief Dental Officers Co-ordinating Committee and a Post-Graduate Refresher Course on Anaesthesia and Planning in Children's Dentistry at Oxford University.

HANDICAPPED PUPILS

Children to a total of 42 were ascertained during the year as belonging to one or other of the categories of handicapped pupils requiring education at special schools approved under Section 9(5) of the Education Act 1944 or boarding in boarding homes.

Blind Children

No child was assessed as blind or partially sighted during the year. Two blind and 3 partially sighted pupils were receiving special education at the end of the year.

Deaf and Partially Hearing Children

No child was assessed as deaf or partially hearing. Seven deaf and 1 with partial hearing were receiving education in special schools.

Physically Handicapped Children

Thirteen children were assessed as physically handicapped during the year.

Maladjusted and Educationally Subnormal Children

One child was assessed as maladjusted and 23 as educationally subnormal. Nine maladjusted children and 140 educationally subnormal children were receiving special education under arrangements made by the authority.

Speech Defects

One child was receiving special education for speech defects.

Epileptic Pupils

No pupil was ascertained as requiring special education by reason of epilepsy. Six epileptic pupils were receiving special education under arrangements made by the authority.

Children Unsuitable for Education at School

Three children were found to be unsuitable for education in school in accordance with the provisions of S.57(4) of the Education Act 1944. No reviews were carried out under the provisions of S.57A of the Education Act 1944. Table VII in the appendix to this part of the report records statistically in the form required by the Secretary for Education information regarding the authority's work amongst the handicapped pupils during the year.

85 visits were made by the female mental welfare officer to handicapped children during the year.

Special Investigation—Verruca Plantaris

The special investigation described in last year's report was continued during 1970.

The treatment and investigation has now gone on for the past ten years and a summary of the findings is as follows:—

Children Treated

YEAR	1965	1966	1967	1968	1969	1970	TOTAL
Girls	68	48	75	142	181	221	735
Boys	54	27	45	85	157	163	531
TOTAL ..	122	75	120	227	338	384	1,266

The predominant group was Female.

Proportion Treated

	GIRLS	BOYS
1965	55.7%	44.2%
1966	64.0%	36.0%
1967	62.5%	37.5%
1968	62.5%	37.5%
1969	53.6%	46.4%
1970	57.6%	42.4%

The predominant age group was under 11 years.

The proportion of the total who attended Secondary Schools was:—

1965—77%	1968—49.3%
1966—53.3%	1969—35.5%
1967—49.1%	1970—39.3%

The highest proportion of attenders in 1970 was E. Sheerien County Secondary School.

Not all cases attended the swimming baths, but of those who did:—

	ATTENDED PUBLIC BATHS	ATTENDED RALEY BATHS	ATTENDED ST. HELEN'S BATHS
1965	36.0%	14.7%	19.6%
1966	50.6%	22.6%	8.0%
1967	67.4%	29.2%	3.4%
1968	47.5%	9.1%	43.4%
1969	59.7%	6.2%	17.7%
1970	53.1%	5.2%	41.7%

The proportion who did barefoot P.E. was 79.6%.

INFECTIOUS DISEASES

Full details of the occurrences of infectious diseases in the County Borough are given in the part of this report which is devoted to epidemiology. The figures relating to the incidence of infectious diseases notified as occurring in children of school age during 1970 are as follows:

DISEASE	NO. NOTIFIED
Scarlet Fever	40
Whooping Cough	13
Measles	224
Dysentery	15
Food Poisoning	1
Acute Meningitis	2
Infective Jaundice	31
	<hr/>
	326
	<hr/>

Immunisation against Diphtheria

During the year 126 children of school age received a primary course of injections of anti-diphtheria antigen and 824 children received reinforcing or booster doses.

School Nursing

Nursing staff carried out home visits in the follow up of defects amongst school children as follows:—

Defective vision and eye disease.. .. .	707
Ear disease	70
Tonsils and Adenoids	45
Unclean Heads	425
Immunisation.. .. .	80
Scabies	203
Other skin diseases	79
Miscellaneous	621
	<hr/>
	2,230
	<hr/>

Visual acuity tests are done every two years during the child's school attendance by the school nurses. Suspected defects are referred to the consultant ophthalmologist if necessary. Retesting and follow up is carried out by the school nurses, especially when glasses are ordered, to ensure that they are obtained and worn. Co-operation of the parents and teachers is often necessary, especially in children attending the secondary schools.

The Scout Dike Camp was visited twice weekly by the school nurses between 9th March and 24th July and 14th September and 23rd October.

Health Education in Schools

Classes are held each week in all senior schools with the twelve to fourteen year old girls. There is liaison between the head teachers, domestic science and biology teachers to ensure that the syllabus given by the school nurses is personal and stimulating. Films and film strips are used as the best means of visual impact, the accent being on personal hygiene, personal relationships and community responsibility.

PHYSICAL EDUCATION — SWIMMING

Swimming Statistics for 12 months ended August, 1970

	Sept. 1969 to Mar. 1970			Apr. 1970 to Aug. 1970		
	Secondary	Junior	A Total	Secondary	Junior	B Total
Number of Children sent to Baths	2,798	2,489	5,287	2,499	2,418	4,917
No. of attendances	41,528	40,307	81,835	20,508	25,515	46,023
Swimmers—10 yds.	2,580	1,685	4,265	2,467	1,875	4,342
L.E.A. 1st Class	—	—	—	1	1	2
L.E.A. 2nd Class	61	9	70	27	15	42
L.E.A. 3rd Class	276	460	727	94	338	432
R.L.S.S. Elementary	11	—	11	—	—	—
R.L.S.S. Intermediate	—	—	—	—	—	—
R.L.S.S. Bronze	16	—	16	12	—	12
R.L.S.S. Bar to Bronze	—	—	—	1	—	1
R.L.S.S. Bronze Cross	16	—	16	8	—	8
R.L.S.S. Bar to Bronze Cross	—	—	—	—	—	—
R.L.S.S. Award of Merit	4	—	4	—	—	—
R.L.S.S. Bar to Merit	1	—	1	—	—	—
R.L.S.S. Preliminary Safety	62	6	68	—	—	—
R.L.S.S. Advanced Safety	16	4	20	—	—	—
R.L.S.S. Preliminary Respiration	2	—	2	—	—	—
A.S.A. Survival Bronze	31	9	40	64	4	68
A.S.A. Survival Silver	18	1	19	8	—	8
A.S.A. Survival Gold	12	1	13	8	2	10

Total number of Individual Children sent to Baths in 12 months ending 31st August, 1970.

Secondary	2,499
Junior	2,418
Total	<u>4,917</u>

PART VII — STATISTICAL APPENDIX
MEDICAL INSPECTION AND TREATMENT

Medical Inspection of Pupils attending Maintained Primary and Secondary Schools (including Nursery and Special Schools)

TABLE IA — Periodic Medical Inspections

AGE GROUPS INSPECTED (BY YEAR OF BIRTH)	NO. OF PUPILS WHO HAVE RECEIVED A FULL MEDICAL EXAMINATION	PHYSICAL CONDITION OF PUPILS INSPECTED		NO. OF PUPILS FOUND NOT TO WARRANT A MEDICAL EXAMINATION	PUPILS FOUND TO REQUIRE TREATMENT (EXCLUDING DENTAL DISEASES AND INFESTATION WITH VERMIN)		
		SATISFACTORY NO.	UNSATIS- FACTORY NO.		FOR DEFECTIVE VISION (EXCLUDING SQUINT)	FOR ANY OTHER CONDITION	TOTAL INDIVIDUAL PUPILS
1966 and later ..	1	1	—	—	1	—	1
1965	478	478	—	—	17	33	47
1964	562	562	—	—	33	36	67
1963	30	30	—	—	—	1	1
1962	17	17	—	—	—	—	—
1961	8	8	—	—	—	1	1
1960	2	2	—	—	—	—	—
1959	7	7	—	—	—	—	—
1958	13	13	—	—	—	—	—
1957	7	7	—	—	—	—	—
1956	25	25	—	—	—	—	—
1955 and earlier	163	163	—	—	5	—	5
TOTAL	1,313	1,313	—	—	56	71	122

B. Other Inspections

Number of Special Inspections	519
Number of Re-inspections	1,606

C. Infestation with Vermin

- (a) Total number of individual examinations of pupils in schools by school nurses or other authorised persons .. 34,756
- (b) Total number of individual pupils found to be infested .. 283
- (c) Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act 1944).. 33
- (d) Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act 1944).. 2

**TABLE II — DEFECTS FOUND BY MEDICAL
INSPECTION DURING THE YEAR**

INSPECTION DURING THE YEAR						
T (treatment) O (observation)						
DEFECT OR DISEASE	PERIODIC INSPECTIONS				SPECIAL INSPECTIONS	
	ENTRANTS	LEAVERS	OTHERS	TOTAL		
Skin T	—	—	—	—	—	
O	—	—	—	—	—	
Eyes: (a) Vision T	51	5	—	56	2	
O	40	2	2	44	—	
(b) Squint T	5	—	—	5	—	
O	1	—	—	1	—	
(c) Other T	2	—	—	2	—	
O	—	—	—	—	—	
Ears: (a) Hearing .. T	8	—	—	8	—	
O	2	—	—	2	—	
(b) Otitis Media T	3	—	—	3	—	
O	—	—	—	—	—	
(c) Other T	—	—	—	—	1	
O	—	—	—	—	—	
Nose and Throat .. T	34	—	1	35	2	
O	2	—	—	2	—	
Speech T	1	—	—	1	—	
O	4	—	—	4	—	
Lymphatic Glands .. T	—	—	—	—	—	
O	—	—	—	—	—	
Heart T	—	—	—	—	—	
O	2	—	—	2	—	
Lungs T	—	—	—	—	—	
O	—	—	2	2	—	
Developmental:						
(a) Hernia T	1	—	—	1	—	
O	—	—	—	—	—	
(b) Other.. .. . T	—	—	—	—	—	
O	3	—	—	3	1	
Orthopaedic:						
(a) Posture T	—	—	—	—	—	
O	—	—	—	—	—	
(b) Feet T	10	—	1	11	—	
O	—	—	—	—	—	
(c) Other.. .. . T	5	—	—	5	—	
O	—	—	—	—	—	
Nervous System:						
(a) Epilepsy T	—	—	—	—	—	
O	—	—	—	—	—	
(b) Other.. .. . T	—	—	—	—	—	
O	3	—	—	3	—	
Psychological:						
(a) Development .. T	1	—	—	1	—	
O	2	—	—	2	—	
(b) Stability T	—	—	—	—	—	
O	3	—	—	3	—	
Abdomen T	—	—	—	—	—	
O	1	—	—	1	—	
Other T	—	—	—	—	—	
O	1	—	—	1	—	

TABLE III

**TREATMENT OF PUPILS ATTENDING MAINTAINED
PRIMARY AND SECONDARY SCHOOLS**

(Including Nursery and Special Schools)

A — Eye Diseases, Defective Vision and Squint

	NUMBER OF CASES KNOWN TO HAVE BEEN DEALT WITH
External and other, excluding errors of refraction and squint	26
Errors of refraction (including squint)	699
Total ..	725
Number of pupils for whom spectacles were prescribed	482

B — Diseases and Defects of Ear, Nose and Throat

	NUMBER OF CASES KNOWN TO HAVE BEEN DEALT WITH
Received operative treatment:	
(a) for diseases of the ear	13
(b) for adenoids and chronic tonsillitis	71
(c) for other nose and throat conditions	14
Received other forms of treatment	212
Total ..	310
Total number of pupils still on the register of schools at 31st December, 1970, known to have been provided with hearing aids:—	
(a) during 1970	—
(b) previous years	38

Table C — Orthopaedic and Postural Defects

	NUMBER KNOWN TO HAVE BEEN TREATED
(a) Pupils treated at clinics or out-patients departments	35
(b) Pupils treated at school for postural defects ..	—
Total ..	35

Table D — Diseases of the Skin

	NUMBER OF PUPILS KNOWN TO HAVE BEEN TREATED
Ringworm—(a) Scalp	—
(b) Body	—
Scabies	228
Impetigo	22
Other skin diseases	508
Total ..	758

Table E — Child Guidance Treatment

	NUMBER KNOWN TO HAVE BEEN TREATED
Pupils treated at Child Guidance clinics	82

Table F — Speech Therapy

	NUMBER KNOWN TO HAVE BEEN TREATED
Pupils treated by speech therapist	—

Table G — Other Treatment Given

	NUMBER KNOWN TO HAVE BEEN TREATED
(a) Pupils with minor ailments	123
(b) Pupils who received convalescent treatment under School Health Service arrangements	—
(c) Pupils who received B.C.G. vaccination	613
(d) Other than (a), (b) and (c) above	—
Total (a)—(d)	736

TABLE IV

**DENTAL INSPECTION AND TREATMENT
CARRIED OUT BY AUTHORITY**

1. STAFF.

(a) DENTAL OFFICERS (including Orthodontists)

	NUMBER OF OFFICERS IN LOCAL AUTHORITY SERVICE		FULL TIME EQUIVALENT INCLUSIVE OF EXTRA PAID SEESIONS WORKED			
	FULL TIME	PART TIME	ADMINIS- TRATIVE DUTIES	CLINICAL DUTIES		TOTAL FULL TIME EQUIVALENT
				SCHOOL SERVICE	M. & C.W. SERVICE	
Principal School Dental Officer	1		NIL	0.8	0.2	1.0
Salaried Dental Officers	1			0.7	0.3	1.0
Sessional Dental Officers		—		—	—	—
Total (a)	1	—	NIL	1.5	0.5	2.0

(b) DENTAL AUXILIARIES AND HYGIENISTS

Dental Auxiliaries ..	NIL	—		—	—	—
Dental Hygienists ..	NIL	—		—	—	—

(c) OTHER STAFF:

	NUMBER OF OFFICERS	FULL TIME EQUIVALENT (ONE PLACE OF DECIMALS)
Dental Technicians	NIL	—
Dental Surgery Assistants	3	2.3
Clerical Assistants	1	1.0
Dental Health Education Personnel ..	NIL	—

2. SCHOOL DENTAL CLINICS.

	FIXED CLINICS				MOBILE CLINICS		
	NO. WITH ONE SURGERY ONLY	NO. WITH TWO OR MORE SURGERIES	TOTAL NUMBER OF SURGERIES		TOTAL NUMBER OF CLINICS		TOTAL NUMBER OF SESSIONS WORKED IN 1970
			AVAILABLE	IN USE	AVAILABLE	IN USE	
Provided directly by Authority ..	3	1	5	5	NIL	NIL	NIL

3. INSPECTIONS.

	INSPECTED	NUMBER OF PUPILS REQUIRING TREATMENT	OFFERED TREATMENT
First inspection—school	4,492	2,941	2,913
(b) First inspection—clinic ..	774		
(c) Re-inspection—school or clinic	22	18	
Totals	5,288	2,959	

4. VISITS (for treatment only).

	AGES 5—9	AGES 10—14	AGES 15 and over	TOTAL
First visit in the calendar year	900	687	106	1,693
Subsequent visits	1,463	1,859	339	3,661
Total visits	2,363	2,546	445	5,354

5. COURSES OF TREATMENT.

Additional courses commenced ..	23	28	1	92
Total courses commenced	2,386	2,574	446	5,406
Courses completed				1,073

6. TREATMENT.

Fillings in permanent teeth	774	1,373	287	2,434
Fillings in deciduous teeth	668	89	—	767
Permanent teeth filled	610	1,161	266	2,037
Deciduous teeth filled	534	82	—	616
Permanent teeth extracted	115	445	88	648
Deciduous teeth extracted	1,773	452	—	2,225
Number of general anaesthetics ..	546	278	29	853
Number of emergencies	392	218	36	645

Number of pupils X-rayed	79
Prophylaxis	727
Teeth otherwise conserved	82
Teeth root filled	9
Inlays	—
Crowns	13

7. ORTHODONTICS.

New cases commenced during the year	32
Cases completed during the year	18
Cases discontinued during the year	6
Number of removable appliances fitted	77
Number of fixed appliances fitted	9
Number of pupils referred to Hospital Consultants	1

8. DENTURES.

	AGES 5—9	AGES 10—14	AGES 15 and over	TOTAL
Number of pupils fitted with dentures for the first time:—				
(a) with full denture	—	—	—	—
(b) with other dentures.. .. .	3	15	3	21
Total	3	15	3	21
Number of dentures supplied (first or subsequent time)	3	15	3	21

9. ANAESTHETICS.

Number of general anaesthetics administered by Dental Officers ..	11
---	----

10. SESSIONS.

	ADMINIS- TRATIVE SESSIONS	NUMBER OF CLINICAL SESSIONS WORKED IN YEAR					TOTAL SESSIONS
		SCHOOL SERVICE			M. & C.W. SERVICE		
		Inspection at School	Treatment	Dental Health Education	Treatment	Dental Health Education	
Dental Officers (incl. P.S.D.O.)	—	17	926	—	42	—	985
Dental Auxiliaries . .							
Dental Hygienists . .							
Total	—	17	926	—	42	—	985

TABLE V

ORTHOPAEDIC CLINIC

Visits of Orthopaedic Surgeon	12 sessions
Patients seen—new cases	35
Other attendances/re-examinations	144

Note:—Children requiring surgical appliances have continued to obtain these through the Beckett Hospital, Barnsley.

TABLE VI

MOUNT VERNON SCHOOL

STATISTICAL SUMMARY OF CHILDREN IN ATTENDANCE

1970

CATEGORY	NUMBER IN		NUMBER	
	SCHOOL 1ST JAN. 1970	NUMBER ADMITTED	NUMBER DISCHARGED	NUMBER REMAINING AT 31.12.70
Respiratory Diseases:				
Asthma	8	3	1	10
Bronchiectasis	2	—	1	1
Chronic Bronchitis	2	1	—	3
Congenital Deformities:				
Spina Bifida and Hydrocephalus	5	—	—	5
Rectal Atresia	1	1	—	2
Bladder obstruction	1	—	1	—
Congenital Heart Disease	5	—	1	4
Cerebral Palsy	5	1	—	6
Muscular Dystrophy	6	1	—	7
Epilepsy	6	—	1	6
Emotional Instability	5	—	—	7
Orthopaedic Disorders	3	—	—	2
Speech Defects	2	—	—	1
Purpura	1	—	—	1
Partial Hearing	1	—	—	1
Partially Sighted	2	—	—	2
Rheumatoid Arthritis	2	—	—	1
Disseminated Sclerosis	—	1	—	1
Post Poliomyelitis	1	—	1	—
Dermatomyositis	1	—	1	—
Debility	1	—	1	—
Totals	60	8	8	60

TABLE VII
RETURN OF HANDICAPPED CHILDREN
New assessments and placements

[illegible]

HEALTH COMMITTEE

(as at 31.12.70)

Chairman: Councillor F. Kaye

Vice-Chairman: Councillor A. Williams

THE WORSHIPFUL THE MAYOR: Councillor F. B. Crow, J.P.

Alderman T. R. Brown, B.E.M.	Councillor Mrs. M. Button, M.B.E.
Alderman H. Dancer	Councillor Mrs. M. Copley
Alderman A. Butler, J.P.	Councillor W. E. Blackburne
Alderman G. Whyke, J.P.	Councillor R. Fisher
Councillor Mrs. E. B. Blackburne	Councillor K. Shaw
Councillor Mrs. M. Brannan	Councillor A. Lowery
Councillor Mrs. M. J. Slater	
Councillor Mrs. S. J. Fox	

Co-opted Members:

Dr. M. C. Duggan Dr. D. H. Pick

SANITARY COMMITTEE

(as at 31.12.70)

Chairman: Councillor G. Moore

Vice-Chairman: Councillor R. Fisher

THE WORSHIPFUL THE MAYOR: Councillor F. B. Crow, J.P.

Alderman W. Hunt, J.P.	Councillor W. E. Blackburne
Alderman G. Whyke, J.P.	Councillor K. M. Borrett
Councillor Mrs. G. Bright	Councillor J. H. Dossett
Councillor Mrs. M. Button, M.B.E.	Councillor R. Firth
Councillor Mrs. S. J. Fox	Councillor W. Sinfield
Councillor Mrs. E. B. Blackburne	Councillor D. Hinchcliffe
Councillor Mrs. M. Gibson	Councillor A. B. Wilkie

EDUCATION COMMITTEE

(as at 31.12.70)

Chairman: Councillor Mrs. M. Brannan

Vice-Chairman: Councillor B. Varley

THE WORSHIPFUL THE MAYOR: Councillor F. B. Crow, J.P.

Alderman T. Hinchliffe, J.P.	Councillor A. Williams
Alderman F. Lockwood	Councillor Mrs. M. Copley
Alderman A. Butler, J.P.	Councillor J. H. Dossett
Alderman F. Lunn, A.R.S.H.	Councillor W. R. Gundry
Councillor Mrs. E. B. Blackburne	Councillor F. Kaye
Councillor Mrs. M. J. Slater	Councillor A. Lowery
Councillor Mrs. G. Bright	Councillor K. Shaw
Councillor Mrs. M. Button, M.B.E.	Councillor G. Moore
Councillor H. Brain	

Co-opted Members:

Miss H. K. Mosley	Very Rev. Canon C. H. O'Flaherty
Mr. H. Owen	Rev. J. C. K. Brumpton
Mrs. D. L. Hirst	Rev. M. S. Dennison

STAFF OF THE PUBLIC HEALTH DEPARTMENT
(as at 31.12.70)

Medical Officer of Health, Principal School Medical Officer and Superintendent of the Welfare Services for the Handicapped:

G. A. W. NEILL, O.B.E., O.S.T.J., T.D., M.D., D.P.H., Barrister-at-Law

Deputy Medical Officer of Health and School Medical Officer:

Leon A. Nettleton, M.B., Ch.B., L.M.S.S.A., D.P.H.

Consultant Anaesthetist (Part-time):

R. C. Davison, M.R.C.S., L.R.C.P., D.A.

S. S. Mahatme, M.B., B.S., D.A.

Senior Clinical Medical Officer in Department:

S. Joan A. Raymond, M.B., Ch.B., D.C.H.

Medical Officer in Department:

Radha Ramaswami, B.A., M.B.B.S., D.C.H. (Part-time)

Lakshmi Rajan, M.B., B.S., DIP. OBST. GYN. (Part-time)

Corinne A. Barraclough, M.B., Ch.B., (Natal) (Part-time)
(Commenced 7.12.70)

Chief Nursing Officer:

Mrs. M. E. L. Goody, S.R.N., S.C.M., Q.I.D.N., H.V.

Health Visiting Service:

Superintendent Health Visitor and School Nurse:

Mrs. E. Inman, S.R.N., S.C.M. (Part I), H.V.

Deputy Superintendent Health Visitor and School Nurse:

Miss S. Abbott, S.R.N., S.C.M., Q.I.D.N., H.V. (Terminated 31.8.70)

Senior Health Visitors and School Nurses:

Mrs. M. Lonsdale, S.R.N., S.C.M., H.V.

Mrs. J. E. Sweetnam, S.R.N., S.C.M., H.V.

Mrs. K. Tomlinson, S.R.N., S.C.M., H.V.

Mrs. A. Marshall, S.R.N., S.C.M., H.V.

Health Visitors and School Nurses:

Miss M. Stott, S.R.N., S.C.M., Q.I.D.N., H.V.

Mrs. I. S. Harris, S.R.N., S.C.M., H.V.

Miss I. Reilly, S.R.N., S.C.M., H.V.

Miss M. Steele, S.R.N., S.C.M., H.V.

Mrs. B. Robinson, S.R.N., S.R.F.N., S.C.M., H.V.

Mrs. W. P. Shepherd, S.R.N., S.C.M. (Part I), H.V.

Mrs. J. A. Livesley, S.R.N., S.C.M. (Part I), Q.I.D.N., H.V.

(Terminated 4.10.70)

Miss J. Broadhead, S.R.N., S.C.M., H.V.

Mrs. E. C. Bolt, S.R.N., S.C.M., H.V.

Mrs. W. Felton, S.R.N., S.C.M. (Part I), H.V. (Commenced 9.12.70)

Mrs. J. Goodyear, S.R.N., S.C.M. (Part I), H.V. (Commenced 21.9.70)

Student Health Visitors:

Mrs. W. Felton, S.R.N., S.C.M. (Part I) (Terminated 8.12.70)
Mrs. J. Goodyear, S.R.N., S.C.M. (Part I) (Terminated 20.9.70)
Mrs. A. Wilkinson, S.R.N., S.C.M. (Part I) (Commenced 1.9.70)

Clinic/School Nurses:

Mrs. F. J. Garner, S.R.N.
Mrs. M. McCobb, S.R.N. (Retired 31.8.70)

State Enrolled Nurses:

Mrs. G. R. Oxley, S.E.N.
Mrs. I. Lodge, S.E.N.
Mrs. M. C. Hill, S.E.N.
Mrs. M. Sidlow, S.E.N.
Mrs. D. Parkin, S.E.N.
Miss N. Corner, S.E.N. (Commenced 12.10.70)

Midwifery Service:

Domiciliary Midwives:

Mrs. G. Bailey, S.R.N., S.C.M., Q.I.D.N. (Senior Midwife)
Mrs. L. Woodhead, S.R.N., S.C.M., Q.I.D.N.
Mrs. A. Taylor, S.R.N., S.C.M.
Mrs. K. Leech, S.R.N., S.C.M.
Mrs. A. Horne, S.C.M.
Mrs. M. Owen, S.C.M.
Mrs. M. M. Gaskell, nee Guest, S.C.M.
Mrs. M. M. Frid, nee Baxter, S.C.M.

Home Nursing Service:

Assistant Superintendent (Training):

Mrs. E. Davies, S.R.N., Q.I.D.N.

District Nurses:

Mrs. I. B. McGowan, S.R.N., S.C.M., Q.I.D.N.
Mrs. G. A. Pollendine, S.R.N., Q.I.D.N.
Mr. J. Woodhead, S.R.N., Q.I.D.N.
Mrs. E. M. Mickethwaite, S.R.N., Q.I.D.N.
Miss S. A. Goldthorpe, S.R.N., Q.I.D.N.
Mrs. B. Sharpe, S.R.N., Q.I.D.N.
Mrs. C. Holding, S.R.N., Q.I.D.N.
Mrs. D. Dyson, S.R.N., Q.I.D.N. (Terminated 13.12.70)
Mrs. B. Cooper, S.R.N., N.C.D.N. (Terminated 18.1.70)
Mrs. G. Cooper, S.R.N., N.C.D.N. (Recommended 2.11.70)
Mrs. E. Higgins, S.R.N., N.C.D.N. (Terminated 30.11.70)
Mr. M. Fletcher, S.R.N., N.C.D.N. (Terminated 1.2.70)
Miss K. Howley, S.R.N., N.C.D.N. (Commenced 9.3.70)
Mrs. H. Buckle, S.R.N., N.C.D.N. (Terminated 18.10.70)
Mrs. S. A. Howell, S.R.N., O.N.C., N.C.D.N. (Commenced 2.3.70)
Mrs. S. Burnham, S.E.N.
Mrs. M. McGuinness, S.E.N.

Orderly:

Mrs. N. Milburn (Terminated 13.12.70)

Handicapped Services Department:

Mr. S. Holmes, A.I.S.W., Senior Welfare Officer
Mr. J. Moore, Social Welfare Officer
Mrs. E. Daley, Welfare Officer for the Deaf (Commenced 2.1.70)
Miss E. White, Home Teacher of the Blind
Mrs. J. M. Chapman, Home Teacher of the Blind (Terminated 31.3.70)
Mr. P. McGraynor, Craft Instructor
Mrs. P. McGraynor, Craft Instructor
Mr. R. W. Hatherley, Craft Instructor
Mrs. S. C. Haigh, nee Roberts, Welfare Assistant for the Handicapped
Miss E. E. Copley, Trainee Home Teacher of the Blind
(Commenced 30.9.70)
Mr. G. P. Guest, Clerk
Miss P. Sewell, Shorthand Typist (Terminated 29.11.70)
Mrs. D. Brook, Clerk.

Barnsley Light Industries:

Mr. N. A. Todd, General Manager
Mrs. S. Donoghue, Clerk-Typist
Mr. S. Wragg, Foreman
Mr. D. Williamson, Assistant Foreman (Terminated 30.4.70)
Mr. M. Liddle, Assistant Foreman (Commenced 14.12.70)
Miss C. Lowe, Clerk

Mental Health Service:

Miss E. M. Seabury, S.R.N., S.C.M., H.V., Senior Mental Health Welfare Officer
Mrs. W. M. Levesque, S.R.N., S.C.M., H.V., Mental Health Welfare Officer
Mr. P. Lynch, R.M.N., Mental Health Welfare Officer
Mr. J. A. R. Cook, Mental Welfare Assistant

Junior Training Centre:

Miss E. Wilde, Supervisor (Qualified)
Miss E. Gill, Assistant Supervisor (Qualified)
Mrs. M. Roebuck, Assistant Supervisor (Unqualified)
Mrs. M. Marrian, Assistant Supervisor (Unqualified)
Mrs. M. Featherstone, S.E.N., Assistant Supervisor (Unqualified)

Adult Training Centre:

Mr. J. H. Power, Manager
Mr. K. Winterbottom, Deputy Manager
Mrs. M. Oxley, Instructor
Mrs. V. Massey, Instructor
Mr. M. Nixon, Instructor
Miss C. Smith, Clerk-Typist

Home Help Service:

Miss D. W. France, I.H.H.O. CERT., Home Help Organiser
Mrs. I. Hackney, I.H.H.O. CERT., Assistant Home Help Organiser
Mrs. E. Allison, Assistant Home Help Organiser
Mrs. E. Hollins, Assistant Home Help Organiser (Commenced 22.6.70)

Dental Service:

Mr. G. White, L.D.S., Chief Dental Officer
Mr. D. R. Nteka, L.D.S., Dental Officer
Mrs. M. J. Rowntree, Dental Auxiliary (Re-commenced 4.5.70)
(Terminated 30.9.70)
Miss R. Sharp, Dental Clerk
Mrs. B. Ashurst, Dental Surgery Assistant
Miss J. Newsome, Dental Surgery Assistant
Mrs. D. Felton, nee Christie, Dental Surgery Assistant

Chiropody Service:

Mr. A. A. Aldam, M.Ch.S. (Sessional basis)
Mr. L. R. Parry, M.Ch.S. (Sessional basis) (Commenced 16.6.70)

Administrative and Clerical Staff:

Mr. K. Holling, D.M.A., Administrative Assistant and Chief Clerk
Mr. J. Faulkner, Senior Clerk
Miss J. Owen, Senior Shorthand Typist
Mrs. S. Clarke, Clerk-Typist
Miss C. M. Senior, Shorthand Typist
Mrs. J. M. Pleasant, Clerk
Miss P. J. Fleetwood, Clerk
Miss J. Walker, Senior Clerk, Care of Mothers and Young Children
and School Health Service.
Miss N. Wade, Clerk, School Health Service
Mrs. C. A. Wilkinson, Clerk, School Health Service
Mrs. B. Ramsden, Clerk, Care of Mothers and Young Children
Mrs. K. Firth, nee Bent, Clerk, Care of Mothers and Young
Children
Miss H. C. Fieldsend, Clerk, School Health Service
Miss L. Whike, Clerk, Care of Mothers and Young Children

Sanitary Service:

Mr. A. Pemberton, Chief Public Health Inspector
Mr. F. Midgley, Deputy Chief Public Health Inspector
Mr. E. S. Hackney, Public Health Inspector (Smoke Inspection duties)
Mr. P. Walker, District Public Health Inspector
Mr. H. J. A. Ackroyd, Public Health Inspector (Food Hygiene duties)
Mr. P. Hunt, District Public Health Inspector
Mr. R. Whittles, District Public Health Inspector
Mr. J. S. Smith, District Public Health Inspector (Terminated 8.11.70)
Mr. F. Smith, Authorised Meat Inspector
Mr. S. Blackburn, Authorised Meat Inspector
Mr. H. Tomlinson, Technical Assistant
Mr. D. Orr, Technical Assistant
Mr. D. R. Worrall, Senior Clerk
Mrs. P. Saxton, Senior Shorthand-Typist
Mrs. H. Lax, Clerk-Typist
Miss C. Evans, Shorthand-Typist
Mr. R. E. Shackleton, Clerk/Student Public Health Inspector
(Terminated 5.4.70)
Mr. C. B. Riby, Clerk/Student Public Health Inspector
Mr. P. Hobson, Clerk
Miss F. Trepczyk, Junior Clerk (Commenced 1.12.70)

