

[Report 1932] / Medical Officer of Health, Halifax County Borough.

Contributors

Halifax (England). County Borough Council. nb2008024085

Publication/Creation

1932

Persistent URL

<https://wellcomecollection.org/works/gbh8x7sg>

License and attribution

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

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

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



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

944
244632



COUNTY BOROUGH OF HALIFAX
HEALTH DEPARTMENT.

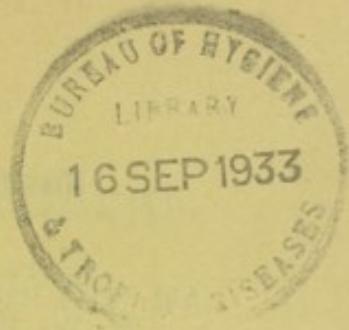
Annual Report ON THE HEALTH OF THE BOROUGH

For the Year 1932.

GEORGE C. F. ROE,
L.R.C.P. & S., L.M., D.P.H., D.P.M.,
Medical Officer of Health.

44





COUNTY BOROUGH OF HALIFAX
HEALTH DEPARTMENT.

Annual Report

ON THE HEALTH
OF THE BOROUGH
For the Year 1932.

GEORGE C. F. ROE,
L.R.C.P. & S., L.M., D.P.H., D.P.M.,
Medical Officer of Health.

Health Committee

(as on Dec. 31st, 1932).

Mayor - ALDERMAN WILLIAM CRABTREE, J.P.

COUNCILLOR H. THORP, *Chairman.*

ALDERMAN W. M. BRANSON, J.P., *Vice-Chairman.*

Ald. T. HEY, J.P.	Coun. M. WILLIAMSON, J.P.
" A. W. LONGBOTTOM, J.P.	" L. CHAMBERS.
" A. WALTERS, J.P.	" F. SHARP.
" J. H. WADDINGTON, J.P.	" T. H. FARRAR.
Coun. P. BARRETT.	" T. W. HANSON.
" A. MUFF.	" C. SHELDRAKE.
Coun. N. F. S. WINTER.	

Sub-Committees

Appointed by the Health Committee.

Health Services Sub-Committee.

Appointed by the Health Committee.

THE CHAIRMAN.	COUNCILLOR SHELDRAKE.
VICE-CHAIRMAN.	MUFF.
ALDERMAN LONGBOTTOM.	" FARRAR.
" HEY.	HANSON.
COUNCILLOR WILLIAMSON.	

Hospital Committee.

THE CHAIRMAN.	COUNCILLOR WINTER.
VICE-CHAIRMAN.	SHARP.
ALDERMAN HEY.	" CHAMBERS.
" WALTERS.	" BARRETT.
ALDERMAN WADDINGTON.	

St. Luke's Hospital Sub-Committee.

THE CHAIRMAN.	COUNCILLOR BARRETT.
VICE-CHAIRMAN.	CHAMBERS.
ALDERMAN WADDINGTON.	" HANSON.
" WALTERS.	" WILLIAMSON.
COUNCILLOR SHEPHERD.	

Accounts Sub-Committee.

THE CHAIRMAN.	COUNCILLOR WILLIAMSON.
VICE-CHAIRMAN.	" BARRETT.
ALDERMAN WALTERS.	" SHELDRAKE.
COUNCILLOR HANSON.	

Joint Recovery Sub-Committee.

ALDERMAN HEY.	COUNCILLOR CHAMBERS.
COUNCILLOR BARRETT.	" SHELDRAKE.
" FARRAR.	" WILLIAMSON.
" SHARP.	MRS. WHITAKER.
" BUTTERS.	MRS. SMITH.

Maternity and Child Welfare Committee.

The Health Committee with the following additional Members :—
MRS. J. STIRK. MRS. LAVINIA LUMB.
MRS. E. WHITAKER. MISS FLORENCE WHITLEY.
MRS. E. E. ROTHERA. MRS. MARY E. WILLIAMSON.
MRS. S. GLEDHILL.

Committee for the Care of the Mentally Defective.

COUNCILLOR L. CHAMBERS (Chairman).	COUNCILLOR J. W. ALDHAM. P. BARRETT.
ALDERMAN W. M. BRANSON (Vice-Chairman).	" G. H. BUTTERS. M. LIGHTOWLER.
MR. ROBERT MCHUGH.	" J. H. MAUDE.
MR. D. SUTCLIFFE.	MRS. A. SMITH.
MRS. E. TOWNEND.	

Welfare of the Blind Sub-Committee.

ALDERMAN HEY.	COUNCILLOR SHARP.
COUNCILLOR H. THORP.	" WILLIAMSON.
COUNCILLOR MUFF.	

Staff of the Health Department.

Medical Officer of Health.

GEORGE C. F. ROE, L.R.C.P. & S., L.M., D.P.H., D.P.M.

Assistant Medical Officers of Health.

*WILFRID SMITH, M.Sc., M.B., B.Ch., B.A.O., Clinical Tuberculosis Officer and Resident Medical Officer, Sanatorium.

*ALICE LATCHMORE, M.D., Ed., Medical Officer to Maternity and Child Welfare Centre.

*F. W. WATERWORTH, M.B., Ch.B., D.P.H., Assistant School Medical Officer.

DUNCAN C. LIDDLE, M.B., Ch.B., Resident Medical Officer, Borough Fever Hospital.

Medical Staff, St. Luke's Hospital.

JAMES DAWSON, F.R.C.S. (Eng.), Medical Superintendent.

JOHN CAMPBELL, F.R.C.S. (Ed.), Senior House Surgeon.

JAMES B. FLEMING, M.B., Ch.B., Junior House Surgeon.

Part Time Medical Officers.

PRIESTLEY LEECH, F.R.C.S (Eng.), Venereal Diseases Clinic.

J. F. HODGSON, M.D., D.P.H., Venereal Diseases Clinic.

F. W. GOYDER, F.R.C.S. (Eng.), Orthopaedic Surgeon.

H. FRANKLYN, M.R.C.S., L.R.C.P., Radiologist.

HARRY V. PHELON, M.R.C.P., Pathologist and Bacteriologist.

D. W. HEYNEMANN, M.B., Ch.B., Assistant School Medical Officer.

W. MACADAM, M.A., M.D., F.R.C.P., Consulting Physician.

Public Vaccinators.

A. GARVIE, M.D. J. J. MURPHY, M.B., Ch.B.

J. MORRISON, M.B. P. MILNES, L.R.C.P., L.R.C.S.

R. DAVIDSON, M.B., Ch.B. C. S. OGILVY, L.R.C.P.,

H. W. MORCK, M.R.C.S., L.R.C.P. L.R.C.S.

District Medical Officers.

A. GARVIE, M.D. W. R. THOMPSON, L.R.C.P.,

J. MORRISON, M.B. L.R.C.S.

R. DAVIDSON, M.B., Ch.B. G. C. SHARP, M.B., Ch.B.

H. FELDMAN, L.M.S.S.A. C. S. OGILVY, L.R.C.P.,
L.R.C.S.

Veterinary and Meat Inspector.

J. POLLARD, M.R.C.V.S., D.V.S.M. (Vict.)

o J. FLANAGAN, Assistant Meat Inspector,

STAFF OF THE HEALTH DEPARTMENT.—*Continued.*

Sanitary Inspectors.

†J. W. BEAUMONT, Chief Sanitary Inspector.
†F. TEAL, District Sanitary Inspector.
†J. G. WALSHAW ”
†E. WILSON ”
†H. LEAPER ”
†H. MARGERISON, Housing Inspector.
T. FEARNLEY, Shops' Inspector.

Clerical Staff.

†C. CARLTON, Chief Clerk.
Clerks—H. WRIGHT. H. CARLTON. A. CLEGG.
N. BRADLEY. MISS M. FAWTHROP.
 J. T. BOOCOCK.

Vaccination Officer.

Visitor Mental Deficiency Acts.
Boarding Out Order (Children under 5). Children Act (Part I.).
 MISS E. CLARKSON.

Maternity and Child Welfare.

Health Visitors.

x§*MISS E. R. ORAM, Senior Health Visitor.
*E. MARSHALL. x§*O. WILSON. x§*S. BRIGGS.
§*M. MOORE. x§*N. DINGSDALE.

Tuberculosis Visitor: M. A. OATES.

Matron, Borough Fever Hospital: F. WILSON.

Matron, Sanatorium: *W. DAVIDSON.

Matron Superintendent, Craigie Lea Certified Institution: M. BAILEY.

Removal Officer: W. P. SHARP.

Public Analyst: H. T. LEA, B.Sc. (Hons.), M.Sc., F.I.C.

St. Luke's Hospital.

Steward : A. WHEELDON.
Matron : E. A. WOODWARD.
Clerks—A. F. PIDGEON. L. WATSON. J. PESTER.

*Salary contributed to, under Public Health Acts or by Exchequer Grants.

†Certificate Sanitary Inspector, Royal Sanitary Institute.

‡Royal Sanitary Institute Certificates as Sanitary Inspector, Meat and other Foods Inspector, and Sanitary Science as applied to Buildings and Public Works.

§Certificate Central Midwives Board.

*Health Visitors' Certificate.

oRoyal Sanitary Institute Certificate as Sanitary Inspector and Inspector of Meat and other Foods.

COUNTY BOROUGH OF HALIFAX.

REPORT OF THE MEDICAL OFFICER OF HEALTH, **FOR THE YEAR 1932.**

INTRODUCTION.

To the Chairman and Members of the Health Committee.

Mr. Chairman and Gentlemen,

I have the honour to submit to you my Fifth Annual Report, being the sixth of the series, for the year ending December 31st, 1932.

* * * *

The arrangement follows that of last year's Report. Each branch of the work is dealt with so far as possible as a separate section, and the statistics relating to any particular compartment are included in the section devoted to that compartment.

* * * *

The live births registered were 1,126 legitimate and 63 illegitimate. The birthrate consequently was 12.1. For England and Wales the rate was 15.3, and in the 118 Great Towns it was 15.4.

* * * *

The total male births numbered 631 the female 558, being a proportion of 1,130 males to 1,000 females.

The deaths numbered 1,441 compared with 1,465 last year; 1,395 in 1930; 1,522 in 1929; 1,286 in 1928; 1,585 in 1927. For 1932 the deathrate was 14.8. The deathrate for England and Wales was 12.0 and for the 118 Great Towns 11.8.

* * * *

The excess of deaths over births was 252, or 2.5 per 1,000 of the population.

* * * *

The marriage rate was 15.2 per 1,000 of the population.

* * * *

The chief causes of death during 1932 were: Heart Disease; Diseases of the Respiratory System, Tuberculosis and Cancer. Heart Disease was the greatest single cause of death. Cancer continues to bulk largely in the deathrates, but this is to be expected as a result partly of the natural increase in the population especially at the higher ages at which Cancer is most prevalent, and partly as a result of improved diagnostic facilities, quite independently of any actual increased incidence which may be occurring. In my Annual Report for last year I dealt with the problems of Heart Disease, Arterio-Sclerosis and Mental Deficiency.

* * * *

The incidence of the common infectious diseases was fairly heavy. Diphtheria showed some exacerbation. The details of the scheme for the new Infectious Diseases Hospital have now been approved and building will begin early next year. Our conceptions of the functions of a Fever Hospital have radically altered in the post-war period. Formerly the main duty was isolation. Nowadays treatment and the reduction of mortality by modern therapeutics are the important considerations. In my opinion a modern Fever Hospital should always be large enough to justify a resident doctor and to provide for the training of nurses in infectious diseases.

* * * *

The work of the Tuberculosis Service appears in Section 5 of the Report. In addition to treatment at the Sanatorium and diagnostic facilities at the Dispensary, tuberculosis patients are educated in the management of their expectorations. The trained patient even under unfavourable home conditions is a less serious cause of risk to others than he was before he had the benefit of treatment and instruction. Whenever possible a case of pulmonary tuberculosis should sleep alone, and preferably in a room alone. It is a safeguard against other members of the household receiving a dose of infection.

In conclusion I would urge that the one thing really essential for the Public Health is a Public Health conscience. Immensely difficult problems lie immediately ahead, problems medical and economic, fascinating in their interest, but Gargantuan in their intricacies. These problems cannot be solved except by people who have a sense of their importance and a feeling for horizon. The future depends on whether we have vision. In the words of Disraeli, "Public Health is the foundation upon which rests the happiness of the people and the power of the State. Take the most beautiful kingdom, give it intelligence and laborious citizens, prosperous manufacturers, productive agriculture; let arts flourish, let architects cover the land with temples and palaces; in order to defend all those riches, have first rate weapons, fleets of torpedo boats—if the population decreases yearly in vigour and stature, the nation must perish. That is why I consider the first duty of a statesman is the care of Public Health."

I am,

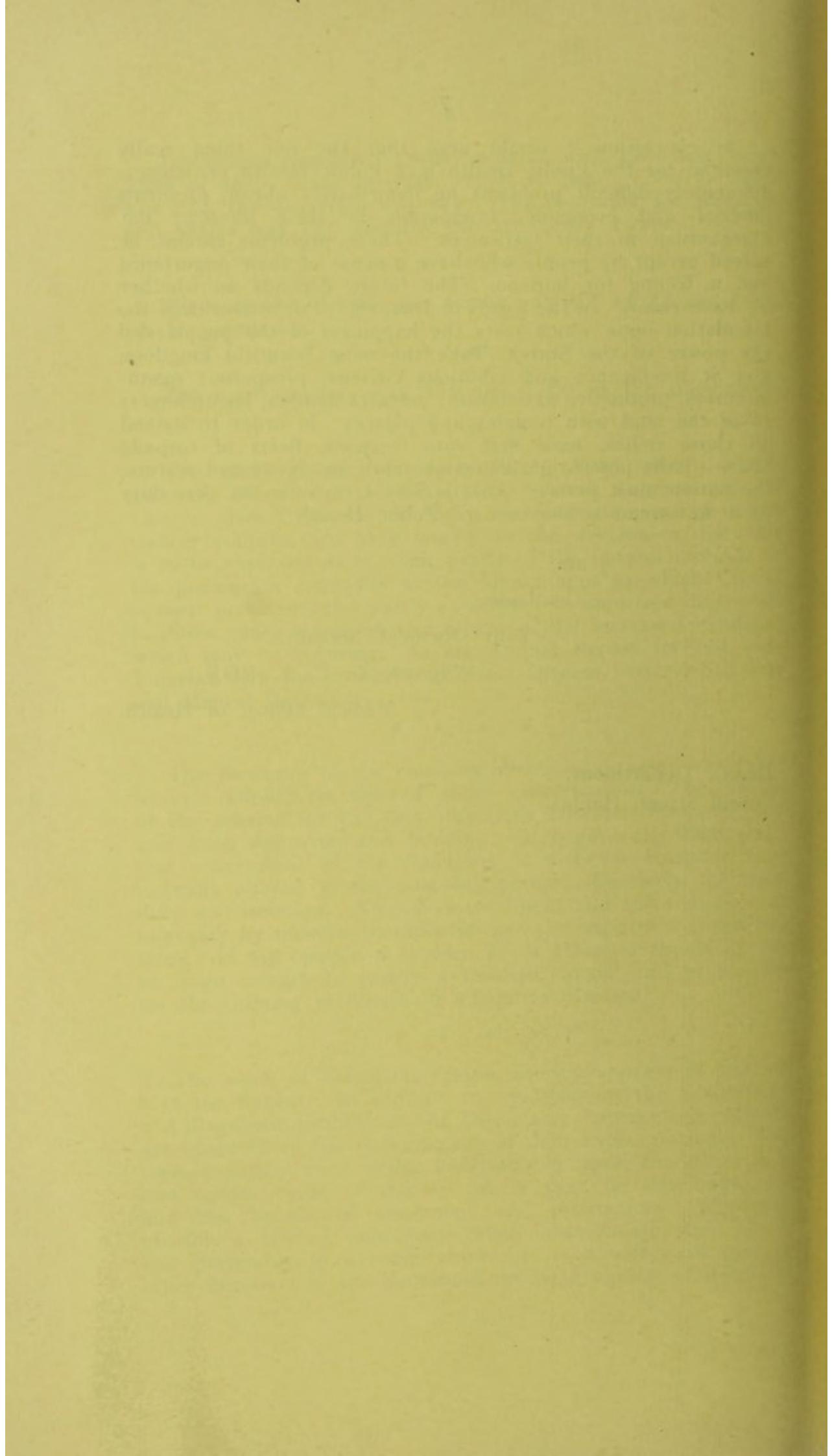
Gentlemen,

Your Obedient Servant,

(Signed) G. C. F. ROE,

Medical Officer of Health.

Health Department,
Powell Street, Halifax.
July, 1933.



SECTION 1.

—o—

Social Conditions.

Vital Statistics.

REPORT.

Social Conditions.

Halifax is essentially an industrial town, being almost unique in the wide variety of the industrial processes carried on. The chief industries being woollen, worsted textiles, carpet weaving, machine tool manufacture and toffee making.

The year has been one of depressed industrial conditions, with considerable unemployment.

Statistics.

Latitude	53 44° North.				
Longitude	1 50° West.				
Mean height above sea level, feet		...	...	780	
Area in acres	...	...	...	...	14,081
Population (Mid year, 1932)		...	...	97,700	
Density of population per acre	...	...	...	7	
Number of inhabited houses (1931 Census)		...	28,488		
Average number of persons to each occupied house...			3.32		
Rateable Value	...	...	...	£548,804	
Sum represented by a penny rate...		...	...	£2,120	

Summary of Vital Statistics.

Birthrate per 1,000 population	...	...	...	12.1
Deathrate per 1,000 population	...	...	...	14.8
Infantile deathrate per 1,000 births	...	...	...	80
Natural decrease of population (Excess of Deaths over Births)	...	...	...	252
Respiratory deathrate	...	...	...	1.4
Phthisis deathrate	...	...	...	.52
Deathrate from other forms of Tuberculosis	...			.20
Deathrate from Cancer	...	...	...	1.8

Summary of Deaths.

(Based on the Registrar General's "Short List" of causes of death).

Cause of Death	Number
Enteric Fever	—
Smallpox	—
Measles	5
Scarlet Fever	1
Whooping Cough	8
Diphtheria	10
Influenza	18
Encephalitis Lethargica	3
Cerebro Spinal Fever	2
Tuberculosis of respiratory system	51
Other Tuberculous Diseases	20
Cancer, Malignant Disease	176
Rheumatic Fever	—
Diabetes	18
Cerebral Haemorrhage, etc.	85
Heart Disease	342
Other Circulatory Diseases	132
Bronchitis	49
Pneumonia (all forms)	82
Other Respiratory Diseases	14
Ulcer of Stomach or Duodenum	11
Diarrhoea, etc.	13
Appendicitis and Typhlitis	5
Cirrhosis of Liver	4
Acute and Chronic Nephritis	61
Puerperal Sepsis	7
Other Accidents and Diseases of Pregnancy and Parturition	4
Congenital Debility and Malformation, Premature Birth	54
Suicide	29
Other deaths from violence	30
Other defined Diseases	205
Causes ill-defined or unknown	2
Total	1,441

		Annual Deathrate per 1,000 Population								Rate per 1,000 Births	
		All Causes	Enteric Fever	Small-Pox	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Influenza	Diarrhoea and Enteritis (under two years)	Total Deaths under one year
Year											
England and Wales ...	1932	15.3	12.0	0.01	0.00	0.08	0.01	0.07	0.06	0.32	6.6
118 County Boroughs and Great Towns including London ...	1932	15.4	11.8	0.00	0.00	0.11	0.01	0.08	0.07	0.28	6.5
HALIFAX ...	1924	14.9	15.3	0.01	0.00	0.08	0.01	0.06	0.05	0.73	6.7
	1925	14.5	15.9	0.04	0.00	0.18	0.01	0.10	0.09	0.40	9.3
	1926	14.5	14.3	0.01	0.00	0.02	0.01	0.10	0.09	0.14	7.8
	1927	13.8	15.4	0.00	0.00	0.20	0.02	0.06	0.08	0.67	6.7
	1928	12.9	12.3	0.02	0.00	0.00	0.02	0.00	0.16	0.10	3.9
	1929	13.4	14.7	0.01	0.01	0.03	0.03	0.14	0.09	0.59	7.6
	1930	13.3	13.4	0.01	0.00	0.06	0.01	0.02	0.07	0.12	4.6
	1931	12.6	14.9	0.02	0.00	0.09	0.03	0.04	0.17	0.38	4.8
	1932	12.1	14.8	0.00	0.00	0.05	0.01	0.08	0.10	0.18	4.2

Provisional figures. The rates have been calculated on a population estimated to the middle of 1931.
 The mortality rates refer to the whole population as regards England and Wales, but only to civilians as regards London and the group of towns.

SECTION 2.

—o—

**General Provision of
Health Services.**

Bacteriological Service.

General Provision of Health Services.

(Arranged as required by the Ministry.)

Hospitals provided or subsidised by the Corporation :—

Tuberculosis—The Sanatorium at Shelf provides accommodation for 50 adults (25 early and 25 other cases) and for 12 children. It is provided by the Halifax Corporation and receives cases from other districts, including Lancashire County.

The Health Committee has a call on 5 beds at the Bermer-side Residential School for children in the pre-tubercular stage, or children suffering from non-pulmonary tuberculosis of a non-infectious character.

Maternity Hospital—The Maternity Homes in connection with St. Luke's Hospital and the Royal Halifax Infirmary appear amply to meet the needs of the town. The Corporation makes a grant of £300 per annum towards the Infirmary Maternity Home.

Hospital for Children—By arrangement with the Education Committee operations for Tonsils and Adenoids are carried out at St. Luke's Hospital.

There is a ward at St. Luke's Hospital for the treatment of sick or crippled children sent there by the Maternity and Child Welfare Committee, also an arrangement by that Committee with the Royal Halifax Infirmary for the treatment of cases of Ophthalmia Neonatorum.

An Orthopaedic Service has been set up at St. Luke's Hospital for the treatment of cases sent by the Maternity and Child Welfare and Education Committees.

Fever Hospital—The Corporation provides the Stoney Royd Fever Hospital which admits cases of Scarlet Fever, Diphtheria, Enteric and other fevers from Halifax, and from the areas of neighbouring Local Authorities. Accommodation for 46 cases.

Small Pox—The Halifax Corporation maintains the Small Pox Hospital at Belle Vue, Mount Tabor, which has accommodation for 26 patients. This hospital is subsidised by the Brighouse Joint Hospital Board and the Urban District Councils of Luddenden Foot, Midgley and Sowerby.

Venereal Diseases—The Corporation has an arrangement with the Royal Halifax Infirmary for both out-patient and in-patient treatment. See page 46.

Hospital Facilities.

Hospital and Situation	Purpose	Total Beds	Authority	Medical Staff	Consultants
Borough Fever Hospital, Stoney Royd	Fever	46	Halifax Health Committee	1 Res. Medical Officer	As required
Halifax Sanatorium, Shelf	Tuberculosis	64	Do	1 Res. Medical Officer The Sen. Asst. M.O.H. and Tuberculosis Officer	As required
Royal Halifax Infirmary	General Surgical Medical and Maternity	230	Voluntary Committee		
St. Luke's Hospital	General Surgical Medical Children and Maternity	394	Halifax Health Committee	1 Medical Superintendent (Resident) 2 Asst. Medical Officers (Res.)	1 Physician 1 Orthopædic Surgeon 1 Radiologist 1 Bacteriologist
Smallpox Hospital, Harewood Well	Smallpox	26	Do	Medical Officer of Health or Asst. M.O.H. (No Resident)	As required

General Nursing—Under the Local Government Act, 1929.

St. Luke's Hospital, containing 394 beds was, on April 1st, 1931, transferred to the Local Authority and is administered by the Health Committee.

Mental Deficiency—The Craigie Lea Certified Institution, which is operated under licence of the Board of Control, was opened during the year. The accommodation is for 28 low grade cases of both sexes (excluding cot or chair cases).

AMBULANCE FACILITIES.

(a) For Infectious Cases—

The Corporation's Motor Ambulance Service (1 "Vulcan" 22 H.P., 1 "Guy" 20 H.P.) worked from Stoney Royd Hospital, serves Halifax and the other districts from which cases are admitted to the Hospital.

(b) For non-Infectious and Accident Cases—

(1) The Corporation's Motor Ambulance Service, worked by the Fire Brigade (Tel. 3222). (1 "Mercedes" 45 H.P., 1 "Vulcan" 20 H.P., 1 "Austin" 20 H.P.)

(2) The Health Committee's Ambulance at St. Luke's Hospital (Tel. 4259). ("Austin" 20 H.P.).

(3) The Ambulance Service of the St. John Ambulance Brigade and British Red Cross Society. ("Austin" 20 H.P.).

Commandant—Mr. A. E. Rawbon (Tel. 61197).

Transport Officer—Mr. L. Chambers (Tel. 3831).

CLINICS.

(Excluding school clinics which appear in the Annual Report
of the School Medical Service).

Name of Clinic	Purpose	Where held	Times		
			Days	Hours	
Tuberculosis	Tuberculosis	8, Clare Road	Monday Thursday	5 p.m. to 7 p.m. 5 p.m. to 7 p.m.	
Maternity and Child Welfare	Ultra Violet Light and Massage Babies Children under 5 Babies	66, 68, Northgate Do Queen's Road 66, 68, Northgate Do	Monday Do Tuesday Wednesday Thursday	Morning Afternoon Morning & Afternoon Do Morning	
	Ultra Violet Light and Massage Ane-Natal Babies	Do Do Do	Do Friday Saturday	Afternoon All day Morning	
	Ultra Violet Light and Massage	Do			
* Halifax District Nursing Association	Ante-Natal	Kirby Leas, Savile Road	First Thursday in each month	Evening	
* Royal Halifax Infirmary	Ante-Natal	Royal Halifax Infirmary	Wednesday Thursday	Afternoon & Evening Afternoon	
St. Luke's Hospital	Ante-Natal	St. Luke's Hospital	Tuesday	Morning & Afternoon	
Royal Halifax Infirmary	Venereal Diseases	Royal Halifax Infirmary	Tuesdays (Women and Children) Thursdays (Men) Auxiliary Centre for Men : Daily	3-30 p.m. to 4-30 p.m. and 6 p.m. to 8 p.m. 6 p.m. to 8 p.m.	
			Sunday	10 a.m. to 12 noon and 6 p.m. to 8 p.m. 10 a.m. to 12 noon	

* Subsidised by the Corporation.

Nursing in the Home—This is provided by :—

- Halifax District Nursing Association.
- Siddal Nursing Association.
- Illingworth Nursing Association.
- Luddenden Nursing Association.

Midwives—See Maternity and Child Welfare Section, page 48.

Chemical Work—All chemical analyses are performed by Mr. H. T. Lea, M.Sc., the Borough Analyst. This work includes not only the analysis of samples taken under the Sale of Food and Drugs Acts (page 112), but also the examination of water from wells and other sources, which from time to time occupy the attention of the officers of the Health Department.

Bacteriological Examinations.

The arrangements are as follows :—

Bacteriological examinations are carried out at the Royal Halifax Infirmary, where swabs, etc., may be sent direct.

A swab is said to be positive when Kleb's Loeffler Bacilli are found, and negative when they are not found. Failure to find K.L.B. does not negative the presence of diphtheria, and in suspicious cases it is wrong to wait for the result of a swab before giving anti-toxin.

A small Bacteriological Laboratory has been equipped at the Fever Hospital, and the resident doctor examines the hospital throat swabs for K.L.B.

St. Luke's Hospital.

The Bacteriological and Analytical work of the Hospital is now carried out at the laboratory in the Hospital which was thoroughly equipped during the year. Dr. Phelon, together with an assistant is in charge of this work.

Enteric Fever.

Blood outfits for the agglutination test are supplied by the Health Department, and may be sent direct to the Royal Halifax Infirmary.

Tuberculosis.

Sputum and other material is examined only at the Tuberculosis Clinic, 8, Clare Road, Halifax, and should not be sent to the Royal Halifax Infirmary. Sputum must be sent in special outfits which will be supplied on the application of the practitioner.

Examinations 1932.

The following Table shows the number of examinations carried out either at the Royal Halifax Infirmary, the Tuberculosis Clinic, or the Fever Hospital during the year, either for the medical practitioners of the town, the clinic, or the Health Department :—

Sputum for Tubercl	...	...	...	669
Diphtheria Swabs	...	...	...	1245
Hair for Ringworm	...	...	...	1
Agglutination Test (Widal) T.A.B.	...	...	...	13
Others (Fluids, etc.)	...	...	...	46
<hr/>				
Total ...	...	...	1974	

In addition to the above, samples of milk from cows suspected to be suffering from tuberculosis of the udder have been taken by the Veterinary Inspector and submitted to bacteriological tests in other Laboratories.

Issue of Sera and Vaccines.

Diphtheria Antitoxin.

As the Health Department is usually prepared to remove diphtheria cases to hospital on the shortest notice, the issue of diphtheria antitoxin for use in the town should be rarely required; a supply is kept at the Health Department for issue in certain circumstances.

Botulism Antitoxin.

The Ministry of Health has placed botulism antitoxin at certain centres about the country. The nearest to Halifax are Manchester and Leeds. The Medical Officers of Health of these places are in charge of the supplies.

SECTION 3.

—o—

Cancer.

Cancer.

A Radium Clinic, in charge of Dr. Chester Williams, has now been established at the Royal Halifax Infirmary, towards the cost of which the Health Committee of the Halifax Corporation pay the sum of £50 per annum. Patients from Halifax are now admitted through this clinic for radium treatment at the Royal Infirmary, Bradford.

Table showing Deaths at Age Periods during 1932 :—

Age Period	Males	Females	Total
Under 25	—	1	1
25—35	—	3	3
35—45	3	10	13
45—65	40	42	82
65 and over... ...	39	38	77
	82	94	176

Deathrate per 1000 population during the past 10 years :—

Year	Deathrate	Year	Deathrate
1923	1·4	1928	1·7
1924	1·5	1929	1·7
1925	1·6	1930	1·7
1926	1·6	1931	1·9
1927	1·6	1932	1·7

Table showing the organs or parts affected :—

Site	Males	Females	Total
Stomach	19	8	27
Leg	—	1	1
Intestines	8	11	19
Heart	1	—	1
Liver	6	1	7
Rectum	14	4	18
Oesophagus	2	2	4
Bladder	1	—	1
Prostate	4	—	4
Scrotum	1	—	1
Tongue and Mouth	9	1	10
Vulva	—	1	1
Uterus	—	19	19
Breast	—	21	21
Ovary	—	5	5
Larynx	—	1	1
Pancreas	2	5	7
Lungs	5	1	6
Forehead	1	—	1
Bone	3	—	3
Pelvis	1	—	1
Umbilicus	—	1	1
Retro-peritoneal ...	—	1	1
Not stated	1	3	4
Other causes ...	4	8	12
	82	94	176

General Notes.

I would draw particular attention to the following points brought out by the above tables:—

- (1) Cancer is almost exclusively a disease of adult life.
- (2) Cancer appears in many forms.
- (3) Cancer in men chiefly attacks the food tract and in women the breasts and special organs of generation.

Prevention.

Statistics prove that the average cancer patient obtains medical advice too late. One should learn how to recognise its principal danger signals, and immediately seek medical advice upon the first suspicion that the disease may be present. The following preventive points are of general interest :—

- (1) If you see or feel a small lump on your body consult your doctor at once.
- (2) If you notice unusual discharges or bleeding from the openings of the body consult your doctor at once.
- (3) Avoid chronic irritation, e.g., excessive smoking, jagged teeth, ill-fitting false teeth and the practice of drinking fluids at high temperatures. The hot stem of a pipe may cause irritation of tongue or/and lip.
- (4) Consult your doctor re Chronic Indigestion.
- (5) Remember the importance of the time factor (early treatment) in cancer.
- (6) Remember there may be no pain in the early stages. If the early stages of cancer were as painful as toothache many lives would be saved.
- (7) Cancer frequently develops in the region of a chronic ulcer (e.g., on lip or tongue), and it is important to see that such ulcers are properly cured.

So far as we know Cancer is neither infectious, contagious, a germ disease, nor hereditary; but it would be unwise to be dogmatic about any of these points. We must look to research for the conquest of Cancer.

SECTION 4.

—o—

Infectious Disease.

(a) Fever Hospital.

(b) St. Luke's Hospital.

Borough Fever Hospital.

I am indebted to Dr. D. C. Liddle, Resident Medical Officer at the Borough Fever Hospital, for the following report :—

The Fever Hospital is situated at Stoney Royd on a site of $3\frac{1}{2}$ acres, at a height of 450 feet above sea level.

As the result of a survey of the Health Services by the Ministry of Health the accommodation of the Hospital has been reduced from its previous number of 52 beds to 46 beds. As the building is entirely unsuited for a Fever Hospital, the Council has decided to build a new Fever Hospital at Northowram.

The allocation of the beds for the various diseases is now as follows :—Diphtheria 12 beds, Scarlet Fever 28, and other diseases 6 beds. As the accommodation is entirely inadequate during an epidemic of one disease, the beds for other diseases are utilised for the epidemic disease.

The Fever Hospital supplies, when necessary, the staff required for the Small-Pox Hospital. The laundry at Stoney Royd does the laundry work for the Sanatorium and the Small-Pox Hospital.

The Hospital is a recognised Training School for Fever Nurses in accordance with the regulations laid down by the General Nursing Council, and during the year 8 Probationer Nurses received training.

Routine Bacteriological work is carried out at the Hospital.

During the year 330 patients were admitted to the Hospital, of whom 313 were Borough cases and 17 were from areas outside the Borough. Of the 330 cases, 158 were admitted as Scarlet Fever, 160 as Diphtheria and 3 for observation.

Scarlet Fever.

The number of cases admitted to Hospital as Scarlet Fever was 158, of which 155 were true cases, the remaining 3 were Measles. 146 were Borough cases, 12 were "Outside the Borough" cases. The average length of stay in Hospital was 29.92 days.

The following complications and sequelæ occurred among the patients suffering from Scarlet Fever :—

	Present on admission	Onset after admission	Total
Impetigo	2	—	2
Rhinorrhœa	7	7	14
Cervical Adenitis	10	6	16
Rheumatism	1	4	5
Sore Nose, etc.	3	3	6
Septic Spots, etc,	7	2	9
Albuminuria of Convalescence	3	8	11
Otitis Media	4	7	11
Heart Disease	3	1	4
Bronchitis and Broncho-			
Pneumonia	2	1	3
Conjunctivitis	—	1	1
Tonsillitis	4	1	5
Abscess	4	1	5
Quinsey	1	—	1

There were 2 deaths among the cases of Scarlet Fever, one being due to Tuberculosis and one to Post Scarlatinal Cellulitis of the neck.

Since the introduction of serum treatment, the prognosis of Scarlet Fever seems to be more favourable than previously. The number of complications and sequelæ appear to be reduced in frequency and in severity. The length of stay in Hospital has also been reduced and the severity of the sequelæ diminished.

As is the case with Diphtheria Antitoxin however, the value of the serum is greatest in the cases to which it is given early in the course of the disease. The type of the disease was mild.

There has been a remarkable decline in mortality from Scarlet Fever during the last 30 years, but it has not been accompanied by any general decrease in prevalence. The hospitalisation of all cases irrespective of other circumstances, e.g. (severity of attack, overcrowding and cases occurring over milkshops) is ineffective in reducing the prevalence or mortality of the disease and is an out-of-date policy. Abortive, missed and "carrier" cases, probably play a larger part in the spread of infection than clinical cases. We therefore exercise discrimination in regard to the admission of cases.

Diphtheria.

During the year 160 cases were removed to Hospital as Diphtheria, of which 159 were true cases, and one Follicular Tonsillitis. Of the 160 cases admitted 155 (3 from the Crossley and Porter School) were Borough cases, 5 were from areas outside the Borough. The length of stay in Hospital for Diphtheria cases was 51.7 days.

The following complications and sequelæ occurred :—

Complication	Before admission	After admission	Total
Tonsillitis	—	4	4
Palatal and other Paresis ...	—	14	14
Albuminuria	2	21	23
Septic Spots and Abscesses ...	4	7	11
Bronchitis and Broncho Pneumonia	3	—	3
Impetigo	2	5	7
Cervical Adenitis	43	—	43
Otorrhoea	22	1	23
Toxic Myocarditis	73	10	83

Deaths from Diphtheria totalled 13. They were complicated by intense Cervico-Adenitis and Oedema of the neck.

The prognosis of Diphtheria depends on its early diagnosis and adequate serum treatment. The Hospital admits all suspected cases without awaiting the results of a Bacteriological examination of swabs. During the year, Halifax experienced an epidemic of unusual extent and severity.

Immunisation, Schick and Dick Testing.

The necessity of protecting the staff of an Infectious Diseases Hospital is obvious. All members of the staff at the Hospital are given the opportunity of being Dick or Schick tested to ascertain susceptibility and if susceptible they are offered immunisation. The Schick Test determines the susceptibility to Diphtheria and the Dick to Scarlet Fever.

In the matter of immunisation there are two stages, (1) a test to determine susceptibility to the disease and (2) the immunisation of those who are found to be susceptible.

A scheme is under consideration for the setting up of a Diphtheria Prevention Clinic and for the provision of facilities for Diphtheria Immunisation by General Practitioners in Halifax.

The Diphtheria Immunisation Schemes in Germany and the United States have proved beyond doubt the value of the measures.

During the year the Resident Medical Officer has been called into consultation by the General Practitioners on many occasions. Schick and Dick Testing and the Immunisation of susceptible cases have been carried out.

Enteric Fever.

During the year one query case was admitted but this proved to be Ulcerative Colitis.

Laboratory Report.

The following examinations of specimens for organisms were carried out :—

	Positive	Negative	Total
Nose and Throat Swabs for K.L.B.	192	479	671
Widals	2	3	5

Operations performed at Stoney Royd.

Nature	Number
Incisions and Drainage	10
Lumbar Puncture	4
Mastoids	2
Exposure of Thyroid and evacuation of Abscess ...	1
Total	17

Disinfection.

A steam disinfecter and Formalin disinfectors are part of the equipment at Stoney Royd.

During the year the following have been disinfected :—

Mattresses and bedding	...	...	...	...	412
Beds	...	...	...	...	213
Bundles of sundries (books, hair, etc.)				...	45
Cases of Scabies treated	...	...	...	...	106

The following Table shows the number of cases suffering from Infectious Diseases transferred from other Hospitals and Institutions to Stoney Royd :—

Disease	Royal Infirmary	St. Luke's Hospital	Halifax Sanatorium	Craigie Lea
Scarlet Fever ...	8	5	—	5
Diphtheria ...	—	12	—	—
Total ...	8	17	—	5

The following Table shows the Monthly Admissions to Hospital for the various diseases for the year :—

Month		Scarlet Fever	Diphtheria	Enteric & Paratyphoid	Other Diseases	Total
January	...	14	7	—	2	23
February	...	16	5	—	2	23
March	...	18	7	—	—	25
April	...	9	3	—	2	14
May	...	12	4	—	2	18
June	...	4	2	—	—	6
July	...	12	1	—	2	15
August	...	6	8	—	—	14
September	...	10	30	—	—	40
October	...	12	34	—	1	47
November	...	16	28	—	—	44
December	...	29	31	1	—	61
Total	...	158	160	1	11	330

The following Table shows the distribution of "outside the Borough cases" :—

Area	Scarlet	Diphtheria	Others	Total
Shelf	...	1	—	1
Luddenden Foot	...	—	5	5
Soyland	...	2	—	2
Greetland	...	1	—	1
Ripponden	...	8	—	8
	12	5	—	17

Ambulance Facilities for Infectious Cases.

Two ambulances are garaged at Stoney Royd for the removal of infectious cases to Hospital. They are (1) a "Vulcan," 22 h.p.; (2) a "Guy," 20 h.p. The latter is reserved for the removal of Small-Pox cases.

Small-Pox Hospital, Mount Tabor.

The Borough remained free from this disease during the year.

This Hospital, maintained by the Council, is under agreement to admit cases from the Brighouse Joint Hospital Board's area, from Luddenden Foot, Midgley and Sowerby.

The Hospital is staffed (in addition to the resident caretaker and his wife) by nurses from Stoney Royd Fever Hospital, and the victualling and nursing is supervised by Miss Wilson, Matron, Stoney Royd. The Medical Officer of Health and the Assistant Medical Officer of Health, provide the medical attendance. The situation of the Hospital, on the open moorland, is such as to expose it to wild weather, and the wood and iron buildings are not the most suitable type for such a situation, the upkeep being costly.

Prevalence of, and Control over, Infectious Diseases.

Enteric Fever.

One case of this disease was notified during the year, and removed to the Borough Fever Hospital, but proved to be Ulcerative Colitis ; it recovered.

Small-Pox.

No case of this disease occurred during the year.

The following steps are taken on the outbreak of a case of Small-Pox in Halifax :—

- (1) The certifying doctor is communicated with and the patient immediately removed to Hospital.
- (2) The house is disinfected.
- (3) The vaccinating officer is advised.
- (4) Medical Officer of Health and staff proceed to the spot and ascertain extent of the mischief.
- (5) History of source of infection is sought.
- (6) List of contacts is compiled.
- (7) Vaccination or re-vaccination is offered to all contacts.
- (8) Contacts are kept under supervision for 21 days.
- (9) Medical Officers of Health in other districts are advised about contacts proceeding thither.
- (10) Practitioners informed when new outbreak occurs.
- (11) Heads of common lodging-houses, casual wards, work-houses, infirmaries and hospitals informed when a new outbreak occurs.

Other measures are dictated by circumstances of the case.

Scarlet Fever.

The number of notifications of this disease received during the year was 182, and the total number of cases admitted to Hospital was 158. One hundred and forty-six cases were from within the Borough, and 12 from outside the Borough.

The present type of Scarlet Fever is mild and the death-rate very low. It varies between two and five per cent. The mortality rate is higher in children between the ages of 1 and 5 years than in those who are attacked earlier or later in life. The disease is rare among infants, especially when at the breast. Second attacks are uncommon but they are met with. Infection is usually conveyed by nose, ear and mouth discharges. It is unlikely that desquamation is infectious. Scarlet Fever, like the poor, is always with us, but is liable to great seasonal variations. The autumn and winter are the most usual periods for epidemics, especially the autumn.

One death occurred.

Diphtheria.

There were 162 notifications received and 160 cases (including 5 non-residents) were admitted to the Fever Hospital as suffering from Diphtheria.

There were 10 deaths from the disease.

Attention is drawn to the need for IMMEDIATE medical advice in ailments of children, and especially when there is anything wrong with the throat, or when breathing is difficult. Diphtheria is a disease which comes on with very slight symptoms, and the patients are always more seriously ill than they seem to the inexperienced. The antitoxin treatment of Diphtheria, which is of such remarkable value when applied early, is of little use when several days have been wasted in the hope that domestic remedies may cure. Parents should keep Diphtheria always in mind and send for the doctor early when a child is poorly.

Diphtheria is a serious disease. The progress of a case of Diphtheria depends very much on how long the disease has lasted before it is seen by a doctor. It is not uncommon to find that the initial sore throat of Diphtheria is disregarded by the parents, and it is only when after some days' illness the child's condition becomes alarming that a doctor is called in. It is in this class of case that heart failure, paralytic manifestations and toxæmia occur. Diphtheria obstructing the larynx is very dangerous and usually necessitates immediate operation. Another danger in connection with this type of Diphtheria is the tendency for Broncho-Pneumonia to occur. Swabs should be examined in all cases, but where there is a reasonable probability that the disease is Diphtheria—and the swab is negative—it is advisable to give anti-toxin.

Puerperal Fever and Puerperal Pyrexia.

Puerperal Fever—the most potent cause of death in child-birth—is caused by streptococci, but obstetricians are divided in their opinion upon the question of the channel of infection in these cases. Prevention depends primarily on good midwifery practice.

Ten cases of Puerperal Fever were notified during the year (2 non-residents). Of the 7 deaths from this cause, one had reference to a case notified in 1931, and 2 were due to abortion, which were not notified, consequently 4 of the cases notified during the year had a fatal result.

Of the 14 cases of Puerperal Pyrexia notified, one was a duplicate, being notified at a later date as Puerperal Fever. All the 13 cases recovered.

Cerebro-Spinal Fever.

One case of this disease was notified during the year.

Acute Polioencephalitis.

This is a disease of the central nervous system and is possibly connected with the stress and strain of modern life. Fatigue is a causative factor. No case occurred during the year.

Influenza and Pneumonia.

Halifax was not visited by a severe epidemic during the year under review. The mortality is mainly from influenzal pneumonia, but it should not be forgotten that an influenza epidemic raises the mortality for the time being in sufferers from Pulmonary Tuberculosis. During an outbreak every opportunity is taken of impressing upon the public of the necessity of going to bed at the first signs. This is done in the interests of the patient and the community.

During the year 17 notifications of Influenzal Pneumonia and 88 of Primary Pneumonia were received.

Non-Notifiable Infectious Diseases.

Measles.

The control of Measles is specially difficult owing to the fact that it is infectious for some days before the rash appears.

Known, or suspected cases are visited at their homes by the Health Visitors, who, if no doctor is in attendance, advise

parents as to treatment, and arrange, when such a course appears to be indicated, for medical or institutional treatment. Appropriate leaflets are also left at the homes, and distributed through the Health Department and Child Welfare Clinics.

During the year the incidence of this disease was fairly heavy, and 131 cases were visited, 43 being removed to hospital. Five deaths occurred.

Whooping Cough.

The control of this disease is very difficult because of the insidious nature of its onset.

Cases cropped up throughout the year, but the disease did not assume an epidemic form until the last quarter.

Similar measures to those outlined above are adopted for controlling the spread of this disease, and 140 cases were visited by the Health Visitors, 58 being admitted to hospital. The disease caused 8 deaths.

Notification.

The following Table shows the number of notifications of infectious disease received during the year :—

Disease				Number
Smallpox	...	...	...	—
Typhoid Fever	...	...	...	1
Scarlet Fever	...	...	...	182
Diphtheria	...	...	...	162
Puerperal Fever	...	...	...	10
Puerperal Pyrexia	...	...	...	14
Erysipelas	...	...	...	36
Ophthalmia Neonatorum	...	...	...	4
Encephalitis Lethargica	...	...	...	2
Acute Polio Encephalitis	...	...	...	—
Acute Polio Myelitis	...	...	...	2
Cerebro-spinal Fever	...	...	...	1
Pneumonia :—				
Influenzal	...	...	...	17
Primary	...	...	...	88
Tuberculosis :—				
Respiratory	...	...	...	133
Other Forms	...	...	...	25
Total	...	...	...	677

St. Luke's Hospital.

This Institution which was appropriated under the Public Health Act is administered by the Health Committee. It is situate at Salterhebble on a site of 10.305 acres, at an altitude of 216 feet above sea level, and serves an area originally bounded by the Halifax Poor Law Union, with a population of approximately 190,000.

The Institution has now been thoroughly reorganised and brought up-to-date on the lines of the suggestions in my Report submitted to and approved by the Council, and as the reorganisation is now more or less complete, advantage has been taken of the delay in publishing this Report, to briefly indicate the lines upon which development has proceeded.

I am indebted to Mr. J. Dawson, F.R.C.S. (Eng.), Medical Superintendent, for the following notes :—

During the past eighteen months the following alterations and improvements have been effected :

Medical Superintendent. From April 1st, 1932, the services of the part-time Medical Superintendent have been discontinued, and a whole-time resident Medical Superintendent employed. Suitable accommodation has been provided for the Medical Superintendent adjoining the quarters of the Resident Medical Officers, and this has been effected by taking a portion of the quarters formerly occupied by the domestic staff.

X-Ray Department. An X-Ray Department has been established in the rooms formerly occupied as the Dispensary and Dental Room, the latter being the Dark Room. The room in which is the X-Ray plant had one existing door-way built up, and double doors made so that a stretcher carriage may be admitted. Owing to the room being an island site it was only necessary to lead-line the wall adjoining the Dark Room. The plant installed is by Schall & Son Ltd., and comprises one X-Ray couch with Potter-Bucky diaphragm, one screening stand with extension, one Transformer Unit, one Switch Table. The Dark Room has been equipped in the usual manner and all windows of the department have been fitted with dark shutters.

A Radiologist has been appointed on a sessional basis, and a whole-time resident female Radiographer.

Massage Department. A Massage Department has been established in rooms formerly occupied as the Matron's Drapery

Store. Two massage couches, one diathermy set, one Pantostat, Schnee Baths, and other minor equipment have been installed, together with the necessary sinks, cupboards, etc. One whole-time Masseuse has been in office since the establishment of the Department, and the work is growing to such an extent that it has been necessary to appoint an assistant Masseuse who will commence duty at an early date. A considerable income is being derived from the treatment of out-patients in the X-Ray and Massage Departments and the work is steadily growing, and proving invaluable to the service of the Hospital.

Operating Theatre. The Health Committee provided the sum of £1,000 for the alterations necessary in order to bring the Operating Theatre up to the present requirements. The Medical Superintendent advised that the building was adequate for the present needs of the Hospital, and the only structural alteration is a window 4ft. 6in. square on the north side. A shadowless lamp has been installed, which was transferred from the Maternity block, and the following new equipment provided:—Sterilizing plant, comprising Bowl Sterilizer, Instrument Sterilizer and two Water Sterilizers; three new Lavatory Basins to replace old ones, and sundry minor equipment. The basement of the Theatre has been excavated and the floor supported on steel joists and all pipes run therein instead of on the outer walls, as formerly. The whole of the expenditure on the Operating Theatre is £300 approx.

Pathological Laboratory. A Pathological Laboratory has been installed in one of the basement rooms, and has been equipped both as regards fixtures and other equipment. A part-time Pathologist has been appointed, who attends two afternoons each week, and a Laboratory Assistant who is on duty each afternoon, and on Saturday morning.

Dispensary. A new Dispensary has been established in one of the basement rooms. Most of the fixtures have been transferred from the other Dispensary, and the necessary additions provided. This Dispensary is somewhat larger than the former one, and is adequate to the needs of the Hospital. The services of the part-time Dispenser are to be discontinued, and a whole-time Dispenser employed, as the old arrangement was very inconvenient and the amount of work now necessitates the service of a whole-time Dispenser.

Laundry. A complete new Laundry plant has been installed in the existing building, and the washing and laundry work for St. Luke's Hospital, Gibbet Street Institution, Westfield Children's Home and the Craigie Lea Home for Mental Defectives is carried out therein. A Laundry Manager has been engaged, who works under the supervision of the Steward,

and it is hoped that considerable economies will be effected by the new arrangement.

Heating and Hot Water Service. A new centralised heating and hot water service is being installed and will be completed by September. The old de-centralised plant has been in use since the Hospital was built, and is thoroughly inefficient. It is anticipated that the new plant will effect economies in the fuel consumption.

Porter's Lodge. The Porter's Lodge at the entrance gate has been converted into a residence for the Steward, who was formerly very badly housed in one of the three cottages adjoining the Hospital. The Porter's Lodge has been transferred to the Receiving Ward adjoining the main entrance to the Hospital. The porter and portress, having attained the age of 65 years, have been superannuated, and a Head Porter and one Hospital Porter appointed in their stead. This has proved a considerable improvement, as the Head Porter is now able to deal with admissions without leaving his post, and to direct and supervise persons entering the Hospital. There has been no loss of efficient supervision of all persons entering or leaving the Hospital.

Use of Inmate Labour. Until recently five male inmates have been employed as follows :—two messengers, one assistant to the bath-man, one in charge of the telephone exchange and one assistant to the store-keeper. The Health Committee has decided that this practice is objectionable and costly, and two youths have recently been appointed as junior Porters, to carry out the duties formerly done by the male inmates.

Transfer of Patients to the Institution. Considerable difficulty has been experienced during the past year with regard to the transfer of chronic, mental and senile cases to Gibbet Street Institution, owing to the lack of accommodation at the latter. It has been necessary to detain many patients in the Hospital who have not been in need of Hospital treatment, and who have had a deleterious effect on other patients. The Public Assistance Committee is providing additional accommodation for these cases which will be available at an early date, and which it is hoped will meet the need.

Medical Staff. The resident medical staff comprises the following :—

- (a) Medical Superintendent, who being an F.R.C.S. of England, does the major portion of the operative surgery, in addition to his administrative duties.
- (b) Senior A.M.O., also with considerable operative experience who can deputise when necessary.
- (c) Junior A.M.O.

The visiting medical staff is as follows :—

- (a) Consulting Physician.
- (b) Consulting Surgeon has just been appointed.
- (c) Consulting Orthopædic Surgeon.
- (d) Consulting Ophthalmologist.
- (e) Radiologist.
- (f) Pathologist.
- (a) Attends weekly.
- (e) and (f) twice weekly.
- (b), (c) and (d) when required.

General Observations. The work of the Hospital is increasing in importance and quality, and the income from private patients, including maternity cases, is steadily increasing.

Regarded from the aspect of preventive medicine appropriation has :—

- (1) Ensured the co-ordination and unification of the Council's Hospital Services.
- (2) Expanded and brought up-to-date the existing Services, and
- (3) Extended the availability of the Hospital in that Hospital treatment can be given as a Health measure dissociated from relief.

The following Table classifies the accommodation and shows the number of beds occupied at the end of the year.

Classification of Ward	No. of Wards	BEDS							
		Men		Women		Children under 16		Total	
		Pro- vided	Occu- pied	Pro- vided	Occu- pied	Pro- vided	Occu- pied	Pro- vided	Occu- pied
Medical ...	4	62	32	62	49	—	—	124	81
Surgical ...	2	23	16	23	10	—	—	46	26
Chronic Sick	5	46	54	77	69	—	—	123	123
Children ...	2	—	—	—	—	64	38	64	38
Isolation ...	—	Side Wards used when necessary						—	—
Maternity ...	3	—	—	37	14	—	—	37	14
Total ...	16	131	102	199	142	64	38	394	282

In-Patients.

1. Total number of admissions (including infants born in Hospital)	2,097
2. No. of Women confined in Hospital	349
3. No. of Live Births	342
4. No. of Stillbirths	13
5. No. of Deaths among the newly born (i.e., under 4 weeks of age)	23
6. Total No. of Deaths among children under 1 year of age (including above)	52
7. No. of Maternal Deaths among women confined in Hospital	4
8. Total No. of deaths	374
9. Total No. of discharges (including infants born in Hospital)	1,759
10. Duration of stay of patients included in 8 and 9 above : No. of cases whose total stay was for the following periods :—	
(a) Four weeks or less	1,516
(b) Exceeding 4 weeks but under 13 weeks ...	380
(c) Thirteen weeks or more	237
11. No. of beds occupied : (a) Average during the year... ...	321
(b) Highest 373 on 1/3/1932.	
(c) Lowest 264 on 27/8/1932.	
12. No. of surgical operations under general anaesthetic (excluding dental operations)	347
13. No. of Abdominal sections	123

Out-Patients.

There is no out-patient or casualty departments but many cases (chiefly surgical) attend for re-examination after discharge. Cases are also seen in consultation with reference to admission, and some out-patient work is done in the massage and X-ray departments.

Ante-natal Clinic : No. of women seen 344.

Attendances 1,499.

Classification of In-Patients who were discharged from or
who died in the Institution during the year.

Disease Groups	Children under 16 years of age		Men and Women	
	Dis- charged	Died	Dis- charged	Died
Acute Infectious Disease	46	18	41	7
Influenza	—	—	3	—
Tuberculosis—				
Pulmonary	—	—	36	12
Non-Pulmonary	4	2	11	5
Malignant Disease	—	—	11	29
Rheumatism—				
(1) Acute Rheumatism (rheumatic fever) together with sub-acute rheumatism and chorea	3	—	6	2
(2) Non-articular manifestations of so-called rheumatism (muscular rheumatism, fibrositis, lumbago and sciatica)	—	—	9	2
(3) Chronic Arthritis	—	—	24	1
Venereal Disease... ...	3	3	9	1
Puerperal Pyrexia	—	—	4	—
Puerperal Fever—				
Confined in Hospital	—	—	—	1
Admitted from outside	—	—	5	4
Other diseases and accidents connected with pregnancy and childbirth ...	—	—	21	5
Mental Diseases—				
(a) Senile Dementia	—	—	2	3
(b) Other	1	—	31	—
Senile Decay	—	—	16	17
Accidental Injury and Violence ...	10	1	42	8
<i>In respect of Cases not included above.</i>				
Disease of Nervous System and Sense Organs	9	—	51	14
Disease of Respiratory System... ...	46	3	125	43
" Circulatory System... ...	2	2	112	109
" Digestive System	22	7	141	25
" Genito-Urinary System ...	6	—	81	19
" Skin	14	—	41	—
Other Diseases	30	17	91	14
Mothers and Infants discharged from Maternity Wards and not included in above figures	321	—	329	—

SECTION 5.

—o—

Tuberculosis.

I am indebted to Dr. Wilfrid Smith, Tuberculosis Officer, for the following report :—

Tuberculosis.

TUBERCULOSIS DEATH-RATE.			
PERIOD	Respiratory only		All Forms
10 years average 1922-31 ...	·67		·88
1932	·52		·72

The following Table shows the ages of the cases at the time of notification and at death :—

AGE PERIOD	TUBERCULOSIS							
	*NEW CASES				DEATHS			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M	F	M	F	M	F	M	F
Under 1 year ...	—	—	—	—	—	—	2	—
1 to 5 years ...	2	1	—	—	2	—	1	2
5 to 10 " ...	7	10	8	2	1	—	1	1
10 to 15 " ...	7	10	8	1	2	—	1	1
15 to 20 " ...	6	10	—	1	3	6	1	2
20 to 25 " ...	8	8	2	—	6	2	—	1
25 to 35 " ...	8	18	1	—	8	7	1	1
35 to 45 " ...	6	6	—	1	6	2	—	—
45 to 55 " ...	13	6	—	1	3	2	1	1
55 to 65 " ...	6	1	—	—	1	—	1	1
65 and upwards ...	—	—	—	—	—	—	—	1
TOTALS ...	63	70	19	6	32	19	9	11

*Includes primary notifications, and cases not notified during life, but first intimated by death returns.

The following Table shows the number of notified cases of Tuberculosis remaining in the Borough on December 31st, 1932 :—

Total Cases	Pulmonary			Non-Pulmonary		
	Males	Females	Total	Males	Females	Total
741	304	261	565	97	79	176

Public Health (Prevention of Tuberculosis) Regulations, 1925.

No action appeared to be called for.

Public Health Act, 1925 ; Section 62.

No action was taken.

Tuberculosis Clinic.

The Tuberculosis Clinic is situated at 8, Clare Road. It is a sorting house, advisory centre, and consultative clinic ; not a treatment centre. Patients are sent from the clinic to sanatoria, and recommended domiciliary treatment by their private doctors. Close co-ordination exists between the Clinic, Medical Practitioners, and the Health Department.

Tuberculosis Scheme.

Diagnosis	Pul-		Non-Pul-	
	monary	monary	monary	Total
A—New cases (excluding contacts) :				
(a) Definitely tuberculous	129	38	167
(b) Diagnosis not completed	—	—	12
(c) Non-tuberculous	—	—	91
B—Contacts :				
(a) Definitely tuberculous	13	8	21
(b) Diagnosis not completed	—	—	4
(c) Non-tuberculous	—	—	65
C—Cases written off Clinic Register as :				
(a) Recovered	13	10	23
(b) Non-tubercular (including any such cases previously diagnosed and entered on the Dispensary Register as tuberculous ...)	—	—	184
D—Number of cases on Dispensary Register on December 31st :—				
(a) Definitely tuberculous	560	135	695
(b) Diagnosis not completed...	—	—	16

Number of cases on Dispensary Register on Jan. 1st...	613
Number of cases transferred from other areas and cases returned after discharge under Head 3 in previous years	4
Number of cases transferred to other areas, cases not desiring further assistance under the scheme and cases "lost sight of"	4
Cases written off during the year as dead (all causes)	55
Number of attendances at the Dispensary (including contacts)	1,742
Number of insured persons under Domiciliary Treatment on the 31st December	27
Number of consultations with medical practitioners :—	
(a) Personal	28
(b) Other	249
Number of visits by Tuberculosis Officers to homes (including personal consultations)	115
Number of visits by Nurses or Health Visitors to homes for Dispensary purposes	2,588
Number of	
(a) Specimens of sputum, etc., examined	669
(b) X Ray examinations made in connection with Dispensary work	78
Number of "Recovered" cases restored to Dispensary Register, and included in A (a) and A (b) above ...	2
Number of "T.B. Plus" cases on Dispensary Register on December 31st	252

Halifax Sanatorium.

Admissions and Discharges during the year :—

	Halifax cases	Other Cases	Total
Remaining in on December 31st, 1931 ...	39	18	57
Admitted during the year... ...	117	37	154
Discharged during the year	111	39	157
Died	7	0	
Remaining in on December 31st, 1932 ...	38	16	54

Grouping of cases admitted during the year :—

A. Non-Pulmonary—8.

B. Pulmonary :—	Male.	Female.	Total.
Observation ... ...	... —	1	1
Group 1. Early cases	... 19	22	41
Group 2. Intermediate cases	... 37	27	64
Group 3. Advanced cases	... 22	26	48

The average length of stay was 139 days, as compared with 129, 125 and 133 days in the preceding three years respectively.

The condition of the patients discharged was as follows :—

Improved.	No Change.	Worse.	Dead.	Total.
111	19	20	7	157

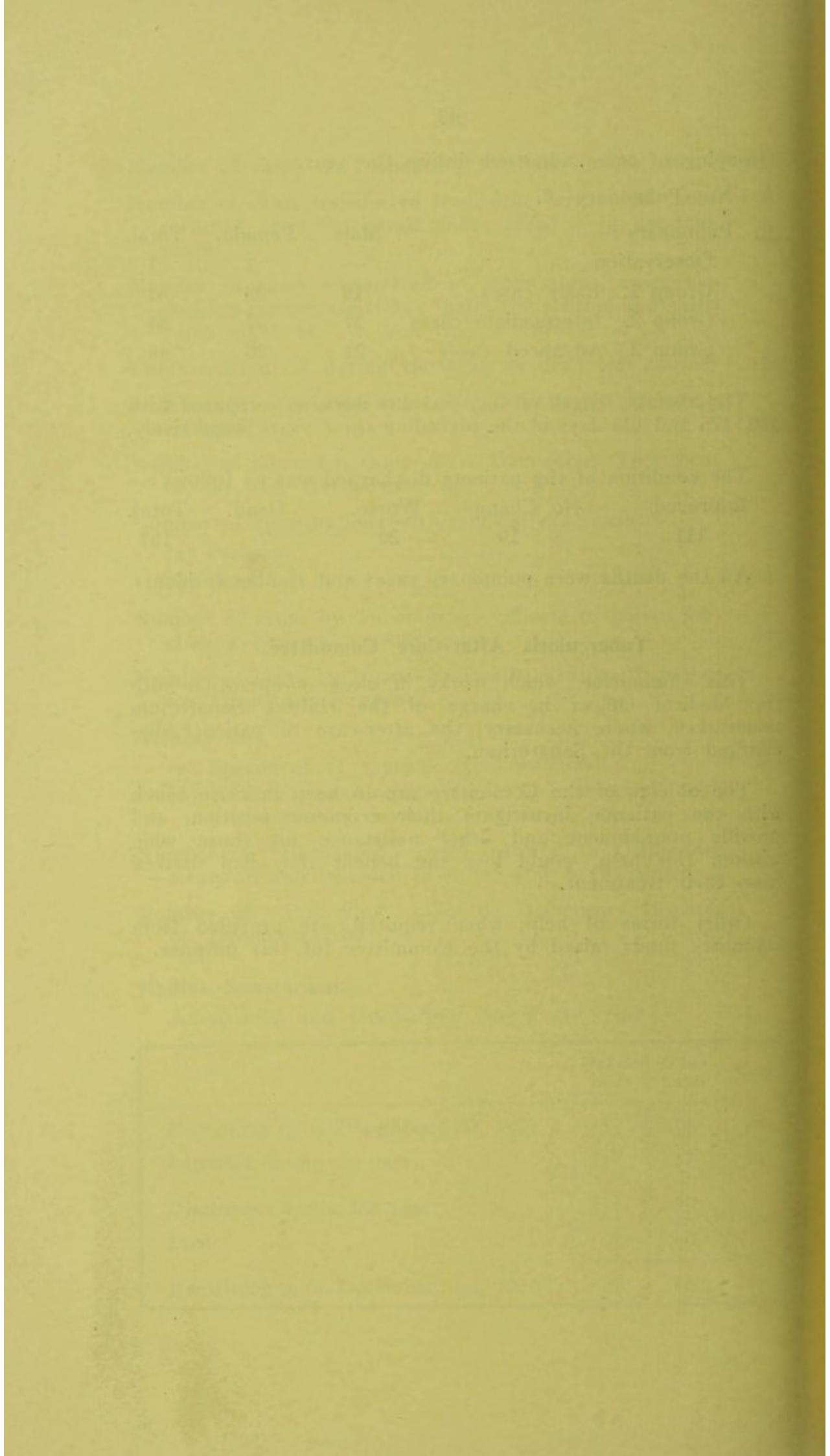
All the deaths were pulmonary cases and Halifax residents.

Tuberculosis After-Care Committee.

This Committee, which works in close co-operation with the Medical Officer in charge of the Halifax Sanatorium undertakes, where necessary, the after-care of patients discharged from the Sanatorium.

The objects of the Committee are to keep in close touch with the patients, investigate their economic position, and provide nourishment and other assistance for those who, without this help, would lose the benefit they had derived from their treatment.

Other forms of help, when required, are provided from voluntary funds raised by the Committee for this purpose.



SECTION 6.

—o—

Venereal Disease.

Venereal Diseases.

In conjunction with the County Authority, a joint clinic for the treatment of venereal diseases is held at the Royal Halifax Infirmary.

The clinic is open for women and children every Tuesday afternoon from 3-30 to 4-30, and from 6 to 8. For men, every Thursday between 6 and 8 p.m. Also an auxiliary treatment centre for men is open daily from 10 a.m. to 12 noon, and 6 to 8 p.m., and on Sundays from 10 a.m. to 12 noon. It appears that these arrangements are sufficient and adequate for the needs of the Borough.

There is a Medical Officer with an Assistant Medical Officer in charge of this clinic.

Co-ordination between this and the Maternity and Child Welfare Service has been secured by the attendance of one of the Health Visitors at the Tuesday afternoon and evening sessions.

The following figures refer to local patients attending the Treatment Centre—

Number of persons dealt with for the first time during the year, and found to be suffering from :—

				Local Clinic	Other Clinics
Syphilis	...	...	...	57	—
Soft Chancre	...	...	...	—	—
Gonorrhoea	...	...	...	82	1
Conditions other than Venereal	...	...	...	158	—
				—	—
Total	...	...	297		1
Total attendances at the out-patient clinic...			8284		34
Aggregate number of in-patient days...		...	78		—
Number of doses of Salvarsan Substitutes given			622		—
Specimens sent to an approved Laboratory for :					
Detection of Spirochaetes	...	...	—		—
Detection of Gonococci	...	...	—		—
Detection of other organisms	...	...	—		—
Wassermann Reaction	...	...	353		—
			—		—
Total	...	...	353		—

873 examinations for detection of Gonococci and 43 for Spirochaetes were carried out at the Treatment Centre.

There are 7 medical practitioners not including the two officers of the clinic, in the Borough, qualified to receive free supplies of Salvarsan substitutes.

SECTION 7.

—o—

Maternity and Child Welfare.

Maternity and Child Welfare.

I am indebted to Dr. A. Latchmore, the Medical Officer i/c of Maternity and Child Welfare, for the following report :

Midwives.

Number practising in the Borough of Halifax during the year (including Midwives working in Institutions) ...	30
Number holding the Central Midwives Board Certificate	28
Number of bona fide Midwives (i.e., holding the Certificate granted by the Central Midwives Board to those women who were in practice before 1902, in virtue of such practice and not by reason of having passed an examination)	2
Number of cases in which Medical aid was summoned by Midwives	147
Medical aid notices sent on behalf of the child... ...	24
Of these, 4 were for "inflammation of the eyes."	
7 were for prematurity.	
7 for unsatisfactory condition of baby.	
2 for dangerous feebleness.	
1 for Asphyxia Pañida.	
1 for Spina Bifida.	
1 for "dead baby" (born before arrival of midwife. Doctor stated child still-born).	
1 "Not passed econium since birth."	

Notifications received in accordance with C.M.B. Rules from Midwives.

Intention to resort to artificial feeding	16
Liability to be a source of infection	2
*Having laid out a dead body (not a Maternity case)... ...	1
Notification of death of infant who survived only 12 hours	1

*The midwife who laid out the body of a patient on the general nursing side, is only called upon for holiday duty and emergency midwifery.

Midwifery Services subsidised by the Corporation. Bradshaw and Luddenden.

The total number of cases attended by the Halifax and District Nursing Association Midwives during the year was

402. Of these 38 were in the Bradshaw area. A doctor was also engaged in 48 out of the 402 cases (in 43 cases of the ordinary district Midwifery, and in 5 cases in the Bradshaw area).

The Bradshaw midwife lives in Nursery Lane, Ovenden, but works under the Halifax District Nursing Association.

Luddenden.

Nurse Kniveton attended 6 midwifery cases in the Halifax Borough during 1932, but these only represent part of her work, as her work for the West Riding Authority is heavier than for Halifax, and she is engaged in nursing medical and surgical cases also.

Nurse Kniveton works under the supervision of the Luddenden Committee, but is inspected by the Halifax Inspector of Midwives with regard to midwifery in Halifax Borough, for which the grant is made.

Notification of Births Act 1907.

Number of births notified...	including births transferred	{	1,453
Number of births registered	to other districts.	{	1,509
Ratio of notified to registered	...	...	96.28
Number of stillbirths	...	...	57
Number of notified births attended by doctors with or without midwives ...	...	...	314
Number of notified births attended by midwives only			411
Number of births notified from St. Luke's Hospital...			355
Number of births notified from Royal Halifax Infirmary			373
Number of births transferred to other districts	...		306

We are again able to show an improved notification, which is very satisfactory.

Health Visiting Summary.

Primary visits	...	...	...	1,160
Visits 1-5 years	...	...	...	6,628
Repeat visits	...	...	...	4,291
Ante-natal visits	...	...	...	165

The total of these visits shows the substantial increase of 2,526 over the figures for 1931.

Infant Welfare Centres.

Northgate—

Number of Sessions...	...	...	228
New cases ...	...	...	572
Re-visits ...	...	...	8,296
Average attendance per Session	...		38.89

Queen's Road—

Number of Sessions...	...	...	90
New cases ...	...	...	180
Re-visits ...	...	...	3,247
Average attendance per Session	...	...	38

It should be borne in mind that children who are attending the Sunlight Clinic at Northgate, twice a week, rarely attend the ordinary Clinics.

Ante and Post-Natal Clinics—

Number of Sessions ...	...	...	45
Number of new cases	...	...	143
Total attendances ...	...	...	341
Average attendance per Session	...	...	7.57

The Medical Officer also holds an Evening Ante-Natal Clinic at the Halifax District Nursing Association premises, about once a month, and this is proving increasingly useful.

Number of Ante-Natal Clinics held in 1932:	...	...	...	...	11
New cases	...	...	...	...	65
Re-visits	...	...	...	...	15

Sometimes the mothers first seen at the Halifax District Nursing Association Clinic subsequently attend the Ante-Natal Clinic at Northgate.

The Toddlers' Clinic at Northgate.

Number of Sessions ...	...	...	43
Total attendances ...	...	...	323

The Toddlers' Clinic was held regularly during 1932 on Friday afternoons. Nurse Moore is in charge, and the time is spent in drilling, marching, and remedial exercises, e.g., exercises to promote nose breathing, chest expansion, development of plantar arches, etc. The results are encouraging, and the children enjoy the class very much.

Artificial Sunlight.

Number of Sessions...	...	...	132
Number of cases treated	...	...	227
Attendances	...	...	4,189
Average attendance per Session	...	...	31.73

Attendances of non-tuberculous children under School age	2,951
Attendances of non-tuberculous children of School age	1,085
Attendances of tuberculous children...	153

In our 1931 Report we stated that the attendances at this Clinic were fewer than in 1930, but this year we can record substantial increases.

The enthusiasm of the parents concerning the increased well-being of the children receiving treatment is maintained.

Infant Mortality.

Of the 92 deaths under one year, 57 were boys and 35 girls.

Of these, 58 deaths occurred during the first month, namely 35 boys and 23 girls.

On analysing the causes of death of infants dying under one month, it is again noticeable that a large majority were lacking in vitality from birth, and had very little chance of surviving. Only one death amongst the neonatal deaths is attributed to digestive disorders, e.g., vomiting, along with other causes (wasting, vomiting, achalesia) which is noteworthy.

Of the 34 infants who died between 1 and 12 months, only 4 are attributed to diseases of digestive organs.

Increased ante-natal care is therefore the only remedy, and public opinion must be continually enlightened on this subject. Until it is realised that no amount of post-natal care can make up for faults of physical development and unsuitable environment, and dieting of the mother, before the birth of the infant; and until these are remedied, this large wastage of neonatal life will continue.

The Medical Officer in charge of the Clinic would be very glad if such things as cod liver oil and malt, and lime tablets, could be given to necessitous expectant mothers, in addition to dried milk for the last three months of pregnancy.

Midwives' Inspection.

The midwives have been regularly inspected during the year, and it is a pleasure to report that they have given satisfaction in the discharge of their duties.

The need for special care in dealing with the eyes of the newly born, has been impressed on all the midwives, and there have not been any cases during the year where damage to the sight has occurred.

Four cases of Ophthalmia Neonatorum were notified. These were comparatively mild in nature and responded satisfactorily to treatment. In no case was vision impaired.

Maternal Mortality.

There have been eleven maternal deaths during the year.

The following Table gives an analysis of these deaths :—

Maternal Mortality 1932.

		Ages		No. of Deaths		Primips		Nulliprs		Midwives' Cases		Hospital Cases		Doctors' Cases		Others		Deaths in Institutions		Number who had Ante-Natal care at a Clinic		Not had Ante-Natal care at a Clinic		Connected with Abortion			
20-30	8	Forces Applied		8		Prinips		Nulliprs		Midwives' Cases		Hospital Cases		Doctors' Cases		Others		Deaths in Institutions		Number who had Ante-Natal care at a Clinic		Not had Ante-Natal care at a Clinic		Connected with Abortion			
30-40	3	Cesarian Section		3				11		11		11		11		11		11		3		8		8		2	
40-50		Induction																									
20-30	1	Perineum Injured																									
30-40	2	P.V. Exam																									
40-50	1	Admitted to Hospital before Labour																									
20-30	3	To Hospital during Labour																									
30-40	4	To Hospital after Labour																									
40-50		Not sent to Hospital																									
20-30	5	Handy-woman Attended																									
30-40	1																										
40-50	4																										
		11																									

GENERAL NOTE.

Every case is investigated and Form 97/M.C.W. completed. I would point out that many deaths are now classified as maternal deaths which in pre-war years would not in the certified cause of death have been bound up with childbirth. As regards environment and childbirth I would submit that childbirth today takes place under better conditions as regards environment than it did 20 years ago.

No. of Births	...	...	...	Sepsis	Others	Total
Rate per 1,000 live births...	...			7	4	11
" " total , , ...	...			5.8	3.3	9.2
				5.5	3.1	8.7

The following Table serves to show the fluctuations in this rate during recent years :—

	1924	1925	1926	1927	1928	1929	1930	1931	1932
Sepsis ...	0	1	1	1	5	3	4	—	7
Other causes	6	7	7	9	8	6	8	4	4
Per 1,000 births	4.0	5.6	5.7	7.4	10.2	6.8	9.2	3.2	8.7

In commenting upon the maternal deaths recorded during 1931, it was indicated that several mothers were hopelessly ill at the end of that year, although the deaths did not actually occur until 1932. The numbers, therefore, appear worse because of the arbitrary division of time necessary for the production of annual statistics. If the deaths occurring in the two years 1931 and 1932 were taken together, which would give a fairer picture of the actual position of affairs, the average would work out at 7.5 per annum.

The following services are in operation in Halifax for the purpose of combating maternal mortality :—

- (a) Ante-natal Clinics at the Maternity and Child Welfare Centre ; the Halifax and District Nursing Association, (premises now in Savile Road) ; the Royal Halifax Infirmary, and St. Luke's Hospital.
- (b) An adequate supply of competent qualified midwives, who are inspected and supervised by Dr. Latchmore.
- (c) The Maternity Homes at the Royal Halifax Infirmary and St. Luke's Hospital.
- (d) Laboratory facilities for bacteriological and pathological examinations.
- (e) The provision, free, of sterile maternity outfits, in necessitous cases.
- (f) A service of "Home Helps."
- (g) The supply of dried milk, free, to expectant mothers, during the last three months of pregnancy (to necessitous cases).

The financial help in prospect to independent midwives who suffer bad debts at present, should conduce to greater alacrity in booking very poor patients.

Home Helps.

Nine cases have benefited by the service of these women during the year; 3 in January, 1 in June, 1 in September, 3 in October, and 1 in December.

Mrs. Gaukroger resigned on June 15th, 1932, and Mrs. Mount was appointed on December 21st, to commence duties on January 5th, 1933.

The following temporary "Home Helps" have been employed :—Mrs. Lumb, 2 cases ; Mrs. Fermyole, 2 cases ; Mrs. Mount, 4 cases ; Mrs. Gaukroger, 1 case.

It has been found that the "Home Helps" fill quite a useful rôle in the Midwifery Nursing Scheme, and greater confidence in employing them is shown, as reports of their work are spread amongst the mothers.

Inspection of Maternity Homes.

There is only one Maternity Home in Halifax, subject to inspection (those at the Royal Halifax Infirmary and St. Luke's Hospital not being subject to registration by the Corporation), and this has been inspected in accordance with the Act, and has been found satisfactory.

Staff.

Mrs. Bancroft (formerly Wolstenholme) left on the 3rd of February, 1932, after many years of valuable and conscientious service.

Miss Dingsdale commenced duty on February 22nd, 1932.

The health of the Staff has been satisfactory, no member having been away for any considerable period during the year.

Miss Moore commenced to attend the V.D. Clinic (for Women and Children, held at the Halifax Infirmary), on the Tuesday afternoon and evening sessions, on September 15th. She has paid 9 visits to V.D. cases during the latter part of 1932.

A class for mothers was formed during 1931, at Northgate Clinic, and 12 talks were given by Miss Oram, on Thursday afternoons. These were found very valuable by those attending, but the numbers did not seem to justify continuing the class.

Miss Oram, the Superintendent Health Visitor, has continued her invaluable work in the supervision and organisation of the various services, and her untiring efforts are much appreciated by all.

Voluntary Workers.

Our indebtedness to the Voluntary Workers does not grow less, and their devoted and unselfish service is a great help to all with whom they come in contact.

SECTION 8.

Orthopædic Service.

Mr. Goyder's Report.

Orthopædic Clinic.

The Orthopædic or Cripple Clinic founded jointly by the Maternity and Child Welfare, Health and Education Committees, has done excellent work. The sessions were originally held in the School Clinic, but as regards the children from the Infant Welfare Centre this was not found successful, as the mothers attended badly. It was therefore arranged that sessions should be held occasionally at the Northgate Centre, and the massage and remedial exercise sessions are also held there. Children requiring operative treatment are now sent to St. Luke's Hospital, Halifax, so as to be treated by the Orthopædic Surgeon of the Clinic, Mr. F. W. Goyder, F.R.C.S., who has been added to the visiting staff of the Hospital.

I am indebted to Mr. F. W. Goyder, F.R.C.S. (Eng.), Orthopædic Surgeon, for the following report :—

The Orthopædic Surgeon has attended at the Northgate Clinic on six occasions. He examined 41 new cases and made 105 re-examinations, so that the work done by him is almost the same as in 1931. The number of children under treatment as the following table shows, is much the same as at the end of 1931. This number showed a considerable increase upon the number treated in 1930.

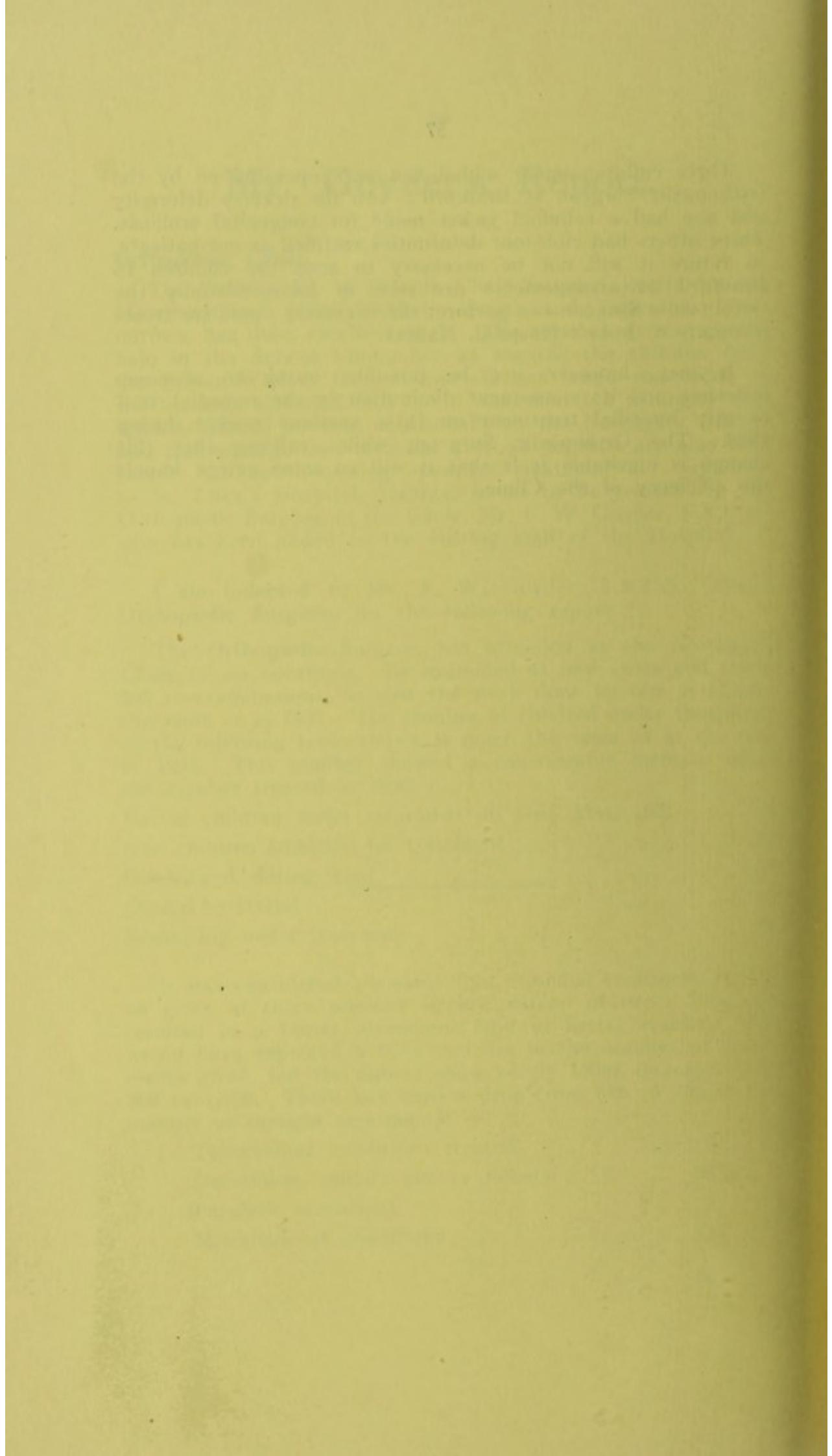
No. of children under treatment on Dec. 31st, 1931	...	29			
New children admitted for treatment	...	...	35		
Discharged during year	...	...	...	19	
ceased to attend	...	...	...	...	18
Remaining under treatment	...	...	...	...	27

It was considered advisable that remedial treatment should be given at three sessions weekly instead of two. This has resulted in a better attendance and in better results. One would have expected a 50% increase in the number of treatments given, but the figures show nearly 100% increase, from 809 to 1,556. There has been a drop from 878 to 792 in the number of sunlight treatments.

Tuberculous conditions treated	...	...	0
Deformities mainly due to rickets	...	...	22
Paralytic conditions	...	...	1
Miscellaneous conditions	...	...	41
		—	
		64	

Three children under school age were operated on by the Orthopaedic Surgeon at Bradford ; two for ricketty deformity and one had a celluloid jacket made for congenital scoliosis. Three others had club-foot deformities rectified as out-patients. In future it will not be necessary to send the children to Bradford as arrangements are now in force whereby the Orthopaedic Surgeon can perform the necessary operative treatment at St. Luke's Hospital, Halifax.

It may, however, not be possible, owing to economy measures and its consequent diminution in the remedial staff to give remedial treatment on three sessions weekly during 1933. The Orthopaedic Surgeon, while realising that this change is inevitable feels that it will to some extent impair the efficiency of the Clinic.



SECTION 9.

—o—

Mental Deficiency.

Mental Deficiency Acts, 1913-1927.

Mental Deficiency is caused by a sub-development of the convolutions of the brain, especially in the frontal lobes. The causes are bad heredity and bad environment. The cure, then, is the elimination of degenerate human stock and the improvement of environment. It is a tremendous problem because we are embarrassed by our lack of knowledge of the basic springs of heredity.

The following Table shows the Institutional arrangements provided for the accommodation of local patients :—

Name of Institution	Sex of Cases Received	Ages	Accommodation for		Grade	Remarks
			Males	Females		
Mid-Yorkshire Institution, Whixley, nr. York	Males	Over 16 years	21	—	High	
St. Catherine's, nr. Doncaster	Females	Over 16 years	—	15	All Grades	
Gibbet Street, Institution, Halifax	Males and Females	Over 16 years	12	12	Mostly Low Grade	To be increased to 52 cases (29 males and 23 females) in 1932
Craigie Lea Certified Institution, Halifax	Males and Females	Under 16 years	16	12	Low Grade excluding Cot or Chair Cases	In operation during 1932. Accommodation reserved for 4 males & 5 females from the West Riding County Area

In addition to the above Halifax patients have been placed in the following Institutions :—

Royal Albert Institution, Lancaster.

Pontville R.C. Special School, Ormskirk.

Rampton State Institution.

Whittington Hall, Chesterfield.

Settle Institution, Giggleswick.

Girls' Village Home, Barkingside, Ilford.

Dovenby Hall, Cockermouth.

The following Table shows the position on December 31st, 1932:—

Cases "Subject to be dealt with":—

Under "Order"

		M.	F.	Total
	Under 16	13	7	20
	Over 16	36	31	67
On Licence from Institutions	Under 16	—	1	1
	Over 16	2	1	3
Under Statutory Supervision	...	31	35	66

In receipt of Poor Law Relief:—

In Public Assistance Institutions not approved under Section 37	...	...	—	—	—
In Institutions certified under the Mental Deficiency Acts (including those approved under Section 37)					
Placed under Section 3	...	...	—	—	—
Other Cases	...	...	—	2	2

Cases notified by Local Education Authority (Section 2 (2)):—

Method of Disposal:—

Sent to Institutions by "Order"	...	7	3	10
Placed under Guardianship by "Order"	—	—	—	—
Placed under Statutory Supervision	...	2	6	8
Placed in "Places of Safety" ...	...	—	—	—
Died or removed from the area	...	1	—	1

Of the total number of mental defectives known to the Local Authority:—

- (a) Number who have given birth to children during 1932 :
 - (1) After marriage Nil
 - (2) While unmarried Nil
- (b) Number who have married during 1932... ... Nil

The particulars given above relate solely to cases under the care of the Statutory Committee, and have nothing to do with children of school age, who, so long as they are capable of receiving benefit from instruction in a special school remain under the care of the Education Committee. Particulars regarding them are to be found in the reports of the School Medical Service published separately, in which the work of the special school at Quarry House is described.

CRAIGIE LEA CERTIFIED INSTITUTION.

The equipping and staffing of this Institution was put in hand during the year, the first patients being admitted on May 3rd, and at the end of the year 22 patients had been admitted.

The Institution is operated under Licence from the Board of Control, the licence being for a period of 3 years from Dec. 16th, 1931, and is in respect of 28 low grade patients under 16 years of age (16 males, 12 females), excluding cot or chair cases.

By agreement with the West Riding of Yorkshire County Council, 9 places are reserved for patients from the County area (4 males, 5 females).

The staff comprises :

- 1 Medical Officer, part time. Non Resident.
- 1 Matron Superintendent. Resident.
- 3 Assistants. (2 Resident, 1 Night Attendant. Non Resident).
- 1 Cook. Non Resident.
- 1 Cleaner. Non Resident.
- 1 Handyman. Non Resident.

On the whole, apart from two small outbreaks of Scarlet Fever and the death of one patient from Status Epilepticus, the health of the children has been good, their physical condition being greatly improved.

Training, of a simple character suited to the limited mental capacity of the patients is carried on.

One licence was granted during the year.

The staff quarters are very cramped and if it is decided to carry on the Institution after the termination of the present licence, the question of improving this accommodation will have to be seriously considered.

SECTION 10.

—o—

Vaccination.

The Vaccination Acts 1867-1898, and the Vaccination Act 1907.

The duty of administering these Acts has been delegated by the Council to the Health Committee.

The Borough has been divided into 7 Vaccination Districts, and the following Table shows the constitution of the districts, together with the names and addresses of the Public Vaccinators :—

District..	Public Vaccinator.
No. 1. Copley Ward.	Dr. H. W. Morck, Orrell House, Sowerby Bridge.
No. 2. Central, Pellon, Southowram, East, South, Kingston, West and Skircoat Wards.	Dr. P. Milnes, Arden Lodge, Halifax.
No. 3. North and Akroydon Wards.	Dr. A. Garvie, Woodlands, Halifax.
No. 4. Illingworth and Ovenden Wards.	Dr. J. Morrison, Oak Leigh, Halifax.
No. 5. Northowram Ward.	Dr. J. J. Murphy, 50, West End, Queensbury.
No. 6. Warley Ward.	Dr. C. S. Ogilvy, Wood Bank, Luddenden Foot.
No. 7. St. Luke's Hospital and Gibbet Street Institution.	Dr. R. Davidson, Woodgate, Halifax.

Stated quite briefly, the Acts make it obligatory—unless a statutory declaration of conscientious objection is made—upon all parents to have their infants vaccinated before they attain the age of six months.

The following short summary outlines the main provisions of the Acts, and indicates the lines of local procedure.

NOTES ON VACCINATION PROCEDURE.

Form A. This is handed by the Registrar to the person registering the birth. It contains :—

- (a) Form of statutory declaration of conscientious objection to vaccination. It must be completed and returned before the child attains the age of 4 months.
- (b) Medical certificate of postponement of vaccination owing to the state of the child's health. Postponement must

- not exceed two months from the date of certificate, but may be renewed from time to time.
- (c) Medical certificate of postponement of vaccination owing to the condition of the house, or recent prevalence of infectious disease in the district. This also must not exceed two months.
 - (d) Medical certificate of insusceptibility to successful vaccination, or of child having had smallpox. The number of times unsuccessfully vaccinated must not be less than three.
 - (e) Medical certificate of successful vaccination must be completed and returned before the child attains the age of 6 months.

Form Q. If Form A has not been received by the Vaccination Officer before the child reaches the age of 3 months 8 days, Form Q is sent reminding the parents that they have still 3 weeks in which to complete and return the form.

NOTE.—The 8 days is not a statutory period of grace. [Steps must have been taken under either (a), (b) or (c), before the child reaches the age of 4 months]. It is a period allowed to parents to complete and return the Form. It was considered to be somewhat arbitrary to place persons in default, who, having complied with the requirements of the Act within the statutory period, neglected to return the Form for a day or two.

Form H. This Form contains the names, addresses, etc., of those who have failed to secure exemption. It is completed by the Vaccination Officer and sent to the Public Vaccinator, whose duty it is, within 4 weeks, to call and offer vaccination.

Form K. This is a final notice sent to parents who have failed to have their child vaccinated, and gives them 14 days in which to comply. Failure to do so places the parent in default and the matter is reported to the Health Committee.

The following figures are extracted from the Return which was prepared for the Registrar General, and relate to the year 1931:—

Number of births returned in the "Birth List Sheets" 1,475
 No. of these births duly entered by 31st January, 1933,
 in Cols. I., II., IV. and V. of the Vaccination Register, viz. :—

Successfully vaccinated	...	...	...	186
Insusceptible of vaccination	...	...	...	3

Had Smallpox	...	...	...	...	—
No. of Statutory declarations of conscientious objection	...	...	...	...	1,129
Died unvaccinated	...	...	...	...	108
No. of these births which on 31st January, 1933, remained unentered in the Vaccination Register on account of :—					
Postponement by Medical Certificate	...	...	...	...	9
Removed to other Districts (V.O.'s duly apprised)	...	...	...	...	14
Removed to places unknown, cannot be reached or unfound	...	...	...	...	17
No. of these births remaining on 31st January, 1933, neither duly entered on Vaccination Register nor temporarily accounted for in Report Book	...	...	...	...	9
Total number of Certificates of successful primary vaccination of children under 14 received during the Calendar Year, 1932	...	...	...	...	194
No. of Statutory Declarations of Conscientious Objection, irrespective of the dates of birth of the children to which they relate, during the Calendar Year, 1932	...	...	...	...	1,078
No. of children successfully vaccinated after declaration of Conscientious Objection had been made	...	...	...	...	1
No. of Certificates of successful primary vaccination of children under 14 sent to other Vaccination Officers	...	...	...	...	5

The following Table shows the number of persons successfully vaccinated and re-vaccinated at the cost of the rates, by the Public Vaccinators during the year ended 30th September, 1932 :—

No. of successful primary vaccinations of persons :—					
Under 1 year of age	...	...	...	...	127
One year and upwards	...	...	...	...	5
Total	...	...	...	...	132

No. of successful re-vaccinations of persons who have been successfully vaccinated at some previous time	10
--	----

It is pleasing to note that parents are now carrying out their obligations, either by making the statutory declaration of conscientious objection or by taking steps to have their children vaccinated within the statutory period.

That the policy of instituting proceedings against those in default was justified is shown by the fact that in no instance was it found necessary to resort to summary proceedings during the year.

SECTION 11.

—o—

**Transferred Poor Law
Services :**

- (a) Children Act 1908. Part I.
- (b) Boarding Out

(Children under 5 years of age).

Children Act, 1908.

The duties and powers under Part I. of the above Act (Infant Life Protection) are administered by this department.

The Act provides that any person undertaking for reward the nursing and maintenance of one or more infants under the age of 7 years apart from their parents, or having no parents shall within 48 hours from the reception of any such infant give notice in writing thereof to the Local Authority.

It is the duty of the local authority to appoint infant protection visitors to visit from time to time to satisfy themselves as to the proper nursing and maintenance of such infants, or to give necessary advice or directions thereon.

The following is a summary of the work carried out during the year :—

I. Notification :—

(i)	Number of foster parents on the Register :—				
	(a) at the beginning of the year ...	...	...	...	15
	(b) at the end of the year ...	...	...	...	17
(ii)	Number of children on the Register :—				
	(a) at the beginning of the year ...	...	...	...	16
	(b) at the end of the year ...	...	...	...	19
	(c) who died during the year ...	...	...	...	1
	(d) on whom inquests were held during the year ...	...	...	...	—

II. Visiting :—

(i)	Number of Visitors holding appointments under Section 2 (2) at the end of the year :—				
	(a) Health Visitors ...	...	...	...	6
	(b) Female, other than Health Visitors ...	...	...	...	1
	(c) Male ...	...	...	...	—
(ii)	Number of persons or societies authorised to visit under the proviso to Section 2 (2) ...	...	...	...	—

III. Number of cases (if any) in which proceedings were taken during the year :—

(i)	Under Section 1 (7) ...	...	...	...	—
(ii)	Under Section 2 (5) ...	...	...	...	—
(iii)	Under Section 2 (6) ...	...	...	...	—
(iv)	Under Section 3 ...	...	...	...	—
(v)	Under Section 4 ...	...	...	...	—
(vi)	Under Section 5 (2) ...	...	...	...	—
(vii)	Under Section 6 (2) ...	...	...	...	—
(viii)	Under Section 7 ...	...	...	...	—
(ix)	Under Section 8 (1) ...	...	...	...	—
	Total	...	...	...	—

IV. Number of cases in which the local authority has given a sanction during the year :—

(i) Under (a) of Section 3	...	...	...	—
(ii) Under (b) of Section 3	...	...	...	—
(iii) Under (c) of Section 3	...	...	...	—
Total	...	...	...	—

V. Number of orders obtained during the year :—

	From a Justice	From the Local Authority
(i) Under (a) of Section 5 (1)	...	—
(ii) Under (b) of Section 5 (1)	...	—
(iii) Under (c) of Section 5 (1)	...	—
Totals	...	—

Boarding-Out of Children.

(Under 5 years of age).

The Council's Administrative Scheme under the Local Government Act, 1929, made Maternity and Child Welfare a "declared" service; therefore, duties under the above Order in respect of children under five years of age were imposed upon the Department.

	Males	Females
Number on Register, Jan. 1st, 1932	...	1 2
Transferred to the Education Department on attaining the age of 5 years	...	1 1
Number on Register, Dec. 31st, 1932	...	— 1

The children were visited, the homes, bedding, and clothing were inspected at regular intervals, and enquiries were made to ensure that the rules as laid down in the Order were duly observed.

The children showed evidence of exceptional care and attention on behalf of their foster parents, and it was not found necessary to take punitive action in any case.

The number of visits paid by the official visitor was 35.

The health of the children at the Northumberland Village Homes, Whitley Bay, remained good throughout the year.

SECTION 12.

—o—

Public Health Propaganda.

Health Education & Propaganda.

Health Education is a primary duty of any Public Health Department. Cooperation of the citizens is necessary if preventive medicine is to achieve all it sets out to do. Propaganda work has continued in Halifax throughout 1932, and the following Table briefly sets out some of the more important lectures delivered to the Public.

LECTURES — 1932.

Date	Title	To	At	By	No. of Audience (Approx.)
11-1-32	Man versus Microbe	Boothtown Methodists	Boothtown Methodist Schl.	Dr. Roe	50
18-1-32	Prevention versus Cure	League of Young Liberals	Liberal Offices	Dr. Roe	40
26-1-32	General Health & Adolescence	Akroyd Place Parents and Senior Girls	Akroyd Place School	Dr. Heynemann	230
23-2-32	Prevention of Heart Disease	Halifax Labour Party (Women's Section)	I.L.P. Rooms	Dr. Liddle	60
23-2-32	Preventive Psychology	Brunswick Methodist Church	Rhodes Street	Dr. Roe	60
24-2-32	Infectious Diseases	The Industrial Society Ltd.	Guild Room, Culver Street	Dr. Roe	80
28-2-32	Safeguarding Health (illustrated with film)	Methodist Young Men's Society	Queen's Road M. Hall	Dr. Roe	40
1-3-32	Fighting Infection (illustrated with film)	St. John's Wesley Guild	St. John's Wesley Guild Hall	Dr. Roe	60
16-3-32	Atmospheric Pollution	Halifax Women's Co-op Guild	Guild Rooms, Culver Street	Mr. Beaumont, C.S.I.	60
19-4-32	The Public Health	The Rangers	9, Regent Street	Dr. Roe	40
29-4-32	Health of Adolescent Girls	Parents and Lady Governors of Princess Mary High School	Princess Mary High School	Dr. Heynemann	250
6-5-32	General Health & Adolescence	Princess Mary High Schi.	Princess Mary High School	Dr. Heynemann	300
26-9-32	The Air we Breathe	British Gas Association	Town Hall, Leeds	Dr. Roe	800
7-10-32	General Health & Adolescence	Haugh Shaw School Parents	Haugh Shaw School	Dr. Heynemann	50
13-10-32	Fighting Infection (film)	Northowram Village Guild	Northowram School	Dr. Roe	60
25-10-32	General Health & Adolescence	Haugh Shaw Girls	Haugh Shaw School	Dr. Heynemann	250
26-10-32	Fighting Infection (with film and slides)	Queensbury Co-op Society Ltd.	Queensbury Co-op Assembly Rooms	Dr. Roe	60
27-10-32	Fighting Infection (with film and slides)	M. & C. W. Association, Sowerby Bridge	Victoria Rooms, Sowerby Bridge	Dr. Roe	40
1-11-32	Food	St. John's Wesley Guild	St. John's Wesley Guild Rm.	Dr. Roe	40
8-11-32	The Internal Secretions	The Pharmaceutical Association	Old Cock Hotel	Dr. Roe	30
15-11-32	First Aid	St. Luke's Hospital, Nurses	St. Luke's Hospital	Dr. Roe	80
17-11-32	Heredity	The Old Men's Parliament	West View Parliament Rms.	Dr. Roe	40
22-11-32	General Health & Adolescence	Caddy Field Parents	Caddy Field School	Dr. Heynemann	28
24-11-32	Mental Deficiency	Old Men's Parliament	Belle Vue Parliament	Dr. Roe	50
7-12-32	The Importance of Public Health Administration	Lightcliffe Young People's Union	Lecture Room, Congregational Church, Lightcliffe	Mr. Beaumont, C.S.I.	20
9-12-32	General Health & Adolescence	Parents, Modern School	The Modern School	Dr. Heynemann	84
14-12-32	General Health & Adolescence	Parents and Girls	Sunnyside School	Dr. Heynemann	141
19-12-32	A Glimpse into the Adminis- tration of a modern Public Health Department	Hx. League of Young Liberals	Marlborough Rooms, Crossley Street	Mr. Beaumont, C.S.I.	14

GENERAL NOTE.—M.O.H. possessess a lantern and cinema which he uses in connection with this work. A large number of health leaflets, brochures, posters and pictures are used. 1,000 copies of Better Health are issued monthly. There are two "Wayside Health Pulpits" in the town; one in George Square and one in Norigate.

SECTION 13.

—o—

Milk Production.

Food Inspection.

Farms.

Offensive Trades.

Inspection and Supervision of Food.

Milk Supply.

I am indebted to Mr. J. Pollard, the Veterinary Inspector, for the particulars given below :—

In reviewing conditions during the past year it is pleasing to be able to report continued progress by local producers to supply the public with better milk. I do not consider there is another town in the County that can show more progressive methods, in contradistinction to buildings, than Halifax. Remarks have been made to express the good bacteriological standard of the local milk supply by the words up to Grade A, or even Certified. These names were given to two grades of milk under the Milk (Special Designations) Order 1923, complying with a bacteriological standard, also with some assurance regarding the health of the cows. The one is complementary to the other. Instances have occurred where milk of low bacterial content has not been free from harmful bacteria, to wit tubercle, which supports the necessity of conditions as a whole. Certified Milk is the highest grade and from cows that have passed the tuberculin test. It should be realised by the public that to produce milk of high hygienic quality results in higher cost of production. Bottling of milk is finding increasing favour with the public. Bottles are apt to be used for purposes other than intended, so that more efficient measures of cleansing are required than hot water, namely steam sterilization.

During the past year I regret to have to report the highest number of cases of tuberculosis of the udder that have been recorded, but the percentage, less than .5 works out considerably less than the average for towns of equal population, or even on cow population. This may be attributed to the prevailing low price for beef which has tempted some farmers to retain a cow for a longer period than usual. The cases have been detected during the course of routine examination of dairy cows within the Borough. A few cases were discovered within five weeks of purchase. It is quite a lottery if the majority of these cases would have been discovered by the process of taking bulk samples for the biological test, for the reason whose sample shall be taken ? In spite of the unfortunate increased incidence I feel certain that good will follow any adversity and farmers realise, it will be to their advantage to pay more attention to the health of the cows they buy.

Milk and Dairies (Amendment) Act 1922.

Under Section 2 of the above-named Order, 2 retailers were invited to appear before the Health Committee to show cause why their names should not be removed from the Register. They complied with the reason for their objection.

Milk and Dairies Order 1926.

In the adjourned case reported in the previous Annual Report for the contravention of Article 20 (1), "Lack of facilities of boiling water or steam," the Magistrates were not asked to adjudicate and the case was withdrawn as the dairy farmer decided to comply by installing a steaming outfit.

One case was reported to the Committee for contravention of Article 15. Failing to wear clean overalls during milking.

The following alterations were carried out :—

Alterations to cowsheds for light and ventilation	...	3
Alterations to cowshed floors	...	6
Dairies provided	...	5
Water supply	...	1

One steaming outfit on the market was tested and found to be unable to achieve its claim for sterilising.

Visits to farms	...	...	...	...	727
Cows examined	...	...	...	...	3,245
Estimated number of milch cows	...	...	...	...

Bacteriological Examination of Samples.

Total number of samples taken for bacteriological examinations as an index of general cleanliness	...	82
Number of samples taken within the Borough...	...	37
Number of graded samples ...	...	45

Milk (Special Designations) Order 1923.

One producer retailer of Certified Milk discontinued producing at the end of the year, while the producer's retailer of Grade A milk obtained a licence to produce and sell Certified Milk.

In addition there are two producers of Certified Milk just outside the Borough.

Considering the conditions of licence and the extra expense incurred in cost of testing, purchasing and replacing cows all of which have to pass the Tuberculin Test, the milk can compare favourably in retail price with milk of inferior quality.

At the end of the year there were on the Register—

Cowkeeper only	...	...	...	...	1
Cowkeepers and Dairymen (Wholesale only)	...	...	...	...	46
Cowkeepers and Dairymen (Wholesale and Retail)	...	...	...	...	26
Cowkeepers and Retail Purveyors	...	...	...	...	93
Retail Purveyors only...	...	...	...	...	23

Tuberculosis Order—Diseases of Animals Acts.

Number of reports ...	...	...	...	...	24
Number of reports confirmed...	...	...	...	...	22
Tuberculosis of the udder ...	...	...	...	...	16
Bacteriological examinations of milk...	...	...	...	...	31
Number reported cytological suggestive of Tubercl...	...	...	...	...	8
Number of cattle examined ...	...	...	...	...	270

A conviction was obtained for failing to report a case of indurated udder which was tubercular. Penalty £2.

Meat.

Private Slaughterhouses (Registered) ...	...	...	...	5
Do (Licensed) ...	...	...	...	0
				5

The approximate number of cattle slaughtered therein during the year is as follows :—

Cattle.	Calves.	Sheep and Lambs.	Pigs.
276	30	1,000	334

Meat Inspection.

The following Table shows the number of visits paid to the slaughterhouses, butchers' shops, markets, etc. :—

Description of Premises	Number of Visits		
Public Slaughterhouse	723
Private Slaughterhouses	194
Borough Market	558
Wholesale Market	311
Lairages	172
Potted Meat Houses	441
Tripe Boiling Houses	168
Butchers' Shops	2230
Auction Mart	62
Other Visits	346
Total	5,205

The following Table shows the number of animals slaughtered during the year and the number condemned :—

	Cattle.	Calves.	Sheep and Lambs.	Pigs.	Total.
Number of Animals slaughtered at the public slaughterhouse ...	7928	1575	26495	8527	44525
Do. condemned...	57	9	16	70	152

NOTE.—9 cows were received under the Tuberculosis Order 1925, of which number 3 were condemned.

The following Table shows the total Approximate weight of meat and offals destroyed on account of tuberculosis, and from other causes :—

	lbs.
Total Amount of Meat Destroyed	48047
Total Amount of Offals Destroyed	12718
Total Amount of Meat Destroyed on account of Tuberculosis	40998
Total Amount of Offals Destroyed on account of Tuberculosis	8528
Total Amount of Meat Destroyed from other causes	7049
Total Amount of Offals Destroyed from other causes	4190
Total Meat and Offals Destroyed ...	60765

Kinds of Food Destroyed	Quantity in lbs.
57 Carcasses of Beef...	30790
Beef not in Carcase	8300
9 Carcasses of Veal	346
Veal not in Carcase...	108
16 Carcasses of Mutton and Lamb	728
70 Carcasses of Pork	6973
Pork not in Carcase	802
16 Rabbits	36
Fish	294
Fruit and Vegetables	1919
5 Turkeys...	59
Bacon	27
Cheese	28
Shredded Suet	28
Cereals and Dates	504
Total Weight ...	50942

Public Health (Meat) Regulations 1924.
Licensing of Meat Carriers.

I consider it would be an advantage for those who undertake the delivery of meat to be subject to Annual Licence. In making this suggestion monopoly is not in view, but such control would enable a higher standard to be maintained.

Merchandise Marks Act 1926.

During the year special attention has been given to the enforcement of this Act, under which duties are continually increasing.

Offensive Trades.

There was a complaint regarding a tripe boiling house which remedied the complaint but has discontinued business.

SECTION 14.

Sanitary Circumstances.

Housing.

Food Sampling.

Milk

(Retail Supply and Distribution).

Smoke Abatement.

Atmospheric Pollution.

Sanitary Circumstances

AND

Sanitary Inspection of the Area.

I am indebted to Mr. J. W. Beaumont, Chief Sanitary Inspector, for the following report :—

Inspections and Visits.

Dwellinghouses :—

Recorded Inspections—Housing Consolidated Regs. 1925	153
Other Inspections and visits under Housing Acts	2690
Complaints	603
Infectious Disease	376
Dirty and/or Verminous	41
Overcrowding	19
Cellar Dwellings and Underground Rooms	7
Tents, Vans, Sheds, etc.	11
Water Supply	80
Common Lodging Houses	147
Houses let in Lodgings	171
Other Inspections	470

Drainage :—

Drains inspected, etc.	1459
Drains tested	326
Sewers, etc., inspected	37

Factory and Workshop Act :—

Factories	64
Workshops	298
Workplaces	14
Bakehouses	267
Outworker's Premises	11

Food Inspection :—

Dairies and Milkshops	99
Ice Cream Premises	221
Fried Fish Shops	254
Other Food Premises	13

Sampling :—

Food and Drugs (Adulteration) Act, 1928	321
Fertilisers and Feeding Stuffs Act, 1926	16
Rag Flock Acts, 1911 and 1928	4
Bacteriological Examination	251
Water Analysis and Bacteriological Examination	30

Smoke Abatement :—

Smoke Observations	...	...	...	341
Visits to Works re Smoke	...	...	...	105

General :—

Complaints (Rats)	...	...	...	25
Nuisance from Stables	-	...	...	16
Accumulations of Manure, Refuse, etc.		...	...	37
Swine, Fowls and other Animals	...	...	...	10
Schools	...	...	...	8
Places of Public Amusement	...	...	...	94
Public Sanitary Conveniences	...	...	...	57
Miscellaneous Visits	...	...	...	1092
Total number of Inspections and Visits		...	...	10238
Total number of re-Inspections	...	...	...	2080

Sanitary Improvements Effected.**Dwellinghouses :—**

Dampness remedied	...	...	...	309
Lighting improved	...	...	...	63
Ventilation improved	...	...	...	160
Food storage provided or improved	...	...	...	20
Cooking accommodation provided or improved		...	...	86
Washing accommodation provided or improved		...	...	37
Sinks provided	...	...	...	133
Floors relaid or repaired	...	...	...	134
Eaves, gutters or fallpipes provided or repaired		...	...	231
Additional water closets provided	...	...	...	7
Sanitary accommodation improved	...	...	...	49
Yards and/or Passages paved or repaired	...	...	...	38
Water supply provided or improved...	...	...	...	79
Cleansed and/or Vermin disinfested...	...	...	...	36
Overcrowding abated	...	...	...	12
Cellar dwellings closed	...	...	...	6
Underground sleeping places closed...	...	...	...	1
Tents, Vans, Sheds, closed...	...	...	...	2
Other sanitary defects remedied	...	...	...	527

Drainage :—

New drains constructed	...	...	...	122
Drains re-constructed	...	...	...	128
Repaired or cleansed	...	...	...	323
Drains under house abolished	...	...	...	19

Factories and Workshops (including Bakehouses) :—

Cleansed and limewashed	...	...	...	11
Ventilation improved	...	...	...	5
Additional sanitary accommodation provided	...	...	...	8
Sanitary accommodation improved	...	...	...	20
Separate sanitary accommodation for sexes provided	...	...	...	4
Underground Bakehouse closed	...	...	...	1
Other sanitary defects remedied	...	...	...	19

Smoke Abatement :—

Boiler Plants improved	...	...	...	4
Other improvements effected	...	...	...	6

Common Lodging Houses :—

Cleansed and limewashed	...	...	...	10
Sanitary condition improved	...	...	...	6

Houses Let in Lodgings :—

Cleansed and limewashed	...	...	...	12
Sanitary condition improved	...	...	...	26

Dairies and Milkshops :—

Sanitary condition improved	...	...	...	4
New Premises provided	...	...	...	3

Ice Cream Premises :—

Cleansed and limewashed	...	...	...	5
Sanitary condition improved	...	...	...	1
Provision made for sterilising utensils	...	...	...	2
New Premises provided	...	...	...	14

Fried Fish Shops :—

Cleansed and limewashed	...	...	...	7
Sanitary condition improved	...	...	...	6
New Premises provided	...	...	...	3

Other Food Premises :—

Cleansed and limewashed	...	...	...	3
Sanitary condition improved	...	...	...	1

General :—

Sanitary condition of stables improved	...	...	...	6
Manure, etc., accumulations removed	...	...	...	40
Swine, Fowl, and other animals—Nuisance abated	...	...	...	11

Places of Public Amusement—Sanitary condition improved	...	...	...	...	4
Public Sanitary Conveniences improved	...	...	...	...	3
Miscellaneous (not included above) ...	...	...	...	...	35

Statutory Action.

Matters reported to the Health Committee for Statutory Action were as follows :—

Housing Act, 1930.

Sanitary Defects (Section 17)	...	...	57 houses
Sanitary Defects (Section 19)	...	...	53 houses

Public Health Act, 1875.

Defective Drainage (Secs. 91 and 94)	...	5 houses
Premises in such a state, etc. (Secs. 91 & 94)	2 stables	
Premises in such a state, etc. (Secs. 91 & 94)	1 house	
Choked watercourse (Secs. 91 and 94)	...	2 factories
Defective rainwater fallpipe (Secs. 91 and 94) ...	2 houses	
Lack of water supply to water closets (Sec. 36)	9 houses	

Public Health Act, 1875. Sections 91 and 94.

<i>Public Health (Smoke Abatement) Act, 1926. Section 1.</i>	
Nuisance from black smoke...	... 2 factories

Halifax Corporation Act, 1900. Section 122.

Lack of proper and sufficient water supply...	9 houses
---	----------

Food and Drugs (Adulteration) Act, 1928.

Milk deficient in fatty solids	...	2 wholesale purveyors
Milk deficient in fatty solids	...	2 retail purveyors
Milk—added water	...	2 retail purveyors
Gin—added water	...	1 retail purveyor

Food and Drugs (Adulteration) Act, 1928.

<i>Public Health (Regulations as to Food) Act, 1907.</i>	
<i>Public Health (Preservatives, etc., in Food) Regs., 1925/6/7.</i>	
No notice displayed re preservatives...	6 retail purveyors

Milk and Dairies (Consolidation) Act, 1915.

Milk and Dairies (Amendment) Act, 1922.

Milk and Dairies Order, 1926.

Lack of proper facilities for cleansing milk utensils with boiling water or steam	1 retail purveyor
---	-----	-------------------

Milk and Dairies (Amendment) Act, 1922.

High bacterial count and B. Coli ... 1 retail purveyor

*Artificial Cream Act, 1929.*Selling "artificial cream" as cream
Selling artificial cream from unregistered premises 1 retail purveyor*Fertilisers and Feeding Stuffs Act, 1926.*Ground Oats containing 10% of Barley
and Rye... 1 retail purveyor*Rag Flock Acts, 1911 and 1928.*Rag Flock containing excess of Soluble
Chlorine 1 retail purveyor**Prosecutions during 1932.**

Date	Act	Offence	Penalty
5/2/32	Food and Drugs (Adulteration) Act, 1928	Selling Gin more than 35° under proof	Fined £2 and £1 11s. 6d. costs
27/10/32	Food and Drugs (Adulteration) Act, 1928	Selling Milk deficient in fatty solids	Fined £5 and £1 1s. 0d. costs
8/12/32	Artificial Cream Act, 1929	Unlawful sale of "cream" contrary to the Act	Case dismissed on payment of 10/- costs
		Unlawfully selling artificial cream, such substance not being preceded by the word "artificial"	Do. do.
		Exposure for sale of artificial cream without the words "artificial cream" printed on the receptacle	Charge withdrawn
		Sale of artificial cream from unregistered premises	Fined £1 and 10/- costs
8/12/32	Rag Flock Act, 1911 and Rag Flock Amendment Act, 1928	Sale of Rag Flock which did not conform to the standard of cleanliness laid down	Fined £2

Factories and Workshops.

Factory and Workshop Act, 1901.

Public Health Acts Amendment Act, 1890. Section 22.

Halifax Corporation Act, 1900. Section 130.

The number of workshops on the register at the end of 1932 was 493.

Inspections made during the year were as follows:— Factories 64 ; Workshops 565 (including 267 visits to Bakeries); Workplaces 14; Outworker's premises 11; Total 654.

H.M. Factory Inspector sent 17 notices under Section 5 of the Factory and Workshop Act 1901, 15 of which referred to factories and 2 to workshops, whilst the following were dealt with during the year :—Factories 18 ; Workshops 2.

Table 1.
Inspection of Factories, Workshops and Workplaces.

Premises (1)	Number of		
	Inspections (2)	Written Notices. (3)	Occupiers Prosecuted (4)
Factories (including Factory Laundries)	64	5	—
Workshops (including Workshop Laundries)	565	2	—
Workplaces (Other than Outworkers Premises)	14	1	—
Total ...	643	8	—

Table 2.
Defects found in Factories, Workshops and Workplaces.

Particulars (1)	Number of Defects			Number of offences in respect to which Prosecutions were instituted (5)
	Found (2)	Remedied (3)	Referred to H.M. Inspector (4)	
Nuisances under the Public Health Acts—*				
Want of cleanliness ...	11	11	...	...
Want of ventilation ...	5	5	...	...
Overcrowding ...	...	...	...	...
Want of drainage of floors ...	...	...	...	...
Other nuisances ...	19	19	...	...
Sanitary Accommodation:				
Insufficient ...	8	8		
Unsuitable or defective	20	20	...	...
Not separate for sexes...	4	4	...	...
Offences under the Factory and Workshops Acts—				
Illegal occupation of underground bakehouse... (S. 101)	1	1	...	...
Other offences ... (Excluding offences relating to out-work and offences under the Sections mentioned in the Schedule to the Ministry of Health (Factories and Workshops Transfer of Powers Order 1921.)	...	...	...	...
Total ...	68	68	...	...

*Including those specified in Sections 2, 3, 7 and 8, of the Factory and Workshop Act, 1901, as remediable under the Public Health Acts.

Bakehouses.

Factory and Workshop Act, 1901.

Ministry of Health Act, 1919.

S.R.O. 958 of 1926.

The number of bakehouses on the register at the end of 1932 was 121, which includes 37 factory bakehouses.

267 inspections have been made and one underground bakehouse has been closed.

The premises were found to be in a generally satisfactory condition.

SMOKE ABATEMENT.

Public Health Act, 1875.

Public Health (Smoke Abatement) Act, 1926.

The number of smoke observations taken of other than domestic chimneys during the year was 341, details of which are given in the following table. 105 visits were made to works re smoke, although there were only eight occasions upon which the black smoke byelaw was transgressed. Five notices were served upon offending firms.

We still suffer as a result of the fact that manufacturers and others may discharge black smoke from their chimneys for any period less than three minutes during any consecutive period of thirty minutes during the whole twenty-four hours of the day, without contravening our black smoke byelaw. When we consider that in taking 341 observations of 108 chimneys, we found that black smoke was emitted for a period averaging less than half a minute per observation, surely it is an indication that the byelaw could be made more stringent without inflicting any hardship upon industry.

There is no doubt that much unnecessary smoke is emitted from our factory chimneys, the effect of which is exaggerated by the geographical situation of the Borough, which is surrounded by high hills on every side. These hills interfere with the natural scavenging action of the winds which, in our case, tend to confine the smoke in the valley in which the town is situate. A visitor approaching the town by road—especially from the Leeds side—finds himself above the level of the mill chimneys, and is immediately struck by the amount of smoke discharged into the atmosphere. Thus we hear Halifax described as a very smoky town, an unenviable reputation which is not altogether warranted, as can be proved by comparing our atmospheric pollution records with those of other industrial towns.

It is a matter for regret that owing to the very small number of students, no class has been held in Halifax during the winter for stokers and boiler attendants, in connection with the scheme inaugurated by the West Riding of Yorkshire

Regional Smoke Abatement Committee about four years ago. Manufacturers and others are urged to encourage, if not require, their stokers to attend these classes with a view to obtaining the certificate of the Regional Committee. By doing so they would not only benefit the general community, but themselves as individuals. In this connection, it is a pleasure to record that at the last Annual Conference of the Regional Committee representing 91 constituent local authorities in the Riding, the following Resolution was passed unanimously :—

“ That this Conference recommend to the local constituent authorities that when engaging stokers and boiler attendants for their institutions and commercial undertakings preference should be given to those possessing the certificate of the West Riding of Yorkshire Regional Smoke Abatement Committee or similar Examining Bodies.”

One hopes the day is not far distant when all users of raw coal for industrial purposes will require that their stokers and boiler attendants possess a certificate attesting to their knowledge of combustion, etc.

With respect to domestic smoke, it cannot be said that very marked progress has been made towards its diminution. The local gas and electricity undertakings contribute their quota by supplying in ever increasing quantity various appliances at minimum cost. Solid smokeless fuel in the form of gas coke was supplied in large quantity during the year, no less than 14,252 tons being sold for industrial purposes, and 6,108 tons for domestic use, giving a total of 20,360 tons during the year.

Smoke Observations, 1932.

CHIMNEY (1)	No. of Observa- tions (30 minutes each) (2)	Average minutes of black smoke per Observation (3)
Adelaide Street Mill	4	.12
Albert Street Mills	2	.75
Albion Mills	4	Nil.
Archer Street Mills	2	1.0
Atlas Dyeworks	6	1.75
Bankfield Mills	3	Nil.
Battinson Road Mills	4	.12
Beacon Works	2	.5
Beechwood Mills	1	Nil.
Billinghay Mills	2	"
Blackwood Mills	5	.2
Bottoms Mill	4	Nil.
Bowling Dyke Dyeworks	8	.25
Bowling Dyke Mills	9	.28
Bradshaw Mills	1	Nil.
Brierley Hill Works	2	1.0
Brunswick Mills	3	.5
Calder & Hebble Navigation Co.	2	Nil.
Canal Works	5	"
Cinder Hill Fireclay Works	2	.5
Clarence Mill	2	Nil.
Clark Bridge Mills	3	.33
Clay Pits Mill	4	Nil
Craven Edge Mill	7	1.43
Crossland's Works	1	Nil
Crossley & Porter School	2	"
Dean Clough Mills (Brick)	3	"
Dean Clough Mills (Stone)	3	"
Drakes, Ovenden	1	"
Dunkirk Mills	6	.16
Eastfield Mills	1	Nil
Eagle Mills	1	"
Ellen Royde Brickworks	3	.33
Ellen Royde Mills	4	Nil
Falcon Laundry	5	.2
Fenton Estate Dyeworks	1	.5
Forest Mills	2	Nil
Globe Mills	1	"
Goodall's, Salterhebble	3	"
Grove Mills	1	"
Halifax Corporation—		
Battinson Road School	2	"
Electricity Works (Stone)	7	4.7
Electricity Works (Brick)	7	1.7
Electricity Works (Steel chimney No. 1)	1	13.0
Electricity Works (Steel chimney No. 2)	1	Nil
Gibbet Street Institution	3	"
Queen's Road School	2	"
St. Luke's Hospital	4	"
Warley Road Schools	3	.83
Halifax Ice and Cold Storage Co.	1	Nil.
Halifax Steam Laundry	7	.78
Hanson Lane Mills	2	Nil
Highroad Well Works	2	.5

CHIMNEY (1)	No. of Observa- tions (30 minutes each) (2)	Average minutes of black smoke per Observation (3)
Holmfield Mills (Brick) ...	1	Nil.
Holmfield Mills (Stone) ...	1	"
Horley Green Brickworks ...	1	1.5
Horley Green Mill ...	1	Nil.
Illingworth Mills ...	1	1.5
Jackroyd Mills ...	1	Nil.
Keighley Mills ...	1	"
Kingston Mills ...	2	"
Kingston Works ...	3	"
Ladyship Mills ...	10	"
Lee Bank Mill ...	10	Nil.
Miall Street Mills (North) ...	1	"
Miall Street Mills (South) ...	1	"
Mixenden Carbonising Company ...	1	"
Old Lane Dyeworks ...	10	.35
Ovenden Wood Brewery ...	1	Nil.
Park Print Works ...	3	.16
Perseverance Mills ...	5	Nil.
Pohlman's Works ...	1	"
Queen's Road Chocolate Factory ...	1	1.5
Queen's Road Mill ...	6	.42
Raglan Street Dyeworks (Brick) ...	11	.73
Raglan Street Dyeworks (Stone) ...	6	.25
Range Royd Mill ...	4	Nil.
Rawson's Mill ...	10	"
C. Redman & Sons ...	2	"
Regent Works ...	1	"
Royal Halifax Infirmary ...	2	"
Royal Mills ...	1	"
Ryburne Mills ...	3	.5
Salterhebble Mill ...	4	Nil
Saville Mills ...	3	"
Sedburgh Mills ...	5	"
Shaw Lodge Mills ...	5	.2
Shay Lane Dyeworks ...	1	Nil
Smith Messrs. T. & W., Dyers ...	2	"
Square Mill ...	1	"
Spring Edge Works ...	2	"
Spring Hall Mill ...	2	.25
Standard Screw Company ...	1	Nil
Stone Trough Brewery ...	4	"
Sun Works ...	5	.7
The Brewery ...	6	.25
Trafalgar Mills ...	2	Nil
Union Mills ...	2	"
Victoria Iron Works ...	1	1.5
Victoria Laundry ...	1	Nil
Victoria Mills ...	5	.6
Warley Spring Dyeworks ...	6	Nil
Wellington Mills ...	1	"
West Croft Mills ...	1	"
West End Cabinet Works ...	2	"
West Grove Mills ...	2	"
Wheatley Dyeworks ...	6	2.83
White Rose Boiler Works ...	2	Nil
Total ...	341	.497

Atmospheric Pollution Records.

There are five standard deposit gauges fixed within $1\frac{1}{2}$ miles of the centre of the town.

The central station is at Wade Street about 200 yards East of the Town Hall, whilst others are in operation at Akroyd Park ($\frac{1}{2}$ mile North), Belle Vue Park ($\frac{1}{2}$ mile West), Royal Halifax Infirmary (1 mile South), and West View Park ($1\frac{1}{2}$ miles West).

At two of the stations—Wade Street and West View Park—records of daylight measurement by the Potassium Iodide method are obtained.

In May, 1933, we also commenced to obtain records of sulphur pollution at each of these stations. The method employed is known as the lead peroxide one. It depends upon the absorption by a prepared standard surface of lead peroxide on a cotton fabric held by a porcelain cylinder, which is exposed for one month. The coated fabric is then stripped off the cylinder and treated with 5 grammes of anhydrous sodium carbonate (A.R.) in 60 c.c. of distilled water. After standing, with occasional stirring, for at least three hours the whole is boiled on a glycerine bath for half-an-hour, the volume being kept nearly constant. The whole is then filtered with appropriate washings on a Buchner funnel. Finally the filtrate is acidified with hydrochloric acid and the sulphate precipitated with barium chloride.

A study of the following Tables will prove very interesting, showing as they do, the variation in atmospheric pollution within a very short distance. For instance, it will be seen that at Wade Street where we get the heaviest deposit, 294.78 tons per square mile was recorded during the year, whilst at the Royal Halifax Infirmary station where we obtained our best results, the figure was 118.21 tons per square mile. The average of the five stations during the year gives a figure of 168.02 tons per square mile. This figure compares with 180 tons per square mile for the previous year.

The method employed to obtain daily records of the measurement of daylight at Wade Street and West View Park was described in last year's Annual Report. The results obtained during the year under review again provide indisputable proof of the connection between atmospheric pollution and light obstruction. This difference is most marked during the winter months—October to March inclusive—when it will be seen that there was 36 per cent. more daylight at West View Park than at Wade Street.

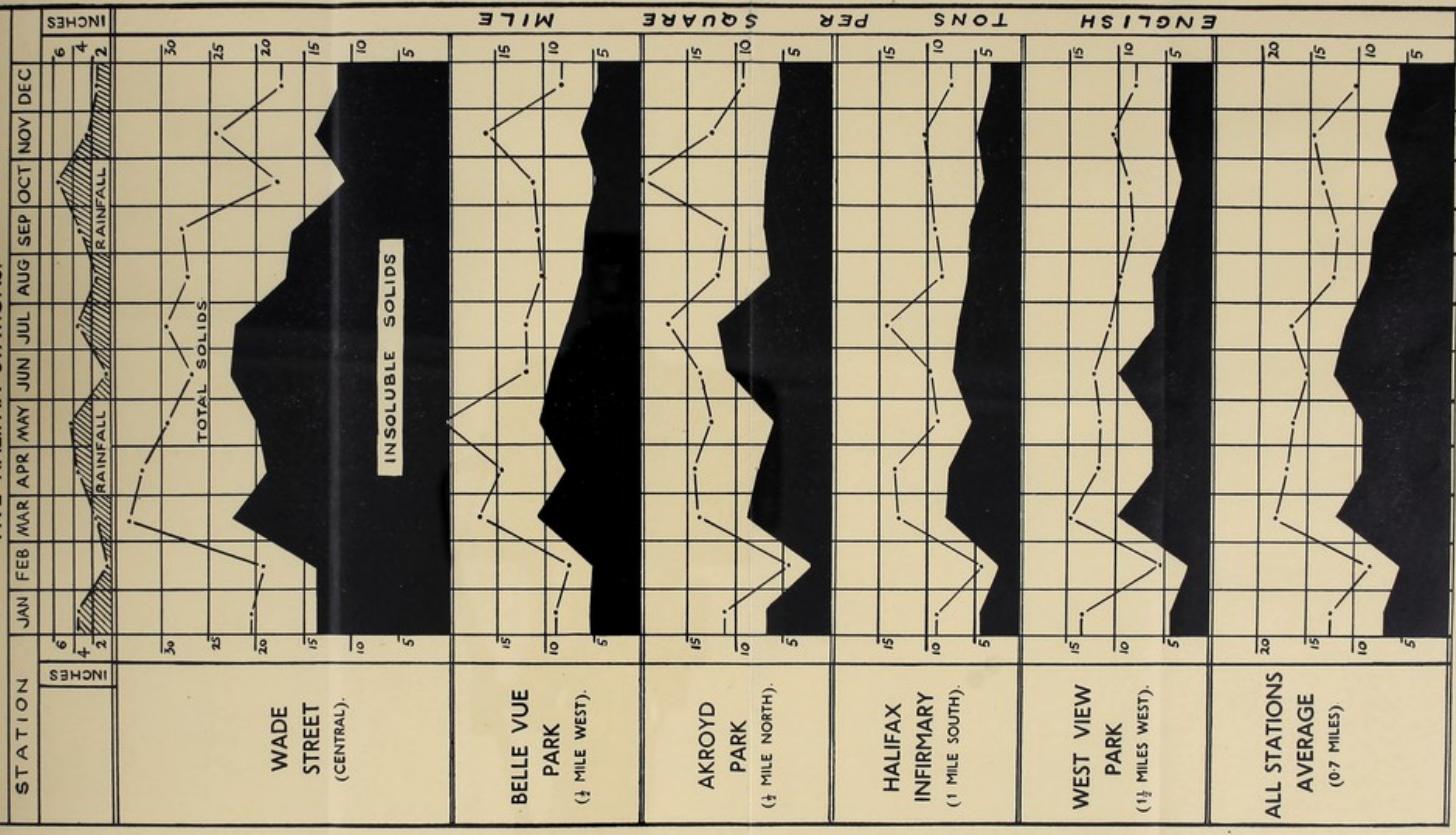
TABLE I.

Month	WADE STREET (Central)			BELLE VUE PARK (½ mile West)			AKROYD PARK (½ mile North)			INFIRMARY (1 mile South)			WEST VIEW PARK (½ miles West)							
	Rainfall in Inches	Solids Insoluble	Solids Total	Rainfall in Inches	Solids Insoluble	Solids Total	Rainfall in Inches	Solids Insoluble	Solids Total	Rainfall in Inches	Solids Insoluble	Solids Total	Rainfall in Inches	Solids Insoluble	Solids Total					
January ...	3.67	13.76	6.62	20.38	3.76	5.12	3.99	9.11	3.53	6.72	4.48	11.20	4.10	4.77	4.46	9.23	4.22	4.37	8.62	12.99
February ...	0.39	13.80	5.41	19.21	0.32	5.08	2.53	7.61	0.37	2.08	2.22	4.30	0.19	2.31	1.99	4.30	0.33	2.53	2.74	5.27
March ...	1.97	22.04	11.29	33.33	1.88	10.82	6.18	17.00	2.01	8.85	4.74	13.59	1.90	7.88	5.08	12.96	1.90	9.71	5.01	14.72
April ...	3.78	18.73	13.35	32.08	3.70	7.84	6.95	14.79	3.47	7.65	6.33	13.98	3.73	7.49	5.90	13.39	3.21	6.14	5.97	12.11
May ...	4.21	19.88	9.17	29.05	3.94	10.28	10.58	20.86	4.23	5.93	6.52	12.45	3.93	5.39	3.58	8.97	4.26	6.65	5.46	12.11
June ...	0.30	22.46	4.03	26.49	0.32	9.37	2.74	12.11	0.38	10.89	2.77	13.66	0.38	7.49	2.40	9.89	0.43	9.92	2.74	12.66
July ...	3.38	21.79	7.70	29.49	3.19	7.70	4.53	12.23	3.47	11.83	5.24	17.07	4.03	6.83	7.40	14.23	3.40	6.32	4.36	10.70
August ...	1.52	17.14	5.21	22.35	1.41	6.47	3.71	10.18	1.75	6.38	5.82	12.20	1.30	5.97	2.51	8.48	1.47	6.40	3.52	9.92
September ...	3.20	16.72	5.91	22.63	3.10	6.24	4.27	10.51	3.30	7.23	3.96	11.19	2.90	5.49	3.67	9.16	3.20	4.78	3.50	8.28
October ...	5.61	10.52	7.41	17.93	5.58	4.94	6.07	11.01	5.59	7.03	13.01	20.04	5.30	4.08	5.78	9.86	5.60	3.13	5.66	8.79
November ...	2.47	14.03	10.29	24.32	2.63	6.26	9.93	16.19	2.36	6.37	6.12	12.49	2.17	4.83	5.25	10.08	2.32	4.62	5.85	10.47
December ...	1.46	11.56	5.96	17.52	1.53	4.51	3.51	8.02	1.45	5.10	4.12	9.22	1.58	3.67	3.99	7.66	1.54	4.46	3.61	8.07
AGGREGATES	31.96	202.43	92.35	294.78	31.36	84.63	64.99	149.62	31.91	86.06	65.33	151.39	31.51	66.20	52.01	118.21	31.88	69.03	57.06	126.09
MONTHLY AVERAGES...	2.66	16.87	7.69	24.56	2.61	7.05	5.42	12.47	2.66	7.17	5.44	12.61	2.62	5.52	4.33	9.85	2.66	5.75	4.76	10.51

2. MONTHLY ATMOSPHERIC DEPOSIT

1932.

FIVE HALIFAX STATIONS.



БОЛГАРИЯ СТАТИСТИЧЕСКА

РЕГИСТРАЦИЯ НАЛОГОВЫХ ОБОГАЩЕНИЙ

СЕМЕЙСТВО

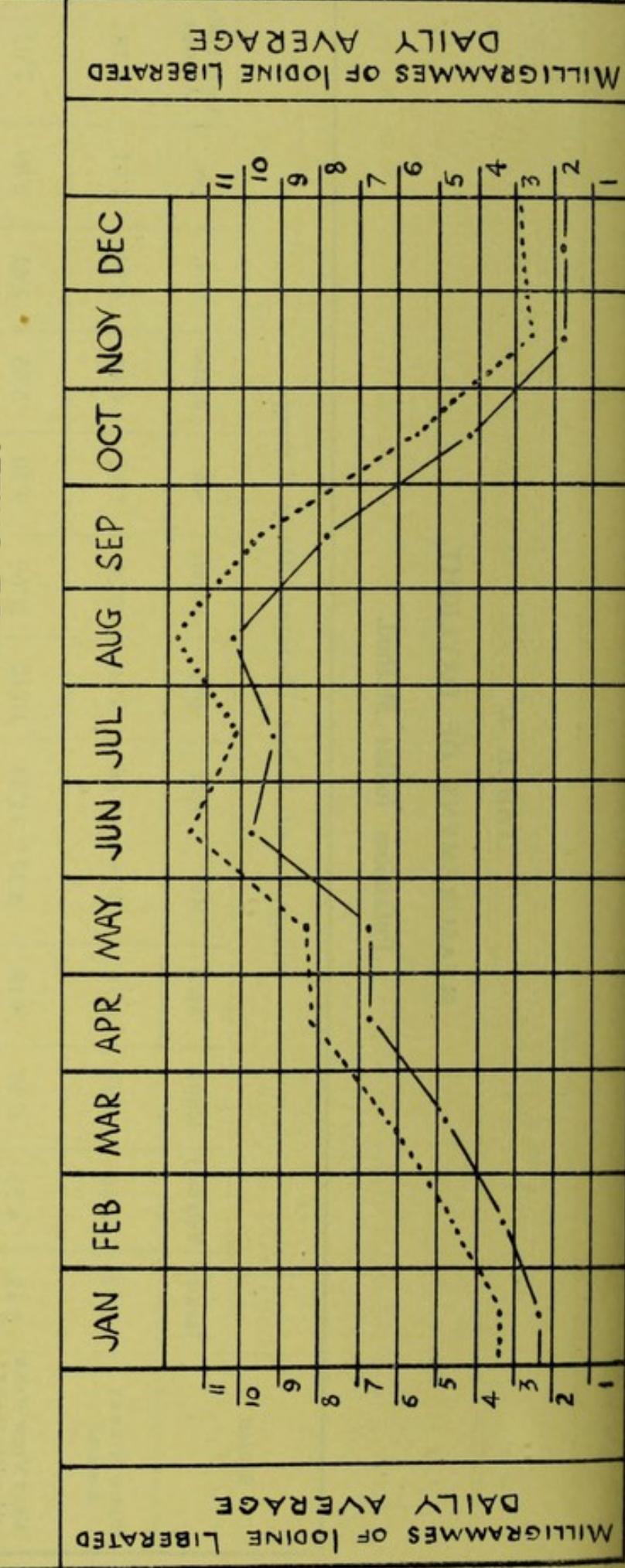
TABLE 3.
MEASUREMENT OF DAYLIGHT.

Station	Milligrams of Iodine liberated—Daily Average.												
	January	February	March	April	May	June	July	August	Sept.	October	Nov.	Dec.	Total Daily Average
WADE STREET (Central)	2.42	3.36	4.97	6.76	6.74	9.86	9.10	10.20	7.85	4.40	1.74	1.91	5.78
WEST VIEW PARK (1½ miles West)	3.42	4.53	6.39	8.18	8.37	11.34	10.10	11.60	9.50	5.65	2.61	2.89	7.05
Total Daily Average	2.92	3.94	5.68	7.47	7.55	10.60	9.60	10.90	8.67	5.02	2.17	2.40	6.41

4. MEASUREMENT OF DAYLIGHT.

1932.

WEST VIEW PARK - - - - - WADE STREET - - - - -



Housing.

(a) Statistics.

Number of New Houses erected during the year :—

(a) Total (including numbers given separately under (b))	225
(1) By the Local Authority	56
(2) By other Local Authorities	Nil
(3) By other bodies and persons...	169

(b) With State assistance under the Housing Acts :—

(1) By the Local Authority	
(a) For the purpose of Part 2 of the Act of 1925	30
(b) For the purpose of Part 3 of the Act of 1925	24
(c) For other purposes	2
(2) By other bodies or persons	Nil

1. Inspection of Dwellinghouses during the year :—

(1) (a) Total number of dwellinghouses inspected for housing defects (under Public Health or Housing Acts)	1061
(b) Number of inspections made for the purpose... 2078	
(2) (a) Number of dwellinghouses (included in sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925	153
(b) Number of inspections made for the purpose... 153	
(3) Number of dwellinghouses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	61
(4) Number of dwellinghouses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	929

2. Remedy of Defects during the year without service of formal notices :—

Number of defective dwellinghouses rendered fit in consequence of informal action by the Local Authority or their officers	975
--	-----

3. Action under Statutory Powers during the year :—			
(a) Proceedings under Sections 17, 18 and 23 of the Housing Act, 1930 :—			
(1) Number of dwellinghouses in respect of which notices were served requiring repairs ...	45		
(2) Number of dwellinghouses which were rendered fit after service of formal notices :—			
(a) By owners	14		
(b) By Local Authority in default of owners	10		
(b) Proceedings under Public Health Acts :—			
(1) Number of dwellinghouses in respect of which notices were served requiring defects to be remedied	17		
(2) Number of dwellinghouses in which defects were remedied after service of formal notices :—			
(a) By owners	34		
(b) By Local Authority in default of owners	Nil		
(c) Proceedings under Sections 19 and 21 of the Housing Act, 1930 :—			
(1) Number of dwellinghouses in respect of which Demolition Orders were made	31		
(2) Number of dwellinghouses demolished in pursuance of Demolition Orders	16		
(d) Proceedings under Section 20 of the Housing Act, 1930 :—			
(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made	Nil		
(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit	Nil		
(e) Proceedings under Section 3 of the Housing Act, 1925 :—			
(1) Number of dwellinghouses in respect of which notices became operative requiring repairs...	Nil		
(2) Number of dwellinghouses which were rendered fit after service of formal notices :—			
(a) By owners	Nil		
(b) By Local Authority in default of owners	Nil		

(3) Number of dwellinghouses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close	... ... ... ...	Nil
(f) Proceedings under Sections 11, 14 and 15 of the Housing Act, 1925 :—		
(1) Number of dwellinghouses in respect of which Closing Orders became operative...	...	Nil
(2) Number of dwellinghouses in respect of which Closing Orders were determined, the dwelling-houses having been rendered fit ...	...	Nil
(3) Number of dwellinghouses in respect of which Demolition Orders became operative ...	...	Nil
(4) Number of dwellinghouses demolished in pursuance of Demolition Orders ...	...	Nil

NOTE.—Action under Statutory Powers during the year :—

- 3 (b) (2) (a) Includes eighteen houses in respect of which notices had been served in 1931.
- 3 (c) In addition to figures given there were 25 houses reported under Section 19 in respect of which the Health Committee accepted undertakings to make fit. Houses rendered fit in accordance with undertakings given in 1932 = 5, given in 1931 = 17, a total of 22 houses rendered fit in 1932.

Housing Conditions of District.

Halifax is an old industrial town, incorporated in 1848. There are nearly 30,000 houses within the Borough of which at least 50 per cent. are of the back-to-back type. The average age of these will be at least 50 years. Whilst there is not a considerable amount of overcrowding of individual houses there is a great amount of overcrowding of houses upon space. A large number of houses have no forecourts or yards of any description and sanitary conveniences are inadequate in number and unsuitable in situation. Light and ventilation are very inadequate and in most cases proper facilities for washing and food storage are entirely absent. Many houses have damp walls and floors due to the absence of damp-proof courses and in part to the fact that they are built into the hillsides. With the ordnance datum level varying between 260 and 1300 feet it will be evident that house building presents difficulties of a particular character. One row of back-to-back houses may be three or four stories high along one side and one or two storeys high along the other.

Many of the houses are 100 years of age and upwards, and are consequently worn out. Bulging walls—in many cases held by tie-rods—are a particular feature of this type of house. There is a real need for the demolition of such houses as soon as possible.

Premises and Occupations which can be controlled by Byelaws or Regulations.

Common Lodging Houses.

The duties in connection with the registration and supervision of these premises are divided between the Watch Committee and the Health Committee. The Chief Constable on behalf of the Watch Committee is responsible for their registration and carrying out the provisions of the Public Health Acts, the Halifax Corporation Act 1900, and any other Act or Acts of Parliament in relation thereto except so far as the same relate to cleanliness, ventilation, infectious disease, and supply of water, these latter coming under the supervision of the Health Department on behalf of the Health Committee.

There are 10 Lodging Houses registered to accommodate 592 lodgers. During the year the Sanitary Inspectors have made 147 inspections of these.

Sanitary improvements have been carried out at six of the Lodging Houses.

Houses Let in Lodgings.

There are 89 houses let in lodgings, comprising 222 furnished rooms and 5 let unfurnished. The number of inspections made was 171 and sanitary improvements have been effected in 26 cases.

The satisfactory supervision of these premises is very difficult owing to the fact that we possess no powers requiring persons to make application for registration of their premises before using them as houses let in lodgings.

Tents, Vans, Sheds, etc.

We have very few of these dwellings within the Borough, and only 11 inspections of same have been made during the year.

Two have been closed as unfit for human habitation.

Theatres, Music Hall, Cinemas, and other places of Public Amusement.

In connection with applications for stage play licences or the renewal of same, 94 inspections have been made and the sanitary condition of four premises has been improved.

Rats and Mice (Destruction) Act, 1919.

The investigation of complaints under this heading is primarily carried out by the Shop's Inspector. Sanitary Inspectors have made 25 inspections. Remedial measures adopted include the repair or reconstruction of defective drains, abolition of dry and wet ash pits, and general rat-proofing of premises.

Inspection and Supervision of Food.

Milk Supply.

Milk and Dairies (Consolidation) Act, 1915.

Milk and Dairies (Amendment) Act, 1922

Milk and Dairies Order, 1926.

As previously stated, duties in connection with the above are divided between the Veterinary Inspector and the Chief Sanitary Inspector.

The following information refers to retailers under the supervision of the Chief Sanitary Inspector :—

Registered Retail Purveyors (within the Borough) ...	53
Registered Retail Purveyors (outside the Borough) ...	78
Registered Retail Purveyors (in Sealed Bottles only) ...	227
Registered Dairy Premises	41

A total of 99 visits have been made to the dairy premises referred to, which include three new dairies.

Sanitary improvements have been effected at four dairies.

Under Section 2 (1) of the Milk and Dairies (Amendment) Act 1922, two retailers of milk were invited to appear before the Health Committee to show cause (a) why his name should not be removed from the register, and (b) why he should not be refused registration.

Reasons for objection were as follows :—

Case (a) Milk of consistently high bacterial count.

Case (b) Lack of proper facilities for cleansing milk utensils with boiling water or steam.

In the first case, which was one where the retailer had premises outside the Borough, it transpired that there were no proper facilities provided for the cleansing of milk utensils by boiling water or steam. As a result of the provision of these facilities, the bacterial count dropped from over a million bacteria per c.c. to less than 10,000.

In the second case also, the retailer concerned had premises outside the Borough, and following his appearance before the Health Committee, he provided the necessary facilities for cleansing his milk utensils with boiling water or steam.

There is no doubt but that in both these cases the fact of having to appear before the Health Committee brought home to the persons concerned their responsibilities as retail purveyors of milk.

Bacteriological Examination of Milk.

During the year 120 samples of ordinary "loose" milk were obtained. 26 of these samples were of milk produced within the Borough and 94 of milk produced outside.

As will be seen from the following Tables, there is a progressive increase in the cleanliness of the milk retailed within the Borough. Respecting general bacteria count 61 = 50.8% of samples taken complied with the standard laid down for Certified Milk, whilst 100 = 83.3% of samples taken complied with the standard laid down for Grade A milk. Respecting coliform bacillus content, 45 = 37.5% of samples taken complied with the standard laid down for Certified Milk, and 74 = 61.6% of samples taken complied with the standard laid down for Grade A milk.

In addition to the above, 18 samples of Grade A (T.T.) milk have been bacteriologically examined. Seven of these were found not to comply with the standard laid down respecting both general bacteria count and b. coli content.

We also took 11 samples of Pasteurised Milk, five of which were unsatisfactory respecting b. coli content and three of them had also an excessive bacteria count.

Three samples of sterilised milk were examined for bacteria and gave a nil return.

Table 1. General Bacteria Count.

Milk produced in Borough		Milk produced outside Borough			TOTAL		
Not more than 30,000 per c.c.	Not more than 200,000 per c.c.	Over 200,000 per c.c.	Not more than 30,000 per c.c.	Not more than 200,000 per c.c.	Over 200,000 per c.c.	Not more than 200,000 per c.c.	Over 200,000 per c.c.
12 = 46·2%	21 = 80·8%	5 = 19·2%	49 = 52·1%	79 = 84·0%	15 = 16·0%	61 = 50·8%	20 = 16·6%

Table 2. Coliform Bacillus Content.

Milk produced in Borough		Milk produced outside Borough.			TOTAL		
Absent in $\frac{1}{10}$ th c.c.	Absent in $\frac{1}{10}$ th c.c.	Absent in $\frac{1}{100}$ th c.c.	Present in $\frac{1}{100}$ th c.c.	Absent in $\frac{1}{1000}$ th c.c.	Present in $\frac{1}{1000}$ th c.c.	Absent in $\frac{1}{10000}$ th c.c.	Present in $\frac{1}{10000}$ th c.c.
9 = 34·6%	16 = 61·5%	21 = 80·8%	5 = 19·2%	36 = 38·3%	58 = 61·7%	78 = 83%	16 = 17%
						45 = 37·5%	74 = 61·6%
						99 = 82·5%	21 = 17·5%

Food and Drugs (Adulteration) Act, 1928.

A total of 321 samples of Food and Drugs have been taken during the year and submitted to the Public Analyst for chemical analysis.

These included 188 samples of milk and 133 samples of other foods and drugs.

Samples not genuine according to the Sale of Milk Regulations 1901, numbered nine, although one of these was an "Appeal to Cow" sample. Excluding this sample the percentage of adulterated milk samples is 4.25. There were also four samples of other foods and drugs which were not genuine giving a percentage of 3.00, making the total percentage of adulterated samples 3.74.

TABLE 1.

Nature of Sample	Number of Samples taken			Number not Genuine		
	Formal	Informal	Total	Formal	Informal	Total
Milk	172	16	188*	8	—	8
Butter	—	5	5	—	—	—
Cowslip Wine ...	—	1	1	—	—	—
Cream	1	9	10	1	—	1
Dripping	—	7	7	—	—	—
Fruits (Dried) ...	—	8	8	—	—	—
,, (Tinned) ...	—	3	3	—	—	—
Gin	2	11	13	—	2	2
Jams (Various) ...	—	7	7	—	—	—
Lemonade	—	1	1	—	—	—
Lemon Crush ...	—	1	1	—	—	—
Lemon, Essence of ...	—	1	1	—	—	—
Margarine	—	7	7	—	—	—
Meat Potted	—	16	16	—	—	—
Mustard	—	1	1	—	—	—
Rum	—	5	5	—	—	—
Sausages	8	18	26	—	—	—
Sherry	—	1	1	—	—	—
Sponge Buns ...	—	6	6	—	—	—
Sugar	2	1	3	—	1	1
Tea	—	1	1	—	—	—
Vinegar	—	10	10	—	—	—
Total	185	136	321	9	3	12

*Included in the 188 samples of milk are 5 "Appeal to Cow" samples, one of which was not up to the standard.

TABLE 2.

Administrative Action taken in respect of Samples reported by the Public Analyst to be not genuine, or otherwise irregular.

No. of Sample	Nature of Sample and Result of Analysis, etc.	Administrative Action Taken
30 }	Milk.—7% deficient in Fat	
41 }	Milk.—7% deficient in Fat	
43 }	Milk.—30% deficient in Fat	No. 30 was a sample from a retailer followed two days later by a sample (41) taken in course of delivery from producer-wholesaler to the retailer. One day later "appeal to cow" samples were obtained from the farm (42 and 43). Only two cows and sample was obtained from each. One gave genuine milk and the other (43) milk deficient in fat to extent of 30%. Producer and vendor appeared before Health Committee and requested to ensure that a better quality milk be supplied.
104	Milk.—3% added water	Sample from producer retailer, followed two days later by "appeal to cow" sample which contained 8·87% of non-fatty solids. Vendor was called before the Health Committee and cautioned.
125 }	Sausage.—No declaration of presence of preservative	Six formal samples obtained from retailers. Matter reported to the Health Committee and Town Clerk instructed to send a warning letter to each.
127 }		
128 }		
129 }		
131 }		
132 }		
160 }	Milk.—1·5% added water	Sample from retailer followed ten days later by another sample (172). The following day two samples were obtained in course of delivery from producer to retailer. These were good milks containing 8·69% and 8·73% of non-fatty solids. Retailer was called before the Health Committee and cautioned.
172	Milk.—2·2% added water	
201	Milk.—3% deficient in Fat	Sample from retailer followed two days later by two further samples (morning's and evening's milk). These contained 3·80% and 3·90% milk fat respectively. No further action.
217 }	Milk.—1% added water	Sample from retailer followed two days later by sample (230) in course of delivery from producer to retailer. Three days later two "appeal to cow" samples were obtained and found genuine. Producer prosecuted in the Halifax Borough Police Court, 27th October, 1932, and fined £5 and £1 10s. od. costs.
230	Milk.—12% deficient in Fat	
259	Gin.—36·7° Under Proof (2% added water)	This was an informal sample followed up five days later by a formal sample which was genuine. (29·0° U.P.)
260	Gin.—41·4° Under Proof (10% added water)	This was an informal sample followed up five days later by a formal sample which was genuine. (30·3° U.P.)
278	Cream.—Found to be Artificial Cream	On analysis this sample was found to be an artificial or reconstituted cream prepared by emulsifying butter and milk. Vendor was prosecuted in the Halifax Borough Police Court, 8th December, 1932, and fined £1 and £1 10s. od. costs.
300	Sugar.—Contained 1·85% of Ground Rice	This was an informal sample obtained from a private purchaser and was followed up immediately by obtaining two formal samples from the local supplier. Both these samples were reported as genuine.

TABLE 3.
Monthly Average Composition of Milk Samples.

Month	No. of Samples	Analytical Data	
		Milk Fat per cent	Non-fatty Solids per cent.
January	21	3.78	9.06
February	31	3.52	8.99
March	11	3.77	9.17
April	1	3.20	8.69
May	21	3.80	9.07
June	8	3.65	9.03
July	42	3.86	8.98
August	7	3.97	8.87
September	28	3.65	9.09
October	6	4.47	9.23
November	10	4.14	9.14
December	2	4.00	8.89
Average for the year 1932 ...	3.78	9.04	
" " 1931 ...	3.69	9.08	
" " 1930 ...	3.69	9.03	
" " 1929 ...	3.63	8.96	
" " 1928 ...	3.81	9.03	
Requirements of the Sale of Milk Regulations, 1901	3.00	8.50	

TABLE 4.

**Articles of Food examined for Preservative in accordance with
the Public Health (Preservatives, etc., in Food) Regulations,
1925.**

Food	No. of Samples examin'd	Nature of Preservative	Amount		Remarks
			Allowed	Found	
Milk	188	Nil	Nil	Nil	
Butter	5	Nil	Nil	Nil	
Cream	10	Nil	Nil	Nil	
Cowslip Wine ...	1	Sulphur dioxide	450 parts ℔ million	250 ppm.	
Fruits Dried ...	7	Do.	2000 parts ℔ million	1-184 pts. 1-806 .. 1-812 .. 1-864 ..	
			750 parts ℔ million	1-11 .. 1-80 .. 1-346 ..	
Lemon Peel ...	1	Do.	100 parts ℔ million	17 ppm.	
Jam	7	Do.	40 ppm.	Nil	4 samples contained harmless colouring matter
Lemonade ...	1	Sulphur dioxide or Benzoic Acid	70 and and 120 ppm.	26 parts Benzoic Acid	
Margarine ...	7	Nil	Nil	Nil	
Meat Potted ...	16	Nil	Nil	Nil	
Sausages ...	26	Sulphur dioxide	450 ppm.	From Nil to 318 ppm.	In the case of six formal samples there was no declaration of the presence of preservatives by vendor. Reported to Health Committee and warning letters sent by Town Clerk.
Sherry	1	Sulphur dioxide	450 ppm.	40	
Sponge Buns ...	6	Nil	Nil	Nil	
Sugar	3	Sulphur dioxide	70 ppm.	Nil	

Manufacture and/or Sale of Ice Cream.

Registered Premises	...	...	132
Number of Inspections	...	...	221
New Premises provided	...	...	14

The same requirements as obtain in the case of a retailer of milk re dairy premises are insisted upon respecting ice cream premises.

In the case of two premises provision was made for the sterilisation of all utensils whilst in one case general sanitary conditions were improved.

Ninety-eight samples of ice cream were submitted to bacteriological examination, particulars of which are given in the following Tables :—

TABLE 1.—General Bacteria Count.

Not more than 30,000 per c.c.	Not more than 100,000 per c.c.	Not more than 200,000 per c.c.	Over 200,000 per c.c.
42 = 42·9%	61 = 62·2%	70 = 71·4%	28 = 28·6%

TABLE 2.—Coliform Bacillus Content.

Absent in 1/10th c.c.	Absent in 1/100th c.c.	Absent in 1/1000th c.c.	Present in 1/1000th c.c.
39 = 39·8%	55 = 56·1%	66 = 67·3%	32 = 32·7%

We have adopted a local bacteriological standard which we are endeavouring to apply ,namely, that the number of bacteria do not exceed 100,000 per c.c., and that there be no bacillus coli present in less than 1/10th c.c.

It will be seen in Table 1 that 62.2 per cent. of the samples taken complied with the general bacteria count mentioned, whilst Table 2 shows that 56.1 per cent. complied with the bacillus coli standard.

Fried Fish Shops.

Number on Register	...	...	176
Number of Inspections	...	...	254
Sanitary condition improved	...	...	6
New Premises provided	...	...	3

On the whole, these premises have been kept in satisfactory condition during the year.

Fertilisers and Feeding Stuffs Act, 1926.

There were 18 samples taken under the above Act during the year, 12 of which were Feeding Stuffs and 6 of Fertilisers. Sixteen of the samples were informal, whilst two were formal.

The Public Analyst reported five samples as being unsatisfactory, details of which are as follows :—

Sample No. 89—Special Compound Fertiliser. An informal sample reported by the Public Analyst as not satisfactory in that the nitrogenous content was below that declared, to a greater extent than allowed by limits of variation.

A warning letter was sent to the vendors by the Chief Sanitary Inspector.

Sample No. 96—White Fish Meal. An informal sample reported by the Public Analyst as not satisfactory in that the amount of oil was greater than amount declared and outside limits of variation.

A warning letter was sent to the vendors by the Chief Sanitary Inspector.

Sample No. 97—Feeding Meat and Bone Meal. An informal sample reported by the Public Analyst as not satisfactory in that the amount of Phosphoric Acid was greater than amount declared and outside limits of variation.

A warning letter was sent to the vendors by the Chief Sanitary Inspector.

Sample No. 98—White Fish Meal. A formal sample taken in following up No. 96, and reported by the Public Analyst as not satisfactory in that the amount of Phosphoric Acid was greater than amount declared and outside limits of variation.

A warning letter was sent to the vendors by the Chief Sanitary Inspector stating that if there were any further infringements of the Act, the matter would be reported to the Health Committee.

Sample No. 99—Feeding Meat and Bone Meal. A formal sample taken in following up No. 97 and reported by the Public Analyst as not satisfactory in that the amount of Phosphoric Acid was greater than amount declared and outside limits of variation.

A warning letter was sent to the vendors by the Chief Sanitary Inspector stating that if there were any further infringements of the Act, the matter would be reported to the Health Committee.

Each of the samples mentioned were obtained from the same vendors and following the taking of other samples during 1933 which were also unsatisfactory, a report upon the whole of the samples taken was presented to the Health Committee in February, when the Town Clerk was instructed to write calling upon the vendors to comply with the Act. At the March meeting of the Health Committee representatives of the vendors appeared and gave an undertaking that they would endeavour to comply with the requirements of the Act. Further samples taken have been found to be satisfactory.

Rag Flock Acts, 1911 and 1928.

Four samples of rag flock were obtained and submitted to the Public Analyst for examination. Three of these were taken informally and one was a formal sample. Amounts of Soluble Chlorine found were as follows :—

Sample No. 1.	270	parts per 100,000
”	4	” ” ”
”	9	” ” ”
”	215	” ” ”

Sample No. 1 was an informal one followed up by a formal sample (4).

Vendor was prosecuted in the Halifax Borough Police Court, 8th December, 1932, and fined £2.

SECTION 15.

—o—

Analytical Work.

BOROUGH ANALYST'S COMMENTARY.

I am indebted to Mr. H. T. Lea, M.Sc., F.I.C., the Borough Analyst, for the particulars given under this heading :

The examination of samples taken under the Sale of Food and Drugs Act, shows, once more, that Halifax compares very favourably with other towns in the quality of its food supplies.

Of the 321 samples examined under this Act, only 12 or 3.74% were classed as not genuine. The recorded percentages of adulterated samples in the whole country are as follows :—

1929	...	...	...	5.4%
1930	...	...	...	4.8%
1931	...	...	...	4.6%

Figures for 1932 not yet available.

Milk, naturally, comprises the majority of samples examined, and of the 188 samples tested, 8 or 4.25% were found to be below the standard required by the Sale of Milk Regulations. Percentages of samples, taken throughout the country, found to be adulterated, are as follows :—

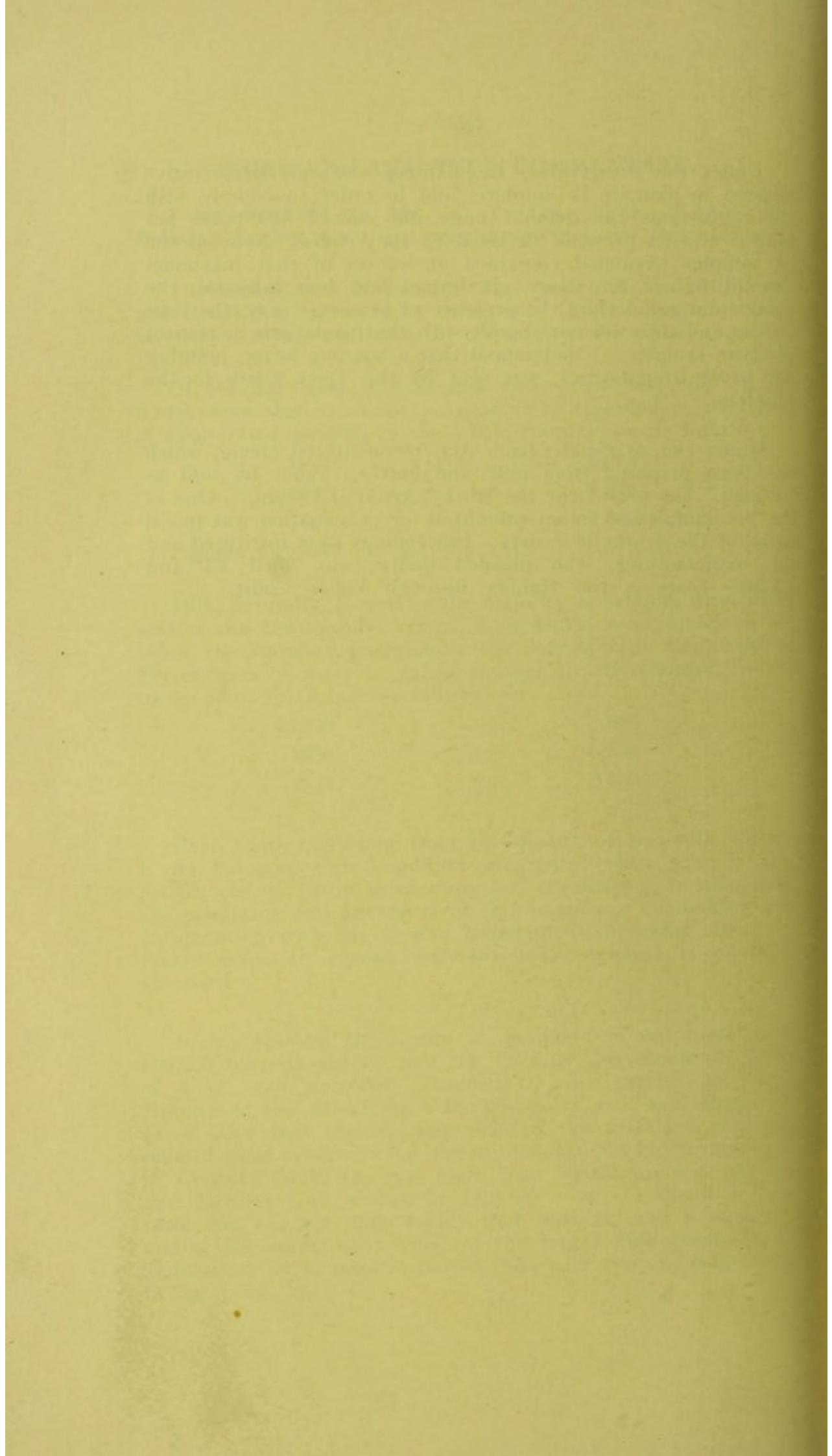
1929	...	...	...	7.8%
1930	...	...	...	6.6%
1931	...	...	...	6.4%

Even more important than the quality of the milk supply is its bacteriological condition or purity, when sold to the public, and it is very satisfactory and encouraging to note that the producers and purveyors of this important commodity are co-operating with the Health Department in taking the necessary steps to ensure that the milk supplied is of high standard.

In my opinion, the Grade 'A' standard of not more than 200,000 bacteria per cc. and the Bacillus Coli absent in 1/100 of a cc. can be easily attained by any careful producer. Results of the examination of 120 milks as "sold from the can" show that the majority reached this standard, and the milk of some producers has already reached the higher standard of Certified Milk, i.e., not more than 30,000 bacteria per cc. and Bacillus Coli absent in 1/10 of a cc. I doubt if any town has a purer milk supply than Halifax, and it seems a matter for regret that some of the larger milk contracts in Halifax are let to non-ratepayers, who have few or no interests in our town.

Under the Preservative Regulations, the only preservative allowed in sausage is Sulphite, and in order to comply with the regulations the amount must not exceed 450 parts per million and its presence declared by the vendor. None of the 26 samples examined contained an excess of that maximum amount but in ten cases, six formal and four informal, the vendor did not declare the presence of preservative at the time of sale and thus did not comply with the regulations in respect of those samples. I understand that a warning letter, pointing out these irregularities, was sent by the Town Clerk to the retailers.

Under the Artificial Cream Act, reconstituted cream, which has been prepared from milk and butter, cannot be sold as "cream," but must bear the label "Artificial Cream." One of the ten samples of cream submitted for examination was found to be of the synthetic variety. Proceedings were instituted and the manufacturer, who pleaded guilty, was fined £1 and £1/10/- costs in the Halifax Borough Police Court.



SECTION 16.

— — 0 — —

Miscellaneous.

WATER SUPPLY.

I am indebted to the Waterworks Engineer, Mr. E. P. Brook, for the following report :—

The water supply is obtained from five valleys, viz.: The Hebble, the Luddenden, the Widdop, the Greave, and the Walshaw Dene.

The source of supply is chiefly moorland and high mountain pasture. The water is conveyed in by covered conduits and iron pipes, and is delivered at high pressure with a constant supply. The supply has been satisfactory both in quality and quantity.

The new Filtration Plant at Thrum Hall has been in operation since March 19, 1931.

The crude water, as collected from the gathering grounds, is an upland surface water with a strong acidic action and often highly coloured with peaty organic matter. During certain seasons of the year it is no uncommon thing to find as many as 1,000 organisms per cc. growing on gelatine, after 48 hours incubation at 20° C. and the Bacillus Coli present in 1 cc.

The water, after the addition of lime and Alumina, is passed through the high pressure sand filters and then further treated with lime. The resultant filtrate is supplied direct to the consumer and is a water, neutral in reaction, of high organic purity and low hardness and colour, and in every way suitable for all domestic and industrial uses.

A typical analysis of the filtered water is as follows :—

Chemical Analysis.

Total Solids	...	...	...	7.73	Pts. per 100,000
Organic Solids	...	...	...	1.58	" "
Chlorine	...	...	...	1.3	" "
Free Ammonia	...	...	...	0.0010	" "
Albuminoid Ammonia	...	...	...	0.0026	" "
Nitric Nitrogen	...	...	...	0.028	" "
Nitrous Nitrogen	...	...	...	Nil	" "
Oxygen absorbed in 4 hrs. at 80° F.	...	0.0092	" "		
Temporary Hardness	...	...	0.8	Degrees.	
Permanent Hardness	...	...	3.2	"	
pH Value	...	...	7.6	"	
Colour Lovibond Units.					
2ft. Strata.	Green	...	...	0.6	Degrees.
	Yellow	...	...	0.2	"

Bacteriological Examination.

Total Micro-organisms growing on Gelatine at 20° C.	2 days	...	...	Nil
	3 days	...	...	2
Total Micro-organisms growing on Agar at 37° C.	2 days	...	...	1
	3 days	...	...	1
B. Coli	Absent in	...	...	100 cc.

I am indebted to Mr. D. T. Lloyd Jones, the Borough Engineer, for the particulars under these headings :—

Rivers and Streams.

Apart from the districts of Northowram, where the sewerage falls to Brighouse, part of Warley which drains to Luddenden, and certain smaller areas which drain into the sewers of the Sowerby and Southowram Authorities, the whole of the sewerage of the Borough gravitates to the Sewage Works at Salterhebble, where the effluent is treated. No known pollution takes place. Surface water, in isolated cases, is taken direct to water courses.

Storm water overflows to main sewers are regulated to the requirements of the Ministry of Health and periodically inspected and cleansed.

Sewerage.

The sewerage and drainage of the Borough is generally in a satisfactory condition, and adequate to deal with the maximum normal flow.

Extensions are rendered necessary from time to time in the outer districts as development takes place on private building estates, and the Conversion Scheme also calls for minor extensions or replacements of old or worn out sewers.

It is anticipated that Sewage Disposal Works will be adequate to deal with the whole of the effluent of the Borough for some time to come, but in the light of recent research, the most modern methods in the various stages of treatment are being adopted.

The second section of the Bradshaw Sewerage Scheme is now well advanced.

Disposal of Refuse and Street Cleansing.

I am indebted to the Director of Public Cleansing, Mr. A. J. Burrell, for the following report :—

Street Cleansing.

I give below particulars of mileage and frequency of cleansing of the roads and streets of the Borough :

Approximate mileage cleansed daily ...	...	...	8
" " " three times weekly ...	...	15	
" " " twice weekly ...	...	20	
" " " once weekly ...	...	52	
" " " less than once weekly ...	...	125	

212,115,000 sq. yards of streets cleansed.

The number of gullies cleansed during the year was 245,547.

Litter.

Special efforts are being made throughout the country to educate the public and to preserve a tidy appearance of the streets. In Halifax, as in many other towns, receptacles for litter have been provided in large numbers at convenient points, and it is hoped that these will be used whenever necessary by all who consider the interests of the community in general.

Snow Removal.

The cleansing department is responsible for the removal of snow and sanding and salting of roads, and last winter provided the biggest snowfall we have experienced for many years. It was necessary for the Department to work night and day and an expenditure of over £5,000 was incurred in dealing with the situation. Work was provided for many days for hundreds of unemployed men.

Refuse Collection.

The type of vehicle in use to-day is far ahead of the old type of open vehicle and the emission of dust whilst the collection of refuse in progress is greatly reduced. Motor vehicles of attractive design are superseding the horse drawn vehicle, and although an absolutely dustless loading vehicle is not yet available for general conditions, the time is not far distant when dustless loading of refuse will be an accomplished fact.

The total weight of refuse collected during the year was 23,552 tons.

Refuse Disposal.

The disposal of refuse to-day is a scientific business greatly different from the old method in vogue. The modern disposal plant installed at Charlestown, during the year under review

dealt with 17,244 tons of refuse, and large quantities of Tins, Iron, Glass, Paper, etc., were extracted and sold for remanufacture, etc. Unusable material was passed to an incinerator and destroyed.

Apart from house refuse the Department deals with Fish Offal, Blood, and Condemned Meat from Abattoirs, Fats, slaughter house Offals, Dogs and Cats, etc., and these are used in the manufacture of Fish Meal, Blood Meal, Fertiliser, etc.

"Controlled Tipping" is being carried out at Birks Hall, Siddal, and other tips, and in addition to being entirely free from nuisance, the tips present quite an attractive appearance.

Shop Inspection, etc.

I am indebted to Mr. Fearnley, the Inspector under the Shops Acts 1912 to 1928, the Children's Byelaws, the Fabrics (Misdescription) Act, the Rats and Mice (Destruction) Act 1919, and the Hairdressers and Barbers Shops (Sunday Closing) Act 1930, for the particulars given below :—

Half-holiday Closing Visits	...	...	...	994
Assistants' Half-holiday Visits	...	...	...	574
Registration and Administrative Visits...	...	...	...	678
Special	„	...	...	328
Early Closing	„	...	...	636
Children's Bye-Law	„	...	...	708
Fabrics (Misdescription) Act	„	...	...	147
Hairdressers (Sunday Closing)	„	...	...	275
Rats and Mice (Destruction) Act	„	...	...	631
Shops without Assistants' Half-holiday Notice (Sec. 1)				47
Do Young Persons	„	(Sec. 2)		18
Do Mixed Business	„	(Sec. 10)		125
Do Half-holiday Closing	„	(Sec. 4)		77
Do Seats for Female Assistants		(Sec. 3)		1
Contravention of Mealtimes		(Sec. 1, Sub. 5)		8
Do Assistants' Half-holiday (Sec. 1, Sub. 1)				62
Do Half-holiday Closing		(Sec. 4)		435
Do Early Closing		(Closing Orders and 1928 Act)		298
Do Young Persons' Hours		(Sec. 2)		3
Do Children's Bye-Laws ...	...	...		18
Do Hairdressers' Sunday Closing	...	...		0
Warning Notices sent	...	...	...	6
Prosecutions	...	...	...	1

Prosecution.

For selling after hours on Saturday, 10th December, 1932, a local butcher was fined £1 at the Borough Court.

Rats and Mice (Destruction) Act, 1919.

Number of premises that are or have been rat-infested during the year	128
Premises temporarily clear after Rat Week	38
Premises where numbers were reduced... ...	42
Premises at present rat-infested	90
Visits paid for National Rat Week purposes	191
Visits paid to rat-infested premises during the year ...	631
Number of rat tails brought to the Health Dept. during the year (excluding Rat Week)	1704
Number of rat tails brought to the Health Dept. during Rat Week	521
Number of rats killed in addition	349

The number of rat tails brought to the Health Department is a record, both for the year and the National Rat Week, there being 722 more tails during the year and 97 more during Rat Week. The large increase is mainly due to the efforts made to clear farms, refuse tips, piggeries and poultry runs. Local rat catchers (both amateur and professional) with their ferrets and dogs, have made the increased slaughter possible.

The record of the destruction of rats by means of Poison and Virus, is more difficult to estimate as only a small percentage of the results are returned as evidence in rat tails. But premises are cleared of rats by their use, and that is the object of all the different methods—to clear out the rodents.

Co-operation with Medical Practitioners.

Number of visits to houses by Doctors of the Health Department at the request of Private Practitioners	Number of Consultations with Private Practitioners exclusive of telephone consultations	Telephone Consultations	Total
28	23	127	178

(This Table does not include visits and consultations by the Tuberculosis Officer. These appear in the Tuberculosis section of the Report).

Medical Examination of Corporation Employees.

Under Road Traffic Act	Other Examinations	Total	Examined by
15	15	30	Dr. Roe.
—	7	7	Dr. Liddle.
—	5	5	Dr. Smith.

LEGISLATION IN FORCE.

An Act for paving lighting cleansing watching and improving the Township of Halifax and for supplying the same with water. 1823.

The Halifax Improvement Act 1853.

The Halifax Park and Improvement Act 1858.

The Halifax Improvement Act 1862.

The Halifax Extension and Improvement Act 1865.

The Halifax Corporation Waterworks and Improvement Act 1868.

The Halifax Water and Gas Extension Act 1870.

The Halifax Water and Gas Extension Act 1876.

The Halifax Corporation Act 1882.

The Halifax Corporation Waterworks Act 1888.

The Halifax Corporation Tramways Act 1897.

The Halifax Corporation Act 1898.

The Halifax Corporation Act 1900.

The Halifax Corporation Act 1902.

The Halifax Corporation Act 1905.

The Halifax Corporation Act 1911.

The Halifax Corporation Act 1915.

The Halifax Corporation Act 1920.

The Halifax Corporation Act 1922.

The Halifax Corporation Act 1924.

The Halifax Corporation Act 1926.

The Halifax Corporation Act 1929.

CONFIRMATION ACTS.

SHORT TITLE.	ORDER THEREBY CONFIRMED.
The Public Health Supplemental Act 1851 (No. 3).	The Halifax Order 1851.
The Public Health Supplemental Act 1856.	Section 2 relating to Hlfx.
The Local Government Board's Provisional Orders Confirmation (Halifax etc.) Act 1881.	The Halifax Order 1881.
The Local Government Board's Provisional Orders Confirmation (No. 4) Act 1886.	The Halifax Order 1886.
The Local Government Board's Provisional Orders Confirmation (No. 4) Act 1887.	The Halifax Order 1887.
The Local Government Board's Provisional Orders Confirmation (No. 11) Act 1889.	The Halifax Order 1889.
The Local Government Board's Provisional Orders Confirmation (No. 3) Act 1890.	The Halifax Order 1890.
The Local Government Board's Provisional Orders Confirmation (No. 4) Act 1892.	The Halifax (No. 2) Order 1892.
The Local Government Board's Provisional Orders Confirmation (No. 9) Act 1892.	The Halifax (No. 3) Order 1892.
The Local Government Board's Provisional Orders Confirmation (No. 10) Act 1892.	The Borough of Halifax Order 1892.
The Commons Regulation (Halifax) Provisional Order Confirmation Act 1895.	Provisional Order dated 30th April 1895.
The Local Government Board's Provisional Orders Confirmation (No. 4) Act 1896.	The Halifax Order 1896.
The Local Government Board's Provisional Orders Confirmation (No. 7) Act 1899.	The Borough of Halifax Order 1899.
The Local Government Board's Provisional Orders Confirmation (No. 5) Act 1901.	The Halifax and Sowerby Bridge Order 1901.
The Local Government Board's Provisional Orders Confirmation (No. 7) Act 1912.	The Halifax (Extension) Order 1912.
The Local Government Board's Provisional Orders Confirmation (No. 1) Act 1918.	The Halifax Order 1918.
Ministry of Health Provisional Orders Confirmation (No. 5) Act 1924.	The Halifax Order 1924.
Ministry of Health Provisional Orders Confirmation (No. 3) Act 1928.	The Halifax Order 1928.
Ministry of Health (Halifax and West Riding Provisional Orders) Confirmation Act 1928.	The Halifax (Extension) Order 1928.
Ministry of Health Provisional Orders Confirmation (No. 11) Act 1929.	The Halifax Order 1929.

ADOPTIVE ACTS.

The undermentioned Acts have been adopted in the Borough :—

- The Infectious Disease (Prevention) Act 1890.
- The Public Health Acts Amendment Act 1890.
- The Public Libraries Acts 1892 to 1919.

BYELAWS, ETC.

- Nuisances.
- Common Lodging Houses.
- Houses Let in Lodgings.
- Smoke Abatement.
- New Streets and Buildings.
- Offensive Trades.

General Summary of Meteorological Observations taken at the Public Library, Belle Vue, from January 1st, 1932, to December 31st, 1932.

By E. GREEN, LIBRARIAN.

LATITUDE OF STATION = 53° 43' N.

LONGITUDE = 1° 52' W.

HEIGHT ABOVE SEA LEVEL = 625 FEET.

Month	Pressure of Atmosphere in Month		Temperature of Air in Month.						Mean Temperature.		Vapour			Mean Reading of Thermometer.		Wind.								REMARKS						
			Mean			(Adapted.)			In a cubic foot of Air.		Mean degree of Saturation.		Mean Weight of cubic foot of Air.		Relative proportion of															
	Mean at 32° V. and Sea Level.	Range.	Highest.	Lowest.	Ranges.	Of all Highest.	Of all Lowest.	Air Range.	Elastic Force.	Mean.	Short of Saturation.	Mean in Rays of Sun.	Minimum on Glass.	Estimated Strength.	N.	S.E.	E.	S.	S.W.	W.	N.W.	Calms.	No. of Days in 160.	Amount in mm.						
January	... 30.120	1.846	55.1	26.2	28.9	46.8	36.5	10.3	41.3	36.4	-215	2.5	0.7	78	534.5	60.4	25.3	3.5	0	0	0	1	2	25	7	2	9	6.8	12	3.55
February	... 30.510	0.678	51.0	22.7	28.3	43.1	32.0	11.1	38.3	34.4	-199	2.3	0.5	84	538.9	61.2	22.8	2.0	0	19	3	0	0	0	0	8	16	8.5	6	0.39
March	... 30.026	1.072	49.9	20.0	29.9	44.2	31.3	12.9	38.7	34.4	-199	2.3	0.5	84	538.9	73.0	21.7	2.0	11	7	1	2	0	3	3	7	9	6.5	13	1.88
April	... 29.738	1.318	57.8	26.9	30.9	46.4	33.5	12.9	41.5	36.4	-215	2.5	0.7	78	534.5	83.5	25.1	3.5	0	6	0	5	0	10	5	17	4	7.5	22	3.68
May	... 29.865	0.540	63.4	29.3	34.1	53.1	30.9	13.2	52.5	41.7	-263	3.0	0.8	79	529.0	88.9	32.2	3.0	9	13	0	0	1	8	0	3	10	8.0	21	3.84
June	... 30.105	0.644	71.1	38.9	32.9	62.8	45.1	17.7	55.2	50.2	-365	4.1	0.9	81	520.1	105.7	36.5	2.0	2	20	1	0	2	4	3	6	9	6.7	7	0.36
July	... 29.824	0.840	80.1	46.9	33.2	64.3	51.0	12.3	58.5	51.4	-380	4.3	1.3	76	517.0	105.2	49.9	3.0	2	8	0	0	2	11	13	8	2	7.9	19	3.20
August	... 30.071	0.700	81.2	41.0	40.2	65.9	52.4	13.5	60.2	53.5	-410	4.6	1.4	77	514.8	104.9	50.3	3.0	0	15	2	0	2	2	7	5	12	7.5	8	1.47
September	... 29.801	1.054	72.1	32.0	40.1	59.3	46.3	13.0	53.8	49.1	-349	3.9	1.0	81	521.1	95.4	41.9	3.0	6	4	0	2	1	14	2	11	7	7.0	13	2.80
October	... 29.666	1.240	61.3	30.3	31.0	51.0	39.5	11.5	45.7	41.7	-265	3.1	0.5	86	531.0	80.0	36.6	3.5	9	4	0	1	0	7	11	13	3	6.9	21	5.67
November	... 30.045	1.060	56.6	28.8	27.8	46.8	38.5	8.3	43.1	40.8	-255	2.9	0.3	92	534.3	56.0	35.4	2.5	2	7	6	4	0	10	5	8	5	8.3	21	2.37
December	... 29.998	1.126	53.7	32.8	21.4	41.9	38.2	3.7	41.3	37.5	-225	2.6	0.5	85	535.5	55.1	32.6	3.0	2	7	4	1	7	11	7	3	3	7.5	14	1.52
Annual Means	29.233	1.100	62.8	31.2	31.5	52.1	40.3	11.7	47.5	46.8	0.278	3.1	0.7	81	529.1	80.7	34.3	3.0	3	9	1	1	1	8	5	7	7	6.6		

The Mean Monthly Readings of the Earth Thermometer, four feet below the surface, were as follows:—

January, 44°

February, 43°

March, 42°

April, 43°

May, 45°

June, 50°

July, 54°

August, 56°

September, 55°

October, 52°

November, 48°

December, 45°

Highest Readings = 56° on Aug. 12th to Sept. 14th.

Lowest Readings = 41° on March 2nd to 24th.

Rain fell on 177 days, and measured 30.73 inches.

The observations have been reduced to mean values by Glaisher's Barometrical and Diurnal Range Tables, and the Hygrometrical results have been deduced from the seventh edition of Hygrometrical Tables, after corrections for Index errors of the Instruments employed.

What is the best way to approach the study of literature?

There are many ways to approach the study of literature.

One way is to focus on the individual author's style.

Another way is to focus on the historical context of the work.

Still another way is to focus on the themes and motifs of the work.

Each of these approaches has its own merits and can lead to a deeper understanding of the work.

It is important to remember that there is no one "best" way to approach the study of literature.

The most important thing is to find a way that works for you and helps you to appreciate the beauty and complexity of literature.

So, what is the best way to approach the study of literature?

It depends on your personal interests and goals.

But, if you are looking for a general approach, then I would say that the best way is to read widely and deeply.

Read books from different genres and cultures.

Read books by different authors and from different time periods.

Read books that challenge your assumptions and beliefs.

Read books that inspire you and make you think.

Read books that you enjoy and that you can relate to.

Read books that you can learn from and that can help you grow.

Read books that you can share with others and that can bring people together.

Read books that you can appreciate and that can bring you joy.

Read books that you can learn from and that can help you grow.

Read books that you can share with others and that can bring people together.

Read books that you can appreciate and that can bring you joy.

Read books that you can learn from and that can help you grow.

Read books that you can share with others and that can bring people together.

Read books that you can appreciate and that can bring you joy.

Read books that you can learn from and that can help you grow.

Read books that you can share with others and that can bring people together.

Read books that you can appreciate and that can bring you joy.

Read books that you can learn from and that can help you grow.

Read books that you can share with others and that can bring people together.

Read books that you can appreciate and that can bring you joy.

Read books that you can learn from and that can help you grow.

Read books that you can share with others and that can bring people together.

Read books that you can appreciate and that can bring you joy.

Read books that you can learn from and that can help you grow.

Read books that you can share with others and that can bring people together.

Read books that you can appreciate and that can bring you joy.

INDEX.

Acts, Housing, Public Health, etc.	122	Measles	31
After-Care, Tuberculosis	43	Measurement of Daylight	95
Ambulance Facilities	15	Meat Inspection ...	76
Analytical Work	112	Medical Examination—	
Artificial Sunlight Clinic	50	Corporation Employees	121
Atmospheric Pollution Records	91	Medical Practitioners,	
Bacteriological Examination	17	Co-operation with ...	120
Bakehouses	86	Mental Deficiency	60
Birthrate	10	Merchandise Marks Act...	78
Births Notification of	49	Meteorology Observations	123
Boarding-out of Children	69	Midwifery	48, 51
Borough Fever Hospital	24	Milk Production, etc.	74, 101
Cancer	20	Milk Samples	106
Cerebro Spinal Fever	31	Miscellaneous	115
Children Act, 1908	68	Non-Notifiable Infectious Diseases	31
Clinics	16	Notification of Births	49
Common Lodging Houses	82, 100	Notification of Infectious Diseases	32
Craigie Lea Certified Institution	61	Offensive Trades	78
Dairies	82	Orthopædic Clinic	56
Deathrate	10, 12	Pneumonia	31
Deaths	11	Polioencephalitis, Acute	31
Diphtheria	26, 30	Private Slaughterhouses	76
Disinfection	27	Prosecutions	84
Drainage	80, 81	Public Health Propaganda	72
Dwellinghouses	80, 81	Puerperal Fever and Pyrexia	31
Enteric Fever	27, 29	Rag Flock Acts	110
Farms	73	Rats & Mice Destruction (Act)	120
Factories & Workshops...	80, 82, 85	Refuse Collection	118
Fertiliser and Feeding Stuffs	109	" Disposal	117
Fever Hospital	24	Rivers and Streams	117
Food and Drugs	104	Sampling	80
Food Inspection	74, 80	Sanatorium, Halifax	42
Fried Fish Shops	82, 108	Sanitary	80
General Provisions of Health Services	14	Scarlet Fever	24, 30
Health Committee	2	Sewerage	117
Health Education and Propaganda	72	Shops Inspection, etc.	119
Health Visiting	49	Smallpox	29
Home Helps	53	Hospital	28
Hospital Facilities	15	Smoke Abatement	81, 82, 87
Houses let in Lodgings	82, 100	Smoke Observations	89, 90
Housing	97	Social Conditions	10
Ice-cream	82, 108	St. Luke's Hospital	33
Infant Mortality	51	Staff	3, 4, 54
Infant Welfare Centres	49	Statistics	10
Infectious Diseases	23, 32	Street Cleansing	117, 118
Influenza	31	Summary of Deaths	11
Immunisation	26	Tents, Vans, Sheds, etc...	100
Lectures, Public Health Education	72	Transferred Poor Law Services	67
Legislation in Force	121	Tuberculosis	40, 43
Maternity and Child Welfare	48	Vaccination	64
" Homes, Inspection of	54	Venereal Diseases	46
Maternal Mortality	52, 53	Vital Statistics	10
		Voluntary Workers	54
		Water Supply	116
		Whooping Cough	32