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# County Borough of Ibalifar Ibealth Department.

# Annual Report

ON THE HEALTH OF THE BOROUGH For the Year 1934.

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





County Borough of Ibalifar Ibealth Department.

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# Ibealth Committee

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(as on Dec. 31st, 1934).

#### Mayor . COUNCILLOR MIRIAM LIGHTOWLER, J.P.

COUNCILLOR L. CHAMBERS Chairman. COUNCILLOR A. MUFF, Vice-Chairman.

Ald	. T	. HEY, J.P.	Coun.	Μ.	WILLIAMSON, J.P.
	Α.	W. LONGBOTTOM, J.P.		G.	H. BUTTERS.
,,	Α.	WALTERS, J.P. H. WADDINGTON, J.P. RADCLIFFE. PINDER.		F.	SHARP, J.P.
	J.	H. WADDINGTON, J.P.	,,	Τ.	W. HAŃŠON.
	J.	RADCLIFFE.	.,	Τ.	STOTT.
	H.	PINDER.		Α.	WAIGHT.
		Coun, E.			

### Sub=Committees

Appointed by the Health Committee.

#### Bealth Services Sub-Committee.

health Service		
THE CHAIRMAN. VICE-CHAIRMAN. ALDERMAN LONGBOTTOM.	ALDERMAN	PINDER.
VICE-CHAIRMAN.	"	RADCLIFFE.
ALDERMAN LONGBOTTOM.	COUNCILLOR	BUTTERS.
Councillo	R WAIGHT.	
Fospitals S	ub-Committee.	
THE CHAIRMAN.	COUNCILLOR	HANSON.
VICE-CHAIRMAN.		SHARP.
ALDERMAN HEY.		STOTT.
" WALTERS.		WILLIAMSON.
VICE-CHAIRMAN. Alderman HEY. "WALTERS. "WADDINGTON.		ISLES.
Accounts Su	b-Committee	
THE CHAIRMAN.	COUNCILLOR	WILLIAMSON.
VICE-CHAIRMAN.	"	ISLES.
ALDERMAN PINDER		STOTT.
Councillor	HANSON.	
Joint Recovery		e.
ALDERMAN WALTERS.		
HEY.		CHAMBERS.
COUNCILLOR WAIGHT.	,,	WILLIAMSON.
Mrs. WI	HITAKER.	
maternity and Child	Welfare Com	mittee.
The Health Committee with the MRS. J. STIRK. MRS. E. WHITAKER. MRS. E. E. ROTHERA.	following ac	Iditional Members
MRS I STIRK.	MRS. LAVII	NIA LUMB.
MRS. E. WHITAKER.	MISS FLOR	ENCE WHITLEY.
MRS. E. E. ROTHERA.	MRS. MARY	E. WILLIAMSON.
Mrs. S. C	LEDHILL.	
Committee for the Care	of the mentall	v Defective.
COUNCILLOR L. CHAMBERS	COUNCILLOR	I. W. ALDAM.
(Chairman). Councillor G. H. BUTTERS.		W. H. R. SKEMP.
COUNCILLOR G. H. BUTTERS.		M. WILLIAMSON,
(Vice-Chairman).		J.P.
ALDERMAN E. SMITH, J.P.	MRS. A. SM	ITH, J.P.
(Vice-Chairman). ALDERMAN E. SMITH, J.P. MRS. B. DRACUP.	MRS. E. TO	OWNEND.
Welfare of the Bl		
THE CHAIRMAN.	ALDERMAN I	
VICE-CHAIRMAN.	COUNCILLOR	
COUNCILLOR V	VILLIAMSO	Ν.

# Staff of the Bealth Department.

#### medical Officer of Bealth.

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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.

ERIC R. SMITH, M.D., Ch.B., D.P.H., Resident Medical Officer, Isolation Hospital.

#### Medical Staff, The Halifax General Hospital.

H. A. KIDD, F.R.C.S., (Ed.), Medical Superintendent.
ALAN CURTIS, M.B., Ch.B., Senior House Surgeon.
J. C. G. ANDERTON, M.B., Ch.B., Junior House Surgeon.

P. R. K. LANE, M.R.C.S., L.R.C.P., 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., D.M.R.E., Radiologist.
HARRY V. PHELON, M.R.C.P., Pathologist and Bacteriologist.
D. W. HEYNEMANN, M.B., Ch.B., Assistant School Medical Officer.
W. MICADAM, M.A., M.D., F.P. C.P., Consulting Physician

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

E. R. FLINT, F.R.C.S. (Eng.), Consulting Surgeon.

#### Public Uaccinators.

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.	V. C. MEYER, M.B., Ch.B.
J. MORRISON, M.B. R. DAVIDSON, M.B., Ch.B. D. G. KENNEDY, M.B., B.Ch., B.A.O.	<ul> <li>W. R. THOMPSON, L.R.C.P., L.R.C.S.</li> <li>G. C. SHARP, M.B., Ch.B.</li> <li>C. S. OGILVY, L.R.C.P., L.R.C.S.</li> </ul>

#### Ueterinary 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.

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**†F.** TEAL, District Sanitary Inspector.

†J. G. WALSHAW

**†**E. WILSON

†H. LEAPER

atH. MARGERISON, Housing Inspector.

oF. BURTON, Housing Inspector.

T. FEARNLEY, Shops' Inspector.

#### Clerical Staff.

†C. CARLTON, Chief Clerk. Clerks-H. WRIGHT. H. CARLTON. A. CLEGG. N. BRADLEY. MISS M. FAWTHROP.

I. T. BOOCOCK.

#### Uaccination Officer.

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

#### Maternity and Child Welfare. health Uisitors.

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

Cuberculosis Uisitor : M. A. OATES.

Matron, Isolation Hospital: F. WILSON.

matron, Sanatorium: \*W. DAVIDSON.

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

#### Removal Officer : W. P. SHARP.

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

#### Che Balifax General Bospital.

Steward : A. WHEELDON.

Matron : E. A. WOODWARD.

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.

Clerks-A. F. PIDGEON.

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

aRoyal Sanitary Institute. Smoke Inspectors Certificate.

COUNTY BOROUGH OF HALIFAX.

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OF THE

· 3 O SEP 1935 \*

# MEDICAL OFFICER OF HEALTH, FOR THE YEAR 1934.

#### INTRODUCTION.

To the Chairman and Members of the Health Committee.

Mr. Chairman and Gentlemen,

I have the honour to present herewith my Seventh Annual Report, being the sixty-second of the series, for the year ending December 31st, 1934. The general arrangement follows that of the last report.

The contents have been compiled in compliance with Circular 1417 of the Ministry of Health.

The report is an ordinary, not a Survey Report.

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In view of the great volume of work in connection with the Halifax Extension Bill which devolved upon the Department, it has not been found possible to include the usual exordium.

\*

The birthrate per 1,000 population was 11.7. For England and Wales the rate was 14.8 and in the 121 Great Towns it was 14.7. The total male births numbered 595, the females 546, being a proportion of 1,089 males to 1,000 females.

The deaths numbered 1,356 compared with 1,501 last year, 1,441 in 1932; 1,465 in 1931; 1,395 in 1930; 1,522 in 1929; and 1,286 in 1928. For 1934 the deathrate was 13.9. The deathrate for England and Wales was 11.8, and for the 121 Great Towns 11.8 per 1,000 respectively. The excess of deaths over births was 215 or 2.2 per 1,000 of the population.

The deathrate may possibly rise again within the next 10 years owing to the ageing of the population.

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As regards Maternal Mortality it must be remembered that as the birthrate falls the proportion of first children to others increases, and since Maternal Mortality is higher with the first children the Maternal Mortality rate has a tendency to increase. There is no doubt that the falling birthrate is a factor (but not the only factor) in increasing the Maternal Mortality Rate. Many other factors (hereditary and environmental) enter into any rational consideration of the problem. The hypothesis that malnutrition per se is responsible for the high rate has not been established. The local distribution of Maternal Mortality in London during recent years negatives the proposition for Maternal Mortality is highest in the richer boroughs. Out of the 12 maternal deaths in Halifax during the period under review only two occurred in poor circumstances. Halifax has had a high rate for over 40 years, therefore the causative factors are not recent ones. As regards our efforts to reduce the rate I cannot over emphasise the great importance of ante-natal supervision. If only all expectant mothers had skilled ante-natal care and supervision (either by their own doctors or at the Clinics provided), how much more vital, instructive and helpful would our Maternity Service become ; and so I feel that such advice should be taken to heart; otherwise how is our Ante-Natal Service to achieve that victory over maternal deaths and disease which only the use of these services by all expectant women can bring about ?

Next year the Ministry of Health will hold an enquiry into Maternal Mortality, but it must be remembered that they will have to deal with a problem of obscure etiology and (not being magicians) it would be too much to expect them to lay their fingers upon the fundamental causes. Doubtless they will advise us as regards the expansion and amplification of the services where necessary and personally I shall welcome their counsel. The Infant Mortality Rate is 77. In an area—such as Halifax—with a very low birthrate, each infant death has a greater effect on the Infant Mortality Rate than in an area with a high or average birthrate.

#### \* \* \*

It will be seen from the Report that Cancer continues to play a big part in our deathrate. One of the great disabilities the Public Health Service labours under with regard to Cancer is that—apart from mortality—the Medical Officer of Health has no knowledge of the prevalence of cancer in his district. He has practically no information (apart from his own hospitals) as regards the heredity, environment, habits, treatment and results of treatment of cancer cases. The barriers against the notification of cancer I need not now discuss. The point is that under present conditions the Public Health Service is doomed (so far as cancer is concerned) to a restricted field.

#### Few good things were born of the War but the present tendency to think in terms of preventing disease and maintaining health, rather than of endeavouring to cure disease (often an impossibility) is one of them.

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I wish to tender my thanks to the Staff of the Health Department for the valuable assistance they have rendered me in the compilation of the statistics, and for the creditable fashion in which they have, each and all, performed their various duties throughout the year.

#### \* \* \*

My thanks are due to you, Mr. Chairman and Gentlemen, for the encouragement and support you have given me at all times.

#### I am,

#### Gentlemen,

Your Obedient Servant,

(Signed) G. C. F. ROE,

Medical Officer of Health.

Health Department, Powell Street, Halifax. August, 1935.



SECTION 1.

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.

# Statistics.

Latitude 53 44° North.		
Longitude 1 50° West.		
Mean height above sea level, feet		780
Area in acres		14,081
Population (Census 1931) (Males 44,600. Females 53,515).		98,115
Population (Mid year, 1934)	50 P	97,050
Density of population per acre		6.8
Number of inhabited houses (1931 Census)		28,488
Average number of persons to each occupied	d house	3.40
Rateable Value, 1933-34		£551,231
Sum represented by a penny rate, 1933-34		£2,115

#### Summary of Vital Statistics.

Birthrate per 1,000 population				11.7
Deathrate per 1,000 population				13.9
Infantile deathrate per 1,000 birth	1S			77
Natural decrease of population (	(Excess	of	Deaths	
over Births)				215
Respiratory deathrate				1.02
Phthisis deathrate				.52
Deathrate from other forms of T	uberculo	sis		.09
Tuberculosis deathrate (all forms	)			.61
Deathrate from Cancer				1.8

### Summary of Deaths.

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

. Cause of De	ath			Number
Enteric Fever				·
Smallpox				
Measles				8
Scarlet Fever				2
Whooping Cough				2
Diphtheria				20
Influenza				8
Encephalitis Lethargica				-
Oerebro Spinal Fever				1
Tuberculosis of respiratory syste	em			51
Other Tuberculous Diseases				9
Cancer, Malignant Disease				180
Rheumatic Fever				-
Diabetes				25
Cerebral Hæmorrhage, etc.				74
Heart Disease				381
Other Circulatory Diseases				120
Bronchitis				32
Pneumonia (all forms)				66
Other Respiratory Diseases				6
Ulcer of Stomach or Duodenum				6
Diarrhœa, etc				5
Appendicitis and Typhlitis				8
Cirrhosis of Liver				3
Acute and Chronic Nephritis		·		42
Puerperal Sepsis				4
Other Accidents and Diseases		mancy and	l Part-	
urition		D	D'	5
Congenital Debility and Malfor			Birth	54
and the second				17
Other deaths from violence		•••		40
Other defined Diseases				183
Causes ill-defined or unknown				4
		Total		1,356

				Ant	nual Dea	thrate po	Annual Deathrate per 1,000 Population	Populatio	n		Births	Rate per 1,000 Births
	Year	Birthrate per 1,000 Total Population	ALL CAUSES	Enteric Fever	xoq-llam2	Measles	Scarlet Fever	адиоЭ запідооdW	Diphtheria	szneuftal	Diarrhœa and Enteritis (under two years)	тотег опе уеаг Тоты. Deatus
England and Wales	1934	14.8	11.8	00.0	00.0	60.0	0.02	\$0.0	0.10	0.14	5.2	59
121 County Boroughs and Great Towns including London	1934	14.7	8.11	00.0	00.0	0.12	0.02	90.0	11.0	0.12	7.4	63
HALIFAX	1926	14.5	14.3	0.00	00.0	0.20	0.02	0.10	80.0 60.0	0.14	7.8	79 90
	1928	12.9	12.3	0.02	00.0	00.0	0.02	00.0	0.16	0.10	3.9	67
	1929	13.3	14 / 13.4	10.0	00.0	90.0	10.0	0.02	20.0	0.12	4.6	99
	1931	12.6	14.9	0.00	00.0	60.0	10.0	0.04	0.17	0.38	4.8	96 80
a series of the	1933	11.2	15.4	00.0	00.0	0.08	0.02	0.03	0.13	0.48	12.7	92

Ine mortality rates refer to the whole population as regards England and Wales, but only to civilians as regards London and the group of towns.

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# SECTION 2.

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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 Bermerside 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 the Halifax General 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 the Halifax General Hospital.

There is a ward at the Halifax General 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 Orthopædic Service has been set up at the Halifax General Hospital for the treatment of cases sent by the Maternity and Child Welfare and Education Committees.

- Fever Hospital The Corporation provides the Isolation Hospital which admits cases of Scarlet Fever, Diphtheria, Enteric and other fevers from Halifax, and from the areas of neighbouring local authorities. Accommodation for 96 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 inpatient treatment. See page 47.

Hospital and Situation	Purpose	Total Beds	Authority	Medical Staff	Consultants
Isolation Hospital, Northowram Hall	Fevers	96	Halifax Health Committee	1 Res. Medical Officer	As required
Halifax Sanatorium, Shelf	Tuberculosis	62	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		
The Halifax General Hospital	General Surgical Medical Children and Maternity	405	Halifax Health Committee	1 Medical Superintendent (Resident) 3 Asst. Medical Officers (Res.)	1 Physician 1 Orthopædic Surgeon 1 Radiologist 1 Bacteriologist 1 Surgeon
Smallpox Hospital, Harewood Well	Smallpox	26	Do	Medical Officer of Health or Asst. M.O.H. (Non Resident)	As required

Hospital Facilities.

- General Nursing—Under the Local Government Act, 1929, the Halifax General Hospital, containing 405 beds was, on April 1st, 1931, transferred to the Local Authority and is administered by the Health Committee as a General Hospital.
- Mental Deficiency—The Craigie Lea Certified Institution, which is operated under licence of the Board of Control, has accommodation 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 the 'Isolation Hospital, Northowram Hall, serves Halifax and the other districts from which cases are admitted to the Hospital.
(b) For non-Infectious and Accident Cases—

- The Corporation's Motor Ambulance Service, worked by the Fire Brigade (Tel. 3222). (1 "Ford" 24 H.P., 1 "Vulcan" 20 H.P., 1 "Austin" 20 H.P.)
- (2) The Health Committee's Ambulance at the Halifax General Hospital (Tel. 4259). ("Austin" 20 H.P.)
  (3) The Ambulance Service of the St. John Ambulance
- (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).

				of t	the	Sc	hool	Medic	al Se	rvice)			
Times	Hours	5 p.m. to 7 p.m. 5 p.m. to 7 p.m.	Morning	Morning & Afternoon	80	Afternoon	All day Morning	Evening	Afternoon & Evening Afternoon	Morning & Afternoon	3-30 p.m. to 4-30 p.m. and 6 p.m. to 8 p.m. 6 p.m. to 8 p.m.	10 a.m. to 12 noon and 6 p.m. to 8 p.m.	10 a.m. to 12 noon
Ti	Days	Monday Thursday	Monday	Tuesday	Thursday	Do	Friday Saturday	First Thursday in each month	Wednesday Thursday	Tuesday	Tuesdays (Women and Children) Thursdays (Men) Auxiliary Centre for	Men : Daily	Sunday
11 1 - 111	Where held	8, Clare Road	66, 68, Northgate	Queen's Road	00, 00, MULINGALE Do	Do	0° D	Kirby Leas, Savile Road	Royal Halifax Infirmary	The Halifax General Hospital	Royal Halifax Infirmary		
d	, Furpose	Tuberculosis	Ultra Violet Light and Massage Babias	Children under 5 Babias	Ultra Violet Light	Ante-Natal	Babies Ultra Violet Light and Massage	Ante-Natal	Ante-Natal	Ante-Natal	Venereal Diseases		
Name of Clinic	Name of Clinic	Tuberculosis	Maternity and Child Welfare					* Halifax District Nursing Association	*Royal Halifax Infirmary	The Halifax General Hospital	Royal Halifax Infirmary		

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

\*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 49.

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 113), 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 Isolation Hospital, and the resident doctor examines the hospital throat swabs for K.L.B.

#### The Halifax General Hospital.

The Bacteriological and Analytical work of the Hospital is now carried out at the laboratory in the Hospital. 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 1934.

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

Sputum for Tubercle		377
Diphtheria Swabs		1961
Hair for Ringworm	·	2
Agglutination Test (Widal) T.A.B.		5
Others (Fluids, etc.)	:	34
Total		2379

In addition to the above, routine samples of milk for bacteriological and biological examination are submitted to 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.

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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.

Age Peri	cd	 Males	Females	Total
Under 25		 1930		-
25-35		 3	2	5
35-45		 	6	6
45-65		 36	49	85
65 and over		 35	49	84
		74	106	180

Table showing Deaths at Age Periods during 1934 :---

Deathrate per 1000 population during the past 10 yea
--

Year	Deathrate .	Year	Deathrate
1925	1.6	1930	17
1926	1.6	1931	1.9
1927	1.6	1932	1.7
1928	1.2	1933	1.6
1929	1.7	1934	1.8

Site		Males	Females	Total
Stomach		10	14	24
Intestines		11	13	24
Liver		3	1	4
Rectum		8	6	14
Oesophagus		2	3	5
Bladder		4	2	6
Prostate		4	COURSE STORE SHARE	4
Tongue and	Mouth	7		7
Neck		-	1	1
Uterus		-	22	22
Breast			18	18
Ovary			. 3	3
Urethra		in pice-in the	winn	Min - Z P
Pancreas		3	5	8
Lungs		3	3	6
Bone		1	-	1
Other cause	s	18	15	33
( fa)	1anl	74	106	180

Table showing the organs or parts affected :--

#### 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 :--

- 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.

Infectious Disease.
(a) Isolation Hospital.
(b) The Halifax General Hospital.

## Isolation Hospital.

The new Isolation Hospital at Northowram Hall was brought into operation during the current year, the opening ceremony being performed on the 7th June, by Lt.-Com. Rt. Hon. Sir E. Hilton Young, G.B.E., D.S.O., D.S.C., M.P., Minister of Health.

Although the official opening took place in June, the first patients were not admitted until September 24th, the date of the opening having been brought forward in order to combine the opening of the new reservoirs at Gorple in the one function.

The final transfer of patients from Stoney Royd was not effected until November 7th, as it was considered inadvisable on medical grounds to disturb several of the patients there.

The following is a brief description of the site, layout, etc., of the new Institution :--

The estate contains 32 acres of reasonably level pasture land on a plateaux 800 ft. above sea level, and it is fringed with a fine belt of trees.

The hospital scheme comprises the following groups of buildings. The mansion, practically without alteration, is the administration block, housing the resident medical officer, the matron, part of the nursing staff and the domestic staff in the servants' wing, where facilities exist for cooking for all the patients of the hospital. A new wing added to the main building serves as a nurses' home, of two storey construction, with 20 single bedrooms, where the night staff in particular will be undisturbed by the daily routine of the hospital.

The hospital buildings proper include three ward blocks (a fourth block to be added at a later date will meet maximum requirements) with dayrooms offset centrally to each, isolation block, discharge block, laundry block, boiler house and disinfector block and mortuary.

The ward blocks are of the single storey pavilion type at present much favoured because of the complete aerial disconnection they give where the infection is not of one type. Each ward block contains two wards of 12 beds, astride the nurses' duty room, with verandahs on one side, and at each end, snugly placed between the projecting lavatory blocks. Two single isolation side wards, and a dayroom for convalescent patients are attached to each ward block. For the diphtheria ward, a small operating theatre takes the place of the end verandah. For cases of doubtful diagnosis on admission, an isolation block is provided containing 12 cubicle bedrooms in line, with glazed partitions, the whole being under observation from the centrally placed duty room. Each patient's room is entered separately from a common verandah, is provided with a fixed lavatory basin, and is separately ventilated.

The discharge block is arranged for patients of both sexes, having two dormitories of three beds each, with separate dressing rooms and sanitary conveniences and lockers for the patient's own clothing, for donning immediately prior to leaving the hospital. Though normally the two halves of the building give intercommunication, when occupied by both sexes, segregation is effected by the locking of one door.

An up-to-date, fully equipped, steam laundry is designed to deal with laundry work of the hospital at its maximum accommodation, and the laundry work of the Tuberculosis Hospital at Shelf.

The boiler house and steam disinfector adjoin the laundry block, the group being conveniently placed on a service road for fuel supplies, and collection and despatch of laundry work.

The buildings throughout are faced with wallstones, with ashlar dressings, and roofed with grey Burlington slates. They are lighted by electricity, and liberally furnished with wall plugs for use with curative appliances. Emergency lighting from storage batteries is provided in the operating theatre in case of sudden failure of the Corporation supply. This will be fully automatic in action. An internal telephone system connects all units of the hospital.

The heating is arranged on the centralised accelerated low pressure hot water system served from calorifiers in the boiler house. Vertical watertube boilers provide steam at 100 lbs. pressure for certain components of the laundry, and reduced pressures for disinfector and hot water services.

I am indebted to Dr. Eric R. Smith, Resident Medical Officer at the Isolation Hospital, for the following report :---

The Isolation Hospital supplies, when necessary, the staff required for the Small-Pox Hospital. The laundry at Northowram Hall 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 la<sup>i,A</sup> down by the General Nursing Council. Routine Bacteriological work is carried out at the Hospital.

During the year 636 patients were admitted to the Hospital, of whom 595 were Borough cases and 38 were from areas outside the Borough. Of the 636 patients admitted, 286 were admitted as Scarlet Fever, 346 as Diphtheria, and 4 as other diseases.

#### Scarlet Fever.

The number of cases admitted as Scarlet Fever was 286, of whom 272 were inside the Borough cases, and 14 outside the Borough cases. 264 were true cases. 22 of the admissions were not true cases—16 were German Measles, 1 Diphtheria complicated by Mumps, 1 was Diphtheria, 1 Measles, 1 Quinsey, and 1 Ludwig's Angina. 3 of the true cases were complicated by Mumps.

The average length of stay in Hospital for the true cases was 36.2 days.

		-		
		Present on admission	Onset after admission	Total
Cervical Adenitis		58	7	65
Rhinorrhoea		17	15	32
Otitis Media		5	14	19
Bronchitis		12	1	13
Broncho or Lobar				
Pneumonia		-	1	1
Rheumatism		1	4	5 7
Heart Disease		7	- 11	7
Albuminuria		1	15	16
Tonsillitis		2	6	8
Quinsy			2	2
Mastoiditis		-	2	2 2 2
Burns and Scalds		2	_	2
Impetigo		2 5	1	6
Sceptic Sores, Boils,	etc	20	4	24
Blepharitis		3	-	3
Empyema (draining)		1		1
Appendicitis (post		the second second		12 10 10 10
operative)		3	-	3
Tonsillectomy (post				
operative)		1	-	1
Strabismus		3		3
Eczema		1		1
Injuries (various)		2		2
Anaemia (all types)		2	-	2 2
			and the second states	

#### Complications and Sequelæ.

There were four deaths from Scarlet Fever, each case being associated with grave complications—

- 1. Scarlet and Toxic Myocarditis.
- 2. Scarlet and Toxæmia from Burns.
- 3. Scarlet and Lobar Pneumonia.
- 4. Scarlet and Osteomyelitis and Pyæmia.

#### Diphtheria.

During the year 346 cases (322 residents and 24 from outside districts) were admitted as Diphtheria. 333 were true cases, 1 was Mumps and Erysipelas, 2 were Broncho Pneumonia, 2 were Tonsillitis, 7 were Scarlet Fever, 1 Vincent's Angina.

The average length of stay of the true cases was 45.8 days.

The following complications were present :--

A A A A A A A A A A A A A A A A A A A	Present on admission	Onset after admission	Total
Cervical Adenitis	 126	2	128
Palatal Paresis	 	35	35
Ocular Paresis	 	6	6
Other Pareses (facial, etc.)	 	7	7
Albuminuria	 -	52	52
Otorrhoea	 8	2	10
Myocarditis	 14	.6	20
Rhinorrhoea	 12	8	20
Quinsy	 -	1	1
Abscesses	 2	7	9
Impetigo	 8	2	10
Septic Spots and Sores	 9	2	11
Bronchitis	 4	1	5
Broncho Pneumonia	 3	-	
Tuberculosis (Pulmonary)	 2	-	3 2 3
Tuberculosis (other forms)	 3		3
Lupus Vulgaris	 1	_	1
Osteomyelitis	 3	-	3
Mastoiditis	 1	1	2 7 3
Tonsillitis	 -	7	7
Appendicitis (post operative)	 3	-	3
Fractures	 7	-	7
Scalds	 2	-	2
Mitral Regurgitation	 8	-	8
Blepharitis	 2		2
Poliomyelitis	 1		1
Chorea	 3	-	3
Epilepsy	 1	-	1
Catarrhal Jaundice	 	1	1
Vulvo-Vaginitis	 2	-	2

There were 20 deaths from Diphtheria during the year, one being complicated by Broncho Pneumonia, and one by Pulmonary Tuberculosis.

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.

#### 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 and Paratyphoid Fever.

None admitted.

#### Erysipelas.

2 patients were admitted suffering from Erysipelas. None died.

The following Table shows the number and disease for which cases were admitted from other Institutions, etc. :---

	Royal Halifax Infirmary	Halifax General Hospital	Gibbet Street	Westfield House	Tuberculosis Dispensary and Shelf Sanator'm	Crossley and Porter Schools	Bermerside School	School Clinic	M. & C.W. Clinic
Scarlatina	12	5	-	1	1	-	1	2	2
Diphtheria	39	29	2	-	1	2	1	7	-
Erysipelas	-	-	-	-	-	-	-	-	-
Ophthalmia			100			a a la la la		trag	
Neonatorum	-	1	-	-	-		-	-	-

The following Surgical Operations were performed during the year :--

Mastoidectomy		 2
Incision and drainage	of abscesses	 2
Tracheotomy		 1
Aspiration of fluid fro	om Chest	 1
Excision of Sebaceous	Cyst	 1

Laboratory Report.—The following examinations were carried out :—

Positive	Negative	Total
194	1047	1241

The following Table shows the number of cases admitted each month for the various diseases :--

Month	E OF	Scarlatina	Diphtheria	Measles	Erysipelas	Ophthalmia Neonatorum	Total
January		18	21	1	-	-	40
February		19	28		1		48
March		19	38		1	- 1	58
April		31	16	- Tours		-	47
May		19	26	-	-	-	45
June		18	20		1-0		38
July		18	27		- 1		45
August		9	20	-	-	-	29
September		40	29	0	MI		69
October		30	22		-	-	52
November		31	29		-	-	60
December		34	70	-	-	1	105
Total		286	346	1	2	1	636

Area			Scarlatina	Diphtheria	Total
Heptonstall			_	1	1
Bradford			-	2	2
Abbeytown (Cum	berlan	d)		1	1
0 1			1	1 In the second	1
Southowram			4	2	6
Brighouse			1	1	2
Sowerby Bridge			2	3	2 5 2
Castleford			_	2	2
Stainland			1		1
Elland			1	3	4
Newton Sands			-	1	1
Luddenden Foot			-	2	2
Hull			-	2	2
Ripponden			2	-	2
Hebden Bridge			-	2	2
Todmorden				1	1
West Hartlepool				1	1
Midgley			1	-	1
Shelf			1	-	1
Total			14	24	38

The following Table shows the distribution of cases from 'Outside the Borough':--

#### Cerebro-Spinal Fever.

There were no cases admitted during the year.

#### Ambulance Facilities for Infectious Cases.

Two ambulances are garaged at the Isolation Hospital 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 the Isolation Hospital, and the victualling and nursing is supervised by Miss Wilson, Matron, Isolation Hospital. 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.

#### Disinfection.

A steam disinfector and Formalin disinfectors are part of the equipment at the Isolation Hospital.

During the year the follo	wing have	e been	disinfect	ed :	-
Beds and Bedding					826
Bundles of Bedclothes	·				763
Bundles of sundry articles					49

# Prevalence of, and Control over, Infectious Diseases.

#### Enteric Fever.

No case of this disease was notified during the year.

#### 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, workhouses, 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 337, and the total number of cases admitted to Hospital was 286. 272 cases were from within the Borough, and 14 from outside the Borough.

The present type of Scarlet Fever is mild and the deathrate 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.

Two deaths occurred.

#### Diphtheria.

There were 344 notifications received and 346 cases were admitted to the Fever Hospital as suffering from Diphtheria, of which 24 were from outside districts.

There were 20 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 toxaemia 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 childbirth—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.

Seven cases of Puerperal Fever were notified during the year; there were 4 deaths.

24 cases of Puerperal Pyrexia were notified during the year.

#### 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 77 notifications of Influenzal Pneumonia and 3 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 not heavy; 42 cases were visited, 15 being removed to Hospital. Eight 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 at any time.

Similar measures to those outlined above are adopted for controlling the spread of this disease, and 48 cases were visited by the Health Visitors, 8 being admitted to Hospital. The disease caused 2 deaths.

#### Notification.

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

Disease			Number
Smallpox		 	
Typhoid Fever		 	
Scarlet Fever		 	337
Diphtheria		 	344
Puerperal Fever		 	7
Puerperal Pyrexia		 	24
Erysipelas		 	38
Ophthalmia Neonatorum		 	2
Encephalitis Lethargica		 	THE R. LOW CO.
Acute Polio Encephalitis		 	-
Acute Polio Myelitis		 	1
Cerebro-spinal Fever		 	1
Pneumonia :			
Influenzal		 	77
Primary		 	3
Tuberculosis :			
Respiratory		 	97
Other Forms		 	24
Tot	al	 	955

## The Halifax General 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.

#### Medical Superintendent.

Mr. James Dawson, F.R.C.S., resigned on 8th August, 1934, and Mr. H. A. Kidd, F.R.C.S. (Ed.), was appointed in his place, and commenced duty 22nd October, 1934.

I am indebted to Mr. H. A. Kidd, F.R.C.S. (Ed.), Medical Superintendent, for the following notes :--

#### Rewiring Electric Lighting System.

The Health Committee voted the sum of £2,500 for this purpose, to be spread over a period of two years. At present approximately one quarter of the work has been done. Owing to the removal of the generator for the electric light there is at present no stand-by in the case of breakdown.

#### Nursing Staff.

Owing to lack of sufficient accommodation it has been impossible to increase the nursing staff to the number requisite for the efficient running of the Hospital. An attempt was made to overcome this difficulty by renting for three years Theophilus Cottage, Huddersfield Road, at a rental of £50. per year. £70 was expended on extra furnishing. This arrangement, however, is far from satisfactory and can only be regarded as a temporary expedient. The need for increased staff is in part due to the increased work of the Hospital and in particular to the extended use of side-wards for private patients. Further accommodation will also be required for domestic staff, who are at present sleeping five in a room. The erection of an additional Nurses' Home on one of the available sites for extension would be the most satisfactory solution of this problem.

#### Superannuation.

The continued absence of any scheme of superannuation is having a deleterious effect on the work of the Hospital. This is shown by :---

- (i) The difficulty experienced in getting the best applicants for staff appointments;
- (ii) The difficulty of retaining the services of efficient members of the staff after their period of training;
- (iii) By the fact that many members of the staff have complained that, whereas in other hospitals remuneration consists of a standard scale, emoluments and a superannuation scheme, in this Hospital, owing to lack of a superannuation scheme, they are, in fact, receiving less salary than that obtainable at other institutions. This particularly applies to the large proportion of the staff who are in the lowest grades and in receipt of the lowest possible approved salaries.

#### Water Mains.

These were overhauled and sixteen dead ends put into circulation. Various additional valves were installed and this was done at a cost of £400. The supply is now greatly improved.

#### **Boiler Feed Pumps.**

Two new pumps were installed and various valves and boiler mountings renewed at a cost of £230.

#### Medical Superintendent's Quarters.

The present accommodation is only suitable for a single man, and in view of the fact that these appointments are held by senior members of the medical profession and the appointment should, in the best interests of the Hospital, be of a permanent nature, it is therefore submitted that the Committee should follow the practice of other Hospitals of a sinmilar nature, and erect a separate house for the residence of the Medical Superintendent.

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

- (a) Medical Superintendent, who being an F.R.C.S. of Edin., 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) 2 Junior A.M.O.'s.

The visiting medical staff is as follows :--

- (a) Consulting Physician.
- (b) Consulting Surgeon.
- (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.

					BE	DS			
Classification of Ward	No. of Wards	М	en	Wo	men		dren er 16	To	otal
		Pro- vided	Occu- pied	Pro- vided	Occu- pied	Pro- vided	Occu- pied	Pro- vided	Occu- pied
Medical	4	64	40	66	60	-	-	130	100
Surgical	2	24	20	24	22	-	-	48	42
Chronic Sick	5	46	21	80	60	-		126	81
Children	2	-	-	-	-	64	45	64	45
Isolation	-	Si	de Wa	rdsuse	d whe	n nece	ssary	-	-
Maternity	3	-	-	37	15	-	-	37	15
Total	16	134	81	207	157	64	45	405	283

#### In-Patients.

1.	Total number of admissions (including infants born in Hospital)	2,459
2.	No. of Women confined in Hospital	413
3.	No. of Live Births	387
4.	No. of Stillbirths	30
5.	No. of Deaths among the newly born (i.e., under 4 weeks of age)	16
6.	Total No. of Deaths among children under 1 year of age (including above)	32
7.	No. of Maternal Deaths among women confined in Hospital	5
8.	Total No. of deaths	374
9.	Total No. of discharges (including infants born in Hospital)	2,139
10.		1,924
	(b) Exceeding 4 weeks but under 13 weeks(c) Thirteen weeks or more	462 127
11.	No. of beds occupied : (a) Average during the year (b) Highest 382 on 13/1/34. (c) Lowest 255 on 14/8/34.	298
12.	No. of surgical operations under general anæsthetic (excluding dental operations) General Spinal	36 <b>3</b> 180
13.	No. of Abdominal sections	97

#### **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 a considerable amount of out-patient work is done in the massage and X-ray departments.

Ante-natal Clinic : No. of women seen 338. Attendances, 2,646.

38

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

		n under s of age	Men and	Women
Disease Groups	Dis- charged	Died	Dis- charged	Died
Acute Infectious Disease	70	5	49	5
Influenza	-	-	4	1
Tuberculosis— Pulmonary	3	1	17	17
Non-Pulmonary	2	_	13	3
Malignant Disease	_		30	45
Rheumatism-	1.00			
(1) Acute Rheumatism (rheumatic				
fever) together with sub-acute	1 - 1 m		A 100	
rheumatism and chorea	5	-	22	-
(2) Non-articular manifestations of				
so-called rheumatism (muscular rheumatism, fibrositis, lumbago				
and activities	1		13	1
(3) Chronic Arthritis	1	_	28	_
Venereal Disease	-	_	7	1
Puerperal Pyrexia	-	_	10	4
Puerperal Fever-				
Confined in Hospital		-	-	1
Admitted from outside	-		1	2
Other diseases and accidents connected				~
with pregnancy and childbirth	-	-	78	7
Mental Diseases— (a) Senile Dementia			3	1
(a) Senile Dementia (b) Other		1	12	_
Senile Decay		_	21	30
Accidental Injury and Violence	10	2	51	17
In respect of Cases not included above. Disease of Nervous System and Sense Organs	19 36 2	<u>—</u>	106 82 71	29 26 90
Digestive System	43	3	141	20
Genito-Urinary System	20	1	124	20
Skin		_	61	20 5 7
Other Diseases	45	22	73	7
Mothers and Infants discharged from				
Maternity Wards and not included	202		121	
in above figures	393	-	434	-
Totals	688	46	1451	328



### SECTION 5.

# Tuberculosis.

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## Tuberculosis.

As regards the prevention of Tuberculosis, patients should observe the following precautions :--

- Don't spit in the street, trams, buses, or homes. Spitting scatters the germs of the disease. Spit into a special bottle.
- 2. Don't cough into other people's faces.
- 3. Don't swallow your phlegm.
- 4. Don't sleep in the same bed with anyone else. If possible, sleep in a separate room.
- 5. Don't kiss anyone on the lips.
- 6. Keep your windows open.
- 7. Attend your doctor regularly.

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

TUBERCULOSIS DEATH-RATE.						
PERIOD	Respiratory only	All Forms				
10 years average 1924-33	•62	.80				
1934	.50	<b>'7</b> 0				

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AGE PERIODS			Num	Number of Primary Notifications of new cases of Tuberculosis	rimary	Notifica	tions of	new ca	ises of	Luberci	losis		Total
	-0	1-	5-	5- 10- 15- 20- 25- 35- 45- 55- 65-	15-	20-	25-	35-	45-	55-	65-	TOTAL (all ages)	Notifications
Pulmonary Males	1		1	1	8	00	7	7	8	3	1	44	45
Females	1	2	5	5	9	13	6	S	07	67	1	50	52
Non-Pulmonary Males	1	1	4	1	1	1	1	9	I	1	1	15	15
", ", Females	1	1	1	3	07	2	2	1	1	1	1	6	6

In the following Tables, new cases coming to the knowledge of the Medical Officer of Health otherwise than by formal notification, together with the sources of such information we set out.

TOTAL	9   2	Cases.	Non- Pulmonary	1	1	1	1	1
65-		No. of Cases.	Pulmonary	∞,	-	1	1	1
55-	4		Pul					
5- 10- 15- 20- 25- 35- 45- 55- 65-	-	1	2					
35-	-	17	-	:		:		
25-	7							
20-	-		Z.		eral		eaths)	:
15-			SOURCE OF INFORMATION	:	ur Gen		able de	
10-	1111		ORM		egistra		ansfera	
			INF	. I	rom R	:	han tr	•
1			E OF	Registrars	aths fi	:	other t	::
-0			URCI	al Re	able de		treas (	cify)
AGE PERIODS	Pulmonary Males ,, Females Non-Pulmonary Males ,, ,, Females		SO	Death Returns { from local	(transferable deaths from Registrar General	Posthumous notifications	"Transfers" from other areas (other than transferable deaths)	Other Sources if any (specify

43

The following Table shows the number of notified cases of Tuberculosis remaining in the Borough on December 31st, 1934 :---

Total	-	Pulmonary		N	on-Pul ronar	у
Cases	Males	Females	Total	Males	Females	Total
639	262	239	501	70	68	138

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 domicilary treatment by their private doctors. Close co-ordination exists between the Clinic, Medical Practitioners, and the Health Department.

#### Tuberculosis Scheme.

		monary	
A-New cases (excluding contacts):			
(a) Definitely tuberculous	67	19	86
(b) Diagnosis not completed (c) Non-tuberculous	-	E	7 81
			01
B—Contacts:			
(a) Definitely tuberculous	15	2	17
(b) Diagnosis not completed	-	-	3
(c) Non-tuberculous	-	-	115
C-Cases written off Clinic Register as :			
(a) Recovered	44	2	46
(b) Non-tubercular (including any such cases previously diagnosed and entered on the Dispensary Register as tuberculous		-	317
D-Number of cases on Dispensary Register on December 31st :			
(a) Definitely tuberculous	506	114	620
(b) Diagnosis not completed	3-	-	10

Number of cases on Dispensary Register on Jan. 1st	743
Number of cases transferred from other areas and cases returned after discharge under Head 3 in previous years	3
Number of cases transferred to other areas, cases not desiring further assistance under the scheme and cases "lost sight of"	10
Cases written off during the year as dead (all causes)	52
Number of attendances at the Dispensary (including contacts)	
Number of insured persons under Domiciliary Treatment on the 31st December	19
Number of consultations with medical practitioners :(a) Personal(b) Other(c) Other	29 237
Number of visits by Tuberculosis Officers to homes (in- cluding personal consultations)	92
Number of visits by Nurses or Health Visitors to homes for Dispensary purposes	2,843
Number of (a) Specimens of sputum, etc., examined	371
(b) X Ray examinations made in connection with Dispensary work	129
Number of "Recovered" cases restored to Dispensary Register, and included in A (a) and A (b) above	4
Number of "T.B. Plus" cases on Dispensary Register on December 31st	201

# Halifax Sanatorium.

Admissions and Discharges during the year :---

	Halifax cases	Other Cases	Total
Remaining in on December 31st, 1933	39	11	50
Admitted during the year	106	41	147
Discharged during the year	93	35	) 144
Died	13	3	J
Remaining in on December 31st, 1934	39	14	53

#### 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.

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# 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

AN

S

during the year, and found to be suffering from :--

from :		Clinic	Clinics
Syphilis		35	
Soft Chancre			-
Gonorrhoea		71	4
Conditions other than Venereal		155	2
Total		261	6
Fotal attendances at the out-patient of		8042	186
Aggregate number of in-patient days		226	
Number of doses of Salvarsan Substitutes	s given	497	5
Specimens sent to an approved Laborator	y for :		
Detection of Spirochaetes		-	-
Detection of Gonococci		-	
Detection of other organisms		-	-
Wassermann Reaction		306	-
Total		306	

1,065 examinations for detection of Gonococci and 18 for Spirochætes 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.

During the year the film "Damaged Lives," produced and distributed under the auspices of the British Social Hygiene Council, was exhibited in a local cinema to crowded audiences during one week. Members of the Health Department were in attendance at each session of the film to answer any enquiries regarding the facilities offered for treatment. SECTION 7.

# 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)	34
Number of Independent Midwives	7
Number holding the Central Midwives Board Certificate	33
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)	1
Number of cases in which Medical aid was summoned by Midwives	150
Medical aid notices sent on behalf of the child	16
Of these, 2 were for "inflammation of the eyes." 1 for dangerous feebleness. 5 for unsatisfactory condition of baby. 2 for prematurity.	

- 2 for premature twins.
- 2 for deformity of feet.
- 1 for Phimosis.
- 1 for "Spots on Legs."

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

Intention to resort to artificial feeding	 	8
Liability to be a source of infection	 	2
Notification of death of infant (lived 2 days)	 	1

#### Midwifery Services subsidised by the Corporation. Bradshaw and Luddenden.

The total number of cases attended by the Halifax and District Nursing Association during the year was 341. Of these 33 were in the Bradshaw area.

A doctor was also engaged in 43 out of the total cases (in 41 cases of the ordinary district midwifery, and in 2 cases in the Bradshaw area).

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

#### Luddenden.

Nurse Kniveton attended 6 midwifery cases in the Halifax Borough during 1934. The larger part of her midwifery work is usually under the jurisdiction of the West Riding Authority. Only 3 cases for Halifax in 1933.

Her duties also cover the nursing of medical and surgical cases.

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

Nurse Kniveton is also subject to inspection by the Inspector of Midwives for the West Riding Authority.

#### Notification of Births Act 1907.

Number of births notified ) including births transferred (	1,469
Number of births notified } including births transferred { Number of births registered } to other districts.	1,528
Ratio of notified to registered	96.13
Number of stillbirths	99
Number of notified births attended by doctors with or	
without midwives	264
Number of notified births attended by midwives only	375
Number of births notified from St. Luke's Hospital	418
Number of births notified from Royal Halifax Infirmary	386
Number of births notified by Nursing Homes	26
Number of births transferred to other districts	338

#### Infant Welfare Centres.

Northgate-					
Number of	Sessions*			228	
				673	
				8,259	
	endance per S				
Percentage	seen by do	ctor at	each		
				75	
Queen's Road-					
	Sessions			90	
New cases					
	tendance per				
	seen by do				
Session				63	
Birth Control Clinic	and the second se	the Cound	cil in	March,	1934

28

44

No. of Attendances Name Sessions Old Cases New Cases Total Average Northgate 45 212 159 ... 371 8.2 The Halifax General Hospital ... 156 2216 438 2654 17.0 ... Royal Hx. Infirmary 156 2129 293 2422 15'5 Kirby Leas .... \*12 7'0 10 75 85

Work of the Ante-Natal Clinics.

\*It is proposed to increase the number of these Sessions.

#### Royal Halifax Infirmary Ante-Natal and Maternity Cases.

It would improve the general maternity service of the Borough if cases that lapse in their attendance at the Ante-Natal Clinics and discharges from the maternity beds were notified to the Maternity and Child Welfare Centre for the purpose of following up. This is an essential part of the machinery of an up-to-date maternity scheme.

#### Toddlers' Clinic at Northgate.

Number of Sessions	 		42
Total attendances	 	• • • • •	372

This Clinic is held on Friday afternoons. It is increasing in popularity.

The time is spent in healthy games and exercises, which promote nose breathing, chest expansion, development of plantar arches, etc., and the results are decidedly beneficial.

#### Artificial Sunlight.

Number of Sessions		132
Number of cases treated		224
Attendances		3,968
Average attendance per	Session	30
Attendances of non-tuber	culous children	1
Attendances of non-tuber		
of School age		1,370
Attendances of tubercule	ous children	72

#### The work of the Health Visitors.

Visits to expectant mothers :	
First visits	 62
Repeat visits	 127
Infants under 1 year :	
First visits	 1,093
Repeat visits	 3,640
Children 1 to 2 years	 2,421
Children 2 to 5 years	 4,842
Ophthalmia Neonatorum	 . 2
Puerperal Fever and Pyrexia	 2
Maternal deaths	 2
Miscellaneous	 31

#### Infant Mortality.

Of the 85 deaths under one year, 55 were boys and 30 girls.

Of these, 51 deaths occurred during the first month, namely 31 boys and 20 girls.

In looking into the causes of death, it is again apparent that most of these infants were handicapped from the start, and the chance of survival was small.

The main defence against this Neo-natal Mortality is increased Ante-natal supervision, and the more careful dieting and attention to health of the prospective mother.

It is gratifying to note that out of 34 deaths of infants from one month to one year, only two deaths from digestive disorders are notified. The cause of death is stated to be: (1) Gastro-Enteritis with Marasmus in a child of 1 month (the primary cause being given as Marasmus); (2) Acute Gastro-Enteritis in a child of 6 months.

The infant mortality rate in 1914 was 103 per 1,000 births; in 1934 it was 77. Although I do not claim that this reduction was entirely due to maternity and child welfare activity, it was, I think, to a great extent due to this agency.

#### Maternal Mortality.

There have been 12 maternal deaths during the year and of these 7 were 30 years or over. The youngest fatal case was 24.

This point as to age must not be overlooked, and has an important bearing on the mortality figures. Another point which should be remembered is that with the present limitation of families, there is a larger proportion of primiparæ, many of them 30 years or more, with the consequent increased danger, and this has its effect on the rate.

						-			= 0	0	
Ages	No. of Deaths	Primips	Nultips	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 30-40 40-50	57	3 2	2 5 -	1 3 -	32			4 5	4 5	1 2 -	1
	12	1	4			14	1				
Ages	Forceps Applied	Ceasarian Section	Induction	Perineum Injured	P.V. Exam.	Admitted to Hospital before Labour	To Hospital during Labour	To Hospital after Labour	Not sent to Hospital	Handy-woman Attended	
20-30 30-40 40-50	2 1 —	2		III .	2 1 	22	1 3 		1	111	

The following Table gives an analysis of these deaths :--

Maternal Mortality, 1934.

#### 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 to-day takes place under better conditions as regards environment than it did 20 years ago.

the second second second	Sepsis	Others	Total
No. of Deaths	 4	8	12
Rate per 1,000 live births	 3.2	7.0	10.2
" " total "	 3.3	6'6	9.9

Number of deaths from Eclampsia... ... One

Saussianis' really	1926	1927	1928	1929	1930	1931	1932	1933	1934
Sepsis Other causes	1 7	1 9	5 8	3 6	4 8	4	7 4	5 6	4 8
Per 1,000 births	5'7	7.4	10.2	6'8	9.2	3.2	8.7	9.4	10.2

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

### Puerperal Fever and Pyrexia.

No. of cases notified :	Puerper. Fever	al	Puerperal Pyrexia
	 6		19
Non-Residents	 1		5
No. attended by midwife alone	 _		7
" doctor alone	 1		1
" doctor and midwife	 -		3
" in an institution	 5		13
" at home	 1		
No. of cases which recovered	 3		23
Case mortality per cent	 57		4

No difficulty has been experienced in securing (on request) immediate hospitalisation of cases of Puerperal infection. Beds are available at the Halifax General Hospital. The question of improving the hospital accommodation for these cases is under consideration.

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 Halifax General 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 Halifax General 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.

Up-to-date experts stress the point that the underfed mother "is capable of supplying for her child from her own body a certain amount of the necessary food elements; but this means that she is sacrificing very useful stores of material that she cannot afford to lose at this time."

Next year I propose asking the Maternity and Child Welfare Committee to consider the appointment of an Obstetric Consultant for the Borough.

#### Midwives' Inspection.

The midwives have been regularly inspected during the year, and have discharged their duties satisfactorily.

As an indication of the improved standard of work, it is gratifying to note that only two cases of Ophthalmia Neonatorum were reported, and both made a good recovery.

The Council has adopted a scheme for assisted midwifery and the payment of compensation to midwives, for any of their cases sent into Hospital on medical advice. The scheme, however, has only operated during the last month of the year, and I am therefore at the moment, unable to fully assess its value.

#### Home Helps.

The Home Helps have again done useful service during the year, and their work has been appreciated by the mothers.

#### Inspection of Maternity Homes.

There are two Maternity Homes in Halifax which are subject to inspection, and these have been visited and conditions found satisfactory.

The Maternity Wards of the Royal Halifax Infirmary and of the General Hospital are not subject to registration by the Corporation.

#### Staff.

There have not been any changes in the personnel during the year, and no long absences through illness.

Nurse Moore has attended the V.D. Clinic for Women and Children, held at the Royal Halifax Infirmary, and has also paid 30 visits to these cases.

All the staff, from the Superintendent Health Visitor, Sister Oram, downwards, have given devoted service during the year.

#### Voluntary Helpers.

We are much indebted to our Voluntary Workers for their most valuable help. Their unselfish service in attending the Clinics regularly throughout the year, has been highly appreciated, and the mothers have been encouraged and cheered by their kindly presence.

There has been an advance made during the year in regard to financial help to independent midwives, the Corporation guaranteeing a stated fee, in cases where the midwife might otherwise refuse to book a case, for fear of a bad debt.

Also, where formerly only dried milk was granted free to necessitous cases, for the last three months of pregnancy, Codliver Oil Emulsion or Adexolin Capsules or Calsimil Tablets are now granted, to fortify the mother for the ordeal of labour and lactation.



SECTION 8.

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# 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 the Halifax General Hospital, 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 :--

In spite of the additional work thrown upon the remedial staff of the Halifax Orthopædic Clinic, owing to the necessary reduction in the numbers of the staff, the work at the Child Welfare Centre has not suffered. The popularity of the Clinic continues to increase; in 1933 the cases increased from 27 to 44, and in 1934 from 44 to 57.

Attendances for remedial treatment has increased from 1,591 to 1,897 and for sunlight from 615 to 783. This improvement is largely due in my opinion to the great interest and enthusiasm of the masseuse allotted to this Clinic. She has taken special interest in the treatment of club foot, and the number of treatments given for this condition is increasing.

Six small children were referred to the General Hospital for treatment by the Orthopædic Surgeon; three for manipulation for club foot, two for rickets and one for a birth deformity. SECTION 9.

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# 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.

Intellectual processes depend upon the elaboration of the supra-granular layer of the cortex, its inadequacy is the proximate cause of mental defect.

#### St. Catherine's Certified Institution.

From April 1st, by consent of the constituent authorities, your Council entered into full membership of the Joint Board of this Institution, the previous agreement being in respect of females only. Under the terms of the new agreement, the accommodation allotted to Halifax is as follows :---

Males, High Grade (Adult	s)		21	Beds
Females, High Grade			23	"
Males, High Grade (under	16 years	of		
age)			3	,,
Females, Low Grade			4	,,
Males, Low Grade			4	,,
Total .			55	"

Name or Institution	Sex of Cases	Ages	Accommodation for		Grade	Remarks
mstrution	Received		Males	Females		ACCOUNTRO .
Mid-Yorkshire Institution, Whixley, nr. York	Males	Over 16 years	21		High	
St. Catherine's, nr. Doncaster	Males	Over 16 years	21	-	High	
, a		Do	4	-	Low	
		Under 16 years	3	-	High	
	Females	Do		4	Low	
		Over 16 years	-	23	High	
Gibbet Street, Institution, Halifax	Males and Females	Over 16 years	16	20	Active Medium to Low Grade	
Craigie Lea Certified Institution, Halifax	Males and Females	Under 16 years	16	12	Low Grade excluding Cot or Chair Cases	In operation during 1932. Accommo- dation reserved for 4 males & 5 females from the West Riding County Area

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

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

> Royal Albert Institution, Lancaster. Rampton State Institution. Whittington Hall, Chesterfield. \*Girls' Village Home, Barkingside, Ilford. Dovenby Hall, Cockermouth. Stoke Park Colony, near Bristol. \*The Home, Everton Terrace, Liverpool.

\*The two cases from these Institutions are now on Licence.

The following Table shows the position on December 31st, 1934 :---

In Institutions (ex	cluding	cases	on	М.	F.	Total
licence)		Under	16	11	5	16
		Over	16	39	33	72
On Licence from Ins	stitutions	Under	16		1	1
		Over	16	2	2	4

Under Statutory Supervision	м. 32	F. 38	Total 70
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 ap-			
proved under Section 37)			
Placed under Section 3 Other Cases	-	_	1
Cases notified by Local Education Authority (Section 2 (2): Method of Disposal:			
Sent to Institutions by "Order"		-	-
Placed under Guardianship by "Order"	-	-	-
Placed under Statutory Supervision Placed in "Places of Safety"		15-21	and some line
Died or removed from the area	_	_	_

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

(a)	Number who have giv		to ch	ildren	during	1933 :
	(1) After marriage					. Nil
	(2) While unmarried				••	. Nil
(b)	Number who have me	arried du	iring 1	1934		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.

This 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. The License has been extended by the Board of Control for 1 year from 16th June, 1935.

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.

The following Table shows the admissions to and discharges from the Institution during the year :--

No. of patients	in	residence on	Dec.	31st	Males	Females	Total
1000					12	12	24
No. admitted			,		-	2	2
					12	14	26
Died			Males	Female	s		
			1				
Transferred to	other	Institutions	-	2			
Licences grante	d		—	1	1	3	4
No. of patients	in	residence on	Dec.	31st,			
1934					11	11	22
					-		

Apart from the death of one patient, 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.

Two patients were transferred to Gibbet Street Institution during the year.



## SECTION 10.

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# 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. No. 1. Copley Ward.

No. 2. Central, Pellon, Southowram, East, South, Kingston, West and Skircoat Wards.

- No. 3. North and Akroydon Wards.
- No. 4. Illingworth and Ovenden Wards.
- No. 5. Northowram Ward.

No. 6. Warley Ward.

No. 7. The Halifax General Hospital and

Gibbet Street Institution.

Public Vaccinator. Dr. H. W. Morck, Orrell House, Sowerby Bridge. Dr. P. Milnes, Arden Lodge, Halifax.

Dr. A. Garvie,
Woodlands, Halifax.
Dr. J. Morrison,
Oak Leigh, Halifax.
Dr. J. J. Murphy,
50, West End, Queensbury.
Dr. C. S. Ogilvy,
Wood Bank, Luddenden

Foot. 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 :--

Number of births returned in the "Birth List Sheets" 1,363 No. of these births duly entered by 31st January, 1935,

in Cols. I., II., IV. and V. of the Vaccination Register, viz. :--

Successfully	vaccinated	 	 179
Insusceptible	of vaccination	 	 2
Had Smallpox Nil No. of Statutory declarations of conscientious			
---			
objection            1,008           Died unvaccinated            122			
Died unvaccinated 122			
No. of these births which on 31st January, 1935, re- mained unentered in the Vaccination Register on account of :			
Postponement by Medical Certificate 13 Removed to other Districts (V.O.'s duly apprised) 4 Removed to places unknown cannot be reached			
Removed to places unknown, cannot be reached or unfound 19			
No. of these Births remaining on 31st January, 1935 neither duly entered on Vaccination Register nor tem-			
porarily accounted for in Report Book 16			
Total number of Certificates of successful primary vaccin- ation of children under 14 received during the Calendar Year 1934 191			
No. of Statutory Declarations of Conscientious Objection, irrespective of the dates of birth of the children to which they relate, during the Calendar Year, 1934 1,089			
No. of children successfully vaccinated after declaration of Conscientious Objection had been made 2			
No. of Certificates of successful primary vaccination of children under 14 sent to other Vaccination Officers 3			
The following Table shows the number of persons success- fully vaccinated and re-vaccinated at the cost of the rates, by the Public Vaccinators during the year ended 30th Sept- ember, 1934 :			
No. of successful primary vaccinations of persons :			
Under 1 year of age, 118			
One year and upwards 12			
Total 130			
No. of successful re-vaccinations of persons who have			
been successfully vaccinated at some previous time 2			

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.

# Transferred Poor Law Services:

 (a) Children Act 1908. Part I.
 Children and Young Persons Act 1932. Part V.

(b) Boarding Out

(Children under 5 years of age).

# Children Act, 1908. Part I. Children and Young Persons Act 1932. Part V.

The duties and powers under Part I. of the Children Act, 1908, as amended by Part V. of the Children and Young Persons Act, 1932, are administered by this department.

The principal alterations are that notice must now be given at least seven days before receiving the child instead of 48 hours following the reception of such child.

The age of the child in respect of whom notice must be given is raised from 7 to 9 years.

Provision is made for the re-notification of children who are between the ages of 7 and 9 years.

In the case of a child being received in an emergency, which makes it impossible for the statutory notice to be given, the Authority must be notified at the earliest possible moment, not later than 12 hours after the emergency.

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 Regist	er :—	
	(a) at the beginning of the year		 17
	(b) at the end of the year		 17
(ii)	Number of children on the Register :		
	(a) at the beginning of the year		 17
	(b) at the end of the year		 17
	(c) who died during the year		 -
	(d) on whom inquests were held during	the year	 

<ul> <li>II. Visiting :—</li> <li>(i) Number of Visitors at the end of the year who were :</li> </ul>	
(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) of the Act of 1908 —	
III. Number of cases (if any) in which proceedings were taken during the year None	
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 under Sec. 67 of the Act of 1932 :	
(i) From a Court of Summary Jurisdiction	
(ii) From a single Justice	
Total ,	

# 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 5 years of age were imposed upon the department.

The following statement shows the pe	osition	at the	end of
the year :		Males	Females
Number on Register, Jan. 1st, 1934		-	2
Added during the year		-	-
Transferred to the care of the Education			
mittee on attaining the age of 5 years		-	
Remaining on Register, Dec. 31st, 1934			2

One child was sent to the Moorfield Convent, Preston.

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 41.

The health of the children at the Moorfield Convent, Preston, remained good throughout the year.

My thanks are due to Mr. Hartnell, the local Inspector of the National Society for the Prevention of Cruelty to Children, for his courteous and valued co-operation during the past year.

# SECTION 12.

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# 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 1934, and the following Table briefly sets out some of the more important lectures delivered to the Public.

Date 1934	то	TITLE	BY	No. of Audience (Approx.)
Jan. 7	Young Men's Class, Christ Church, Pellon	Some Public Health Aspects of the Milk Question	Mr. Beaumont, C.S.I.	12
,, 21	Young Men's Class, Christ Church, Pellon	What is Mental Deficiency? (illustrated)	Dr. Roe	40
., 31	Queensbury Industrial Society	How Infectious Diseases are spread (illustrated)	Dr. Roe	60
Feb. 15	Haugh Shaw School	Health and Strength (with Film)	Dr. Roe	150
,, 16	Gen. Council of Hx. and Dis. Band of Hope Union	Public Health Administra- tion	Mr. Beaumont, C.S.I.	35
Mar. 14	Battinson Road School, Adult Class	Health in Childhood and Adolescence	Dr. Heynemann	200
,, 21	Caddy Field School, Adult Class	Random Excursions into Public Health	Mr. Beaumont, C.S.I.	50
,, 22	Y.M.C.A.	Intestinal Stasis	Sir Arbuthnot Lane, F.R.C.S.	400
Apr. 11	Gas Association	Mental Health	Dr. Roe	100
25	Rotary	Masses and Men	Dr. Roe	60
May 6	Northgate End Chapel	Tuberculosis (illustrated)	Dr. Roe	40
6	Men's Class, St. Mark's Sunday School, Siddal	Public Health Administra- tion	Insp. Walshaw	40
Oct. 9	Micklefield Wesley Guild	Man's Invisible Foes (illus.)	Dr. Roe	50
., 25	Old Men's Parliament, Belle Vue	Occupational Mortality (illustrated)	Dr. Roe	50
,, 30	St. John's Wesley Guild	Man versus Microbe (illus.)	Dr. Roe	60
., 31	Haugh Shaw Senior School, Parents' Class	Health in Childhood and Adolescence	Dr. Heynemann	200
Nov. 2	Council of Social Welfare	Mental Deficiency (illus.)	Dr. Roe	100
4	Siddal Parish Church, Men's Class	Protection against Infectious Diseases	Dr. Liddle	50
., 8	Northowram Village Guild	The War Against Infection (illustrated)	Dr. Roe	60
., 19	The Modern School, Parents' Class	Health in Childhood and Adolescence	Dr. Heynemann	200
,, 29	M. & C.W. Mothers' Meet- ing, Sowerby Bridge	Immunisation against Diphtheria	Dr. Liddle	30
Dec. 9	Adult Class, Northgate End Chapel	Public Health Measures and their effect upon Individual	Mr. Beaumont, C.S.I.	12
., 12	Akroyd Park Men's Parliament	and Community Interests Public Health Measures and their effect upon Individual and Community Interests	Mr. Beaumont, C.S.I.	30

GENERAL NOTE.—M.O.H. possesses 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 Northgate.

#### Health Week.

The Health Week was held this year from March 18th to the 25th, and proved most successful. The main features of the week may be summarised as follows :—

- 1. Health talks to children in the schools by the kind permission of the Education Committee.
- 2. The distribution of a large quantity of health literature, leaflets, etc.
- 3. Daily lectures on health subjects to factory and workshop employees in their lunch hour, also to clubs and welfare associations.

Most of these lectures and talks were given by Mr. T. Bowen Partington.

Sir William Arbuthnot Lane addressed two largely attended mass meetings at the Y.M.C.A. premises, Clare Road.

Special sermons were delivered in certain places of worship on the two Sundays.

The object of a Health Week is to focus public attention on health matters. A distinguished statesman of Victorian days enunciated the truism that, "The Health of a Nation is its wealth." This to-day is not disputed. That is why health education is of vital importance. The feeling that education in health matters does not matter is an illusory cushion against the realities of disease.



# SECTION 13.

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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 following report :--

While improvements have been carried out during the year in order that the producers might reach Grade A Standard, there are a few who have slipped back and a few who refuse to progress with the times and prefer to carry on in their own slip shod ways. It is understood their reports on bacteriological examinations are considered to be satisfactory, but these examinations cannot replace inspections; one is complementary to the other. Much depends on the age of the samples. It is recognised that milk from farms where care is not taken will compare favourably during the first three or four hours with those where due care is taken. It is as the sample increases in age that the difference becomes so marked. Suggestions have been made of the need of a more sensitised medium for cultivation.

Byelaws are necessary to make the Milk and Dairies Order 1926, complete in regard to such provisions as site of cowsheds, middensteads, fittings and equipment, with a view to the reduction of the use of wood in cowsheds and dairies. The anomaly of a wholesale producer having preferential conditions over the producer retailer should be removed. Why should a wholesale producer be able to register under the Milk and Dairies Order without satisfactory storage ?

There is a tendency of several farmers to reduce the number of cows to four in order to avoid paying the levy to the Milk Marketing Board. This action is definitely retrogressive as it means the number is uneconomical, and they plead with reason that their production does not justify expenditure in buildings or equipment.

Improvements are desirable in the delivery of milk; I do not consider a motor car is a suitable vehicle for delivery.

During the year 13 cases of tuberculosis of the udder were found among milch cows within the Borough. While one would prefer being able to report the non-existence of tuberculosis in cattle, 13 out of a total number of 3,177 cows examined is a very small percentage, and compares most favourably with other districts. A report was received from the Medical Officer of Health that tubercle bacilli had been found by the biological test, in a sample of milk from a farm within the Borough. Two cows were slaughtered under the Tuberculosis Order. One cow had calved about a fortnight previously. In another case a cow was found on routine examination where a sample of milk (bulk) was stated to have been taken for the detection of tubercle bacilli and reported to be negative. The cow was slaughtered under the Tuberculosis Order and the disease confirmed in the udder.

Considering the number of bovines destroyed under the Tuberculosis Order, it might be considered there would be some prospect of the disease being stamped out eventually but the Order does not attempt to eradicate the disease, and it is time some definite action was taken. It is to be regretted that the State does not give facilities to those willing to establish tested tubercle free herds. The dairy farmers within this area are not self-contained and have to depend on purchases to maintain their supply of milk, consequently on account of lack of room frequent changes have to take place.

The greatest danger appears to be in the cow that has proved to be extraordinary in the production of milk and is retained for a longer period than is usual, viz.: the 3rd or 4th calf.

Tuberculosis of the udder usually develops if the cow is retained long enough. If cows could be purchased at a commercial price from some recognised tubercle free herds, definite progress could be made, but at the present time no such source appears to be available. From a public health view it is neither the fact of the cow being a pedigree one, nor a prize winner, nor the greatest milker that counts, but the fact of being healthy—free from diseases communicable to human beings—and milk produced under hygienic conditions.

Clean milk in the truest sense.

#### Milk (Special Designations) Order 1923.

There are within the Borough two producer retailers, one licensed for Certified Milk, the other Grade A (T.T.).

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

Cowkeeper only		 1
Cowkeepers and Dairymen (Wholesale only)	·	 42
Cowkeepers and Dairymen (Wholesale and	Retail)	 28
Cowkeepers and Retail Purveyors		 99
Retail Purveyors only		 25

#### Tuberculosis Order-Diseases of Animals Acts.

Number of reports			 16
Number of reports confirmed			 16
Tuberculosis of the udder			 13
Bacteriological examinations (1	nicroscopical)		 31
Number reported positive (micr	oscopical)		 2
Number reported cytological st	aggestive of 1	Г.В.	 11
Number subject to biological te			 11
Number subject to biological te	st-Positive		 1
Microscopical examination of s			 1
Number of cattle examined			 187

#### Milk and Dairies (Amendment) Act 1922.

Under Section 2 of the above named Order, one retailer was invited to appear before the Health Committee to show cause why his name should not be removed from the Register.

The retailer corrected the reason for the objection.

#### Milk and Dairies Order 1926.

The following alterations were carried out :--

Alteration to cowsheds for	light				3
Alteration to cowsheds for	floors				7
Alteration to cowsheds for	ventilat	ion			3
Alteration to cowshed for	walls				1
Dairy provided					1
Sterilizers installed					and the second
Number of cows examined					3,177
Visits to farms					745
· · ·		10.1	1 .1	3.4.11	1000

Legal proceedings were instituted under the Milk and Dairies Order 1926, for contravention of :--

Article 21(1) Failing to cleanse dairy utensils as soon as may be after use. Penalty £1.

renarry a.r.

#### Bacteriological Examination of Samples.

Total number of s inations as an	index of gene	eral clean		xam- 	86
Number of Ordina	ary Milk samp	les			55
Number of Grade	d Milk samples	5			31
Meat. Private Slaughter	houses (Regist	(ered)			5
	(Licens				õ
20	(meene			14,4	
The approxim during the year is			slaughter	ed the	rein
Cattle.	Calves. Sl	heep and	Lambs.	Pigs.	
195	28	720		100	

#### Meat Inspection.

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

Description of	Number of Visits		
Public Slaughterhouse		 	796
Private Slaughterhouses	5	 	171
Borough Market		 	520
Wholesale Market		 	300
Lairages		 	170
Potted Meat Houses	·	 	309
Tripe Boiling Houses		 	127
Butchers' Shops		 	1920
Auction Mart		 	44
Other Visits		 	261
	Total	 	4,618

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 slaughter- house	8143	2013	•25949	6306	42411
Do. condemned	83	4	9	54	150

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

Total Amount of Meat Destroyed	<sup>lbs.</sup> 63165
Total Amount of Offals Destroyed	14405
Total Amount of Meat Destroyed on account of Tuberculosis	56309
Total Amount of Offals Destroyed on account of Tuberculosis	11092
Total Amount of Meat Destroyed from other causes	6856
Total Amount of Offals Destroyed from other causes	3313
Total Meat and Offals Destroyed	77570

Kind	Quantity in lbs.				
83 Carcases of Bee	f				44850
Beef not in Carcas	e				10698
4 Carcases of Veal					224
9 Carcases of Mutt	on				392
54 Carcases of Por	k				5567
Pork not in Carcas	e			·	1434
Rabbits					12
Fish					564
Fruit and Vegetabl	es				14375
Canned Provisions					640
Hams					12
Chicken					3
Turkey					16
Polonies			· ··· ·		5
	Tota	l Weigh	it		78792

It was found necessary to obtain 7 Justices' Orders.

The number of large bovine carcases condemned on account of tuberculosis is the highest that had been recorded in Halifax. Included in the number are three cows slaughtered under the Tuberculosis Order. From an animal health view this is disquieting as our experience has indicated an increase each year in the incidence of the disease, and indicates the urgent need of action by the Government to eradicate it. The cattle are not from this district but come from other areas chiefly. Some of the bovines should have been reported by the farmers under the Tuberculosis Order, and would have been detected if routine veterinary examination had been in operation in those areas.

Cases of tuberculosis in pig carcases have been few.

The public need not to be alarmed by these remarks as their interests are well protected by the standard of inspection.

#### Slaughter of Animals Act 1933.

This is controlled by the Markets and Parks Committee, although the Act does not give their official the right of entry to places other than under their direct control.

The captive bolt is used for the slaughter of all animals within the Borough.

84

#### Sale of Food Order 1921 (Part 3).

This Section requires that all imported meat exposed for sale by retail must be labelled with the word "Imported."

**Prosecution.** A conviction was obtained for non-compliance with this Order, and a penalty of  $\pounds 2$  against the Manager, and  $\pounds 1$  against the Firm with 5/- costs, was imposed.

#### Merchandise Marks Act 1926.

This Order requires that certain specified foodstuffs shall bear an indication of origin.

#### Offensive Trades.

These places have been visited regularly during the year. Complaints were noted in one trade and the complaint was remedied.

Other duties have included the Diseases of Animals Acts.



SECTION 14.

Sanitary Circumstances. Housing. Food Sampling. Milk (Retail Supply and Distribution).

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-Hous	ing Con	solidated	Regs.	1925	366
Other Inspections and visit	s under	Housing	Acts		787
Complaints					397
					616
Dirty and/or Verminous					84
Overcrowding					18
Other Inspections					825
Cellar Dwellings and Under	rground	Rooms			33
Tents, Vans, Sheds, etc.					8
Common Lodging Houses					31
Houses let in Lodgings					191
Drainage :					
Drains inspected, etc.					1829
Drains tested					590
Sewers, etc., inspected					38
Factories and Workshops Act	:				
Factories					87
Workshops					131
Workplaces					13
Bakehouses					261
Outworker's Premises					2
Food Inspection :					
Dairies and Milkshops					781
Ice Cream Premises					253
Fried Fish Shops					291
Other Food Premises					46
Smoke Abatement :					
Smoke Observations					358
Visits to Works re Smoke					59
					55

## Sampling :--

C

Food and Drugs (Adulteration) Act, 1928			393
Bacteriological Examination-Milk			272
" " Ice Cream			98
Water Analysis and Bacteriological Exami	nation		11
Biological Examination-Milk			64
Fertilisers and Feeding Stuffs Act, 1926			16
Rag Flock Acts, 1911 and 1928			2
ieneral :			
Complaints (Rats)			27
Nuisance from Stables			25
Accumulations of Manure, Refuse, etc.			52
Swine, Fowls and other Animals			26
Schools			6
Theatres, Cinemas, etc			20
Public Sanitary Conveniences			39
Miscellaneous Visits			1307
otal number of Inspections and Visits		1	0453
'otal number of re-Inspections			2377

# Sanitary Improvements Effected.

Dwellinghouses :	Without Notice	By Notice
Dampness remedied	68	148
Lighting improved	5	38
Ventilation improved	23	114
Water supply provided or improved	28	101
Food storage provided or improved	4	40
Cooking accommodation provided or improved	15	86
Washing accommodation provided or improved	1 11	22
Sinks provided or renewed	92	124
Floors relaid or repaired	12	79
Eaves gutters or fallpipes provided or		
repaired	79	94
Sanitary accommodation provided or improved	15	38
Yards, etc., paved or paving repaired	-	24
Overcrowding abated	4	-
Houses cleansed and/or disinfested re Vermin	45	7
Cellar dwellings closed	4	19
Underground sleeping places closed	1	-
Miscellaneous sanitary defects remedied	79	435
Drainage :		-
Drains constructed or reconstructed	110	115
Drains repaired or cleansed	351	134

Factories and Workshops (including Bakehouses)		
	Without	By Notice
Cleansed and limewashed	17	
Ventilation improved	2	-
Floors drained	_ 1 .	
Additional sanitary accommodation provided	2	-
Sanitary accommodation improved Separate sanitary accommodation for sexes	27	12
provided	3	15
Other nuisances remedied	20	6
Common Lodging Houses :		
Cleansed and limewashed Other improvements effected	1	-
Other improvements enected	12 Dates	1
Houses Let in Lodgings :		
Cleansed and limewashed	56	1
Other improvements effected	4	18
A VILLA		
Dairies and Milkshops :		
Provision made for sterilising utensils	1	-
Other improvements effected	1	-
Ice Cream Premises :		
		~
Provision made for sterilising utensils New Premises provided	10	2
Other improvements effected	10	2 3 1
and an		
Fried Fish Shops :		
Cleansed and limewashed	3	
New Premises provided	2	2
Other improvements effected	7	1
Other Food Premises (including Restaurant Kitch	ens) -	1
	4	1
Other improvements effected	8	Ô
Smoke Abatement :		
Boiler Plants improved	1	-
Other improvements effected	. 1	1
General :		
Sanitary condition of stables improved	6	5
Manure and/or Refuse accumulations removed	40	9
Swine, Fowls, and other animals-Nuisance		
abated	4	5
Sanitary condition of Theatres, etc., improved		100
Miscellancous sanitary improvements effected	14	10

#### Statutory Action.

Matters reported to the Health and Housing Committees for Statutory Action were as follows :--

Housing Act, 1925. Infringement of Houses Let in Lodgings Byelaws (Sec. 6) ... ... 1 house Housing Act, 1930. Sanitary Defects (Sec. 1).........248 houses""(Sec. 17)......5 houses""(Sec. 19)......38 houses Public Health Act, 1875. Infringement of Byelaws re Nuisances (Sec. 44) 10 pigsties Cellar Dwellings (Secs. 72 and 73) ... 12 houses Overcrowding (Secs. 91 and 94) ... 2 houses Defective drainage (Secs. 91 and 94) ... 3 houses Dirty house (Secs. 91 and 94) ... 1 house Defective rainwater fallpipes (Secs. 91 and 94) 9 houses Leaking water tank (Secs. 91 and 94) Leaking water tank (Secs. 91 and 94)... ... 1 dyeworks Public Health Act, 1875. Section 41. Public Health Acts Amendment Act, 1890. Section 19. Defective drainage ... ... 9 houses Public Health Act. 1875. Section 41. Public Health Acts Amendment Act, 1890. Section 19. Halifax Corporation Act, 1905. Section 43. Defective drainage ... ... ... 12 houses ' Halifax Corporation Act, 1900. Section 122. Lack of proper and sufficient water supply ... 19 houses Factory and Workshop Act, 1901. Section 98. ... .. 1 bakehouse Insanitary conditions... ... Food and Drugs (Adulteration) Act, 1928. Section 2. Strawberry Jam deficient in fruit ... 1 retailer Gin more than 35° under proof ... 1 retailer Food and Drugs (Adulteration) Act, 1928. Section 2 Sale of Milk Regulations, 1901. Milk deficient in non-fatty solids ... 1 retailer Milk deficient in fatty solids... 1 producer/retailer Milk and Dairies (Consolidation) Act, 1915. Section 1. Milk and Dairies Order, 1926. Article 31 (2). Filling milk bottles in street ... ... 1 retailer

# Prosecutions during 1934.

Date of Hearing	Act	Offence	Penalty
23/1/34	Food and Drugs (Adulteration) Act, 1928. Section 2. Sale of Milk Regulations, 1901.	Sale of milk defic- ient in fatty solids.	Producer fined $f_5$ . Retailer fined $f_1$ .
15/5/34	Factory and Work- shop Act, 1901. Section 98.	Occupation of insan- itary bakehouse.	Case adjourned one month on defendant promising to cease to use bakehouse. Re- hearlng on 12/6/34 when case was dis- missed, defendant having ceased to use bakehouse.
19/6/34	Food and Drugs (Adulteration) Act, 1928. Section 2. Sale of Milk Regulations, 1901.	Sale of milk defic- ient in non fatty solids.	Defendant fined £5.
8/8/34	Milk and Dairies (Consolidation) Act, 1915. Section 1. Milk and Dairies Order, 1926. Article 31 (2)	Delivering milk in bottle, such bottle not having been filled and closed on registered premises.	Defendant fined 10/-
11/9/34	Food and Drugs (Adulteration) Act, 1928. Section 2. Sale of Milk Regulations, 1901.	Sale of milk defic- ient in fatty solids.	Case dismissed.
25/10/34	Public Health Act, 1875. Section 44. Byelaws with res- pect to Nuisances.	Keeping of swine within 100 feet of a dwellinghouse, in premises not main- tained in a cleanly and wholesome con- dition.	Case adjourned for three months and defendant ordered to abate nuisance. R e - h e a r i ng o n 16/1/35, when sum- mons was withdrawn
25/10/54	Housing Act, 1930. Section 39.	Failure to quit dwellinghouse under Demolition Order.	Order was made for possession within 28 days. (Two defend- ants). One defend- ant was later ejected
12/12/34	Housing Act, 1930. Section 39.	Failure to quit dwellinghouse under Demolition Order.	Order was made for possession within 21 days in the case of two of the defend- ants. One case adjourned for one month. Summons was later withdrawn as house was vacated.

#### 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 the year was 311, a considerable reduction on the figures for the previous year.

Inspections made were as follows :--Factories 87; Workshops 392 (including 261 visits to bakehouses); Workplaces 13; Outworkers' premises 2; Total 494.

H.M. Factory Inspector sent 36 notices under Section 5 of the Factory and Workshop Act, 1901, 30 of which referred to factories and 6 to workshops.

Complaints dealt with during the year were 23, including 22 factories and one workshop.

#### Table 1.

#### Inspection of Factories, Workshops and Workplaces.

and the second second second	Number of				
Premises (1)	Inspections (2)	Written Notices. (3)	Occupiers Prosecuted (4)		
Factories	87	8			
Workshops (including Workshop Laundries)	392	1			
Workplaces (Other than Outworkers Premises)	13				
Total	492	9			

Particulars	Nun	Number of offences in respect of which		
(1)	Found (2)	Remedied (3)	Referred to H.M. Inspector (4)	Prosecutions were instituted (5)
Nuisances under the Public Health Acts—* Want of cleanliness	17	17		
Want of ventilation	2	2		'
Overcrowding				
Want of drainage of floors Other nuisances	1 25	1 25		
Sanitary Accommodation: Insufficient Unsuitable or defective	2 39	2		-
Not separate for sexes	3	3		
Offences under the Factory and Workshops Acts— Illegal occupation of underground bakehouse (S. 101) Other offences	 1	 1		
Total	90	90		

#### Table 2.

Defects found in Factories, Workshops and Workplaces.

\*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 1934 was 104, which includes 42 factory bakehouses.

There were 261 inspections during the year and premises generally were found to be in a satisfactory condition.

#### SMOKE ABATEMENT.

#### Public Health Act, 1875. Public Health (Smoke Abatement) Act, 1926. Byelaw re Black Smoke, 1928.

The number of smoke observations of other than domestic chimneys taken during the year was 358, details of which are given in the following table. Visits to works in connection with smoke emission were made on 59 occasions, although the black smoke byelaw was transgressed nine times only.

No further progress has been made by the West Riding of Yorkshire Regional Smoke Abatement Committee-of which Halifax is a constituent member-towards getting constituent local authorities to declare themselves in favour of an uniform black smoke byelaw which would make it an offence to discharge black smoke into the atmosphere for a period of two minutes during any consecutive period of thirty minutes. We are therefore still in the position of having one local authority with a two-minute byelaw whilst an adjoining and similar local authority has a three-minute byelaw. It would also appear that the more progressive local authorities which desire to reduce the time allowance for black smoke emission in their area are to be held back until all the local authorities within the West Riding area are agreed upon a reduction. The application of the Halifax Corporation in 1933 for an alteration of their black smoke byelaw by reducing the time allowance for the emission of black smoke from three to two minutes in the half-hour, was refused by the Minister of Health for the above reason.

It is again clearly shown that such a reduction would inflict no hardship in Halifax, as 358 half-hour observations taken show that the emission of black smoke averaged only 0.41 minutes per observation.

The local education authority continues to support the training and examination scheme for stokers and boiler attendants, inaugurated by the West Riding of Yorkshire Regional Smoke Abatement Committee six years ago. During the 1934-1935 session, classes have again been held in the Technical College, and it is a pleasure to record that the seven candidates who sat for the examination were all successful, and will in due course be awarded the certificate granted by the Regional Committee.

It is frequently stated that the output of domestic smoke<sup>\*</sup> is greater than that of industrial origin. Whether this be so or not, it is an indisputable fact that owing to the lower temperature obtained in the domestic grate, domestic smoke contains a greater proportion of tars and acid than industrial smoke, and is therefore more injurious to all forms of life and buildings.

Although the domestic smoke problem must remain unsolved until there is an adequate supply of smokeless fuels available at a price which will compare favourably with that of bituminous coal, the good work being done by our local gas and electricity undertakings is worthy of comment.

Mr. McLusky, the Gas Engineer, to whom I am indebted for the following information, states that the sales and hirings of various gas appliances have increased very considerably during the past five years, and there are at present 68,551 of these appliances in use, which is an average of more than two per consumer. Some of the more notable increases are as follows :—

Fires	 	Increase	84%
Cookers	 	,,	33%
Various	 	"	42%

With respect to solid smokeless fuel (gas coke) there is a ready sale, and over 19,000 tons of this fuel were sold last year, including that supplied in 14-lb. paper bags, which is sold over the counters of more than 200 shops in the gas area.

The Electrical Engineer, Mr. Vowles, has kindly supplied information which shows that his department is also making a notable contribution towards smoke abatement. During the past five years there has been a very large increase in the number of electrical appliances sold and hired, as shown by the following figures :--

Water Heaters	 Increase	4585%	
Washboilers	 "	432%	
Cookers	 ,,	263%	

The increase of K.W. connected to domestic supply during the same period is 177%; whilst the total units sold have increased by 38%.

A REAL PROPERTY AND A REAL		_		
			No. of	1
		0	bserva- tions	Average minutes of
<ul> <li>CHIMNEY</li> </ul>		(20		black smoke per
		1.5	each)	Observation
(1)			(2)	(3)
			1	
Adelaide Street Mills			5	1.2
All C. ANCH			7	
A 11. ' A 7'11				0.85
Albion Mills			3	0.66
Archer Street Mills			3	1.2
Atlas Boiler Works			5	4.0
Atlas Dyeworks			4	1.87
Deilen Hall Mille			2	1.25
D 12.11 MC11.		100 C	8	0.12
Battinson Road Mills		***	3	Nil
				INII
Beechwood Mills			1	
Billinghay Mills		***	2	
Binner's Boiler Works			2	
Blackwood Mills			3	0.33
Bottoms Mill			4	0.37
Dealling Data Danada		1902	6	
Bowling Dyke Dyeworks				0.33
Bowling Dyke Mills		***	6	0.33
Brierley Hill Works			2	0.5
Brunswick Mills			3	Nil.
Calder & Hebble Navigation			3	0.33
Canal Works			2	Nil.
Cinder Hill Fireclay Works			3	1.5
C1 37.11				
Clarence Mill			2	0.52
Clay Pits Works			2	Nil
Copley Chemical Works			2	· · ·
Copley Mills			2	
Copley Mills Craven Edge Mill			2	and the second
Crossland's Works		122	3	
C I O D C I I		•••		
			4	
Dean Clough Mills (Brick)			5	
Dean Clough Mills (Stone)			6	
Dunkirk Mills			5	0.5
Eagle Mills			6	1.16
Factfold Mille		and the second se	1	Nil.
			4	NII.
Falcon Laundry			3	0.33
Fenton Estate Dyeworks			2	Nil
Forest Mill			2	
Globe Mills			5	
Goodall's, Salterhebble			3	0.16
			1	Nil
	•••		1	in l
Halifax Corporation-		1.1		
Battinson Road School			1	
Borough Isolation Hospital	***		1	
Electricity Works (Stone) Electricity Works (Brick)			8	0.52
Electricity Works (Brick)			7	0.58
Electricity Works (Steel ch	imney No.	1)	2	Nil
Electricity Works (Steel ch	imney No	2)	2	
Gibbet Street Institution			2	
St. Luke's Hospital				
St. Luke's Hospital			3	
Warley Road School			3	1:66
Woodside Baths			8	Nil
Halifax Ice and Cold Storage	Co.		2	0'75
Halifax Steam Laundry			4	0.12
Hancon Lone Mill		1000	5	0.7
Hartley's Malleable Fittings Wo	ales.		2	
Highroad Wall Works				Nil
Highroad Well Works		••	1	11
Holmfield Brickworks			1	1.0
Holmfield Mills (Brick)			2	Nil
		100 C		and the second

Smo	ke	0	bservat	ions.	. 19.	34.
~		~				

(1)	(2)	(3)
Holmfield Mills (Stone)	 2	Nil
Horley Green Brickworks	 2	0.75
Horley Green Mill	 1	Nil
Horley Green Works	 1	
Illingworth Mills	 1	
Jackroyd Mill	 1	
Keighley Mills Kingston Mills	 3	
Kingston Works	 4	1.25
Ladyship Mills	 3	Nil
Law & Crossley's Stores	 1	
Lee Bank Mill	 5	
Miall Street Mills (North)	 2	
Miall Street Mills (South) Mile Thorn Works	 23	
Mixenden Carbonising Company	 1	
New Mill	 î	:
Old Lane Dyeworks	 5	0.2
Ovenden Wood Brewery	 23	1.0
Pellon Lane Mills		0.66
Perseverance Mills	 3	Nil
Pioneer Iron Works Providence Soap Works	 4 2	
Queen's Road Chocolate Factory	 6	
Queen's Road Mill	 8	i'o
Raglan Street Dyeworks (Brick)	5	0.3
Raglan Street Dyeworks (Stone)	 3	0.16
Raglan Street Works	 1	Nil
Regent Works	 2	1.25
Royal Halifax Infirmary Royal Mills	 1 2	Nil
Royal Mills Ryburne Mills	 3	
Salterhebble Mill	 3	1
Saville Mills	 3	0.33
Sedburgh Mills	 3	0.83
Shaw Lodge Millis	 4	0.37
Shay Lane Dyeworks Smith Messrs. T. & W., Dyers	 1 2	Nil
Spring Edge Works	 4	0'75 Nil
Spring Mill	 i	A STATE STATE AND A
Spring Hall Mill	 3	0.16
Square Mill	 * 1	Nil
Sterne Mills	 1	
Stone Trough Brewery	 3	
Sun Works	 6	1.08
Sunlight Laundry The Brewery	 4	Nil
Trafalgar Mills	 6	0.83
Union Mills	 1 I	Nil
Victoria Mills	 4	0.87
Warley Springs Dyeworks	 13	0.22
Waterside Works (Steel)	 22	Nil
Waterside Works (Stone)	 1	2:0
Webster's, Northgate Wellington Mills	 4	2.0 1.0
West Croft Mills		Nil
West End Cabinet Works	 2 3 2	
West Grove Mills		
Wheatley Dyeworks	 1	0.2
Total	 358	•411
	 1	

#### Atmospheric Pollution Records.

Throughout the year we have continued to obtain monthly records of deposited atmospheric pollution at each of our five stations where standard deposit gauges have been installed. Details of these are set out in Tables 1 and 2, where it will be seen that the Wade Street and West View Park stations, as last year, show respectively the maximum and minimum amount of pollution.

The aggregate deposit of all five gauges shows a slight decrease as compared with 1933—0.22 tons per square mile and is the lowest yet recorded in Halifax. The subnormal rainfall during the year under review has undoubtedly had some bearing upon this result, although it should also be taken as an indication of improvement in the direction of industrial and domestic smoke emission. It is gradually very slowly perhaps—being realized by the "man in the street" that his respiratory tract is quite as important as his alimentary canal, and therefore, that it is just as essential he should have clean air to breathe as pure food to eat.

Details of our records of daylight measurement at Wade Street and West View Park are set out in Tables 2 and 4, and again provide a striking illustration of the effect of atmospheric pollution upon daylight. This side of the question has of late been frequently commented upon in connection with the establishment of municipal aerodromes. To the airman visibility is of vital importance, and any application by a local authority to provide an aerodrome in an area considerably affected by atmospheric pollution (smoke) is likely to be not only frowned upon but absolutely refused by higher authority.

Tables 3 and 6 give particulars of sulphur pollution at the Wade Street and West View Park stations, and it will be seen that at the former there is 88% more sulphur in the atmosphere than at the latter station. TABLE 1.-DEPOSITED ATMOSPHERIC POLLUTION.

		WADE STREET (Central)	DE STREF (Central)	TT .	BEI	BELLE V (} mile	LE VUE PARK ({ mile West)	ARK	A	AKROYD PARK (1/2 mile North)	KROYD PAR ({ mile North)	tK		INFIF (1 mile	INFIRMARY (1 mile South)		WE	WEST VI (1½ mil	IST VIEW PARK (1 <sup>1</sup> / <sub>2</sub> miles West)	ARK (t)
Month	Rainfall in Inches	sbilo2	sbilo2 sbilo2	Total sbilo2	Rainfall in Inches	sbilo2	eldulo2 sbilo2	Total Solids	Raintall in Inches	elduloenI sbilo2	aldulo2 sbilo2	Total Solids	Rainfall in Inches	sbilo2	spilo2 sbilo2	Total Solids	Rainfall in Inches	Solids Solids	Soluble Solids	Total sbilo2
January February		11.38	6.50	17.88	2-88	5.63	5.43	11.06	2-74	7.12	5.34	12.46	2-93	5.85	6.68 2.46	12:53	2.56	2.87	3.71 2.68	6.58 4.58
March April Mav	2.57	14.35 16.92 13.89	11:33	22-34 28-25 18-48	2.99 2.04	7-79	4.62 4.61	12-13 12-13 12-40	2.74 1-93	5.95 7.04	4.19	10-14	2.18 2.18 1.96	6-37 6-37 7-74	6.94 4.14 3.18	10-92	2.48 2.48	5.51	5.07 2.80	10.85 8.31
		23.44	7.09	31.00	1.87	9-81	3.85	13-89	2.65	8.53	3.64	12-17 15-63	3.12	8.85	3.93	12-40	2.08 2.888	8:42	4.94 5.08	13:36 12:55 9:41
September		13.24	4-81	18.05	3-26	5-66	3:43	9-09 11-23	1.76	8-31 5-03	3.63	11.94	1.81	5.59	3-70	9-29	2.03	2.38	3-99	9-31 8-96
November December		16.61	6-16 8-22	22.77	2.15	6.13	4.27	13.36	2-33	2.47	4.18	6.65	2.14 4.96	4.54	4.75 5.93	9-29	2.11	2.70	3.60	6.30
AGGREGATES	31.13	178.04	82.44	260.48	30.57	79-12	63-53	142.65	30-48	81.16	54.85	136-01	29-96	75.06	57.00	132.06	30.22	56.86	54.19	111.05
MONTHLY AVERAGES	2.59	14.84	6.87	21.71	2.55	6.59	5-29	11-89	2.54	92.9	4.57	11-33	2.49	6.25	4.75	11.00	2.52	4.74	4.52	9-25
Monthly Average for whole Borough t	Avera	ge for	whole	Borou	gh t	Rainfall Insoluble Soluble Total S	So	in inches Solids Solids blids	:::: ø	- Carlo		::::	1111	2.54 7.84 5.20 13.04	64 14 tons 10	",	square mile. "	e mile.		
Total Annual Deposit for whole Borough	Inual	Deposit	for w	rhole B	orough		= 156'48 tons	tons per		square m	mile.									





TABLE 3.

# MEASUREMENT OF DAYLIGHT.

# Potassium Iodide Method.

Station				Milligran	is of Ic	Milligrams of Iodine liberated-Daily Average.	erated-	Daily A	verage.				Total Daily	
	January	January February March	March	April	May	June	July	August	Sept.	October	Nov.	Dec.	Average	10
WADE STREET (Central)	06.1	3.96	5:37	8.18	10.39	10.60	12.10	8.29	7.13	4.50	2.78	1.77	6.45	3 .
WEST VIEW PARK (11 miles West)	2.95	61.5	65.9	95.6	86.11	18.11	13.70	9.26	99.8	02.9	4.76	2.66	7.89	
Total Daily Average	2.425	4.875	5.98	8.87	11'185	11'205 12'90	12'90	8.925	7.895	5.80	3.77	2.215	7.17	






TABLE 5.

# SULPHUR POLLUTION-LEAD PEROXIDE METHOD.

Station			We	ight in (	Grammes	s of SO3	calculat	Weight in Grammes of SO3 calculated per 100 square centimetres.	100 squa	re centii	netres.		
	January	January February March	March	April	May	June	July	August	Sept.	October	Nov.	Dec.	Total Monthly Average
WADE STREET (Central)	0.1468	0.1468 0.1250 0.1171 0.1123 0.08	0.1171	0.1123	10	0.0754	0.0724	2990.0	0.0667 0.0696 0.0920 0.1643 0.1550	0.0920	0.1643	0.1550	0.1065
WEST VIEW PARK (1 <sup>±</sup> miles West)         0.0721         0.0512         0.0682	0.0721	0.0512	0.0682	0.0621 0.0376 0.0396	0.0376	0.0396	0.0423	0.0361	0.0361 0.0352 0.0438 0.0859	0.0438		0.1061	0.0567
Total Monthly Average	0.1094	0.1094 0.0881 0.0926 0.0872 0.0593	0.0926	0.0872	0.0593	0.0575	0.0573	0.0514 0.0524 0.0679 0.1251 0.1305	0.0524	6290.0	0.1251	0.1305	0.0816

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# Housing.

# (a) Statistics.

Numb	er of New Houses erected during th	e year :		
(a)	Total including numbers given separ	ately under (	b) 553	
	(1) By the Local Authority		16	
	(2) By other Local Authorities		Nil	
	(3) By other bodies and persons		537	
(b)	With State assistance under the Ho	using Acts :-	-	
	(1) By the Local Authority			
	(a) For the purpose of Part 2 1925			
	(b) For the purpose of Part 3 1925			
	(c) For other purposes		12	
	(c) vor other purposes		14	
	(2) By other bodies or persons		Nil	
1. In	spection of Dwellinghouses during	the year :		
(1)	(a) Total number of dwellinghouses			
	housing defects (under Public H			
	ing Acts)			
	(b) Number of inspections made for	the purpose	2569	
(2)	(a) Number of dwellinghouses (inclu	ded under su	b-	
(-)	head (1) above) which were	inspected an	nd	
	recorded under the Housing Con		-	
	ulations, 1925			
	(b) Number of inspections made for	the purpose	366	•
(3)	Number of dwellinghouses found to	be in a sta	te	
(0)	so dangerous or injurious to health			
	for human habitation		358	
(4)	Number of duallinghouses (avelu	cive of the		
(4)	Number of dwellinghouses (exclu referred to under the preceding su	ub-head) four	nd	
	not to be in all respects reasonably	fit for huma	in	
	habitation			
2. Re	emedy of Defects during the year	without servi	ce	
	formal notices :			
	Number of defective dwellinghouses	rendered fit	in	
	consequence of informal action	by the Loc.	al	
	Authority or their officers		934	

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2	Action under Statutory Powers during the year -	
5.	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	5
	(2) Number of dwellinghouses which were rendered fit after service of formal notices :	
	(a) By owners	10
	(b) By Local Authority in default of owners	
	(b) Proceedings under Public Health Acts :	
	(1) Number of dwellinghouses in respect of which notices were served requiring defects to be	
	remedied	48
	(2) Number of dwellinghouses in which defects were remedied after service of formal notices :—	
	(a) By owners	67
	(b) By Local Authority in default of owners	
	(c) Proceedings under Sections 19 and 21 of the Housing Act, 1930 :	
	(1) Number of dwellinghouses in respect of which Demolition Orders were made	49
	(2) Number of dwellinghouses demolished in pur- suance of Demolition Orders	9
	(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	NU
		Nil
	(2) Number of separate tenements or underground rooms in respect of which Closing Orders	
	were determined, the tenement or room having been made fit	Nil

### General Observations as to Housing Conditions.

In October, 1933, the Corporation decided upon a 5-year slum clearance programme to deal with insanitary housing conditions existing within the Borough.

This programme provides for the demolition of 1,727 houses in 33 Clearance Areas by the end of 1938, and involves the re-housing of 6,091 persons in 1,836 new houses and/or flats. In addition, not less than 50 houses per annum are to be dealt with under Section 19 of the Housing Act, 1930.

### Halifax (Hardcastle's Buildings) Clearance Area.

Since the last Annual Report was written, the erection of 26 houses required to re-house persons from this area has been completed. These consisted of 14 houses of two bedrooms and 12 houses of three bedrooms. Only ten of these houses are occupied by persons from the area, the remainder having been let to families living in houses which have been dealt with under Section 19 of the Housing Act, 1930. The whole of the houses in this Clearance Area are now vacated and demolition is in progress.

### Halifax (Chapel Fold) Clearance Area.

This area was represented in May, 1934, and comprises 1.457 acres, 72 buildings including 61 dwellinghouses, and housing a population of 300 persons.

It was decided to deal with it as a Compulsory Purchase Order and a Public Inquiry was held by the Minister of Health in October, 1934. This Order was confirmed with modifications in February, 1935.

### Halifax (Hatter's Fold) Clearance Area.

This area was represented in May, 1934, and comprises 0.107 acres, 8 buildings including 4 dwellinghouses, with a population of 18 persons.

A Compulsory Purchase Order was made and the Minister of Health held a Public Inquiry in October, 1934. This Order was confirmed with modifications in February, 1935.

### Halifax (Hodgson's Fold) Clearance Area.

This area was represented in May, 1934, and comprises 0.375 acres, containing 26 dwellinghouses, with a population of 117 persons.

A Compulsory Purchase Order was made and the Public Inquiry ordered by the Minister of Health, was held in October, 1934.

This Order was confirmed without modification in February, 1935.

### Halifax (South Street) Clearance Area.

This area was represented in May, 1934, and comprises 0.638 acres, containing 69 dwellinghouses with a population of 194 persons.

A Compulsory Purchase Order was made and a Public Inquiry held by order of the Minister of Health in October, 1934.

This Order was confirmed with modifications in February, 1935.

### Halifax (Waterhouse Arms Yard) Clearance Area.

This area was also represented in May, 1934, and comprises 0.283 acres, containing 21 buildings, 19 of which are dwelling-houses, with a population of 90 persons.

A Compulsory Purchase Order was made and the Public Inquiry ordered by the Minister of Health held in October, 1934.

This Order was also confirmed with modifications in February, 1935.

### Halifax (St. John's Street) Clearance Area.

This area was represented in July, 1934, and comprises 0.847 acres, containing 75 buildings of which 69 are dwelling-houses, with a population of 192 persons.

A Compulsory Purchase Order was made and the Public Inquiry ordered by the Minister of Health held in November, 1934.

This Order was confirmed with modifications in April, 1935.

### Individual Houses.

Under Section 19 of the Housing Act, 1930, 38 houses were represented during the year as being unfit for human habitation, and not capable at a reasonable expense of being rendered so fit.

In the case of 18 houses, owners presented written undertakings accompanied by a specification of works to be carried out to make the houses fit, or use them for some other purpose. Two undertakings concerning two houses were accepted by the Health Committee, but one undertaking respecting 16 houses was rejected.

Demolition Orders were made in respect of 49 houses, and 9 houses were demolished during the year.

In the case of the 16 houses referred to, the owner appealed against the Demolition Orders to the County Court. The case was heard on the 8th February, 1935, and the appeal was allowed with costs against the Corporation.

### Common Lodging Houses.

There are still 9 Common Lodging Houses within the Borough, registered to accommodate 488 lodgers. Two of these are situate in Clearance Areas already confirmed by the Minister of Health and others will be included in Clearance Areas yet to be dealt with. The accommodation which will be left, however, will be ample to supply all requirements in this direction. During the year 31 inspections have been made by the District Sanitary Inspectors.

### Houses-let-in-Lodgings.

The number of Houses-let-in-Lodgings is 73, housing about 211 separate families. Again, many of these have been dealt with in Clearance Areas, whilst many others will be included in Clearance Areas yet to be represented.

The number of inspections made during the year was 191.

### Theatres, Music Halls, Cinemas, etc.

These have been inspected during the year to ascertain if they were satisfactory in regard to their general sanitary condition, and in two cases improvements were effected.

### Rats and Mice (Destruction) Act, 1919.

Under this heading 27 complaints were received and the premises inspected. Remedial measures necessary included the repair or reconstruction of defective drainage in addition to 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.

The following information refers to retailers whose premises are under the supervision of the Chief Sanitary Inspector.

Registered Retail Purveyors with Dairy Premises ... 58 Registered Retail Purveyors of Bottled Milk only ... 242 Registered Dairy Premises ... ... ... ... 46

In addition there are 78 registered retail purveyors of milk within the Borough, with premises outside the Borough.

During the year 781 inspections were made of dairies and milkshops within the Borough.

### Bacteriological Examination of Milk.

During the year 239 samples of ungraded milk were obtained. Of these 126 were of milk produced inside the Borough, the remaining 113 samples being of milk produced outside our district.

The following Table shows that of the milk produced in the Borough, 69 or 54.8 per cent. of the samples complied with the standard laid down for Certified Milk, whilst not less than 106 or 84.1 per cent. of the samples were of Grade A standard. Of milk produced outside the Borough, 48 or 42.5 per cent. of the samples taken were of Certified Milk standard, whilst 76 or 67.3 per cent. satisfied the standard laid down for Grade A milk. In addition to the above, the following samples were obtained :--

Grade A (Tuberculin Tested) Milk, 25 samples (three unsatisfactory; Pasteurised Milk, 3 samples (one unsatisfactory; Sterilised Milk 5 samples (two unsatisfactory). All unsatisfactory samples were followed up, and later samples taken were found to be very satisfactory.

Ungraded Milk. Bacteriological con	ondition.
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MII	K PRODUCED IN BOROL	JGH.
Not more than 30,000 bacteria per c.c. and no coliform bacillus in 1/10th c.c. 69 = 54.8%	Not more than 200,000 bacteria per c.c. and no coliform bacillus in 1/100th c.c. 106 = 84.1%	More than 200,000 bacteria per c.c. and/or coliform bacillus in 1/100th c.c. 20 = 15.9%
Milk 1	PRODUCED OUTSIDE BO	ROUGH.
48 == 42.5%	76 = 67.3%	37 == 32.7%
	TOTAL. ALL MILK.	
117 = 49%	182 == 76°2%	57 = 23.8%

### **Biological Examination of Milk.**

During the year a total of 64 samples were obtained, 40 of which were samples of milk produced in the Borough, the remaining 24 being samples of milk produced outside our district.

Only one sample was reported as giving a positive result indicating Tuberculosis, and that was of a milk produced within the Borough, from a herd of 23 cows, and a bulk sample.

The matter was referred to the Veterinary Inspector for attention, and three cows were slaughtered which were found to be affected with Tuberculosis.

### Food and Drugs (Adulteration) Act, 1928.

A total of 393 samples of Food and Drugs was taken during the year and submitted to the Public Analyst for chemical analysis.

These included 221 samples of milk and 172 samples of other foods and drugs.

Samples not genuine according to the Sale of Milk Regulations, 1901, numbered 4, giving a percentage of 1.81. There were also four samples of other foods and drugs reported not genuine, giving a percentage of 2.34. The total percentage of adulterated samples is 2.04.

Tables 1, 2, 3 and 4 give particulars respecting all samples taken.

Nature of Sample	Numb	er of Sa taken	mples	Number not Genuine		
	Formal	Informal	Total	Formal	Informal	Total
Milk	195	26	221*	2	2	4
Cream	-	12	12	-		
,, (Tinned)	-	1	1	-	-	_
Baking Powder	-	11	11			-
Butter	-	8	8	-	-	-
Cheese		5	5	-	-	
Cocoa		3	3	-		
Cream of Tartar	-	5	5	-	-	-
Fruits Dried (Apricots)	-	4	4		-	
" (Peaches)		1	1	-	-	_
" (Prunes)		2	2	-	-	_
Gin	1	7	8	1	1	2
Ginger (Ground)	-	8	8	-	-	
Ginger Wine		3	3	_	-	
Jam	1	9	10	1	1	2
Lemon Crush	-	1	1	-	- 1	
Margarine	-	8	8		-	
Milk of Sulphur	-	4	4	-3		
Mincemeat	-	6	6	-	-	
Paregoric	-	3	3		-	_
Pearl Barley	-	4	4	-		_
Peas (Bottled)		1	1	-		-
" (Tinned)	-	4	4	-	-	-
Pepper (White)	-	8	8	_	- 1	-
Potted Meat	-	9	9			-
Rice	-	4	4	-	-	-
Rum	-	6	6		-	
Sausages	-	17	17	-	-	
Soda Mint Tablets	-	2	2			-
Sponge Cakes	-	6	6	-	-	-
Vinegar		6 2 6	6 2 6	-	-	
., (Malt)	-	6	6		-	-
Total	197	196	393	4	4	8

TABLE 1.

\*Included in the 221 samples of milk is one "Appeal to Cow" sample.

### TABLE 2.

115

### 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
130	Milk-8% added water	Sample from retailer followed three days later by sample taken from alleged pro- ducer in course of delivery to retailer. This sample (132) contained 9'14% of Non-Fatty Solids and was genuine milk. Two days later we were informed that milk in question had been produced by another producer outside the Borough, and a further "in course of delivery" sample (135) was obtained on our behalf by the West Riding County Council. This sample was stated to contain 8'92% Non-Fatty Solids and to be genuine milk. Retailer was prosecuted in the Halifax Borough Police Court on 19th June, 1934, and fined £5.
195	Milk—8% deficient in Fat	Sample from producer-retailer followed two days later by "appeal to cow" sample found to contain 3'3% of milk fat. Vendor was prosecuted in the Halifax Borough Police Court on 11th Septem- ber, 1934, when case was dismissed, the Bench being impressed by an allegation that samples had been mixed.
214	Milk—2% deficient in Fat	An informal sample from a producer- retailer. A formal sample taken later was found to be genuine milk.
227	Milk—12% deficient in Fat	An informal sample from a producer- retailer. Formal samples obtained later showed the milk to be genuine though of low fat content. Some Jersey cattle were added to herd to improve fat content of milk.
350 357	Strawberry Jam— Deficient in Fruit	This was an informal sample reported by the Public Analyst as not complying with the standard laid down by the Food Man- ufacturers' Federation. Two days later a formal sample was obtained and found to contain only 30% of strawberry fruit. Reported to Health Committee and warning letter sent by Town Clerk.
368 369	Gin—2.3% added water Gin—1.5% added water	This was an informal sample followed the same day by a formal sample. Matter was reported to the Health Com- mittee and the Town Clerk instructed to send a warning letter to the vendor.

TA	B	LE	3.

			No. of	Analytical Data		
Mon	th		Samples	Milk Fat per cent	Non-fatty Solids per cent.	
January			20	3.68	9.15	
February			18	4.08	9'14	
March			14	3.61	9.19	
April			14	3.83	9'13	
May			20	3.63	9'04	
June			28	3.69	9'14	
July			27	3.63	8.88	
August			15	3.64	9.02	
September			21	3.95	9.09	
October			17	3.81	9.06	
November			13	3.71	9'17	
December			14	3.61	8.99	
Average for	the ye	ar 193	4	3.74	9'09	
"	,,	193	3	3.71	8.99	
,,	,,	193	2	3.78	9.04	
"	,,	193	1	3.69	9'08	
"	,,	193	0	3.69	9.03	
"	,,	192	9	3.63	8'96	
"	,.	192	8	3.81	9.03	
Requirements Regulations,		Sale o	f Milk	3.00	8.20	

Monthly Average Composition of Milk Samples.

### TABLE 4.

and the second second			Amo	ount	
Food	No, of Samples examin'd	Nature of Preservative	Allowed	Found	Remarks
Milk	221	Nil	Nil	Nil	
Cream	13	Nil	Nil	Nil	
Butter	8	Nil	Nil	Nil	
Fruits Dried : Apricots	4	Sulphur Dioxide	2000 ppm.	1069 ppm. 640 ppm. 475 ppm. 1293 ppm.	
Peaches	1	Do.	Do	627 ppm.	Sector 1
Prunes	2	Nil	Nil	Nil	
Ginger Wine	3	Sulphur Dioxide	350 ppm	Nil	
1		Benzoic Acid	600 ppm.	Nil	
Jams	10	Sulphur Dioxide	40 ppm.	7-Nil 1-15 ppm. 1-25 ppm. 1-27 ppm.	
Lemon Crush	1	Sulphur Dioxide	350 ppm.	Nil	
and there want		Benzoic Acid	600 ppm.	Nil	-
Margarine	8	Nil	Nil	Nil	
Mincemeat	6	Sulphur Dioxide	350 ppm.	Nil	
Peas (Tinned & Bottled)	5	Nil	Nil	Nil	
Potted Meat	9	Sulphur Dioxide	450 ppm.	Nil	And And
Sausages	. 17	Sulphur Dioxide	450 ppm.	6-Nil 1-51ppm. 1-58 1-77 1-103 1-122 1-128 1-128 1-141 2-256 1-346 1-368	
Sponge Buns	. 6	Nil	Nil	Nil	

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### Articles of Food examined for Preservative in accordance with the Public Health (Preservatives, etc., in Food) Regulations, 1925/6/7.

### Manufacture and/or Sale of Ice Cream.

During the year 253 inspections have been made of 153 registered premises. Thirteen new premises were provided and improvements were carried out in respect of three premises.

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

Ice Cream. Bacteriological Condition.

PRODUCED IN	N BOROUGH.
Not more than 100,000 bacteria per c.c. and no coliform bacillus in 1/100th c.c. or less.	More than 100,000 bacteria per c.c. and coliform bacillus in 1/100th c.c.
35 = 53.03%	31 = 46°97%
PRODUCED OUT	SIDE BOROUGH.
20 = 62 5%	12 = 37.5%
тот	AL.
55 = 56.12%	43 == 43.88%

Although the results during the year under review are an improvement upon those obtained during 1933, they are still most disappointing.

It will be seen from the above Table that only 56.12% of the total samples taken comply with the adopted standard.

The Department is co-operating with the manufacturers and vendors so far as is possible, and it is hoped that this will ultimately result in a much improved bacteriological standard being obtained.

### Fried Fish Shops.

During the year 291 inspections were made of 170 registered premises. Four new premises were established, and sanitary improvements carried out at 11 existing premises.

Generally speaking, premises may be said to be kept in good sanitary condition.

### Fertilisers and Feeding Stuffs Act, 1926.

There were 16 informal samples taken during the year, 5 of which were of Fertilisers and 11 of Feeding Stuffs.

All were satisfactory excepting one sample of Fertiliser and one of Feeding Stuff.

The fertiliser was Nitrate of Soda and the sample stated to be unsatisfactory in that the limits of variation laid down in the Regulations made under the Act, had not been complied with. A warning letter was sent to the vendors by the Chief Sanitary Inspector.

The other unsatisfactory sample was one of Wheatings with a fibre content higher than that declared, and which was also outside the limits of variation referred to above.

In this case also a warning letter was sent to the vendors by the Chief Sanitary Inspector.

### Rag Flock Acts, 1911 and 1928.

Rag flock is not manufactured in the Borough and there are very few dealers in same.

Two samples were taken during the year and both were satisfactory.



SECTION 15.

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# Analytical Work.

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### 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 year under review has been remarkably free from detected adulteration. Three hundred and ninety three samples of thirty varieties of Food and Drugs have been examined, and only four samples of Milk, two of Jam and two of Gin have failed to reach the normal standards of quality expected in those articles.

The four samples of Milk did not reach the standard laid down by the Board, now Ministry of Agriculture and Fisheries, in their Sale of Milk Regulations 1901. The standard legalised by these Regulations is a very low one, namely 3.0 per cent. of Fat and 8.5 per cent. of Solids not Fat. Just how low this standard is, can be demonstrated by quoting the averages of 221 samples analysed under the Act in Halifax during the year. Average Fat content 3.74%, average Solids not Fat content 9.07%.

I act as Public Analyst for three other Boroughs and find that the quality of milk in Halifax, as judged by the amount of cream and total solids, is far higher than that of the other authorities. The purity of the milk in Halifax also reaches a very high standard, and clearly demonstrates the care in production and distribution exercised by the producers and retailers. The milk industry as a whole, and more particularly that of the West Riding, is passing through difficult times : it is greatly to the credit of producers that such care is maintained. Let us hope that in the near future those concerned in the West Riding Milk Industry will receive the help and encouragement they so sorely need.

A few years ago a Joint Committee of the Jam Manufacturers' Association and the Society of Public Analysts arranged that members of the Association should recognise two qualities of Jam—the Full Fruit Quality and the Lower Fruit Quality —the two qualities being gauged by the weight of fruit per hundred pounds of Jam. Two of the ten samples examined, though marked 'Full Fruit Standard ' did not contain sufficient fruit, and were reported against.

Section 2 of The Food and Drugs (Adulteration) Act 1928, states that it is an offence to adulterate Whiskey, Brandy, Gin, or Rum with water to such an extent as to reduce the spirit to more than 35 degrees U.P. In the fourteen samples of spirits examined two, both Gin, had been admixed with so much water that their strength had been reduced to more than 35 degrees U.P., and the samples were accordingly reported as unsatisfactory.

# SECTION 16.

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# Miscellaneous.

### WATER SUPPLY.

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

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

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.

Gorple Reservoirs. The construction of the two reservoirs at Gorple was commenced in July, 1927, and they were officially opened on the 7th June, 1934, by Lt.-Com. Rt. Hon. Sir E. Hilton Young, M.P., Minister of Health.

They have a combined drainage area of 1,992 acres, and a total capacity of 658,128,000 gallons.

The compensation water discharged from them is 1,020,000 gallons per day, continuous flow.

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

The new Filtration Plant at Ogden was opened on June 14th, 1934; the water for the whole of the Borough is now efficiently treated.

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.

Total Solids				7.73 Pts	s. per	100,000
Organic Solids	· ···			1.58	,,	,,
Chlorine				1.3	,,	,,
Free Ammonia	·			0.0010	,,	,,
Albuminoid A	mmonia			0.0026	,,	,,
Nitric Nitroge	n			0.028	,,	,,
Nitrous Nitrog	en			Nil		,,
Oxygen absorb	bed in 4	hrs. at 8	0° F.	0.0092	,, ,	,,
Temporary Ha	ardness		1	0.8 Deg	rees.	
Permanent Ha	ardness			3.2	22	
pH Value				7.6	,,	
Colour Lovibond	Units.					
2ft. Strata.	Green			0.6 Deg	rees.	
	Yellow			0.2	"	
Bacteriological En Total Micro-on			on G	elatine		
at 20° C.					Nil	
	3 days				.2	
Total Micro-on			on Ag	gar at		
	days				1	
3	days				1	
	Absent				100	cc.

In common with other Authorities throughout the country, the question of water supply is engaging the serious consideration of the Council.

I am indebted to Mr. D. T. Lloyd Jones, the Borough Engineer, for the following observations :--

### **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.

Whilst the main sewerage of the Borough has for many years been considered adequate to deal with the maximum normal flow, a recent survey has disclosed conditions which show the necessity for the construction of certain relief sewers to mitigate surcharge problems in various urbanised sections of the town. It is proposed to commence these works as soon as the sanction of the Ministry of Health has been obtained, and to spread the operations over a period coinciding with works of Highway re-construction along the respective routes.

Building development and conversion of closets in various districts will call for extensions of branch sewers and replacements of sewers of obsolete construction.

It is anticipated that the 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.

### Disposal of Refuse and Street Cleansing.

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

### **Refuse Collection.**

The weight of refuse collected during the year was 23,054 tons, equivalent to 12.35 cwts. per 1,000 of our population per day.

The collection is carried out chiefly by low loading mechanical vehicles of semi-dustless and completely dustless types.

The department is responsible for the cleansing of just over 1,400 Goux Pails, and during the year 61,974 pails were collected, emptied, cleansed and disinfected.

### Refuse Disposal.

The quantity of refuse dealt with as stated above was 23,054 tons, and of this quantity, 17,323 tons was received at

				т.	с.	Q.		%
Dust		*		 7299	7	3		44.32
Cinders				 1652	14	0		10.03
Pots and	Bricks			 238	17	0		1.45
Tins				 387	7	3		2.35
Iron	/			 119	4	3		0.73
Glass				 78	10	1		0.48
Combusti	ble Deb	ris		 5583	2	1		33.90
Vegetable	Garba	ge		 873	7	1		5.30
Miscellan	eous			 236	17	0		1.44
Т	otal Hou	ise Refu	se	 16469	8	0		100.00
Fish				 317	7	2		
Blood				 279	9	1		
Meat, Fa	t, Offals	s, Bones		 242	18	3		
793 Dogs	, 480 C	ats		 13	18	1		
		Total		 17323	1	3	-	

our Refuse Disposal Works. The composition of this refuse was as follows :---

5,731 tons of refuse was dealt with under the system of controlled tipping recommended by the Ministry of Health at our various tips. Considerable revenue is derived from the sale of manufactured products such as Fish Meal, Meat and Bone Meal, Fertiliser, Fats, etc., and from recovered materials such as Cinders, Old Metal, Paper, etc.

### Street Cleansing.

The department is responsible for the cleansing of 220 miles of streets and roads, and approximately 212,115,000 square yards are cleansed annually.

The number of gullies emptied during the year was 245,872.

### Snow Removal and Ashing Roads.

We have had only one slight fall of snow during the last winter, and once again our chief duty has been to maintain the roads in a safe condition during periods of frost by speedy application of salt and sand or riddled ashes. The amount of vehicular traffic and the gradients in our district necessitate immediate attention when sharp frost occurs.

### 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	806
Assistants' Half-holiday Visits	541
Registration and Administrative Visits	601
Special	290
Farly Closing	500
Children's Rue Low	596
Fabrics (Misdoscription) Act	169
Hairdressers (Sunday Closing) ,,	227
Rats and Mice (Destruction) Act "	686
Shops without Assistants' Half-holiday Notice (Sec. 1)	
Do Young Persons ,, (Sec. 2)	
Do Mixed Business ,, (Sec. 10)	
Do Half-holiday Closing ,, (Sec. 4)	
Do Seats for Female Assistants (Sec. 3)	
Contravention of Mealtimes (Sec. 1, Sub. 5)	
Do Assistants' Half-holiday (Sec. 1, Sub. 1)	5
Do Half-holiday Closing (Sec. 4)	207
Do Early Closing (Occ. 4)	. 207
(Closing Orders and 1928 Act)	160
Do Young Persons' Hours (Sec. 2)	100
Do Children's Bye-Laws	6
Do Hairdressers' Sunday Closing	_
Warning Notices sent	14
Descritions	1
Prosecutions	

For selling during prohibited hours, a Caterer and Confectioner was fined £1 and costs.

### Rats and Mice (Destruction) Act, 1919.

Number of premises that are or have been rat-infeste	ed
during the year	114
	24
Premises where numbers were reduced	46
Premises at present rat-infested	90
Visits paid for National Rat Week purposes	193
	686
Number of rat tails brought to the Health Dept. durin	
the year (excluding Rat Week)	
Number of rat tails brought to the Health Dept. durin	ng
Rat Week	747
Number of rats killed in addition	456

Compared with previous years, the year 1934 was remarkable by reason of the very few premises which were badly rat infested. A large number of premises have been visited by a few rats, but generally their stay has been brief, their departure being hastened by the use of poison bait, the stopping of burrows with concrete and by other methods. It is only by exercising unceasing vigilance that the increase in the rat population can be controlled.

### **Co-operation** with Medical Practitioners.

Number of visits to houses by Dectors of the Health Department at the request of Private Practitioners	Number of Consulta- tions with Private Practitioners exclusive of telephone consultations	Telephone Consultations	Total
29	25	110	164

(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
35	15	50	Dr. Roe.
-	7	7	Dr. Liddle.

### 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.

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SHORT TITLE.

The Public Health Supplemental Act 1851 (No. 3).

- The Public Health Supplemental Act 1856.
- The Local Government Board's Provisional Orders Confirmation (Halifax etc.) Act 1881.
- The Local Government Board's Provisional Orders The Halifax Order 1886. Confirmation (No. 4) Act 1886.
- The Local Government Board's Provisional Orders The Halifax Order 1887. Confirmation (No. 4) Act 1887.
- The Local Government Board's Provisional Orders The Halifax Order 1889. Confirmation (No. 11) Act 1889.
- The Local Government Board's Provisional Orders The Halifax Order 1890. Confirmation (No. 3) Act 1890.

The Local Government Board's Provisional Orders Confirmation (No. 4) Act 1892.

The Local Government Board's Provisional Orders Confirmation (No. 9) Act 1892.

The Local Government Board's Provisional Orders Confirmation (No 10) Act 1892.

- The Commons Regulation (Halifax) Provisional Order Confirmation Act 1895.
- The Local Government Board's Provisional Orders Confirmation (No. 4) Act 1896.
- The Local Government Board's Provisional Orders Confirmation (No. 7) Act 1899.

The Local Government Board's Provisional Orders Confirmation (No. 5) Act 1901.

The Local Government Board's Provisional Orders Confirmaticn (No. 7) Act 1912.

- The Local Government Board's Provisional Orders Confirmation (No. 1) Act 1918.
- Ministry of Health Provisional Orders Confirma- The Halifax Order 1924. tion (No. 5) Act 1924.
- Ministry of Health Provisional Orders Confirmation (No. 3) Act 1928.
- Ministry of Health (Halifax and West Riding Provisional Orders) Confirmation Act 1928.

Ministry of Health Provisional Orders Confirmation (No. 11) Act 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.

ORDER THEREBY CONFIRMED. The Halifax Order 1851.

Section 2 relating to Hlfx. The Halifax Order 1881.

The Halifax (No. 2) Order 1892.

The Halifax (No. 3) Order 1892.

The Borough of Halifax Order 1892.

Provisional Order dated 30th April 1895.

The Halifax Order 1896.

The Borough of Halifax Order 1899.

The Halifax and Sowerby Bridge Order 1901.

The Halifax (Extension) Order 1912.

The Halifax Order 1918.

The Halifax Order 1928.

The Halifax (Extension) Order 1928.

The Halifax Order 1929.

### General Summary of Meteorological Observations taken at the Public Library, Belle Vue, from January 1st, 1934, to December 31st, 1934. By E. Green, Libeartan.

- 1934.		Pressul Atmosph Mont	e of ere in b.		Temp	inature of	f Air in i	Month.		Tempe	rahure.		Fapour.		2 0	44	Mean Re Thermo	ading of motor.					WI	int.							Rain.	in.	
		32º F. Level.						Mean.		(Adop- tel.)			In a foot	cubic of Air.	a degree o	Weight of a foot of Air.	Ann.		Page 1				Relati	ive prope	etion of				of Clead.	and i	57	Revenue	
Meath.		Mean at 3 and Sea 1	Barge.	Highest.	Lowest.	Range.	Of all Righest.	Of all Lovest.	Daily Bange.	Air.	Dew Points	Elastic For	Mean.	Short of Saturation.	Mean Mean Miles	Mean	Maximum in Rays of Su	Minimum on Grass.	Retimo	N.	N.E.	Е.	8.E.	8.	8,W.	w.	N.W.	Calms.	Mean	No. of Days it fell.	Amount		
January February March April May June July August September October November December		29·993 30·414 29·603 29·698 30·020 30·042 29·955 29·555 29·855 29·855 29·829 29·990 29·509	1.728 1.184 1.154 0.890 0.782 0.976 0.920 1.548 1.264	$\begin{array}{c} 50 \cdot 1 \\ 55 \cdot 6 \\ 67 \cdot 1 \\ 73 \cdot 9 \\ 75 \cdot 9 \\ 84 \cdot 2 \\ 72 \cdot 4 \\ 74 \cdot 9 \\ 64 \cdot 0 \\ 50 \cdot 7 \end{array}$	$\begin{array}{c} 25 \cdot 5 \\ 25 \cdot 5 \\ 27 \cdot 1 \\ 34 \cdot 7 \\ 42 \cdot 0 \\ 51 \cdot 1 \\ 40 \cdot 3 \\ 39 \cdot 0 \\ 32 \cdot 2 \\ 27 \cdot 4 \end{array}$	$\begin{array}{c} 24{\cdot}6\\ 30{\cdot}1\\ 40{\cdot}0\\ 39{\cdot}2\\ 43{\cdot}9\\ 33{\cdot}1\\ 32{\cdot}1\\ 35{\cdot}9\\ 31{\cdot}8\\ 23{\cdot}3\end{array}$	$\begin{array}{r} 44 \cdot 2 \\ 43 \cdot 4 \\ 49 \cdot 6 \\ 57 \cdot 3 \\ 63 \cdot 9 \\ 70 \cdot 5 \\ 63 \cdot 6 \\ 64 \cdot 4 \\ 52 \cdot 9 \\ 45 \cdot 5 \end{array}$	$\begin{array}{c} 33.6\\ 32.4\\ 36.7\\ 41.2\\ 46.9\\ 52.5\\ 49.3\\ 47.9\\ 43.0\\ 38.1\end{array}$	10.0 11.0 12.9 16.1 17.0 18.0 14.1 16.4 9.9 7.4	3 38.6 3 38.5 43.2 49.0 54.6 54.6 55.5 47.8 42.0	$\begin{array}{r} 34.3\\ 34.4\\ 38.6\\ 42.8\\ 48.1\\ 52.1\\ 51.2\\ 50.0\\ 41.7\\ 39.8 \end{array}$	$0.199 \\ 0.234 \\ 0.276 \\ 0.334 \\ 0.399 \\ 0.377 \\ 0.360 \\ 0.263 \\ 0.245 \\ 0.245 \\ 0.245 \\ 0.199 \\ 0.19$	$\begin{array}{c} 2 \cdot 3 \\ 2 \cdot 3 \\ 2 \cdot 7 \\ 3 \cdot 1 \\ 3 \cdot 8 \\ 4 \cdot 4 \\ 4 \cdot 2 \\ 4 \cdot 1 \\ 3 \cdot 0 \\ 2 \cdot 8 \end{array}$	0.5 0.5 0.9 0.9 1.8 1.0 0.6 0.8 0.3	89 84 84 79 80 72 81 86 79 92	534.4 527.8 522.3 513.9 519.0 522.1 529.0 535.3	$\begin{array}{c} 64 \cdot 3 \\ 69 \cdot 2 \\ 87 \cdot 1 \\ 96 \cdot 7 \\ 103 \cdot 8 \\ 111 \cdot 8 \\ 99 \cdot 3 \\ 99 \cdot 8 \\ 79 \cdot 3 \\ 57 \cdot 5 \end{array}$	$\begin{array}{r} 28.9\\ 28.2\\ 33.5\\ 36.7\\ 42.8\\ 45.1\\ 42.9\\ 40.8\\ 37.8\\ 28.1 \end{array}$	$     \begin{array}{r}       3 \cdot 5 \\       3 \cdot 0 \\       2 \cdot 5 \\       3 \cdot 0 \\       2 \cdot 5 \\       3 \cdot 0 \\       3 \cdot 0 \\       3 \cdot 0 \\       3 \cdot 0 \\       2 \cdot 0 \\     \end{array} $	$\begin{array}{c} 0 \\ 3 \\ 2 \\ 1 \\ 4 \\ 2 \\ 0 \\ 2 \\ 3 \\ 0 \\ 2 \\ 3 \\ 0 \\ \end{array}$	$\begin{smallmatrix}&0\\&2\\&4\\12\\&2\\16\\&3\\&0\\&0\\&0\\&8\\&0\end{smallmatrix}$	$ \begin{array}{c} 0 \\ 0 \\ 2 \\ 1 \\ 2 \\ 3 \\ 0 \\ 0 \\ 0 \\ 1 \\ 0 \end{array} $	$     \begin{array}{c}       2 \\       2 \\       4 \\       2 \\       0 \\       1 \\       1 \\       5 \\       9 \\       3 \\       1 \\       3 \\       1 \\       3 \\       1 \\       3 \\       1 \\       3 \\       1 \\       3 \\       1 \\       3 \\       1 \\       3 \\       1 \\       3 \\       1 \\       3 \\       1 \\       1 \\       1 \\       3 \\       1 \\     $		$     \begin{array}{r}       16 \\       3 \\       9 \\       9 \\       10 \\       5 \\       10 \\       12 \\       21 \\       15 \\       3 \\       14 \\     \end{array} $	5544845111413900	$9 \\ 19 \\ 7 \\ 5 \\ 11 \\ 7 \\ 15 \\ 4 \\ 1 \\ 10 \\ 5 \\ 3 \\ 3 \\ 10 \\ 5 \\ 3 \\ 10 \\ 5 \\ 3 \\ 10 \\ 5 \\ 3 \\ 10 \\ 10 \\ 10 \\ 10 \\ 10 \\ 10 \\ 10 $	$     \begin{array}{c}       10 \\       12 \\       9 \\       6 \\       11 \\       8 \\       11 \\       9 \\       7 \\       4 \\       18 \\       12 \\     \end{array} $	$\begin{array}{c} 6.3\\ 8.0\\ 7.5\\ 7.0\\ 7.0\\ 6.7\\ 6.4\\ 7.0\\ 6.0\\ 7.0\\ 8.7\\ 8.4\end{array}$	8 24 18 14 13 12 21 16 27 15	105. 2-95 0-24 2-95 2-59 1-86 1-84 2-88 2-62 1-80 3-30 2-25 5-03	The observations hav been reduced to mea values by Glaisher Barometrical & Diurm Range Tables, and th Hygrometrical result have been deduced fron the seventh edition of Hygrometrical Table after corrections for Index errors of th Instruments employed	
Annual Mea	ns	29.895	1.218	64.6	33.3	32·1	54.0	41.0	18.	47.5	42.4	0.279	3.2	0.73	83	529.5	81.6	35.2	$2 \cdot 8$	2	4	1	3	2	11	6	8	10	7.2	-	-		



Rain fell on 215 days, and measured 30.31 inches.

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