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INSTITUTE OF SOCIAL
MEDICINE

10, PARKS ROAD,
OXFORD

County Borough of Halifax
Health Department

Annual Report

ON THE HEALTH
OF THE BOROUGH
FOR THE YEAR 1948



GEORGE C. F. ROE

M.R.C.P., L.R.C.S., L.M., D.P.H., D.P.M.

Medical Officer of Health





County Borough of Halifax
Health Department

THE INSTITUTE OF SOCIAL MEDICINE,
10, PARK STREET

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Medical Officer of Health

Health Committee

(as on December 31st, 1948).

Mayor - Alderman C. HOLDSWORTH, J.P.

Alderman L. CHAMBERS, Chairman.

Councillor E. RILEY, Vice-Chairman.

Alderman A. MUFF.

Alderman J. H. STEPHENSON.

Councillor A. GELDER.

Councillor Mrs. W. OXLEY.

" F. C. LAWRENCE.

" D. ROBINSON.

" J. LUMB.

" G. W. SHOTTON.

" J. NICHOLL.

" F. SWIRE.

" H. NUTTON.

" T. STOTT.

Councillor Mrs. E. L. WHITLEY.

Sub-Committees

Appointed by the Health Committee.

Accounts Sub-Committee.

THE CHAIRMAN.
VICE-CHAIRMAN.

Councillor LUMB.
" SHOTTON.

Councillor SWIRE.

Sanitary Services Sub-Committee.

THE CHAIRMAN.
VICE-CHAIRMAN.
Alderman STEPHENSON.
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Councillor NICHOLL.
" ROBINSON.
" SHOTTON.
" STOTT.

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Maternity and Child Welfare Sub-Committee.

THE CHAIRMAN.
VICE-CHAIRMAN.
Alderman MUFF.
Councillor GELDER.
" LUMB.
" NICHOLL.

Councillor OXLEY.
" STOTT.
" WHITLEY.
Mrs. D. I. GREENWOOD.
Mrs. E. I. HAIGH.
Mrs. D. RHODES.

General Purposes Sub-Committee

THE CHAIRMAN.
VICE-CHAIRMAN.
Alderman STEPHENSON.
Councillor GELDER.

Councillor NUTTON.
" ROBINSON.
" SHOTTON.
" WHITLEY.

Mental Health Services Sub-Committee.

THE CHAIRMAN.
VICE-CHAIRMAN.
Alderman MUFF.
Councillor LAWRENCE.

Councillor LUMB.
" NUTTON.
" OXLEY.
" SWIRE.

Staff of the Health Department

(as on December 31st, 1948).

Medical Officer of Health.

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

Assistant Medical Officer of Health.

E. J. SIMPSON, M.B., Ch.B., Medical Officer, Maternity and Child Welfare.

Public Analyst.

R. MALLINDER, B.Sc., F.I.C.

Chief Sanitary Inspector.

J. W. BEAUMONT.

Meat and Foods Inspector.

J. FLANAGAN.

Lay Administrative Officer and Ambulance Controller.

E. GILLOTT.

Senior Sanitary Inspector and Housing Inspector.

H. MARGERISON.

District Sanitary Inspectors.

H. LEAPER.

G. A. WOODHEAD.

F. BURKE.

Housing Inspector.

F. BURTON.

Clerical Staff.

H. WRIGHT—Senior Clerk.

N. BRADLEY.

T. K. BOOTHMAN.

E. A. BARKER.

J. WILEY.

A. SUTCLIFFE.

V. M. ATKINSON

Mrs. E. MALTON—M. & C.W. Centre.

(Telephonist).

L. WOOD—Housing Section.

Mental Health Service.

S. PARKINSON—Duly Authorised Officer.

G. S. EXLEY

" "

Miss E. CLARKSON

" "

Maternity and Child Welfare.

Senior Health Visitor—Miss E. R. ORAM.

Health Visitors.

Miss M. MOORE.
Miss S. E. BRIGGS.
Miss D. BARNES.

Miss M. O. FORRESTER.
Miss N. DINGSDALE.
Miss P. A. VAUGHAN,
Tuberculosis Visitor.

Domestic Help Organiser.

Miss E. CLARKSON.

Day Nurseries.

Craigie Lea Day Nursery, Ovenden—

Matron: Miss A. L. GUMMERSON.

Ling Bob Day Nursery, Pellon—

Matron: Mrs. M. R. WILSON,

Ambulance Service.

Assistant Controller—L. HANSON.

12 Driver-Attendants, 3 Attendants, 1 Telephonist.

Rodent Control.

Rodent Operative—H. E. PERFECT.

Assistant Rodent Operative—C. HALLIDAY.

COUNTY BOROUGH OF HALIFAX

REPORT

OF THE

MEDICAL OFFICER OF HEALTH,
FOR THE YEAR 1948.

INTRODUCTION.

*To the Chairman and Members of the Health
 Committee.*

Mr. Chairman, Ladies and Gentlemen,

I have the honour herewith to present the Annual Report upon the Health of Halifax for the year 1948. The Report is the seventy-sixth of the series of these reports. It is planned in sections so that the details of any specific service can be readily obtained.

Under the National Service Act the structure of the Health Services was altered. The Local Authority lost its hospitals which, on the 5th of July, went over to the Hospitals Management Committee. The Local Authority continued to be responsible for the non-hospital maternity and child welfare clinics, the domiciliary midwifery service, care of mothers and young children and domestic helps. In addition they became responsible for the new Mental Health Services and the Ambulance Service. In due course Health Centres will become the responsibility of the Local Authority.

The following Table shows some of the chief Vital and Mortal Statistics for the period under review, compared with 1947.

Year	B.R.	D.R.	I.M.R.	M.M.R.	No. of Still Births	No. of Illeg. Births	Pulm. T.B., D.R.	Cancer D.R.
1947 ...	19.9	14.8	41.77	0.52	48	125	0.4	2.26
1948 ...	17.7	13.8	29.2	0.58	41	121	0.3	2.13

The major causes of death among the population were as follows :—

No. of deaths from Heart Diseases ...	415 (455 in 1947)
„ „ Cancer ...	206 (214 in 1947)
„ „ Cerebral Haemorrhage ...	213 (188 in 1947)
„ „ Pulmonary Tuberculosis...	28 (38 in 1947)

Apart from an increased incidence of measles, during the last quarter of the year, the incidence of infectious diseases continued low. The year was entirely free from epidemics. The low incidence of diphtheria was maintained.

The duties of the Health Visitors are being expanded from being primarily concerned with Maternity and Child Welfare to the care of the family as a health unit. In addition to environmental hygiene they will have to deal with the social and psychological aspects of family health.

The Day Nurseries have been full to capacity during the year. A scheme is in being for their expansion. The incidence of infections in the nurseries was very low. The children have learned to adapt themselves to other children in a remarkable way. About 3 per cent. of babies suffer from prematurity. A factor in the incidence of prematurity is the quality and quantity of the mother's diet. The most common deficiencies in the diet are protein, calcium, iron and vitamins A. and C. In this matter the Health Visitor plays an important rôle by educative work in the home.

It is important to know the morbidity of an area as well as its death-rates. Such knowledge gives us a much more comprehensive picture of disease incidence and may suggest remedies. Morbidity studies are now a feature of the Public Health Department.

Misconceptions are common about illness. For example, some parents seem to believe that scarlet fever and measles are only infectious if and when a rash appears. That is not so. Measles is most infectious **before** the rash appears, i.e., during the period when the child affected displays the symptoms of an ordinary cold. During a measles epidemic a child who develops "bleary" eyes, a "running" nose or a cough, should be carefully watched and, if necessary, isolated. In scarlet fever, the rash may appear and disappear within a few hours.

The appointment of Lay Administrative Officers to Public Health Departments is a move in the right direction. In the past the Medical Officer of Health was overwhelmed by executive details. He had no time to think and explore health fields at present largely unexplored. It is hoped that in the future, he will have time for this work. A prime duty of a Health Department is to educate the people in all matters that lead to better health. For example, in an industrial town, clean air does not exist. Who knows how much damage results to the human body from smoke and chemicals emitted into the air we inhale.

The problems of illness are modified by age. The child's physiological activities are greater than the adults and it is these that account for some of the special problems of disease in childhood. The subject, indeed, is so vast and varied that it has come to form a special branch of study. It is called Pediatrics. The young adult may take many liberties; may indulge in many pleasures and draw on his resources without apparent detriment to health. But however little it appears to cost, he is drawing on health capital that is limited, and for every unphysiological expenditure he must pay in later days of life. With regard to minor illnesses it must be remembered that they are an unphysiological expenditure of energy. They take their toll, be they never so trifling nor so successfully passed through.

An individual's health and his expectancy of life are assessed on the soundness of his organs, on his family medical history and on his innate capacity to resist disease. Obviously the assessment requires much knowledge of human anatomy and pathology and these are matters for the individual's doctor. One is often called upon to give an opinion on the mental development of a child. This is a big and special subject.

Development depends on many factors, congenital and acquired, and is much influenced by environment. The normal child begins to recognise objects by sight at the end of six months. Obviously deprivation of sight and/or hearing in early life will greatly retard mental development and, render it at best, incomplete. Again, old age presents its special problems. One may be young at seventy and old at fifty. Some families are notoriously long-lived, while of others, few members attain to three score years and ten. Senility is, therefore, not a question merely of years. Many senile changes can be ascribed to definite morbid causes, but of these changes (such as hardening of the arteries) many are so common as to be almost physiological. In illness the old succumb more readily than the young, but diseases which are associated with fever and acute reactions in the young are in the old much less acute: there is less—or no—fever and less reaction.

Regarding disinfection, modern public health throughout is, I believe, generally in favour of the abolition of terminal disinfection. The practice of current disinfection by the sterilisation of contaminated articles during the course of an infectious illness is the more rational procedure. The experience gained in various cities in U.S.A. shows that secondary cases of scarlet fever are not increased when terminal disinfection is abolished. I think the time has come when this expensive and ineffective procedure should be dropped.

The expectation that the hospitalisation of infectious diseases would diminish their prevalence has proved unfounded. Hospitalisation has had little, if any, effect upon prevalence. The reason is that endemicity is maintained not by clinical cases but by the more numerous unrecognised sub-clinical infections and by carriers. The most valuable services hospitals give to the public are primarily curative and only secondarily preventive.

In Section 2 of the Report I have set out the statistics relating to mental illness and mental deficiency. To these statistical illustrations of mental ill-health it is necessary to add the individuals in all sections of the community, who are leading unhappy, incomplete and frustrated lives. Among school children too, there are mental problems, for in many schools there are difficult or maladjusted children whose conduct or educational progress causes anxiety. All these instances constitute problems in our social life which call for

skilled investigation, treatment, and, if possible, prevention. The purpose of the new Mental Health Services is to tackle this problem. Provided it is found possible to secure trained staff, the Mental Health Services will play an important part in mental health work, and, I hope, make human life better, more useful and happier. It is a big problem and I cannot, here, pursue it further.

As in former years I have endeavoured to write this introduction in non-technical language for "the man in the street." It would have been easier to write it in technical language but such a presentation would have little—if any—appeal to the ordinary citizen and, it is my desire to interest the citizen in matters relating to the public health.

Mr. A. Rogers, the Lay Administrative Officer, left us in September to take up the post of Lay Administrative Officer to the Lancashire County Council. He had been with us only since June 1947. His predecessor—Mr. J. H. Bargh—only stayed with us for the period July 1946, to March 1947. Frequent changes of the Lay Administrative Officer are not good for the Department. On each occasion they cause a hiatus—sometimes continuing for months—and such gaps, recurring at frequent intervals, are not in the best interests of public health administration. The whole of this matter requires to be reviewed in the light of conditions of service operating in comparable Boroughs.

I take this opportunity of thanking all the members of the Health Department Staff for the zeal, energy and loyalty which they have, one and all, displayed during the year.

It is once again my privilege to express to the Chairman and Members of the Health Committee my appreciation of the interest they have shown in the work of the Public Health Department.

I am,

Mr. Chairman, Ladies and Gentlemen,

Yours faithfully,

GEORGE C. F. ROE,

Medical Officer of Health.

Public Health Department,
Powell Street,
Halifax.

REPORT

Statistics

SECTION 1



Statistics

REPORT

Statistics

Latitude	53° 44' North.				
Longitude	1° 50' West.				
Mean height above sea level, feet	...	...	...	780	
Area in acres	...	...	...	14,081	
Population (Census 1931)	...	...	...	98,115	
(Males 44,600. Females 53,515).					
Population (Mid year, 1948)	...	...	...	96,420	
Density of population per acre	...	...	...	6·8	
Number of inhabited houses (1931 Census)	...	...	...	28,488	
Number of houses according to Rate Books (14th December, 1948).	...	...	...	32,176	
Average number of persons to each occupied house...	...	...	...	2·99	
Rateable Value, 14th December, 1948	...	...	...	£623,145	
Sum represented by a penny rate (Estimated Product).	...	...	...	£2,425	

Summary of Vital Statistics.

Birthrate per 1,000 population	...	...	...	17·7	
Deathrate per 1,000 population	...	...	...	13·8	
Infantile deathrate per 1,000 births	...	...	...	29·2	
Respiratory deathrate	...	...	...	1·34	
Phthisis deathrate	...	...	...	0·3	
Deathrate from other forms of Tuberculosis	...	...	...	0·04	
Tuberculosis deathrate (all forms)	...	...	...	0·33	
Deathrate from Cancer	...	...	...	2·13	

Summary of Deaths.

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

Cause of Death	Number
Typhoid and Paratyphoid Fevers	1
Cerebro-spinal Fever	—
Scarlet Fever	—
Whooping Cough	1
Diphtheria	—
Tuberculosis of respiratory system	28
Other forms of Tuberculosis	4
Syphilitic Disease	6
Influenza	1
Measles	2
Acute Poliomyelitis and polioencephalitis	1
Acute Inf. Encephalitis	2
Cancer of Buc. Cav. and Oesoph (M)	4
Cancer of Uterus (F)	16
Cancer of Stomach and Duodenum	34
Cancer of Breast	17
Cancer of all other sites	135
Diabetes	13
Intracranial vascular lesions	213
Heart Disease	415
Other Diseases of Circulatory System	66
Bronchitis	75
Pneumonia	39
Other Respiratory Diseases	16
Ulcer of Stomach or Duodenum	13
Diarrhoea, etc. (under 2 years)	9
Appendicitis...	3
Other Digestive Diseases	26
Nephritis	42
Puerperal and post-Abort: Sepsis...	—
Other Maternal Causes	1
Premature Birth	8
Congenital Malformation; Birth inj.; Infant Dis.	20
Suicide	16
Road Traffic Accidents	12
Other Violent Causes	24
All other Causes	66
Total	1,329

	Year	Birthrate per 1,000 Total Population	* Annual Deathrate per 1,000 Population						Rate per 1,000 Births	
			ALL CAUSES	Typhoid and Para-Typhoid	Small-Pox	Whooping Cough	Diphtheria	Influenza	Diarrhoea and Enteritis (under two years)	DEATHS under one year
England and Wales ...	1948	17.9	10.8	0.00	0.03	0.02	0.00	0.03	3.3	34
126 County Boroughs and Great Towns including London ...	1948	20.0	11.6	0.00	0.00	0.02	0.00	0.03	4.5	39
HALIFAX ...	1940	13.0	15.6	0.01	0.00	0.02	0.15	0.23	4.0	45
	1941	13.3	15.7	0.00	0.00	0.03	0.12	0.10	21.3	65
	1942	15.8	14.6	0.00	0.00	0.00	0.05	0.05	6.9	56
	1943	17.1	15.4	0.00	0.00	0.04	0.04	0.31	5.2	50
	1944	18.6	14.5	0.00	0.00	0.03	0.04	0.03	3.5	38
	1945	16.39	16.1	0.00	0.00	0.02	0.05	0.09	3.4	42
	1946	18.6	14.4	0.00	0.00	0.02	0.00	0.04	2.3	31
	1947	19.9	14.8	0.00	0.00	0.01	0.02	0.03	5.8	42
	1948	17.7	13.8	0.01	0.00	0.01	0.00	0.01	5.3	29

Provisional figures.

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

Vital and Mortal Statistics for Halifax during the last 21 years.

Year	Death-rate	Infant Mortality Rate	Maternal Mortality Rate	Tuberculosis (all forms)		Diphtheria		Scarlet Fever		Typhoid and Para-typhoid		Cerebro Spinal Fever		Smallpox	
				New Cases	Deaths	New Cases	Deaths	New Cases	Deaths	New Cases	Deaths	New Cases	Deaths	New Cases	Deaths
1928	12.3	67	10.2	150	67	224	16	386	2	8	2	1	nil	221	nil
1929	14.7	76	6.8	183	82	146	9	431	3	73	1	nil	nil	156	1
1930	14.3	66	9.2	169	79	100	7	274	1	9	1	1	nil	56	nil
1931	14.9	77	3.2	198	70	165	17	163	3	4	2	nil	nil	nil	nil
1932	14.8	80	8.7	158	71	162	10	182	1	1	nil	2	2	nil	nil
1933	15.4	92	9.4	161	71	173	13	256	2	nil	nil	3	3	nil	nil
1934	13.9	77	10.5	132	60	344	20	337	2	nil	nil	1	1	nil	nil
1935	14.6	70	6.4	158	55	322	16	227	2	nil	nil	1	1	nil	nil
1936	15.2	68	7.02	206	75	206	12	136	nil	3	nil	2	2	nil	nil
1937	14.6	63	2.39	135	38	164	5	162	nil	1	nil	5	5	nil	nil
1938	14.1	57	2.92	165	55	155	6	145	nil	nil	nil	3	1	nil	nil
1939	15.3	60	4.4	135	65	129	5	184	2	nil	nil	nil	nil	nil	nil
1940	15.6	45	8.8	118	51	311	15	166	nil	3	1	31	9	nil	nil
1941	15.7	65	1.5	111	60	230	12	97	nil	nil	nil	16	3	nil	nil
1942	14.6	56	3.4	113	56	196	5	669	nil	1	nil	9	4	nil	nil
1943	15.4	50	1.9	123	68	127	4	411	nil	2	nil	2	2	nil	nil
1944	14.5	38	2.3	156	54	118	4	481	nil	nil	nil	nil	nil	nil	nil
1945	16.1	42	2.0	110	53	92	5	173	nil	nil	nil	nil	nil	nil	nil
1946	14.4	31	1.1	69	41	17	nil	74	nil	73	nil	nil	nil	nil	nil
1947	14.8	42	0.52	87	44	21	2	84	nil	2	nil	3	nil	nil	nil
1948	13.8	29	0.58	61	32	9	nil	161	nil	*1	1	2	nil	nil	nil

* Transferred in

Vital and Mortal Statistics for Halifax during the last 21 years (continued).

Year	Pneumonia		Whooping Cough		Poliomyelitis		Cancer Deaths	Heart Diseases Deaths	Cerebral Hæmorrhage Deaths
	New Cases	Deaths	New Cases	Deaths	New Cases	Deaths			
1928	66	32	nil	nil	nil	nil	172	216	92
1929	87	38	nil	14	6	nil	170	308	100
1930	121	61	nil	2	nil	nil	170	308	114
1931	124	109	nil	4	1	nil	191	327	95
1932	105	82	nil	8	2	nil	176	342	85
1933	105	87	nil	3	4	nil	158	418	87
1934	80	66	nil	2	1	nil	180	381	74
1935	117	69	nil	1	1	nil	194	406	67
1936	91	74	nil	4	1	nil	193	448	74
1937	115	77	nil	2	nil	nil	178	424	73
1938	164	58	nil	nil	1	nil	186	419	77
1939	182	59	2	2	2	nil	193	449	89
1940	156	57	185	2	2	nil	187	408	232
1941	188	66	240	3	nil	nil	235	381	179
1942	226	61	174	nil	5	nil	216	374	164
1943	236	55	211	4	2	nil	205	374	179
1944	124	38	201	3	nil	nil	177	366	199
1945	103	43	133	2	nil	nil	219	398	237
1946	69	35	153	2	1	nil	206	464	182
1947	67	37	237	1	6	nil	214	455	188
1948	62	39	295	1	1	1	206	415	213

Table showing comparative yearly Vital and Mortal Statistics from 1940 to 1948 inclusive.

Year	Birth-rate	Death-rate	Infant Mortality Rate	Maternal Mortality Rate	Pulmonary Tuberculosis		Venereal Diseases		Pneumonia	
					New Cases	Death-rate	Syphilis	Gonorrhoea	New Cases	Deaths
1940	13.0	15.6	45	8.8	106	.44	45	96	156	57
1941	13.3	15.7	65	1.5	102	.58	33	66	188	66
1942	15.8	14.6	56	3.4	98	.53	34	40	226	61
1943	17.1	15.4	50	1.9	101	.62	49	56	236	55
1944	18.6	14.5	38	2.3	90	.48	45	49	124	38
1945	16.39	16.1	42	3.0	90	.48	50	67	103	43
1946	18.6	14.4	31	1.1	53	.37	103	124	69	35
1947	19.9	14.8	42	0.5	72	.40	95	130	67	37
1948	17.7	13.8	29	0.5	61	.33	70	73	62	39

Year	Deaths from Heart Disease	Deaths from Cancer	Deaths from Cerebral Hæmorrhage	Deaths from Diabetes	Diphtheria		Scarlet Fever	
					New Cases	Deaths	New Cases	Deaths
1940	408	187	232	8	311	15	166	nil
1941	381	235	179	17	230	12	97	nil
1942	374	216	164	19	196	5	669	nil
1943	373	205	179	20	127	4	411	nil
1944	366	177	199	19	118	4	481	nil
1945	398	219	237	15	92	5	173	nil
1946	464	206	182	16	17	nil	74	nil
1947	455	214	188	14	21	2	84	nil
1948	415	206	213	13	9	nil	161	nil

Notification.

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

Disease					Number	
					Notified	Con- firmed
Smallpox	...	...	...	...	Nil	Nil
Dysentery	...	...	...	...	Nil	Nil
Typhoid Fever and Enteric Fever	...	...	...	...	Nil	Nil
Para-Typhoid	...	...	...	...	Nil	Nil
Scarlet Fever	...	...	...	...	171	161
Malaria	...	...	...	...	Nil	Nil
Diphtheria	...	...	...	...	18	9
Puerperal Pyrexia	...	...	...	...	10	10
Erysipelas	...	...	...	...	14	14
Ophthalmia Neonatorum	...	...	...	...	2	2
Encephalitis Lethargica	...	...	...	...	Nil	Nil
Acute Poliomyelitis	...	...	...	...	1	1
Cerebro-spinal Fever	...	...	...	...	2	2
Measles	...	...	...	...	642	641
Whooping Cough	...	...	...	...	296	295
Pneumonia—Primary-Influenzal	...	...	...	...	62	62
Tuberculosis—						
Respiratory	...	...	...	...	50	50
Other Forms	...	...	...	...	10	10
Total					1278	1257

Road Traffic Accidents.

During the year there were 12 deaths attributable to Road Traffic Accidents. The following table affords a comparison with the number of fatal accidents occurring in previous years:

	1942	1943	1944	1945	1946	1947	1948
Fatal	9	7	6	9	4	7	12

The Growth of the Borough of Halifax.

Year	Population	Note
1848	40,000	Borough Incorporated.
1861	51,937	
1871	65,510	
1881	63,360	
1891	82,864	
1892	83,364	Borough extended by the additions of Ovenden and Illingworth Wards.
1899	90,934	
1900	96,684	Borough extended by the addition of Copley Ward.
1901	104,936	
1911	101,556	Borough extended by the additions of Warley and Northowram Wards.
1921	100,700	
1931	98,115	Mid year density of population per acre 6.3.
1945	89,390	
1946	93,280	
1947	94,580	
1948	96,420	

COMPARATIVE STATEMENT OF VITAL STATISTICS.

Year 1948.

	Birth Rate	Death Rate	Infantile Mortality Rate		Death Rate from Phthis	Death Rate from other Tub. Diseases	Maternal Mortality Rate (per 1,000 Total Live and Still Births)				
			Year 1948	Average 5 years 1943-47			(140) Abortion with sepsis	(141) Abortion without Sepsis	(147) Puerperal Infections	(142-6) (148-150) Other	Total
ENGLAND AND WALES	17.9	10.8	34	45	*	*	.11	.05	.13	.73	1.02
126 GREAT TOWNS	20.0	11.6	39	51	*	*	*	*	*	*	*
Birkenhead ...	21.4	12.1	53	70	.87	.15	...	...	...	.3	.3
Burnley	17.35	14.24	49	51	.48	.05	...	...	...	.66	.66
Bury	17.9	13.39	47	41	.33	.05	...	...	.93	.93	1.86
Halifax	17.7	13.8	29	40	.30	.04	...	...	...	.58	.58
Huddersfield ...	16.91	13.23	33	50	.25	.06	.89	...	...	.45	1.34
Liverpool	22.3	11.4	54	70	.79	.11	...	...	.605	.165	.77
Manchester	19.9	12.27	42	58	.69	.07	.07	.07	.07	.57	.78
Oldham	18.56	14.0	46	53	.40	.11	...	.43	1.30	1.74	3.47
Preston	18.78	12.62	39	60	.55	.11	...	...	.44	...	.44
Rochdale	17.0	14.1	38	48	.49	.07	...	...	...	...	...
Salford	21.1	11.8	42	61	.80	.10	...	...	...	.8	.8
St. Helens	21.3	10.2	60	64	.57	.04	...	...	.41	1.24	1.65
Stockport	17.49	11.86	36	60	.38	.05	.395	...	...	.395	.79
Wallasey	17.99	12.54	43	48	.53	.09	...	...	.56	...	.56
Wigan	18.84	11.55	54	63	.41	.06	.61	...	...	...	.61

* Not available

SECTION 2



National Health Service Act 1946.

**Section 22. CARE OF MOTHERS AND YOUNG
CHILDREN.**

Section 23. MIDWIFERY.

Section 24. HEALTH VISITING.

Section 25. HOME NURSING.

Section 26. VACCINATION AND IMMUNISATION.

Section 27. AMBULANCE SERVICES.

**Section 28. PREVENTION OF ILLNESS,
CARE AND AFTER-CARE.**

Section 29. DOMESTIC HELP.

Section 51. MENTAL HEALTH SERVICES.

Sections 22 and 24.

CARE OF MOTHERS AND YOUNG CHILDREN.

HEALTH VISITING.

I am indebted to Dr. E. J. Simpson, Medical Officer-in-Charge Maternity and Child Welfare Centre for the following comments :—

The co-ordination of Maternity Services under Mr. Emblin, M.D., F.R.C.S., M.M.S.A., M.R.C.O.G., initiated in September, 1947, has resulted in figures which show a world record for safe obstetrics, and exceedingly low rates of still-births and neonatal deaths. The only maternal death in 1948 was an early abortion.

Our Infant Mortality Rate of 29.2 per 1,000 live births is the lowest recorded in Halifax, and noteworthy in an industrial community. That for England and Wales is 34, and that for the greater towns, of which Halifax is one—39. It is to be noted that the reduction in our infant mortality rate is mainly due to fewer deaths in the first four weeks of life especially among premature babies and those suffering from congenital malformations.

The attendances at Child Welfare Clinics totalled just under 20,000, i.e., about 1,000 less than last year when there were 200 more births. There was some drop in attendances in the weeks following the inception of the National Health Service Act but they have risen again. Presumably the mothers found the doctors surgeries too crowded, though such conditions apply at all our clinics. With our present small staff and inadequate premises it is inevitable, as it is regrettable, that the patients have to wait, especially those requiring medical consultation. In August, work was begun on the extension of the Northgate clinic into the adjoining premises—formerly a chemist shop. This will give urgently needed additional space, but we hope for a day when it will be possible to have a Child Welfare Centre built for the purpose on a more suitable site.

Immunisation, with a combined serum for Diphtheria and Whooping Cough, has proved popular, and the number of children now being immunised is higher than it has ever been, but even now it only represents about half the young children who should be protected against dangerous diseases.

Orthopaedic and artificial sunlight clinics have been used to the full and the results achieved have been excellent.

Our voluntary workers at the Child Welfare Clinics have done most useful work as in the past, and we are deeply indebted to them. We were sorry to lose Mrs. Whitaker who retired this year. She has been closely associated with the Centre since 1915, and has given most loyal and valuable service, both on the Maternity and Child Welfare Committee and at the Northgate Clinic.

There have been no changes in the permanent staff, but we have ourselves started to train Health Visitors. Two pupils started their course in October. They go to Bradford for lectures and receive practical training in Halifax. When they have obtained their diploma (in 1949) they will join our staff of Health Visitors. In this way we hope gradually to overcome our present shortage of staff. Only then will we be able to open urgently needed new clinics at Pellon, Northowram, Luddenden and Siddal. These clinics will not only make it easier for mothers to attend Child Welfare Centres, but will relieve the severe congestion at our present clinics—Northgate, Queen's Road and Ovenden.

In conjunction with the Education Committee, a two year training course for Nursery Nurses was begun in September. These girls attend lectures on child hygiene, sewing, cookery and biology two days a week, and on the remaining days gain practical experience by working in day nurseries and nursery classes, and attending infant, orthopaedic and sunlight clinics. The syllabus followed is that of the Nursery Nurses' Education Board whose examination the pupils will sit. They should eventually provide trained staff for our day nurseries and nursery schools.

Because the rate of pay for untrained helpers is comparatively high, I do not think it is sufficiently realised by parents or girls how important it is to accept a small reduction in wages over two years for the sake of systematic training or the subsequent value of a diploma.

Births.

No. of Births notified in the Authority's Area during the period 5th July 1948, to 31st December 1948, under Section 203 of the Public Health Act 1936, as adjusted by any transferred notifications :—

(a) Live Births—798. (b) Still Births—14. (c) Total—803.

1st January, 1948—31st December, 1948.

Public Health Act 1936, Section 203.

Number of births notified (including births transferred to other districts)	...	...	...	...	2947
Number of births registered	...	...	...	...	2979
Number of stillbirths...	...	...	...	...	36
Number of notified births attended by doctors with and without midwives	...	...	...	...	55
Number of notified births attended by midwives only	...	...	...	...	424
Number of births notified from the Royal Halifax Infirmary	...	...	...	...	569
Number of births notified from the Halifax General Hospital	...	...	...	...	1898
Number of births notified from Nursing Homes	...	...	...	...	1
Number of births transferred to other districts...	...	...	...	...	1248

Ante-Natal Clinics.

The Halifax County Borough provides one Ante-Natal Clinic at the Northgate Infant Welfare Centre in addition to the Ante-Natal Clinic which is provided by arrangement with Halifax District Nursing Association. Ante-Natal Clinics are also held at the Halifax General Hospital and the Royal Halifax Infirmary (Hospitals Management Committee).

Post-Natal Clinics.

Post-Natal Clinics are also held at each of the above premises.

Local Health Authority Clinics.

	No. of Clinics provided at end of year	No. of sessions now held per month at Clinics in previous column	No. of women in attendance		Total No. of attendances in period 5th July to 31st Dec.
			No. of women who attended during the period 5th July, 1948, to 31st Dec., 1948	No. of women in previous column who had not previously attended a clinic before current pregnancy or after last confinement	
Ante-Natal Clinics	2	20	256	145	1356
Post-Natal Clinics	2	8	32	17	78

Ante-Natal Clinic (Infant Welfare Centre).

1st January, 1948—31st December, 1948.

Number of Sessions	...	...	...	...	28
Number of new cases	...	...	...	...	47
Number of repeat visits	...	...	...	...	64
Average attendance per Session	...	...	...	...	4
Number of children attending the Clinics—					
Under 1 year	...	...	...	...	1356
Between the ages of one and five years	...	...	...	...	3928

Arrangements with Medical Practitioners.

There are no arrangements with general practitioners for ante-natal and post-natal mothers to be examined.

Child Welfare Clinics.

Infant Welfare Centres are provided at the Northgate Clinic, Queen's Road Clinic and Ovenden Clinic. The Northgate Clinic is a whole-time centre. The centres at Queen's Road and Ovenden are situated in Church Schools, at which one session is held at Ovenden and two sessions at Queen's Road each week.

1	No. of Centres provided at end of year	No. of Infant Welfare Sessions now held per month	No. of children who attended Centres during period 5th July to 31st Dec.	No. of children who first attended the Centres during the period 5th July to 31st December, 1948, who were :		No. of children included in Col. 4 who at end of year were :		Total number of attendances made by children in the period 5th July to 31st December, 1948	
				Under 1 year of age	Over 1 year of age	Under 1 year of age	Over 1 year of age	Under 1 year of age	Over 1 year of age
Centres	3	24	2279	579	88	993	1286	7642	1692

1st January, 1948—31st December, 1948.

Infant Welfare Centres.

Northgate—

Number of Sessions	...	...	...	135
Number of new cases	...	...	...	727
Number of repeat visits	...	...	...	7047
Average attendance per Session	...	...	...	52.6
Percentage seen by the Doctor at each Session	...	...	...	38.34

Queen's Road—

Number of Sessions	...	...	...	92
Number of new cases	...	...	...	558
Number of repeat visits	...	...	...	8915
Average attendance per Session	...	...	...	103
Percentage seen by the Doctor at each Session	...	...	...	25.64

Ovenden—

Number of Sessions	...	...	...	46
Number of new cases	...	...	...	230
Number of repeat visits	...	...	...	2469
Average attendance per Session	...	...	...	53.67
Percentage seen by the Doctor at each Session	...	...	...	44.55

Day Nurseries.

The Local Authority provides two Day Nurseries, one at Ling Bob and the other at Craigie Lea. The accommodation is not sufficient to meet the needs of the Borough.

	No.	No. of Approved Places		No. of children on register at end of year		Average daily attendance	
		0-2	2-5	0-2	2-5	0-2	2-5
Nurseries main- tained by Council ...	2	64	23	64	23	56	21

Mother and Baby Homes.

Hostel accommodation for unmarried mothers and their babies is available at the St. Margaret's Home, Balmoral Place. This Home is owned by the Halifax Rural Deanery Moral Welfare Council who act as agents of the Local Health Authority. The hostel provides accommodation for 10 mothers and their babies. The Local Health Authority have been given an appropriate share in the management of the service.

There are many problems to be thought of with an illegitimate child and its mother which do not arise in a normal family where the parents are married. The future security of the child has to be safeguarded as far as is possible, and the mother has to be helped to realise and enabled to carry out her responsibilities and this very often, without any help, from the baby's father. If advice and help can be given to an unmarried mother before the baby is born and afterwards many foolish arrangements may be avoided and much suffering and unhappiness to the child may perhaps be prevented.

There are many cases in Halifax where the girl's family will help and will keep the mother and the baby in the home, but there are many instances where a girl has no parents living or where the parents are not in a position to help or will not help. In such cases residential accommodation such as is now provided at St. Margaret's fills a great need. If an expectant and a nursing mother can receive proper care and can be given the opportunity of caring for her own child, the foundations of the future well-being and the health of the child are being established.

During these nine months thirty unmarried mothers were referred to us. The following figures just indicate what happens in some of these cases:—

24 mothers have had their babies.

- 7 mothers with their babies are living at home with their family.
- 2 mothers with their babies are living in lodgings.
- 2 mothers with their babies are living with the putative father's family.
- 4 mothers with their babies were still at St. Margaret's on the 31st March.
- 2 mothers married the putative father.
- 1 baby was placed with a foster-mother.
- 1 baby was placed in a voluntary residential nursery.
- 1 baby died.
- 3 babies were adopted.
- 7 of the girls went to Mother and Baby Homes outside Halifax.
- 4 of the girls were European Volunteer Workers living in Halifax.

In addition, six married women were referred to us as having illegitimate children. In all these cases the husband and wife were separated, divorced or living apart from each other. In two cases the babies have not yet been born; two babies are being brought up by the mother, and in two cases the babies have been adopted.

Name and Address—St. Margaret's House, Balmoral Place, Halifax.

Nature of Accommodation—Unmarried Mothers.

Provided by Voluntary Organisation financed by Local Authority.

No. of Beds—Mothers 10; Young Children 6.

Average length of stay—Mothers 4 months.

Young Children 4 months.

CLINICS.

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

Name of Clinic	Purpose	Where held	Times	
			Days	Hours
Tuberculosis Dispensary Maternity and Child Welfare 1. Infant Welfare Centre	Tuberculosis	8, Clare Road	Mon. & Thurs.	2-0 — 4-0
	Sunlight and Massage	66/68, Northgate	Monday	9-30—11-30
	Posterior Schick	do	do	10-0 — 11-30
	Babies and Consultations	do	do	2-0 — 4-0
	Sunlight and Massage	do	Wednesday	9-30—11 30
	Babies and Massage	do	do	2-0 — 4-0
	Sunlight and Massage	do	Thursday	9-30—11-30
	Immunisation	do	do	2-30— 4-0
	Immunisation and Massage	do	Friday	9-30—10-30
	Ante-Natal	do	do	10-30—12-0
2. Queen's Road Clinic	Babies and Massage	do	do	2-0 — 4-0
	Sunlight and Massage	do	Saturday	9-30—11-0
	Babies	Fairfield Meth. School	Tuesday	9-30—12-0
	do	do	do	1-30— 4-0
3. Ovenden Clinic	do	Nursery Lane Methodist School	Wednesday	9-30—11-30
†Hx. District Nursing Assoc.	Ante-Natal Booking	Kirby Leas, Savile Road	Monday	2-30— 4-0
	Ante-Natal	do	Thursday	*10-0 — 12-0
	Post-Natal	do	do	12-0 —
	Ante-Natal Booking	do	do	5-0 — 7-0
Halifax General Hospital	Ante-Natal	Halifax General Hospital	Monday	10-0 — 11-0
	do	do	Tuesday	10-0 — 11-0
	Post-Natal	do	Wednesday	10-0 — 11-0
	Ante-Natal	do	Thursday	10-0 — 11-0
	do	do	Friday	10-0 — 11 0
Royal Halifax Infirmary	do	Royal Halifax Infirmary	Monday	10-30—12-0
	do	do	Tuesday	10-30—12-0
	do	do	Wednesday	10-30—12 0
	Post-Natal	do	do	2-0 — 4-0
	Ante-Natal (New Patients)	do	Friday	10-30—12-0
	Ante-Natal	do	do	2-0 — 4-0

† Subsidised by Corporation.

* Doctor in attendance.

Health Visiting.

The Health Visiting Service is directly controlled by the Health Committee. The Service comprises one Senior Health Visitor and five District Health Visitors. In order to meet the needs of the Borough and to carry out the proposals of the National Health Service Act, it is proposed to increase the number of Health Visitors in the near future.

5th July to 31st December, 1948.

No. of Health Visitors employed 31st Dec., 1948	No. of Visits paid by Health Visitors during the period 5th July to 31st December, 1948							
	Expectant Mothers		Children under 1 year of age		Children between 1 and 5		Other Classes	
Whole Time on Health Visiting	First Visits	Total Visits	First Visits	Total Visits	First Visits	Total Visits	First Visits	Total Visits
6	44	76	782	2432	20	2764	286	312

1st January, 1948—31st December, 1948.

The Work of the Health Visitors.

Visits to expectant mothers—

First visits	...	...	...	...	...	68
Repeat visits	...	...	...	...	...	128

Infants under 1 year—

First visits	...	...	...	...	...	1581
Repeat visits	...	...	...	...	...	4138
Children 1 to 2 years	...	...	...	...	...	2002
Children 2 to 5 years	...	...	...	...	...	3332
Ophthalmia Neonatorum	...	...	...	...	...	1
Miscellaneous	...	...	...	...	...	54

One Health Visitor has attended the Venereal Diseases Clinic each week throughout the year, and has paid 15 visits in connection with this work.

Infant Mortality.

There were 50 deaths of infants under 1 year.

12 died under 24 hours.

6 died under 1 week.

7 died under 1 month.

25 died over 1 month.

Maternal Deaths.

There was 1 Maternal death in Halifax during 1948.

Maternity Homes.

Maternity cases were admitted to Heathroyd Nursing Home up to June 1948. Only 1 case was admitted during the year.

Sections 23 and 25

MIDWIFERY AND HOME NURSING.

Midwifery.

The Domiciliary Midwifery Service is carried out through the agency of the Halifax District Nursing Association.

In addition to this Association there are two midwives who work in private practice. These midwives are supervised by the Medical Officer of the Maternity and Child Welfare Department.

	Number of Maternity Cases in the Area of the Local Supervising Authority attended by Midwives during the period 5th July to 31st December, 1948					
	Domiciliary Cases		Cases in Institutions		Total	
	As Midwives 1	As Maternity Nurses 2	As Midwives 3	As Maternity Nurses 4	As Midwives 5	As Maternity Nurses 6
Midwives employed by Voluntary Organisations under Section 23 of the National Health Service Act 1946... ..	191	15	—	—	191	15
Midwives employed by Hospital Management Committees	—	—	—	1183	—	1183
Midwives in Private Practice	18	12	—	—	18	12
Total ...	209	27	—	1183	209	1210

Medical Aid under Section 14 (1) of the Midwives Act 1918.

No. of cases in which medical aid was summoned during the period 5th July, 1948, to 31st December, 1948, under Section 14 (1) of the Midwives Act 1918, by a midwife :—

(a) For Domiciliary Cases :—

(i) Where the Medical Practitioner had arranged to provide the patient with maternity medical services under the National Health Service ...	5
(ii) Others	69
Total ...	74

1st January, 1948—31st December, 1948.

Midwives.

Number of Midwives practising in the Borough during the year (including Midwives working in Institutions)	36
Number of Independent Midwives	3
Number of cases in which medical aid was summoned by the Midwives	146
Medical Aid Notices sent on behalf of child	25

Of these :—

Discharging Eyes	15
Unsatisfactory condition of infant	2
Dangerous feebleness	1
Prematurity	2
Convulsions	1
Skin eruptions	1
Haemorrhage from umbilicus	1
Spina-Bifida	1
Vomiting and Tongue-Tie	1

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

Intention to resort to artificial feeding	56
Liable to be a source of infection	5
Luddenden—Number of cases in the Borough of Halifax	Nil

Home Nursing.

Arrangements have been made with the Halifax District Nursing and the Illingworth District Nursing Association to carry out a Home Nursing Service which is adequate to meet the needs of the Borough. The Local Authority have equal representation on the Joint Committee.

1	No. of Home Nurses employed at 31st Dec., 1948		Equivalent of Whole-Time Services devoted by Home Nurses included in Cols. 2 and 3 to Home Nursing	No. of visits paid by Home Nurses included in Cols. 2 and 3 during the period 5th July to 31st Dec., 1948	No. of Cases attended by Home Nurses included in Cols. 2 and 3 during the period 5th July to 31st Dec., 1948
	Whole-Time on Home Nursing	Part-Time on Home Nursing			
Local Health Authority...	—	—	—		
Voluntary Organisations by agreement with the Authority	10	3	11	12,894	539

Nurseries and Child-Minders Regulation Act 1948.

Premises—No. Registered at 31st December, 1948	...	1
No. of children provided for	...	20

Artificial Sunlight.

Number of Sessions	...	...	...	175
Number of cases treated	...	...	...	265
Number of attendances	...	...	...	5450
Number of attendances of tuberculous children	...	...	...	0
Average attendance at each Session	...	...	...	30.96

Dental Treatment.

Expectant mothers attending an Ante-Natal Clinic for the first time are dentally inspected as part of the initial examination and steps are taken for any treatment to be carried out. The treatment can be obtained at the Dental Centres at the Royal Halifax Infirmary and the Halifax General Hospital, or if the patient prefers she can visit her own dentist. There has been no delay in treatment given by private Dental Surgeons.

Children under five years of age are treated at the School Clinic by arrangement with the Education Committee, but as with expectant mothers, a private dentist is often preferred.

Table of Examination and Treatment for the period 5th July to 31st December, 1948 :—

	Expectant and Nursing mothers	Children under 5	Total
Number Examined	301	667	968
Number needing Treatment	28	54	82
Number made dentally fit	28	54	82

Section 28

PREVENTION OF ILLNESS, CARE AND AFTER-CARE.**Tuberculosis.**

The continuous fall in tuberculosis mortality—broken only during the war period—gives grounds for hope that disease may be still further reduced. The causes of this decline are complex but important factors include improvement in living conditions, modern methods of diagnosis and treatment and the segregation of infectious cases in sanatoria. Knowledge

of the pathogenesis of tuberculosis has advanced, and there are grounds for believing that inoculation with B.C.G. safely establishes a healed primary focus which will confer a considerable degree of protection against subsequent invasion by tubercle bacilli.

The influence of heredity and race is being reviewed in the light of recent research. In treatment a new era is dawning with the use of antibiotics and chemotherapeutic agents. In the break up of the old administrative machine one must not forget the essential unity of prevention, treatment and after care work. Treatment is important, but the protection of the healthy is of equal importance and, preventive work must be maintained at a high level if it is to be effective.

The systematic search for infectious cases must never be relaxed. It is hoped that tuberculosis officers will not be lured from the preventive work by the more dramatic practice of treatment. The re-organisation of the tuberculosis services under the National Health Service Act tends to emphasize the clinical side of tuberculosis but, it must not be forgotten that an essential aid to treatment is an efficient rehabilitation service. Tuberculosis mortality rates have fallen, but the incidence is still rising. No doubt this is partly due to the more intensive search for early cases and the use of mass radiography.

Tuberculosis is still the main killer of youth in its prime, and causes in this country nearly one-third of the deaths between the ages of 15 and 39, and a total of 24,000 per annum at all ages. There has been a greater reduction in the incidence of tuberculosis meningitis. Every case of tuberculosis meningitis in childhood suggests a dangerous open case of pulmonary tuberculosis in the immediate entourage of the sick child. Preventive medicine seeks out such cases and, when found, takes appropriate action. It is in the field of prevention that the battle against tuberculosis will be won.

Arrangements have been made for affording all necessary care and after-care to persons suffering from tuberculosis and their families. The Local Authority employ a full-time Health Visitor solely for the purpose of tuberculosis visiting. This Health Visitor works in co-operation with the Tuberculosis Officer at the Tuberculosis Clinic.

The figures of new cases of Pulmonary Tuberculosis for Halifax since 1940, are as follows :

1940	1941	1942	1943	1944	1945	1946	1947	1948
120	110	98	106	90	90	53	63	61

TUBERCULOSIS DEATH-RATE.						
PERIOD				Respiratory only	All Forms	
10 years average 1938-47 ...				*49	*59	
1948 ...	...	...	...	*30	*33	

The following Table shows the number of notified cases of Tuberculosis remaining in the Borough on December 31st, 1948 :—

Total Cases	Pulmonary			Non-Pulmonary		
	Males	Females	Total	Males	Females	Total
558	253	237	490	37	31	68

for age, sex, and localisation of the disease.

FORMAL NOTIFICATIONS.

AGE PERIODS	Number of Primary Notifications of new cases of Tuberculosis										Total Notifications
	0-	1-	5-	10-	15-	20-	25-	35-	45-	55-	TOTAL (all ages)
Pulmonary Males ...	—	—	—	—	2	2	4	2	8	5	24
Females ...	1	—	—	2	4	5	4	6	1	1	24
Non-Pulmonary Males	—	—	2	—	1	—	—	—	—	—	4
" Females	—	1	—	—	—	1	—	3	—	—	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 are set out.

AGE PERIODS	0-	1-	5-	10-	15-	20-	25-	35-	45-	55-	65-	TOTAL
Pulmonary Males ...	—	—	—	—	1	—	—	—	1	—	—	2
Females ...	—	—	—	—	—	—	2	—	—	—	—	2
Non-Pulmonary Males	—	—	—	—	1	—	—	—	—	—	—	1
" Females	—	—	—	—	—	—	—	—	—	—	—	—

SOURCE OF INFORMATION.		No. of Cases.	
		Pulmonary	Non-Pulmonary
Death Returns { from local Registrars ...	...	2	—
transferable deaths from Registrar General ...	...	—	1
Posthumous notifications ...	...	—	—
"Transfers" from other areas (other than transferable deaths) ...	...	2	—
Other Sources ...	...	—	—

Other Types of Illness.

It is intended to develop arrangements for other types of illness, and at the end of the year the Health Committee were dealing with the question of Convalescent Home treatment for persons not requiring medical attention.

Provision of Nursing Equipment and Apparatus.

One Voluntary Association in the Borough held a fairly large stock of loan equipment which has always been sufficient for the needs of the Borough. The stock has now been transferred to the Public Health Department who are now responsible for the issue of equipment as and when required.

Health Education.

On account of the illness of the Medical Officer of Health, Education lectures were reduced by fifty per cent. The following public lectures on health matters were delivered :—

Title	Delivered by
The Prevention of Tuberculosis	Dr. G. C. F. Roe
Mental Defect	"
Cancer	"
The Glands of Destiny	"
The Temple of the Mind	"
Immunisation	Dr. R. I. S. Lewis
Heredity and Environment	Dr. G. C. F. Roe
The Road to Maturity	"
Eugenics	"
The Future Rôle of the Fever Hospital	"
The Mental Health Services	"
The Prevention of Diphtheria	Dr. R. I. S. Lewis
The Health of School Children	Dr. E. J. Kelly
Difficult Children	Dr. E. J. Simpson
Child Welfare	"
The Nursery School Child	"
The Premature Baby	"

I am indebted to the local press ("Halifax Courier and Guardian") for publishing the gist of many of the above lectures, which in this way reached a wide public.

Mental Illness and Defectiveness.

The administration of the Mental Deficiency Acts and the Lunacy and Mental Treatment Acts is under the control of the Health Department, and in addition to the Medical Officer of Health, two male and one female authorised officers carry out this work.

Venereal Diseases.

The control of the venereal diseases is as much a social as it is a medical problem. From the medical point of view, the first aim is early diagnosis and efficient treatment. With the sulphonamides we have powerful weapons against gonorrhoea and syphilis. As each cured case means one less focus of infection, venereal disease treatment schemes are in operation, under which skilled diagnosis and treatment are available and free for all.

Among the general measures directed towards the prevention of venereal disease, the most important is the provision of instruction for young adolescents in sex knowledge and for young adults in the dangers of illicit intercourse. A proportion of infections are contracted while under the influence of alcohol, which not only inhibits the control of the higher brain centres, but also renders the individual less capable of taking precautions which, if sober, he might employ. Also we must now recognise that one result of emancipation of women is the increase in the number of those who exercise their freedom by indulging in sexual intercourse for the same reason as men. So long as human nature is what it is and social conditions render marriage impossible at an age when sexual desire is at its height, so long will these problems continue to exist. The venereal disease problem bristles with difficulties, medical, social and legal. We are concerned with the preventive aspect as it affects public health viz., the direct spread from individual to individual, and from the parent who has contracted the disease and may pass it on to the generation yet unborn. As I have said the most important general measure directed towards the prevention of venereal disease, is the provision of sound instruction for young adolescents in sex knowledge.

The following figures refer to local patients attending Treatment Centres :—

Number of persons dealt with for the first time during the year, and found to be suffering from					Local Clinic	Other Clinics
Syphilis	...	...	...	...	70	—
Soft Chancre	...	...	...	...	—	—
Gonorrhoea	...	...	...	...	72	1
Conditions other than Venereal	...	...	...	...	89	2
Total					231	2
Total attendances at the out-patient clinic					7694	53
Aggregate number of in-patient days...					306	—

Pathological Work.

Microscopical :—

		Specimens examined at Treatment Centre	
For Syphilis	102
For Gonorrhoea	1194

Section 26

VACCINATION AND IMMUNISATION.

Diphtheria Immunisation.

Children under 5—

Children in this group are immunised either at the Child Welfare Clinic or by doctors (chosen by parents) taking part in the Authority's arrangements. Doctors are supplied free with immunising agents.

Immunisation is encouraged by the Medical Officer of Health, by Public Health Lectures, and by the Public Health Department Staff.

Children of school age—

Children in this group are immunised at the School Clinic or by doctors chosen by the parents. Details will be found in the separate report on the School Medical Service.

No. of Children who completed a full course of Primary Immunisation in the period 5th July to 31st December, 1948		
Age at date of Final Injection		Total
Under 5	5—14	
507	116	623

Total No- of Children who were given a secondary or Reinforcing Injection
During 6 months ending 31st December, 1948
204

Vaccination.

Medical arrangements in respect of vaccination are the same as those in operation for immunisation. In the event of an outbreak of smallpox, the Child Welfare and School Clinics will be used as emergency vaccination centres, and general practitioners will be asked to co-operate either at their own surgeries or at the emergency vaccination centres.

The public are kept constantly informed of the facilities provided for free vaccination.

No. of Persons Vaccinated (or re-vaccinated) during period :—

Age at 31st December, 1948	Under 1 1948	1—4 1944 to 1947	5—14 1934 to 1943	15 or over Before 1934	Total
No. Vaccinated ...	45	8	5	8	66
No. Re-vaccinated ...	—	—	2	8	10

Section 27

AMBULANCE SERVICE.

I am indebted to Mr. E. Gillott, Ambulance Controller for the following report :—

With the coming into operation of the National Health Service Act, the Health Committee became responsible for providing a free ambulance service for the whole of the County Borough. The general and Infectious Diseases Ambulance were combined into one service, which is operated from the Ambulance Depot, Dryclough Lane, Salterhebble, Halifax (Telephone Halifax 60606), adjoining the General Hospital.

The vehicles taken over were all, with one exception, in a poor condition, and immediate steps were taken to obtain new vehicles. By the end of the year, two new Austin ambulances had been delivered, and there was the prospect of further ones being obtained in the early part of 1949. My best thanks are due to the Manager and staff of the Transport Department for their assistance in keeping the old vehicles roadworthy, in spite of the great difficulty in obtaining spares; also for their prompt attention to running repairs.

The reciprocal arrangement for mutual assistance with neighbouring authorities has worked well, and has resulted in a considerable saving in time and mileage.

The public have made full use of the service, and, generally it has not been abused.

The following Table summarises the work for the period 5th July to 31st December, 1948, inclusive.

		No. of Vehicles at 31st Dec., 1948	Total No. of Calls during the period 5th July to 31st Dec., 1948	Total No. of Patients carried during the period 5th July to 31st Dec., 1948	No. of Accident and other Emergency Cases included in Col. 3 during period 5th July to 31st Dec., 1948	Total Mileage during the period 5th July to 31st Dec., 1948
1		2	3	4	5	6
Directly Provided Service	Ambulances	7	3590	3903	347	45,067
	Cars ...	1	1432	2033	—	11,895

Section 29

DOMESTIC HELP.

The Local Authority took over the control of the Home Help Scheme in October, 1946, and since that date it has worked very satisfactorily, and the demand for the service of the Home Help has increased.

The Medical Officer of Health is responsible for the administration of this service, which is carried out in the Public Health Department under the control of an organiser.

No. of Domestic Helps employed at 31st December, 1948 :
(a) Whole-time ... 12. (b) Part-time ... 3.

126 cases were provided with Domestic Helps under the existing arrangements during the period 5th July to 31st December, 1948.

The cases assisted generally fall into one of the following groups :—

1. Aged and infirm people—often living alone.
2. People suffering from chronic ailments such as heart disease, arthritis, and so on.
3. Cases of temporary illness.
4. Blind persons.
5. Maternity cases.

Section 51

MENTAL HEALTH SERVICES.

The Mental Health Service of the County Borough is a single service combining the mental treatment and the mental deficiency services of the past.

A Mental Health Sub-Committee has been appointed to deal with the detailed administration of the service and meets as and when required.

The Medical Officer of Health is responsible for the medical direction of the service, and the non-medical staff consists of two male authorised officers and one female authorised officer.

Mental Health.

The statistics relating to mental health are certainly disturbing. The incidence of mental illness and mental defect is rising. We have got into the habit of attributing all our ills to the war but, in the matter of mental health, many other factors operate. It has been said that from a third to a half of all medical invalids discharged during the war were sent home on psychiatric grounds. In industry, a recent survey of 3,000 workers showed 10 per cent. had had definite disabling neurosis and a further 20 per cent. minor neurosis, causing absenteeism during the six months before the investigation. Again, about 30 per cent. of the patients attending medical out-patient clinics are said to be cases of psychiatric disorder. It is estimated that one child in 30 is likely to spend some time in a mental hospital, and one in 10-15 will have a nervous breakdown. It must be remembered that it is only within the last 40 years that psychological medicine has become, more or less, a science. In this connection we owe much to Freud, Adler and McDougall. Freud elucidated the mysteries of the sub-conscious part of the mind; Adler pointed out that the key to psychological matters is the desire to compensate for an unconscious feeling of inferiority, and McDougall maintained that the primary motive forces of nature are the instincts. Today, every film-goer knows about the, more or less, respectable manifestations of the unconscious, and psychiatrists are, sometimes, requested to help the courts when a defence of mental illness is advanced. In my view vocational guidance will—by the effective weeding out of unsuitable persons—help in combating neurosis, but, it will not per se banish it.

With regard to accommodation for cases of mental illness and amentia in the West Riding, I am informed that the mental hospitals are overcrowded to the extent of 33 per cent.

Some remarkable advances have, in recent years, been made in the treatment of mental illness. By destroying the nerve fibres in the frontal lobe of the brain, we can make some people less anxious and less worried by their doubts and frustrations. This operation is called pre-frontal leucotomy. Sometimes the results are not satisfactory, but, in selected cases, the operation has had spectacular successes which cannot be overlooked. No doubt we shall learn more in time about the value of pre-frontal leucotomy. It is possible that Hamlet would have led a happier life after a pre-frontal leucotomy, but whether the state of Denmark would have improved is a debatable point.

Another advance in the treatment of certain types of mental illness is electro convulsive treatment. In selected cases some remarkable successes have been achieved.

In the future, mankind will be more active (today it is possible to travel faster than sound) and no doubt longer lived but, whether he will be happier or more contented is another matter. The evolution of the human brain raises great problems and, evolution does not always mean progress. In the laboratory of the psychiatrist there are immense fields for research. What we can be sure of giving to mankind in the future is a more scientific mental health service than formerly, and if we can do this so much the better for everyone. The profession of psychiatry is exacting on its followers. Like all doctoring it demands much from them, and that incessantly. Not only must the psychiatrist know the technical details of his work, but he must have in high degree the understanding, tolerance and patience that come from a broad outlook on life. So it is in every calling—technical competence without character is like a bird with clipped wings.

Mental Deficiency.

After the 5th of July we were no longer able to secure Institutional accommodation for our mental defectives at St. Catherine's Institution, Doncaster. The result of this arrangement is that we are finding it very difficult to secure accommodation for urgent cases of amentia. I do not wish to press the point unduly, but I think, in view of the steady rise in the incidence of mental defect that it will cause a serious situation. There can be no doubt that the disproportion obtaining between the birth-rate of the mentally "fit" and the "unfit" has now become a problem of most serious significance to the community. The birth-rate amongst aments is considerably higher than among the normal population. The inadequacy of Institutional facilities for defectives results in many serious social evils. With regard to preventing the propagation of persons who are themselves defective, two methods have been proposed—namely, sterilization and segregation during the reproductive age. In my opinion sterilization is not a practical proposition in this country. In respect of segregation, the number of defectives is so great (at least 8 per 1,000) that for many years to come it will be impossible to provide an adequate amount of Institutional accommodation. It will consequently be necessary to adopt some means of community care for a large proportion. There is no reason why in many cases such care should not suffice to guard against propagation, but where this is not possible, the only course is segregation in an Institution during the reproductive period. It is a national problem and can only be solved on a national basis.

What is the cause of primary mental defect? In my view the chief cause is germ impairment and it is, in all probability, transmitted in accordance with Mendel's laws. There is a neuropathic inheritance in the majority of these cases, and I suggest that the nature of the germ impairment is a vitiation of the developmental potentiality of the neuronc determinant. The neuronc determinant is the germ cell which determines the development of the central nervous system. Since the central nervous system of man represents the latest phylogenetic achievement, the one still undergoing the greatest evolutionary change and consequently the least organically fixed, it seems likely that its determinant within the germ cell is specially susceptible to the action of dileterious factors. This vitiation is transmissible. If the germ impairment is severe, dementia, paranoia and manic-depressive insanity may evenuate. With a more marked degree of germ impairment the developmental potentiality is inadequate to admit of the complete erection of the temple of the mind and some degree of amentia results. The final degree of this degenerative process is idiocy. Therefore mental defect (as well as the primary forms of insanity) is due to inheritance, but it is important to stress the point that this inheritance is not of the clinical manifestations as we see them. What is inherited (and what is transmissible) is a pathological germ material. The subject is interesting and important, but I cannot pursue it further in a short report.

The closest possible liaison is maintained between the Mental Health workers of the Local Health Authority and those of the Regional Hospitals Board. In all cases of mental illness, information is pooled and a comprehensive Case-History built up. Cases requiring after-care are jointly considered by the two authorities' Mental Health workers, and an agreed policy is determined in the light of psychiatric advice and followed out in each case.

Supervision of :

(a) Patients on Trial from Mental Hospitals :

These are patients who were, on admission to mental hospital, certified under the Lunacy Acts 1890-1. Patients are normally placed "On Trial" by the mental hospital concerned for a period of approximately four weeks, and during this time are supervised by the Regional Hospital Board's Officer. At the end of the period, the patient is handed over to the Local Health Authority's Mental Health Service (if further supervision is necessary or requested), together with a report on the case. Such report makes reference to the measures which may have already been put into operation for the patient's rehabilitation. In all cases a direction is given

along the lines of future care. There is no break in the continuity of After-care, and the liaison established between the Mental Health workers of the Regional Hospital Boards and those of the Local Health (Mental Health Service) prevents overlapping of duties and is working extremely well.

(b) Patients on Licence from Mental Deficiency Institutions :

The Regional Hospitals Boards utilise the services of the Halifax Mental Health workers for the supervision of such cases. Visitation of the cases is undertaken and reports submitted to the appropriate Regional Board periodically.

It has not been found necessary to delegate Mental Health duties to Voluntary Associations, but contact is maintained on matters of common policy.

The duties of Duly Authorised Officers are carried out by two male and one female officers; the social work is similarly undertaken by them in conjunction with such duties. All the Duly Authorised Officers have had considerable experience of field and casework in the various aspects of mental health over a long period of years, both in Halifax and in other Local Health Authority areas. One of the male officers attended a Mental Health Course at Leeds University from August, 1948, to November, 1948, and every facility and encouragement is given these officers to attend spare-time courses and lectures on Sociological matters. They have a sound knowledge of local conditions and temperament, and are fully conversant with social legislation in its many branches.

Work undertaken in the Community.

Considerable work has been done in the community with regard to prevention, care and after-care of mental patients and ex-patients. In many cases the provisions of the Disabled Persons (Employment) Act 1944, have been invoked, several cases have now been satisfactorily placed in graded and sheltered employment. Contact with the Ministry of Labour and the local "Remploy" factory has removed or reduced the handicap to which many persons suffering from mental disorder found themselves victims. Although as stated above, it has not been found necessary to delegate specific duties in the mental health field to Voluntary Associations, the good offices of the British Red Cross Society have been sought, particularly in the supply of rug wool (free, or at a reduced cost), to persons able and desirous of performing handwork in their own homes. Arrangements have been made with private firms to market the products of ex-patients where the patient so

requests a market to be found. Introductions have been obtained for persons to Deaf Clubs, Societies, etc., the assistance of Youth Movements has been enlisted and the co-operation of religious organisations has been used with advantage in several cases.

Although strenuous efforts have been made along these lines generally through the channels mentioned, care is taken to leave room for the patient's own initiative to be exhibited wherever possible. The aim is to preserve the person's feeling of individuality. It would be wrong, psychologically, to deprive the patient the satisfaction resulting from their own exertions. The services of an out-patient clinic for Nervous and Psychological Disorders at the Halifax General Hospital has been used, and attendance there recommended with the intention of arresting or preventing mental deterioration. Advice is given as a personal thought, not as an official mind.

Cases dealt with :

1. Under the National Health Service Act 1946 (Prevention, Care and After-care)	52
2. Under the Lunacy Acts 1890/1 and the Mental Treatment Act 1930 (by Duly Authorised Officers) ...	66
3. Total Cases reported (from all sources) for possible action under the Lunacy and Mental Treatment Acts, by Duly Authorised Officers	96
4. Total visits undertaken by Duly Authorised Officers	356
5. Under the Mental Deficiency Acts 1913/38 : Cases ascertained during year 1948	11
6. Mental Defectives awaiting vacancies in Institutions on 31st December, 1948	8
7. Mental Defectives under Guardianship	nil
8. Mental Defectives under Statutory Supervision, on 31st December, 1948	58

NOTE.—The numbers of cases shown in paragraphs 1, 2, 3 and 4 (above) relate only to the period 5th July, 1948, to 31st December, 1948.

In the performance of their duties, the use of the ambulances and sitting-case cars are available without restriction to the personnel of the Mental Health Service.

SECTION 3



Cancer

Cancer

We do not know how many people are suffering from cancer; we estimate the numbers from cancer deaths but this is only a very rough and ready method. Approximately one person in six over the age of 45 dies from cancer. As not all cancers are fatal, it would appear that the odds against any person over the age of 45 developing cancer are only five to one—a rather grim prospect. The fact that so many of us die from cancer because we have been prevented from dying from other diseases, is no great consolation. It is hoped that under the National Health Service Act the prospects of early treatment will improve, for persons (especially those over 40) with lumps, cracks and bleedings from the openings of the body will be more ready to obtain treatment before the disease is too far advanced, to expect cure. It is at present impossible to hold out any hope of a new form of treatment. Treatment by radio-active isotopes is still in the experimental stage.

The death-rate from cancer continues to rise. Even when allowance is made for the fact that the proportion of elderly persons in the community is greater now than formerly, the increase is still a real one. No doubt improved facilities for diagnosis (including X-rays) and more accurate certification of the cause of death have accounted for part of the increase of mortality from cancer, but only part. We know many facts relating to cancer but we are ignorant of its fundamental cause or causes. Cancer of the uterus is more fatal to married or widowed, and cancer of the breast and ovary to single women. Liability to cancer is not an attribute of any particular social class, profession or occupation. The part played by hereditary mechanisms is still a matter of controversy. Mice experiments suggest that (in mice) susceptibility is intrinsic. If the skin of mice is subjected to carcinogenic agents, some mice will develop cancer and some will not. Since these differences are found while mice are kept under identical conditions, they must be due to the factors of susceptibility—which are probably hereditary. The virus theory has been advanced as the cause of cancer. It is difficult to reconcile the long preliminary period of cancer with virus infection. Again, if we produce a cancer of the skin by certain agents (oestrin) we clearly do not introduce a virus. The virus therefore (if the virus theory is true), must have been pre-existent in a non-pathogenic state. The subject of cancer etiology is interesting but, unfortunately, our knowledge is incomplete. One certain fact about cancer is that it frequently follows on chronic or prolonged irritation. A jagged tooth may be a source of irritation. There is no scientific evidence that the use of any particular article of food increases the liability to cancer. No known drug will prevent cancer or permanently cure it when present. There is no

evidence that cancer is infectious or contagious. No danger of cancer has been proved to result from living in houses or areas in which cancer happens to have been unduly common. Once again I wish to stress the value of early diagnosis and prompt treatment. It is untrue to say that all cases of cancer are incurable. To take but one example, the average duration of untreated cases of cancer of the uterus is less than two years, whereas after modern operative treatment the proportion of cases surviving after five years is, on the average, 40%.

Our statistics stress the following points :—

1. Cancer is—in the majority of cases—a disease of adult life.
2. In men cancer chiefly attacks the food tract and in women the breasts, uterus and ovaries.
3. The incidence of cancer of the lungs is rising.

Cancer Prevention.

The following preventive points are of interest :—

1. If you see or feel a lump on your body consult your doctor at once.
2. If you notice unusual discharge or bleeding from the opening of the body see your doctor without delay.
3. Avoid chronic irritation, e.g., jagged teeth, ill-fitting false teeth, and the habit of drinking fluids at high temperatures.
4. Consult your doctor regarding Chronic Indigestion.
5. Remember the importance of the time factor (early treatment) in cancer.
6. 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 receive medical and/or surgical treatment.

The following Table shows the death-rate from Cancer in Halifax from the year 1929 :—

Year.	Death-rate per 1,000 population.		Year.	Death-rate per 1,000 population.
1929	1.7		1939	1.9
1930	1.7		1940	1.9
1931	1.9		1941	2.5 Note Increase
1932	1.8		1942	2.3
1933	1.6		1943	2.2
1934	1.8		1944	1.9
1935	1.9		1945	2.5
1936	1.9		1946	2.2
1937	1.8		1947	2.3
1938	1.9		1948	2.1

SECTION 4

Inspection and Supervision of Food

Inspection & Supervision of Food

I am indebted to Mr. J. Flanagan, Meat and Foods Inspector, for the following Report:—

Meat Inspection.

Since January 1940, the slaughter of food animals has been under Ministry of Food Control at the abattoir which is a supply centre for the County Borough of Halifax, Sowerby Bridge, Hebden Bridge, Ripponden, Queensbury and Shelf, and Todmorden.

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

Description of Premises				Number of Visits
Public Slaughterhouses	...	...	...	575
Private Slaughterhouses	...	...	...	2
Borough Market	...	...	...	259
Wholesale Market	...	...	...	260
Lairages	...	...	...	74
Potted Meat Houses	...	...	...	167
Tripe Boiling Houses	...	...	...	53
Butchers' Shops	...	...	...	521
Other Visits	...	...	...	248
Total				2,159

Carcases Inspected and Condemned.

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

	Cattle	Calves	Sheep & Lambs	Pigs
Number killed (if known)...	6133	2497	18,978	300
Number inspected	6133	2497	18,978	300
ALL DISEASES EXCEPT TUBERCULOSIS.				
Whole carcasses condemned	8	7	18	9
Carcasses of which some part or organ was condemned	1621	5	1,375	44
Percentage of the number inspected affected with disease other than Tuberculosis	26.6	.48	7.3	17.7
TUBERCULOSIS ONLY.				
Whole carcasses condemned	86	1	—	1
Carcasses of which some part or organ was condemned	1291	—	—	3
Percentage of the number inspected affected with Tuberculosis	22.4	.04	—	1.3

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	lbs. 51,574
Total Amount of Offals Destroyed	86,505
Total Amount of Meat Destroyed on account of Tuberculosis	44,389
Total Amount of Offals Destroyed on account of Tuberculosis	32,241
Total Amount of Meat Destroyed from other causes	7,185
Total Amount of Offals Destroyed from other causes	48,264
Total Meat and Offals Destroyed ...	138,079

Food Inspection.

The following Table shows the amount of foods condemned:

Kinds of Food Condemned	Quantity in Lbs.
94 Carcases of Beef	43,890
Beef not in Carcase	5,244
8 Carcases of Veal	453
Veal not in Carcase	2
18 Carcases of Mutton	517
Mutton not in Carcase	20
10 Carcases of Pork	1,358
Pork not in Carcase	90
Offals	86,505
Fish	6,992
Fruit and Vegetables	14,401
Canned Provisions	16,591
Biscuits and Buns	68
Sweets and Chocolate	85
Pancakes	91
Fish Cakes	18
Pikelets	244
Puddings	75
Preserves and Treacle	71
Prunes	71
Figs	154
Sultanas	30
Dried Apricots and Peaches	158
Jellies and Trifles	211
Eggs (Dried)	14
Fowls	4
Rabbits	338
Sausages	12
Pies	18
Cream	30
Cakes and Cake Powders	176
Malt Extract and Meat Cubes	228
Cereals and Dried Peas	403
Total Weight	178,562

Shell Fish.

Supplies of shell fish coming into the Borough received attention in an endeavour to ensure that they had first been subjected to treatment in purification tanks before being offered for sale. Certain known suspect sources were excluded.

SECTION 5

Sanitary Circumstances

Factories

Smoke Abatement

Housing

Milk Production and

Distribution

Food Sampling

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 :—

Primary Inspections under the Housing Acts	...	...	22
Subsequent inspections under the Housing Acts	...	...	325
Visits re work in progress under the Housing Acts	...	...	235
Visits re removals and disinfestations	...	...	1629
Visits re overcrowding	...	...	26
Re sanitary defects (complaints etc.)	...	...	1255
Re notifiable disease	...	...	176
Re dirty and/or verminous premises	...	...	94
Moveable Dwellings...	...	...	3
Common Lodging Houses	...	...	10
Houses-Let-in-Lodgings	...	...	89

Drainage :—

Public sewers inspected	...	...	297
Special drainage inspections	...	...	1225
Public sewers tested	...	...	68
Drains tested	...	...	284

Factories, etc.:—

Factories with mechanical power	...	...	205
Factories without mechanical power	...	...	17
Outworkers' premises	...	...	26
Workplaces (general)	...	...	39
Workplaces (offices)	...	...	10

Shops :—

Visits under Shops Acts	14
-------------------------	-----	-----	----

Food Inspection :—

Cowsheds	...	...	309
Dairies	...	...	243
Milkshops	...	...	2
Ice Cream premises	...	...	268
Fried Fish Shops	...	...	62
Bakehouses	...	...	71
Restaurants, Cafes, etc.	...	...	70
Other food premises...	...	...	158

Smoke Abatement :—

Smoke observations	34
Visits to works re smoke emission	...	...	...	...	33

Sampling :—

Food and Drugs Act, 1938	...	...	...	...	351
Bacteriological samples	...	...	...	...	339
Water	...	...	...	...	47
Fertilisers and Feeding Stuffs	...	...	...	...	15
Swimming Baths Water	...	...	...	...	4

General :—

Fertilisers and Feeding Stuffs premises	...	...	...	...	16
Rat infested premises	...	...	...	...	658
Stables re nuisances	...	...	...	...	5
Fowls, Swine and other animals	...	...	...	...	44
Schools	...	...	...	...	12
Places of public entertainment	...	...	...	...	10
Public Sanitary Conveniences	...	...	...	...	183
Requisitioned Houses	...	...	...	...	23
Pharmacy and Poisons Act	...	...	...	...	52
Building Licences	...	...	...	...	1218
Miscellaneous visits	...	...	...	...	1964
Total number of inspections and visits	...	...	...	...	12240
Total number of Re-inspections	...	...	...	...	6570

Sanitary Improvements Effected.**Dwellinghouses :—**

						Informal Action
General repairs	...	...	...	...	...	643
Dirty houses cleansed	...	...	...	...	...	32
Council houses found bug infested and disinfested	...	...	...	...	...	13
Other houses found bug infested and disinfested	...	...	...	...	...	39
Houses cleared of other vermin	...	...	...	...	...	75
Houses-let-in-lodgings. Nuisances abated or improvements effected	...	...	...	...	...	5

Drainage :—

Sewers cleansed	...	...	...	...	...	67
Drains cleansed and/or repaired	...	...	...	...	...	119
Drains reconstructed or new drains provided	...	...	...	...	...	107
Public sewers repaired and/or reconstructed	...	...	...	...	...	22

Factories :—

Factories with mechanical power. Nuisances abated or improvements effected	16
Factories without mechanical power. Nuisances abated or improvements effected	...	...	...	...	5

Workplaces :—

Offices. Nuisances abated or improvements effected	2
--	---

Shops :—

Nuisances abated or improvements effected under Section 10	1
--	---

General :—

Premises cleared of rats—Dwellinghouses	142
Other premises	121
Cowsheds—Nuisances abated or improvements effected	6
Dairies—Improvements effected, etc.	6
Fried Fish Shops—Nuisances abated or improvements effected	4
Bakehouses—Nuisances abated or improvements effected	4
Ice Cream premises—Nuisances abated or improve- ments effected	2
Restaurants, Cafes, etc.—Nuisances abated or improve- ments effected	2
Other food premises—Nuisances abated or improve- ments effected	1
Boiler Plants improved	4
Stables—Nuisances abated or improvements effected	1
Fowls, Swine and other animals—Nuisances abated ...	3
Schools—Improvements effected	2
Places of Public Entertainment improved	2
Public Sanitary Conveniences improved	7
Miscellaneous Sanitary improvements affected ...	45

Prosecutions during 1948.

Date of Hearing	Act	Offence	Penalty
19/3/48	Defence (General Regulations 1939)	Occupiers of requisitioned house in arrears with rent	Corporation given Order for Possession in one month against three occupiers of a requisitioned house, two of whom were later evicted
15/6/48	Food & Drugs Act 1938. Section 3	Selling milk deficient in fatty solids	Case dismissed on payment of £1/5/- costs, the Magistrates being of opinion that a technical offence had been committed, with no intention of gain
22/6/48	Defence Regulation 56A	Carrying out work on a building without a licence	Borough Magistrates referred case to Quarter Sessions. Quarter Sessions—Defendant fined £350, with £20 costs
22/7/48			
28/9/48	Housing Act 1936. Section 14	Occupying premises in contravention of a Closing Order	Defendant pleaded guilty. Case adjourned for 28 days to give defendant an opportunity to leave the premises. At the adjourned hearing, as defendant had not vacated the premises, a fine of £5 was imposed, and 14 days' grace allowed before imposition of the £5 daily penalty. (The owner of the premises was, at a later date, granted an Order for Possession, and a week later defendant was removed to a mental hospital)
26/10/48			

Factories.

H.M. Inspector of Factories sent 15 notices under Section 9 of the Factories Act 1937, all of which referred to factories with mechanical power. In addition, there were 29 complaints brought forward from 1947.

Complaints dealt with during the year numbered 14, all of which referred to factories with mechanical power. There were 30 outstanding complaints at the end of the year.

There were 21 outworkers on the register at the end of the year, and no cases of default in sending lists to the Council were discovered (Section 110). There were no cases of outwork being carried on in unwholesome premises (Section 111).

Table 1.

Inspections for Purposes of Provisions as to Health.

Premises	No. on Register	Number of		
		Inspections	Written Notices	Occupiers Prosecuted
(i) Factories in which Sections 1, 2, 3, 4 & 6 are to be enforced by Local Authorities	87	17	2	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	776	205	11	—
(iii) ‡ Other premises in in which Section 7 is enforced by the Local Authority (excluding outworkers' premises)	—	—	—	—
Total ...	863	222	13	—

‡ Works of Building and Engineering Construction, Electrical Stations should be reckoned as factories.

Table 2.
Cases in which defects were found.

Particulars	Number of cases in which defects were found				No. of cases in which prosecutions were instituted
	Found	Remedied	Referred		
			To H.M. Inspector	By H.M. Inspector	
Want of Cleanliness (S.1)	—	—	—	—	—
Overcrowding (S.2)	—	—	—	—	—
Unreasonable temperature (S.3)	—	—	—	—	—
Inadequate Ventilation (S.4)	—	—	—	—	—
Ineffective drainage of floors (S.6)	—	—	—	—	—
Sanitary Conveniences (S.7)	—	—	—	—	—
(a) Insufficient	4	3	—	4	—
(b) Unsuitable or defective	10	9	—	10	—
(c) Not separate for sexes	2	3	—	2	—
Other offences against the Act (not including offences relating to Out-work)	—	—	—	—	—
Total	16	15	—	16	—

Bakehouses.

The number of bakehouses on the register at the end of the year was 83.

There were 71 inspections made and the premises were generally found to be satisfactory.

Smoke Abatement.

The number of smoke observations taken during the year was 34, details of which are given in the following Table :—

Visits to works in connection with smoke emission numbered 33, and the average emission of black smoke was 1.11 minutes per observation, or 2.22 minutes per hour.

Chimney	No. of observations (30 minutes each)	Average minutes black smoke per observation
Blackwood Mills	1	Nil
Bowling Dyke Dye Works	1	Nil
Bowling Dyke Mills	1	Nil
Brewery, The	1	Nil
Brunswick Mills	2	Nil
Central Laundry	1	Nil
Croftmyl	1	Nil
Dean Clough Mills—Brick	1	Nil
Tall stone	1	Nil
Stone	1	Nil
Electricity Works—South	1	Nil
North	1	Nil
Globe Mills	1	Nil
Keighley Mills	2	1.5
Perseverance Mills	1	Nil
Pioneer Iron Works	2	Nil
Raglan Street Dye Works	1	Nil
Regent Works	1	3.5
Royal Mills	5	5.8
Sun Works	1	2.25
Victoria Mills	2	Nil
Wellington Mills	1	Nil
West Grove Mills	2	Nil
Winding Road Brass Foundry	2	Nil
Total ...	34	1.11

Housing

Housing Statistics.

1. Inspection of Dwellinghouses during the year :—
 - (1) (a) Total number of dwellinghouses inspected for housing defects (under Public Health or Housing Acts) 1437
 - (b) Number of inspections made for the purpose 4747
 - (2) (a) Number of dwellinghouses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 and 1932 19
 - (b) Number of inspections made for the purpose 19
 - (3) Number of dwellinghouses found to be in a state so dangerous or injurious to health as to be unfit for human habitation 15
 - (4) Number of dwellinghouses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation 1
2. Remedy of defects during the year without service of formal notices :—

Number of defective dwellinghouses rendered fit in consequence of informal action by the Local Authority or their officers 968
3. Action under Statutory Powers during the year :—
 - (a) Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936 :—
 - (1) Number of dwellinghouses in respect of which notices were served requiring repairs 2
 - (2) Number of dwellinghouses which were rendered fit after service of formal notices :—
 - (a) By owners 11
 - (b) By Local Authority in default of owners Nil
 - (b) Proceedings under Public Health Acts :—
 - (1) Number of dwellinghouses in respect of which notices were served requiring defects to be remedied 51
 - (2) Number of dwellinghouses in which defects were remedied after service of formal notices :—
 - (a) By owners 35
 - (b) By Local Authority in default of owners 40

(c) Proceedings under Section 11 and 13 of the Housing Act, 1936 :—	
(1) Number of dwellinghouses in respect of which Demolition Orders were made	2
(2) Number of dwellinghouses demolished in pursuance of Demolition Orders	11
(d) Proceedings under Section 12 of the Housing Act, 1936 :—	
(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made	13
(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
4. Housing Act, 1936 (Part IV)—Overcrowding.	
(a) (1) Number of dwellings overcrowded at the end of the year	1021
(2) Number of families dwelling therein	1021
(3) Number of " persons " dwelling therein	3676
(b) Number of new cases of overcrowding reported during the year	14
(c) (1) Number of cases of overcrowding relieved during the year	10
(2) Number of " persons " concerned in such cases	40
(d) Particulars of any cases in which dwellinghouses have again become overcrowded after the Local Authority have taken steps for the abatement of overcrowding	Nil
(e) Any other particulars with respect to overcrowding conditions upon which the Medical Officer of Health may consider it desirable to report	Nil

Eradication of Bed-Bugs.

(1) (a) (1) Number of Council Houses found infested	13
(2) Number of Council houses disinfested	15
(b) (1) Number of other houses found infested	39
(2) Number of other houses disinfested	39
(c) Number of houses where furniture was disinfested with HCN gas at Charlestown	102

Closing and Demolition Orders : Housing Act, 1936.

Continuing the information given in previous reports, the following Table shows the position on the 31st December, 1948:

Ref. No. (1)	Situation. (2)	Date of Report. (3)	Date of Closing Order. (4)	Date of Demolition Order. (5)	Remarks. (6)
122	11 Smithy Street	22/1/48	—	—	Undertaking to convert into garage accepted 19/2/48. Completed 10/12/48.
123	14 Spring Edge	19/2/48	8/4/48	—	—
124	11a Lucy Street	19/2/48	—	—	Undertaking to wall up all windows and doors accepted 25/3/48. Completed 2/7/48.
125	146 Haugh Shaw Road	24/6/48	9/8/48	—	Basement cottage taken into house above 9/8/48.
126	5 Tidswell's Terrace	22/7/48	26/8/48	—	—
127	1 Abbey Street	22/7/48	26/8/48	—	—
128	15a Ambler's Terr.	22/7/48	26/8/46	—	—
129	21 Crossley Terrace	19/8/48	29/9/48	—	—
130	3 Abbey Street	23/9/48	29/10/48	—	—
131	17a Brinton Terrace	23/9/48	26/11/48	—	—
132	25 Moxon Terrace	23/9/48	29/10/48	—	—
133	24 Moxon Terrace	23/9/48	29/10/48	—	—
134	19 Moxon Terrace	23/9/48	29/10/48	—	—
135	17 Moxon Terrace	23/9/48	29/10/48	—	—
136	1 Lower Haugh Shaw	21/10/48	—	—	Undertaking to convert into garage accepted 18/11/48.
137	31 & 32 Wheatley Bottoms	21/10/48	—	10/12/48	Not yet demolished.
138	63 & 55 Church St.	18/11/48	—	8/1/49	Not yet demolished.
139	11 Moxon Terrace	18/11/48	8/1/49	—	—
140	22 Smith Street Nth.	22/12/48	3/2/49	—	—

Furnished Houses (Rent Control) Act 1946.

During the year 8 houses were referred by the Housing Committee to the Furnished Houses Rent Tribunal, under the above Act.

There were 60 separate lettings in these eight houses, and, after hearing the evidence, the Tribunal reduced the rent in 54 cases. In the other 6 lettings, the Tribunal decided to fix the rents at the same value as fixed by the owners.

Common Lodging Houses.

There were only 2 Common Lodging Houses in the Borough and 10 inspections of same were made during the year. They were found to be in a satisfactory condition.

Houses-Let-in-Lodgings.

At the end of the year there were 38 Houses-Let-in-Lodgings, providing accommodation for 185 families. There were 89 inspections made during the year, and conditions were fairly satisfactory. In 6 cases nuisances were abated or improvements effected (5 informal and 1 formal).

Places of Public Entertainment.

During the year 10 inspections were made of theatres, cinemas and other premises for which theatre licences were necessary, and improvements were carried out in 2 cases.

Inspection & Supervision of Food

Milk Supply.

There are 149 producers of milk with premises situated within the Borough.

Of these, there are 3 holding licences to produce Tuberculin Tested Milk and 19 with the requisite licence to produce Accredited Milk.

During the year 309 inspections of cowsheds were made and improvements were effected in 6 cases.

There are 167 registered retailers of milk with premises within the Borough and 87 with premises outside our area. The number of registered dairy premises is 140.

In addition to the above, there are 288 registered retailers of milk in sealed bottles only.

During the year there were 243 inspections of dairies and 2 inspections of milkshops.

Bacteriological Examination of Milk.

During the year 186 samples were examined. Of these, 18 were of ungraded milk; 22 were of Tuberculin Tested Milk; 74 were of Pasteurised Milk, and 62 were farm samples of Accredited and Tuberculin Tested Milks.

Of the ungraded milks, 9 were produced within the Borough and 9 were produced outside. The Resazurin test was applied to these milks, with the following results:—

Locally produced milk: Satisfactory keeping quality 5; doubtful keeping quality 4.

Milk produced outside Borough: Satisfactory keeping quality 9.

Of the 32 samples of Tuberculin Tested Milk, 3 (or 9.375 per cent.) failed to pass the tests applied; whilst of the 74 samples of Pasteurised Milk, 4 (or 5.41 per cent.) failed to pass the tests

Of the 62 farm samples of Accredited and Tuberculin Tested Milk—this milk is not retailed as such—19 (or 30.65 per cent.) failed to pass the tests applied.

Food and Drugs Act 1938.

A total of 351 samples of Food and Drugs was obtained during the year and submitted to the Public Analyst.

These included 202 samples of milk and 149 samples of foods and drugs.

Samples of milk "not genuine" according to the Sale of Milk Regulations numbered 8, giving a percentage of 3.96.

Of the 149 samples of other foods and drugs, 6 (or 4.03 per cent.) were reported not genuine.

Full details of all samples taken will be found in the following Tables:—

TABLE I.

Nature of Sample	No. of Samples taken			No. not genuine		
	Formal	Informal	Total	Formal	Informal	Total
Milk	*194	8	*202	8	—	8
Baking Powder	—	4	4	—	—	—
Beef, pressed	—	1	1	—	—	—
Beer, mild	6	—	6	—	—	—
Beverages—						
Coffee and Chicory						
Essence	—	4	4	—	—	—
Cocoa	—	1	1	—	—	—
Malt Cup	—	1	1	—	—	—
Chocolate Sponge Cake						
and Pudding Mixture...	—	3	3	—	—	—
Cordials	—	2	2	—	—	—
Crystals—						
Barley	—	1	1	—	—	—
Lemonade	—	3	3	—	—	—
<i>Carried Forward</i> ...	200	28	228	8	—	8

TABLE 1—Continued.

Nature of Sample	No. of Samples taken			No. not genuine		
	Formal	Informal	Total	Formal	Informal	Total
<i>Brought Forward</i> ...	200	28	228	8	—	8
Dried Fruits—						
Dates ...	—	1	1	—	—	—
Fruit Dessert ...	—	1	1	—	—	—
Dried Herbs ...	—	3	3	—	—	—
Frizets ...	—	1	1	—	—	—
Fruit Malt Syrup ...	—	1	1	—	—	—
Gelatine ...	—	1	1	—	—	—
Gravy Brown ...	—	1	1	—	—	—
Gravy Salt ...	—	1	1	—	—	—
Gravy Powder ...	—	3	3	—	—	—
Health Salts ...	—	1	1	—	—	—
Ice Cream ...	—	29	29	—	—	—
Jam ...	6	2	8	—	—	—
Lemon Cheese ...	3	—	3	—	—	—
Lemon Curd ...	1	—	1	—	—	—
Malt Extract Tablets ...	—	1	1	—	—	—
Meat Pie ...	—	1	1	—	—	—
Meat, Potted ...	1	4	5	—	2	2
Mincemeat ...	6	—	6	1	—	1
Mixed Spice ...	—	1	1	—	—	—
Mustard ...	—	3	3	—	—	—
Oatmeal, Malted ...	—	1	1	—	—	—
Olive Oil ...	—	6	6	—	—	—
Orange Juice ...	—	2	2	—	—	—
Paste, Fish ...	—	3	3	—	—	—
Paste, Meat ...	—	2	2	—	—	—
Peas, Tinned ...	—	5	5	—	—	—
Pickles, Mixed ...	—	1	1	—	—	—
Pickles, Onions ...	—	1	1	—	—	—
Pickles, Red Cabbage ...	—	1	1	—	—	—
Polony ...	—	1	1	—	—	—
Rum ...	1	—	1	—	—	—
Salad Cream ...	—	1	1	—	—	—
Sausage, Beef ...	13	—	13	3	—	3
Sausage, Meat ...	1	—	1	—	—	—
Suet, Shredded ...	—	1	1	—	—	—
Soup, Meat ...	—	1	1	—	—	—
Vinegar, Malt ...	—	3	3	—	—	—
Vinegar, Non-brewed ...	—	2	2	—	—	—
Vinegar, Tarragon ...	—	1	1	—	—	—
Water Ice... ...	—	1	1	—	—	—
Whisky ...	3	—	3	—	—	—
Total ...	235	116	351	12	2	14

*Includes 4 "Appeal to Cow" samples which were genuine.

TABLE 2.

Administrative Action taken in respect of Samples reported by the Public Analyst to be Not Genuine or otherwise irregular.

No. of Sample	Nature of Sample and Result of Analysis, etc.	Administrative Action taken
2	Milk— 2.9% added water	Formal sample of Tuberculin Tested milk, bottled on the registered premises of a wholesaler outside the Borough, obtained from a retailer. A warning letter was sent to the bottler and a report sent to the County Medical Officer, West Riding County Council. A reply was later received stating that samples had been taken which were genuine.
86	Beef Sausage— Deficient in meat	Formal sample from manufacturer/retailer, contained only 34.8% of meat, contrary to the Supplies and Services (Transitional Powers) Food (Meat) Order, which requires 50% of meat. Letter sent by the Chief Sanitary Inspector to the Food Executive Officer, for reference to the Divisional Enforcement Officer.
88	Potted Meat— 4.6% starchy filler	Informal sample from manufacturer/retailer. Warning letter sent by Chief Sanitary Inspector.
92	Beef Sausage— Deficient in meat	Formal sample from manufacturer/retailer, contained only 45.1% of meat, contrary to the Supplies and Services (Transitional Powers) Food (Meat) Order, which requires 50% of meat. Letter sent by Chief Sanitary Inspector to the Food Executive Officer, for reference to the Divisional Enforcement Officer.
95	Potted Meat— 2.4% starchy filler and 77 parts per million Sulphur Dioxide	Informal sample from manufacturer/retailer, who had made the product from an out-of-date recipe book. Formal sample (No. 127) was taken at a later date and reported as satisfactory. No further action taken.
125	Milk— 8.3% deficient in fat	Formal sample from producer/retailer outside of Borough. "Appeal to Cow" samples (W.R.C.C. 772, 773 and 774) reported to be genuine milk. Prosecution in Borough Police Court on 15th June, 1948, when case was dismissed under the Probation of Offenders' Act, on payment of £1/5/- costs, the magistrates being of opinion that a technical offence only had been committed, no gain being intended,

TABLE 2—Continued.

No. of Sample	Nature of Sample and Result of Analysis, etc.	Administrative Action taken
213	Milk— 0.4% added water	Formal sample obtained from producer. No further action taken at the time, but producer kept under observation.
270	Milk— 5.6% deficient in fat	Formal sample from producer. "Appeal to Cow" samples (Nos. 272 and 273) obtained and found to be genuine milk. Reported to Health Committee, who instructed the Town Clerk to send a warning letter.
275	Milk— 5.3% deficient in fat	Formal sample from producer/retailer. "Appeal to Cow" samples (Nos. 284 and 285) were obtained and found to be genuine milk. Reported to Health Committee who instructed the Town Clerk to send a warning letter.
279	Milk— 5.1% added water	Formal sample obtained from producer/retailer outside the Borough. "Appeal to Cow" samples (W.R.C.C. 984) was obtained and found to be genuine milk. Prosecution in Borough Police Court on 18th January, 1949, when defendant was fined £1, with £1/15/- costs.
296	Milk— 7.5% added water	Formal samples from producer outside the Borough at "the place of delivery" to the retailer. "Appeal to Cow" samples (W.R.C.C. 989 and 990) were obtained and found to be genuine milk. Prosecution at Borough Police Court on 18th January, 1949, when defendant was fined £2 on each charge, with £1/10/- costs.
297	Milk— 6.2% added water	
315	Mincemeat— Deficient in soluble solids	Formal sample from manufacturer/retailer, contained only 63.5% soluble solids, contrary to the Food Standards (Preserves) Order, 1944, which requires 65.0% soluble solids. Letter sent by Chief Sanitary Inspector to the Food Executive Officer.
323	Beef Sausage— Deficient in meat	Formal sample from manufacturer/retailer, contained only 32.5% of meat, contrary to the Meat Products and Canned Meat (Control and Maximum Prices) Order, 1948, which requires 50% of meat. Letter sent by Chief Sanitary Inspector to the Food Executive Officer for reference to the Divisional Enforcement Officer.

TABLE 3.

Monthly Average Composition of Milk Samples.

Month	No. of Samples	Analytical Data	
		Milk Fat per cent.	Non-fatty Solids per cent.
January	17	3.62	8.74
February	10	3.86	8.78
March	18	3.68	8.59
April	21	3.51	8.66
May	9	3.46	8.69
June	20	3.81	8.87
July	20	3.74	8.74
August	—	—	—
September	17	3.76	8.80
October	19	4.07	8.89
November	31	3.72	8.66
December	16	3.45	8.71
Total	198		
Average for the year 1948 ...		3.71	8.74
" " 1947 ...		3.88	8.76
" " 1946 ...		3.84	8.86
" " 1945 ...		3.79	8.85
" " 1944 ...		3.78	8.87
" " 1943 ...		3.83	8.83
" " 1942 ...		3.81	8.78
" " 1941 ...		3.73	8.78
" " 1940 ...		3.79	8.95
" " 1939 ...		3.74	8.95

NOTE.—4 "Appeal to Cow" samples are excluded from the above Table.

TABLE 4.

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

Food (1)	No. of Samples examined (2)	Permitted Preservative (3)	Amount		Remarks (6)
			Allowed (4)	Found (5)	
Milk	202	Nil	Nil	Nil	
Ice Cream ...	29	Nil	Nil	Nil	
Beef, pressed ...	1	Nil	Nil	Nil	
Beer, Mild ..	6	Sulphur Dioxide	70 ppm.	2-Nil 1-4 ppm 1-5 ppm. 2-6 ppm.	Satisfactory ,, ,, ,,
Beverages : Coffee & Chic- ory Essence	4	Benzoic Acid	450 ppm.	4-Nil	Satisfactory
Cordials : Lemon Squash	1	Sulphur Dioxide or Benzoic Acid	350 ppm. 600 ppm.	218 ppm. Nil	} Satisfactory
Lime Flavour	1			81 ppm. Nil	
Orange Juice ...	2			2-Nil Nil	} ,,
Dried Fruits— Dates	1	Sulphur Dioxide	350 ppm.	Nil	Satisfactory
Fruit Dessert...	1	No standard : except as allowed in constituent fruits		50 ppm. Nil	,,
Fruit Malt Syrup	1	Not fixed		Nil	Satisfactory
Gelatine ...	1	Sulphur Dioxide	1000 ppm.	800 ppm.	Satisfactory
Jams : Apple and Raspberry	1	Sulphur Dioxide	100 ppm.	Nil	Satisfactory
Apple and Strawberry	1			Nil	,,
Damson ...	1			11 ppm.	,,
Gooseberry ..	1			Nil	,,
Raspberry ...	1			11 ppm.	,,
Strawberry ...	2			2-Nil	,,
Strawberry & Gooseberry	1			Nil	,,
Lemon Cheese	3	Not fixed		3-Nil	Satisfactory
Lemon Curd ...	1	Not fixed		Nil	Satisfactory
Malt Ext't Tab.	1	Not fixed		Nil	Satisfactory

TABLE 4—Continued.

Food (1)	No. of Samples Exam'nd (2)	Permitted Preservative (3)	Amount		Remarks (6)
			Allowed (4)	Found (5)	
Meat Pie ...	1	Nil	Nil	Nil	
Meat, Potted ...	5	Nil	Nil	4-Nil 1-77 ppm.	Unsatisfactory by reason of the presence of Sulphites
Mincemeat ...	6	Nil— except as allowed in ingredients		2-Nil 1-11 ppm. 1-16 ppm. 1-19 ppm. 1-27 ppm.	Satisfactory as the Sulphites present would be in ingredients
Mustard ..	3	Nil	Nil	3-Nil	
Paste, Fish ...	3	Nil	Nil	3-Nil	
„ Meat ...	2	Nil	Nil	2-Nil	
Peas, tinned ...	5	Nil	Nil	5-Nil	
Pickles ...	3	Benzoic Acid	250 ppm	3-Nil	Satisfactory
Polony ...	1	Nil	Nil	Nil	
Salad Cream ...	1	Nil	Nil	Nil	
Sausage, Beef ...	13	Sulphur Dioxide	450 ppm.	9-Nil 1-33 ppm. 1-110 ppm. 1-150 ppm. 1-160 ppm.	Satisfactory „ „ „ „
Sausage Meat ...	1	Sulphur Dioxide	450 ppm.	Nil	Satisfactory
Soup, Meat ...	1	Nil	Nil	: il	

Manufacture and/or Sale of Ice Cream.

During the year 268 inspections were made of 83 registered premises :—

Manufacturer-vendors	...	...	...	6
Vendors only	...	...	...	77

A total of 153 samples were submitted to bacteriological examination by the methylene blue reduction test, particulars of which are given in the following Table :—

Produced	No. of Samples	Highly Satisfactory	Satisfactory	Unsatisfactory	Very Unsatisfactory
In Borough ..	49	17 (34.69%)	10 (20.41%)	15 (30.61%)	7 (14.29%)
Outside of Borough	104	41 (39.42%)	21 (20.19%)	28 (26.92%)	14 (13.46%)
Total ...	153	58 (37.91%)	31 (20.26%)	43 (28.10%)	21 (13.73%)

Fried Fish Shops

During the year 62 inspections were made of 140 premises. Improvements were effected in 4 cases.

General

Fertilisers and Feeding Stuffs Act 1926.

Fertilisers and Feeding Stuffs Regulations 1932.

Of 15 samples obtained during the year, 13 were of fertilisers and 2 were of feeding stuffs. 7 of these samples were unsatisfactory and appropriate action was taken by the Chief Sanitary Inspector.

Pharmacy and Poisons Act 1933.

Pharmacy and Medicines Act 1941.

At the end of 1948 there were 180 registered sellers of Part II. poisons, occupying 242 registered premises.

There were 52 inspections of these premises during the year, and 1 sample was taken.

Rag Flock Acts 1911 and 1928.

There are no manufacturers of rag flock with premises within the Borough, and very few dealers in same.

No visits were paid to premises and no samples were taken during the year.

TABLE 1.—DEPOSITED ATMOSPHERIC POLLUTION. 1948

Month	WADE STREET (Central)				BELLE VUE PARK (½ mile West)				AKROYD PARK (½ mile North)				INFIRMARY (1 mile South)				WEST VIEW PARK (1½ miles West)			
	Rainfall in Inches	Insoluble Solids	Soluble Solids	Total Solids	Rainfall in Inches	Insoluble Solids	Soluble Solids	Total Solids	Rainfall in Inches	Insoluble Solids	Soluble Solids	Total Solids	Rainfall in Inches	Insoluble Solids	Soluble Solids	Total Solids	Rainfall in Inches	Insoluble Solids	Soluble Solids	Total Solids
January ...	8.62	18.17	17.74	35.91	7.66	7.39	14.87	22.26	7.47	6.78	13.85	20.63	7.90	7.54	11.44	16.98	8.02	5.51	12.92	18.43
February ...	2.73	16.86	21.82	38.68	2.60	7.27	10.17	17.44	2.70	6.14	8.83	14.97	*	*	*	*	2.52	5.78	6.94	12.72
March ...	*	*	*	*	1.48	6.34	5.94	12.28	*	*	*	*	1.55	5.72	4.67	10.39	1.44	5.01	4.66	9.67
April ...	*	*	*	*	2.47	9.37	6.03	15.40	2.55	9.43	8.67	18.10	2.57	6.85	6.40	13.25	2.57	5.98	6.12	12.10
May ...	1.17	20.97	10.14	31.11	0.92	6.92	4.58	11.50	1.09	9.79	6.65	16.44	0.96	6.21	4.72	10.93	1.03	6.25	5.17	11.42
June ...	4.09	14.89	8.92	23.81	4.02	6.38	10.83	17.21	3.97	10.53	9.00	19.53	4.11	6.17	6.93	13.10	4.74	4.92	6.68	11.60
July ...	0.81	14.25	3.32	17.57	0.80	5.55	2.48	8.03	0.72	6.30	2.87	9.17	0.70	6.47	2.59	9.06	1.14	4.08	4.59	8.67
August ...	3.52	13.76	9.06	22.82	3.56	5.99	5.85	11.84	3.57	7.52	10.50	18.02	3.61	4.49	5.44	9.93	4.00	4.56	6.03	10.59
September ...	1.44	10.27	4.51	14.78	1.47	3.73	3.65	7.38	1.57	5.86	4.63	10.49	1.40	3.11	2.38	5.49	1.70	2.94	3.17	6.11
October ...	1.54	13.64	8.17	21.81	1.52	4.83	3.72	8.55	*	*	*	*	1.48	3.83	3.76	7.59	1.48	3.51	4.09	7.60
November ...	1.24	20.16	18.74	38.90	1.20	7.03	4.83	11.86	1.45	6.38	5.56	11.94	0.27	5.03	0.81	5.84	1.19	3.38	4.00	7.38
December ...	3.16	15.65	15.72	31.37	2.99	5.86	6.69	12.55	3.12	6.15	5.37	11.52	3.16	4.40	5.89	10.29	3.23	4.75	5.40	10.15
AGGREGATES	28.32	158.62	118.14	276.76	30.69	76.66	79.64	156.30	28.21	74.88	75.93	150.81	27.71	57.82	55.03	112.85	33.06	56.67	69.77	126.44
MONTHLY AVERAGES...	2.83	15.86	11.81	27.68	2.56	6.39	6.64	13.02	2.82	7.49	7.59	15.08	2.52	5.26	5.00	10.26	2.75	4.72	5.81	1.54

Monthly Average for whole Borough :— Rainfall in inches ... 2.69
 Insoluble Solids ... 7.72 tons per square mile.
 Soluble Solids ... 7.24
 Total Solids ... 14.96

Total Annual Deposit for whole Borough = 183.79 tons per square mile.

* Records spoilt by unlawful interference.

TABLE 2.

SULPHUR POLLUTION — LEAD PEROXIDE METHOD. 1948.

Station	Milligrams of SO ₃ per 100 square centimetres.												Daily Average.	
	January	February	March	April	May	June	July	August	Sept.	October	Nov.	Dec.	Total Daily Average	
WADE STREET (Central)	3·30	4·15	3·40	3·26	2·15	1·49	1·18	1·58	1·67	2·75	5·21	3·94	2·84	
WEST VIEW PARK (1½ miles West)	2·22	3·12	2·55	2·77	1·51	0·98	0·89	1·09	1·20	2·13	4·03	3·22	2·14	
Total Daily Average ...	2·76	3·63	2·97	3·01	1·83	1·23	1·03	1·33	1·43	2·44	4·62	3·58	2·49	

TABLE 3.
MEASUREMENT OF DAYLIGHT. 1948.
Potassium Iodide Method.

Station	Milligrams of Iodine liberated—Daily Average.												Total Daily Average
	January	February	March	April	May	June	July	August	Sept.	October	Nov.	Dec.	
WADE STREET (Central)	0.59	1.07	3.72	5.73	8.19	10.82	8.43	6.01	4.78	3.47	1.84	0.63	4.66
WEST VIEW PARK (1½ miles West)	1.34	2.37	5.68	8.70	12.65	11.33	9.80	7.40	5.65	4.44	3.57	1.08	6.17
Total Daily Average ...	0.96	1.72	4.70	7.21	10.42	11.07	9.11	6.70	5.21	3.95	2.70	0.85	5.41

Average Total Depth	TABLE 1													0.81
	0.00	1.45	4.20	5.51	10.43	11.03	0.11	0.30	2.61	3.63	5.20	0.82		
(17) (19) (20) MED. DEPT. DATA	1.74	5.21	2.98	6.50	13.92	11.37	0.80	1.46	3.62	4.44	12.21	1.08	0.13	
(Continued) AVER. DEPT.	0.20	1.03	3.25	4.02	6.10	10.38	9.02	6.01	4.36	3.02	2.84	0.42	4.06	
Weight	5.30	4.15	3.25	2.77	2.10	1.60	1.20	0.80	0.60	0.40	0.30	0.20	0.10	
	Weight (lb)	1.22	0.92	0.73	0.62	0.47	0.36	0.27	0.18	0.14	0.10	0.07	0.05	
Weight (kg)	2.42	1.92	1.46	1.25	0.95	0.73	0.54	0.36	0.27	0.18	0.14	0.09	0.06	
	Total Depth	0.76	2.63	2.87	2.11	1.63	1.15	0.85	0.55	0.41	0.29	0.27	0.19	

TABLE 3

Miscellaneous

SECTION 6



Miscellaneous

Miscellaneous

WATER SUPPLY.

I am indebted to Mr. H. F. Lea, Waterworks Engineer for the following Report :—

During the year 1948, the quality of the water supplied has been maintained at the highest standard and supplies have been adequate.

The three filtration plants have proved efficient and daily routine analyses of both crude and filtered water have been carried out in the laboratory. In addition, independent samples from various points in the area of supply have been submitted to the Public Analyst, from whom satisfactory reports have been received.

Water pumped from Thrum Hall to Roils Head reservoir, which is open to atmosphere, is rechlorinated in conjunction with ammonia to allow residual chlorine to be retained in the water in the reservoir.

New water mains on the housing sites of the Corporation have been provided, and a supply of water has always been available in advance of requirement.

With the exception of a very few outlying properties the town's water supply is fully utilised.

No. of dwellinghouses supplied from public water mains :—

(a) direct to houses ...	...	...	30,700
(b) by means of stand pipes	...	...	5

CLEANSING.

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

Refuse Collection.

This service has operated regularly throughout the year, though with some difficulty at times, owing to the shortage of labour, and men had to be transferred from the Street Cleansing section to the detriment of the road sweeping duties of this Department.

The total refuse dealt with by the Department was 28,329 tons, of which 17,304 tons were disposed of by separation-incineration and the remainder by controlled tipping.

Salvage.

The total income from the sale of waste materials during the year amounted to £18,839. The separate collection of kitchen waste and waste paper has assisted considerably in maintaining this high figure—the total collected of the former being 1,472 tons.

SEWAGE.

I am indebted to Mr. C. Lumb, Sewage Works Manager, for the following Report :—

Sewage Purification.

A vital link in the chain of health services is the treatment of sewage and trade effluents, the necessity for which was so clearly shown by the notoriously insanitary conditions of last century. Drainage from the bulk of the Borough falls to the Sewage Purification Works at Salterhebble, Copley and North Dean. Here all foul-water sewage plus trade wastes from over 50 manufacturing premises are fully purified so that clean and innocuous effluents are finally passed to the River Calder; these effluents have to be within the standards laid down by the West Riding of Yorkshire Rivers' Board. The purification of trade waste waters is just as necessary from a public health standpoint as that of sewage water, and their presence not only increases the magnitude of the task, but also greatly complicates the technology of treatment. Due to this factor, the Sewage Works are approximately double the size they would otherwise need to be.

The method of treatment consists of sedimentation, assisted by scientifically-controlled precipitation with sulphuric acid, followed by bacterial purification effected part by percolating filter beds and part by the activated sludge (surface aeration) process. The solid matters are deposited in the form of sludges which are mechanically dewatered and further treated with a view to maximum possible salvage of by-products. In this manner both grease and fertilisers are recovered, these products being returned to productive channels after sterilisation and processing into conditions which show no trace of their origin; such recovery of by-products is of particular importance from an economic standpoint, both nationally and locally.

The works are continually maintained in an efficient condition and advantage taken, wherever possible, of all the most modern developments. During the past year important units of plant have been mechanised, with resulting increased efficiency and economy in manpower.

During 1948, 2,302,000,000 gallons of sewage and trade effluent were dealt with by the Department, an average of 6,290,000 gallons for each day of the year. From this volume 47,518 tons of sludge residues were extracted, which were dewatered and worked-up into grease and fertiliser.

Owing to the topography of the Borough, certain areas in the Northowram and Warley districts, comprising approximately 5% of the total population, cannot be drained into the Salterhebble system. Drainage from the Northowram area is connected to the Brighouse Corporation sewers and dealt with, by agreement, by that authority. Drainage from the Warley area is treated at the works of the Luddenden Foot Joint Sewerage Board, of which Halifax Corporation is a constituent member.

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General Summary of Meteorological Observations taken at the Central Public Library, Belle Vue, Halifax, from January 1st, 1948, to December 31st, 1948
 By FRANK HAIGH, CHIEF LIBRARIAN.

LATITUDE OF STATION = 53° 43' N. LONGITUDE = 1° 52' W. HEIGHT ABOVE SEA LEVEL = 625 FEET.

Month.	Pressure of Atmosphere in Month.		Temperature of Air in Month.							Mean Temperature.		Vapour			Mean degree of Humidity—100.	Mean Weight of a cubic foot of Air.	Mean Reading of Thermometer.		Wind.										Mean amount of Cloud.	Rain.		REMARKS																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																							
	Mean at 37° F. and Sea Level.	Range.	Highest.	Lowest.	Range.	Mean.			(Adapted.)	Air.	Dew Point.	Evapor. Force.	In a cubic foot of Air.				Maximum	Boys of Sun.	Minimum on Grass.	Relative proportion of										No. of Days it fell.	Amount Collected.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																								
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The Mean Monthly Readings of the Earth Thermometer, four feet below the surface, were as follows:—

January, 44°	February, 43°	March, 43°	April, 45°	May, 49°	June, 51°
July, 53°	August, 56°	September, 54°	October, 53°	November, 49°	December, 46°

Highest Readings = 56° on August 2nd to 19th.

Lowest Readings = 42° on February 28th to March 9th.

Rain fell on 207 days, and measured 30-73 inches.

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