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**County Borough of Halifax**  
**Health Department**

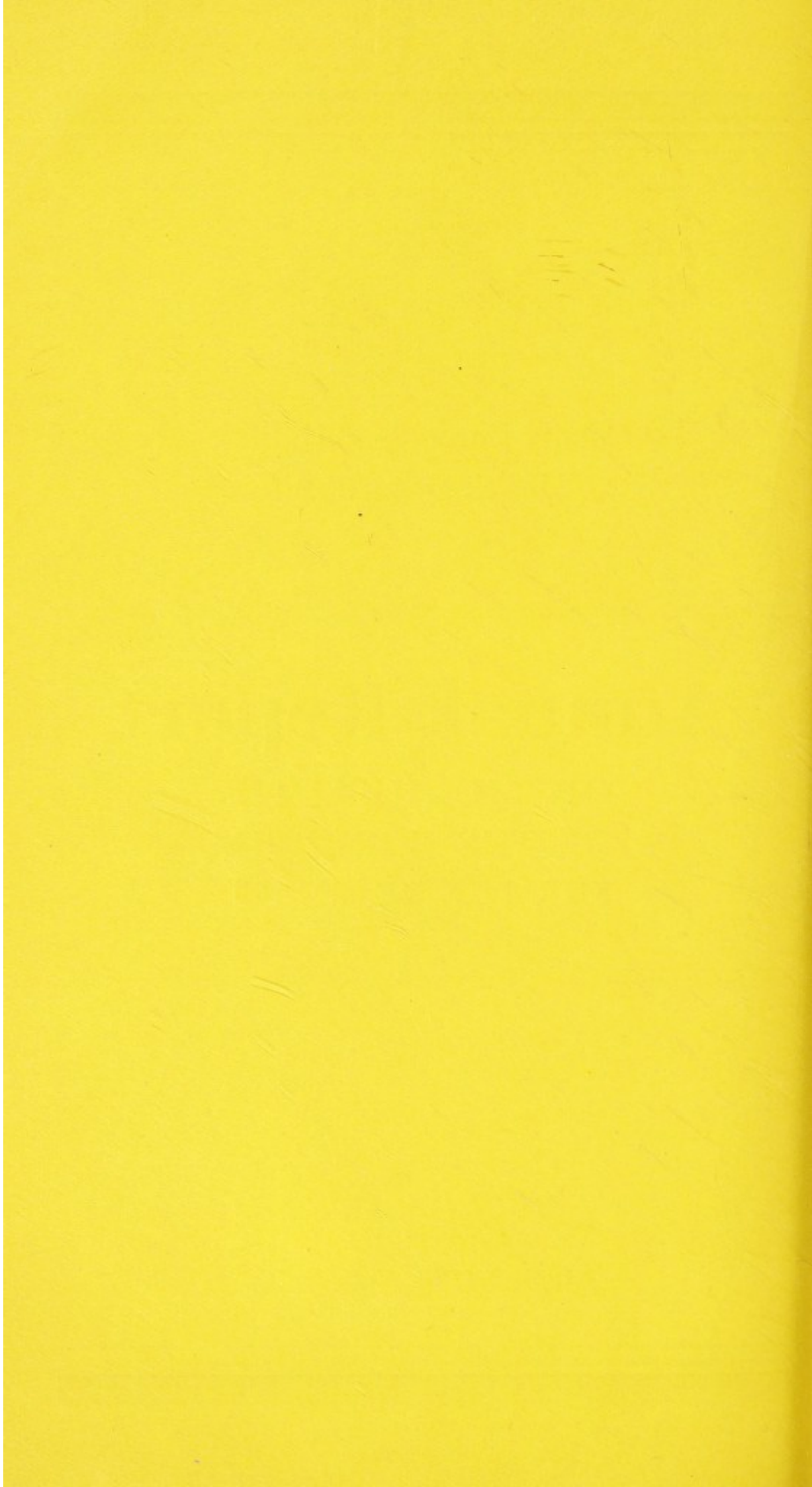



# **Annual Report**

**ON THE HEALTH  
OF THE BOROUGH  
FOR THE YEAR 1960**



**JOHN G. CAIRNS**  
**M.B., Ch.B., D.P.H.**  
**Medical Officer of Health**

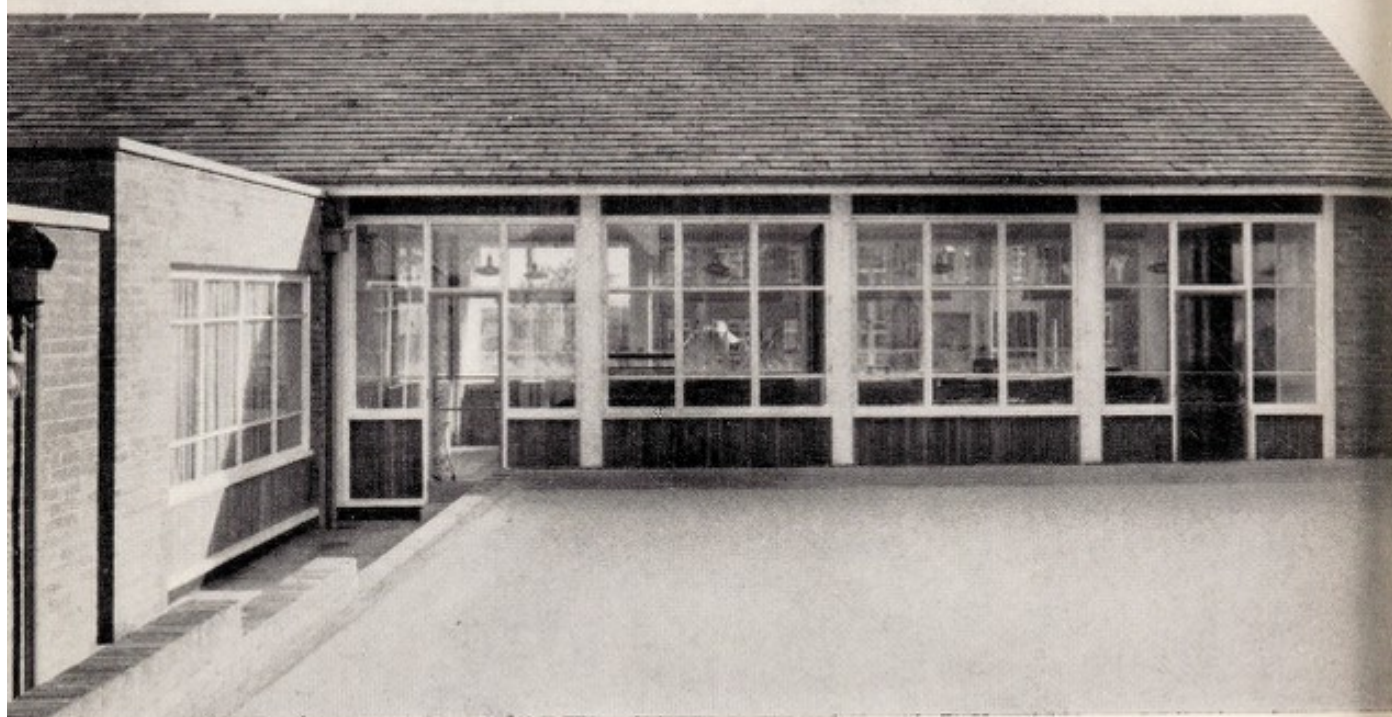




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*Furness Park Training Centres, Illingworth*





**County Borough of Halifax**  
**Health Department**

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# **Annual Report**

**ON THE HEALTH  
OF THE BOROUGH  
FOR THE YEAR 1960**

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**JOHN G. CAIRNS**  
**M.B., Ch.B., D.P.H.**  
**Medical Officer of Health**



# Health Committee

(as on 31st December, 1960)

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**The Worshipful, The Mayor**  
Alderman DOUGLAS ROBINSON, J.P.

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Chairman: Alderman F. H. SWIRE  
Vice-Chairman: Councillor Mrs. L. A. MAWSON

## Councillors:

E. C. ASTIN  
G. E. CHADWICK  
J. CHARNOCK  
J. P. CROSSLEY  
D. FAWCETT  
W. HARDY

S. HOLLAND  
R. KITCHEN  
J. J. McGOWAN  
A. OAKES  
C. G. STREETER  
L. H. THORNTON

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## Sub-Committees

### Accounts Sub-Committee

THE CHAIRMAN  
VICE-CHAIRMAN

Councillors HOLLAND, McGOWAN, THORNTON

### Sanitary Services Sub-Committee

THE CHAIRMAN  
VICE-CHAIRMAN  
Alderman BOWER

Councillors ASTIN, CHARNOCK, CROSSLEY, FAWCETT, HARDY,  
HOLLAND and KITCHEN

### Maternal and Child Welfare Sub-Committee:

THE CHAIRMAN  
VICE-CHAIRMAN

Councillors CHADWICK, HARDY, HOLLAND, KITCHEN, McGOWAN,  
OATES and STREETER

Co-opted Members: Mrs. JOAN GREENWOOD  
Mrs. GLADYS PICKLES  
Mrs. DORIS RHODES

### Mental Health and Care Sub-Committee

THE CHAIRMAN  
VICE-CHAIRMAN

Councillors ASTIN, CROSSLEY, HARDY, HOLLAND, STREETER and  
THORNTON

Co-opted Member: Dr. W. H. CRAVEN

### Clean Air Sub-Committee

THE CHAIRMAN  
VICE-CHAIRMAN  
Alderman BOWER

Councillors ASTIN, CROSSLEY and THORNTON

# Staff of the Health Department

(as on December 31st, 1960)

## Medical Officer of Health

JOHN G. CAIRNS, M.B., Ch.B., D.P.H.

## Deputy Medical Officer of Health

ROBERT C. LAVERICK, M.B., Ch.B., D.P.H.

## Assistant Medical Officer

VERONICA PEARSON, M.B., Ch.B.

## Chief Public Health Inspector

A. W. PERRY, M.R.S.H., M.A.P.H.I., D.P.A.

## Meat and Foods Inspector

G. A. WOODHEAD

## Lay Administrative Officer

H. HUDSON

## Senior Public Health Inspector

H. LEAPER

## District Public Health Inspectors

F. BURKE, J. E. BANKS, T. ASHWORTH, B. OVERSBY

Pupil: G. BOTTOMLEY

## Smoke Control Inspector

A. LUM

Clerk of Works: K. HUBBARD

## Housing Inspectors

R. CROSSLEY, J. M. TODD

## Rodent Control

Senior Rodent Operative: R. GARFORTH

## Clerical Staff

H. WRIGHT (Senior Clerk), N. BRADLEY, Senior Clerk (Health Inspectors' Section), E. I. DAVIS, D. SPEAK, Mrs. E. A. SUNDERLAND, Mrs. H. GREENWOOD, Mrs. H. DOYLE, Mrs. B. PRIESTLEY, Mrs. B. L. WATSON (M.C.W.), A. R. PASS (Housing Section), Miss A. FARRELL (Health Inspectors' Section), E. W. PRIESTLEY, Miss P. CLARK, Miss S. GARTSIDE (Mental Health).

## Maternal and Child Welfare

Superintendent Nursing Officer: Miss V. SAVAGE

## Health Visitors

Miss N. DINGSDALE

Mrs. E. J. KITCHING

Mrs. B. M. DACK

Miss J. VAUGHAN

Mrs. N. THOMPSON

Miss J. BURGIN

Miss I. HOLDSWORTH

Miss H. SHOOTER

Mrs. J. C. B. GREENWOOD

Clinic Nurses: Mrs. H. BROWN, Mrs. A. ENNIS

## Day Nurseries

Craigie Lea Day Nursery, Ovenden: Matron, Mrs. M. R. WILSON

Ling Bob Day Nursery, Pellon: Matron, Miss M. GOODWIN

## Mental Health Service

Mental Welfare Officers: L. HOLDSWORTH, A. LEE

Mental Welfare Assistant: Miss J. NICHOLSON

## Occupation Centre

Supervisor: Miss L. BALL

Five Assistant Supervisors

## Ambulance Service

Ambulance Office: W. FITTON

4 Shift Leaders, 16 Driver/Attendants, 2 Switchboard Attendants

## Domestic Help Organiser

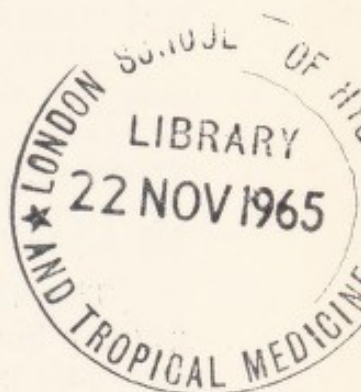
Miss J. WILEY

## Part Time

J. N. I. EMBLIN, F.R.C.S., F.R.C.O.G. (Obstetrician)

R. MALLINDER, B.Sc. F.I.C. (Public Analyst)

Miss G. DAVIE, S.R.N., S.C.M., H.V's Cert. (Special Treatment Centre)





## COUNTY BOROUGH OF HALIFAX

# Annual Report FOR THE YEAR 1960

## INTRODUCTION

To the Chairman and Members of the Health Committee.

Mr. Chairman, Ladies and Gentlemen,

The Report, which is the eighty-eighth of the series, is on the general lines of its predecessors. During 1960, there has been emphasis on the work of Mental Health, Health Education, and Chiropody, and in the pages which follow, these subjects receive special mention. The year was a difficult one due to depleted staffs.

So far as Mental Health is concerned, the year 1960 has been momentous. The Mental Health Act opens the door to progress inviting fresh ideas and admitting new opportunities. Still more emphasis is being placed on the importance of the healthy mind related to social well-being. Mental disorder, also, in whatever way it is manifest, is no longer discussed in under-tones, or regarded with suspicion or fear, but provides a topic for open discussion. All families have at times experienced distress in mind, body or estate. Nowadays, however, one can look forward more hopefully to satisfactory results in the treatment of even the more severe forms of mental trouble. This has been brought about not only by great advances in research, but by the enlightenment and better education of the public. It is often said that ignorance is bliss; ignorance of things which affect family happiness or community stability is a recurring social evil calling for special action. By means of Health Education the social conscience is being stirred, and there is a more tolerant understanding of mental hygiene by the man in the street, which not only fosters a deeper interest, but helps relationships one with another.

In dealing with a situation arising as a result of mental disorder, not only does the patient suffer, but his relatives also. Furthermore, his recovery, and ultimate return to the community is a testing time not only for himself but to all concerned, in particular those near and dear to him. There is often a feeling of uncertainty in the minds of those reunited and this is the time when support, re-adjustment of relationships, and a strengthening of family ties, require attention. In all these ways throughout the year the Mental Health Staff has rendered noble service.

Mental Health Year which began in 1960, has left its impression on the minds of the public. In Halifax interest was quickened, not only during Mental Health Week when press and pulpit proclaimed the importance of mental health, but throughout the year (World Mental Health Year), when a host of organisations arranged special



lectures. It was a disappointment that the particular week set aside nationally coincided with the local holiday week.

The coming into force of the Mental Health Act 1959 on the 1st November, signalled the end of an era wherein mental disorder had been badly defined and the arrangements for treatment had been outmoded by new knowledge. All categories of mental disorder are now included under one legal code and hospitals may give treatment on an informal basis. In addition, the Act and the supportive Circulars issued by the Ministry of Health emphasise the switch from hospital to community care. Whilst this cannot be accomplished overnight, much has been achieved in Halifax; the schemes which have been formulated to meet the challenge have been approved, but more important, a link has been forged between the staffs of the Local Authority and those of the hospitals.

During the year for the first time Mental Welfare Officers have been in attendance at Psychiatric Out-patient Clinics. Social reports on home background, family relationships, economic circumstances and case histories, have been discussed with the Psychiatrist at personal level and on the spot decisions have been made on arrangements for treatment. A need for a variety of hostels has become apparent. Although the aim is the provision of a hostel in association with a male training centre, an experimental mixed unit may be necessary since the numbers of cases in various categories are not numerous enough to justify the building of separate units.

The staff of the Mental Health section became seriously depleted towards the end of the year and some anxiety was experienced in fulfilling our visiting commitments. Happily the deployment of existing staff, including nurses, proved a valuable expedient. The generalship of Mr. Holdsworth has been greatly appreciated.

The position as to hostels is dealt with on Page 55. At the end of the year, after frequent visits and apparently endless negotiation, neither definite site nor final plans had been fixed for the building or acquiring hostel accommodation. There may be a changing need for accommodation brought about by better medical treatment and a more perfect appraisal of social techniques. Fresh legislation has been followed by a flood of new ideas, but it is very proper that we should use time wisely to adapt and adjust our proposals to matured experience. Some larger authorities may have a sufficient variety of different types of patients, each in sufficient number, to build a variety of hostels. Nothing will obscure our observations, but it may well be as stated above that our final plan will take shape as a small experimental unit. This would bring home-life and comfort to the small number of different types of patients who cannot be "boarded out" in households equipped and geared with the necessary sympathy and understanding.

The rôle of the duly authorised officer is passing with the new emphasis on case finding and case preventing schemes whereby emergency or compulsory admissions are reduced to a minimum.



The staff of the department has adapted themselves to the new methodology.

It is, nevertheless, fitting to note that this will be the last opportunity on which acknowledgment can be made of the duties performed by a local magistrate in connection with the confirmed Mental Health legislation. These duties ceased on the 31st October upon the inception of the Mental Health Act 1959. We have been very fortunate in our dealings with these ladies and gentlemen through the years. Frequently, at great inconvenience to themselves, they have given of their time and services in the interest of the patients brought to their notice. Mention should also be made of the good relationships that have existed between the services, General Practitioners and hospital medical staffs at all times.

The work of Health Education is reported on Page 49. It is becoming increasingly clear that smoking presents a serious health hazard. This is especially so in relation to lung cancer, tuberculosis and chronic bronchitis. The Health Department is very conscious of its responsibilities in emphasising the risks involved and in attempting to stem the adverse influence of propaganda which encourages smoking. To this end, the problem is brought before the public mind in several ways. For example, by posters, by lectures from the department's staff and by informal discussion. I feel it is of especial importance to prevent the young from taking up the habit. Teachers have attempted to dissuade those in their charge from smoking and the School Medical Officers have carried out propaganda in the schools. Unfortunately, I am not convinced that any of the foregoing methods are meeting with much success. As far as the young are concerned, it is of the utmost importance that a good example is set by the more adult section of the population, especially those directly responsible for their education and upbringing.

During the year a scheme for giving Chiropody treatment to elderly handicapped and expectant mothers was instituted. Approval was received from the Minister of Health on March 10th and the first Health Department Chiropodist was appointed on the 6th September. The delay in securing his appointment was due to the difficulty in satisfying the National Health Service (Medical Aux.) Regulation 1954. The treatment is carried out on a domiciliary basis but on one session per week it is conducted from the Maternal and Child Welfare Clinic at North Parade.

This scheme is included as part of the Council's arrangements for the prevention of illness under Section 28 (i) of the National Health Service Act 1946.

The need for Chiropody treatment is mainly brought to light by domiciliary visitation in various fields including Doctors, Nurses and Social Workers of the Health and Welfare Departments. The family doctor is invited by the Medical Officer of Health to fill in a prescription form if he agrees that treatment is necessary. Eight to ten cases were being seen per session at the end of the year, and the number of sessions worked by the Chiropodist were being



increased from three to six sessions per week. Prior to introducing the Chiropody Scheme, the range of private and voluntary chiropody services within the Borough was carefully reviewed. This revealed a special need for additional provisions for a high proportion of disabled and elderly within their homes amounting to 400-600 persons, and also for 8%-12% of expectant mothers attending the ante-natal clinic.

The clinical significance of chiropody, apart from the greater comfort experienced by those in need, lies on the mobilising of those who would otherwise require to be sedentary or recumbent. Activity in old people is required for the maintenance of muscular tone quite apart from the interest engendered by getting from one place to another. For those with handicaps, particularly for those with cardio-vascular disease, an adequate circulation can only be promoted if the health of the feet in relation to such conditions as corns and callosities permit sufficient locomotion.

In general, liaison with hospitals is satisfactory. Several meetings were held during the year at which the Medical Officer of Health and the Superintendent Nursing Officer met the almoners and hospital consultants. This was followed later by the appointment of special nurses for geriatrics and tuberculosis. The appointment also of Miss Savage, the Matron of the Halifax District Nursing Association, and later of Miss Walker, the Assistant Matron, as Superintendent Nursing Officer and Assistant Nursing Officer on the staff of the Health Department have brought about a closer working partnership between Health Visitors, Midwives and District Nurses. There has, therefore, been improvement in the domiciliary services, not only in relation to hospital after-care but in the co-operation between the family doctor and the Health Department. The arrangement has resulted in more adequate treatment and nursing being carried out in the home, sometimes without the need of children being admitted to hospital. Under the new arrangements also, the integration of the health visiting service under the Superintendent Nursing Officer enables a report on homes and family circumstances to be obtained which can often be a useful factor in determining not only the best method of after-care and prevention of recurrence, but the circumstances which would permit, if possible, the discharge of a child from hospital to his own home, to be accelerated.

A Central Health Service Council special committee on the welfare of children in hospitals has advised the Minister of Health that mothers should be encouraged to nurse a sick child at home with the assistance of the domiciliary services, including a Home Help. The full implementation of these recommendations is very desirable even to the extent of subsidising the high cost of a Home Help where one is required.

The agency arrangements whereby the Halifax District Nursing Association is responsible for the practice of domiciliary midwifery has continued satisfactorily and they are reported on Page 44.



Arrangements were in progress during 1960 for the establishment of a Child Guidance Clinic as part of the School Health Service. When the new clinic opens in 1961 the Child Psychiatrist of the Leeds Regional Hospital Board will continue to see pre-school children in the new premises. A satisfactory relationship has been established with the Department of Psychiatry at the General Hospital and advice is not only given in individual cases of maladjustment, but in relation to the needs of the whole family.

The Registrar General's estimate of population in the County Borough at mid-year 1960 was 94,900 compared with 94,980 in 1959—a decrease of 80. During 1960, the total number of live births registered was 1,612 and the total number of deaths was 1,371. The difference of 241 gives the natural increase in the population and this figure, together with the decrease of 80, is an indication of the extent to which transfer out from the town is taking place. Drift of population from the town has been referred to in previous reports; the decrease in population during the period 1950 to 1960 is of the same magnitude as the increase which took place from 1900 to 1910.

1,612 live births were registered during the year equivalent to a crude birth rate of 16.99. The rate for 1959 was 15.92. When multiplied by the Area Comparability Factor the adjusted rate for 1960 is 17.33 which corresponds with the rate for England and Wales of 17.10. Birth rates in Halifax over the years show little alteration (Table 1). Illegitimate live births numbered 108 as compared with 102 in 1959 and equal to 6.70% of the total live births. Notifications of premature births during 1960 showed an increase of 14 on the previous year. Details of all premature live and still births for two years are shown in Table II.

There was an increase in the number of stillbirths during the year, the figures being 33 in 1960 and 29 in 1959. The rates for the two years were 20.06 and 18.82 respectively, whilst the rate for England and Wales for 1960 for 19.7. Deaths of infants under one week were greater than in the previous year and the total perinatal deaths numbered 51. The perinatal mortality rate produced by this figure per 1,000 live and still births, is 35.87. This compares unfavourably with the 1959 rate (31.8) which was the lowest recorded. The Infant Mortality referred to below and on Page 18 is also an unsatisfactory feature of the Health Position during 1960. Perinatal mortality is a sensitive index to the standard of ante-natal care and the position in relation to both rates is explained by an increase of congenital malformations. The latter cannot be accounted for only by an increased risk brought about by a higher birth rate but is due to some unexplained factor associated with activity in expectant mothers.

The total number of children who died under the age of one year was 52 compared with 35 in the previous year and the infant mortality rates for the two years were 32.26 in 1960 and 23.15 in 1959 per 1,000 live births. The figure for England and Wales for



1960 was 21.7. The figures relating to infant mortality for a ten year period are shown in Table V. Thirty two children died during the first four weeks of life giving a neo-natal mortality rate of 19.85 per 1,000 live births compared with the England and Wales rate of 15.8. In 1959 the local rate was 13.99 whilst that for the country as a whole was 15.8. The number of children who died between the ages of one month and twelve months was 20 compared with 14 in 1959. The rate of 12.4 for 1960 shows an increase in the 1959 rates, which was 9.3. Further details concerning infant mortality are given in Tables V to IX. The principal causes to which the deaths of children under one year of age were attributed are shown in Tables VIII and IX.

Deaths of Halifax residents totalled 1,371 in 1960 of which 668 were males and 703 were females. The crude death rate was 14.45 per thousand compared with 14.74 for 1959. When the crude death rate is multiplied by the area comparability factor the adjusted death rate is 13.87 which compares with 13.85 in 1959. The rate for England and Wales for 1959 was 11.5. There was one maternal death during the year. In Table X the death rates are shown for Halifax and England and Wales for the past ten years.

There was one death from influenza, equivalent to a rate of 0.01 per thousand population as against a rate of 0.25 in 1959 and 0.02 in 1958. The total number of deaths from other respiratory diseases, excluding respiratory tuberculosis, were fewer than in the previous year, 148 being recorded compared with 158 in 1959.

The increase in the incidence and mortality from respiratory tuberculosis could be associated with the high number of Influenza cases which occurred in 1959. (See Page 51).

The "short list" of causes of death (Table XI) confirms that Infectious Diseases and Tuberculosis are no longer major causes of death; over the years they have been replaced by cancer, heart disease and cerebro-vascular conditions. There were 209 deaths due to malignant neoplasms in 1960, a further decrease on the previous year's figure. The rate per thousand estimated population was 2.20 as against the rate of 2.46 in 1959. Cancer deaths accounted for 15.24 of the total deaths for the year under review as compared with 16.71 in 1959 and 16.60 in 1958. Further comparison of the deaths from this disease in recent years is given in Table XII. 45 deaths were attributable to cancer of the lung and bronchus, a decrease of 7 over the previous year. The greatest number of deaths occurred in males in the age-group 45-64 years. Deaths from cancer of the stomach numbered 41 compared with 45 in 1959 and 48 in 1958. Table XIII gives an analysis of deaths from malignant neo-plasms showing the parts of the body affected and the age at which death occurred. Deaths from Coronary Disease seem to increase each year and although this is offset by a reduction in other cardiac deaths the former are not occurring less frequently in middle age (Tables XIV-XVII).

In presenting an Annual Report one must bear in mind the



relationship between environmental hygiene and the health of the community as ordinarily understood. The incidence of illness is one criterion which as our scale of social values becomes more sophisticated, is being replaced by standards of well being or emotional security. Mortality also must still be a correlate with environment which, however, as conditions improve may be associated more appropriately with the outward and visible signs of a fuller and happier process of living. Illness and death are negative; the emotions engendered by a rich and healthy mode of living are positive. Environmental hygiene has a positive contribution to make to health. In the field of housing, with official representations of clearance areas at New Bank and Gt. Albion Street, the programme of removing unfit houses is being maintained. I deplore, however, the time lag between the Ministry of Housing and Local Government confirmation of Orders under the Housing Act and demolition. In addition, the contours of the ground emphasise the need for re-development to take place immediately following demolition. The average number of persons per occupied house has increased to 2.74. This may well be satisfactory. The increase in over-crowding partly due to the influx of Irish personnel has evoked a careful response from our social services.

The provision of bathrooms and water closets in houses, many of them back to back, continues, and alleviates sub-standard housing conditions and obviates the need for water closet accommodation down the street. Although many bedrooms have been converted to bathrooms, only a small number of attics in these have been used for sleeping. There seems to be a more effective use of living cubic space.

The public are now more sensitive to noise. This may be due to more noise or the need for more quietness. The human mind has great powers of resilience and in the absence of adaptations to a regularly recurring noise the measures for the good of public health may be either in the realm of psychology or abatement. The Halifax Corporation have had powers in the latter contingency for some years which are difficult to operate, but a solution from applied psychology may still be outside the realm of community care. This is a subject for Mental Health research and one which is due for discussion at the Royal Society of Health meeting to be held in 1961. In the ordinary way the inspectorate have been responsible for effectively abating a number of noise nuisances. As in other branches of public health administration, however, it is much easier to prevent than to cure a noise nuisance, and the utmost vigilance is required of a Development Committee in allocating sites for industrial development and by a Health Committee on how it may advise.

Industrial and domestic progress is reported in procuring cleaner air and the Five Year Smoke Control programme has not been delayed. An official enquiry was needed before an order was confirmed for the Mixenden Smoke Control area. Smoke Control publicity is worth-while, and the department arranged an exhibition



of Smokeless Fuel at a demonstration house at No. 10, Clare Road, attended by over two thousand persons.

During the year, the Halifax Industrial Health Committee was formed. This voluntary Committee has a membership drawn from the Halifax and District Incorporated Chamber of Commerce Trade Union Council, members of the medical and nursing professions and others. The Committee's terms of reference include measures for the maintenance of good industrial health and the systematic medical supervision of all workers in industrial and non-industrial occupations.

The position concerning infectious diseases has been very satisfactory and is reported on Page 27. The incidence of food poisoning is usually considered under the statistical headings General Outbreaks, Family Outbreaks, and Sporadic Cases. The year is notable, however, in that there was no general outbreak and of the 17 individual cases which came to light, in only two families investigated were there more than one case. There were no cases due to *Clostridium Welchii* and *Staphylococcus Aureus* and this may be due in some measure to health education directed to canteens. Memory is short however and advice has been constantly applied to unhygienic practices associated with meat, gravy or 'stock'. In 1959, three outbreaks were associated with re-heated meat or 'stock'. Salmonellosis remains the most serious food poisoning problem in England and Wales and *Salmonella Typhi* Murium by far the most common cause which in unhygienic circumstances can contaminate processed and made up meat, cream buns, duck eggs, and fresh milk. *Salmonella Typhi* Murium occurred in six Halifax cases. In nine other cases *Salmonella heidelberg* was recorded and for the first time in Halifax. This organism was first detected in Heidelberg a few years ago and of 4,105 cases of food poisoning in England and Wales in 1960 it was recorded on 118 occasions. Those affected with food poisoning due to *Salmonella Heidelberg* have abdominal pain, colic and Diarrhoea coming on in 24 to 36 hours and lasting for 48 to 72 hours. There were no fatal cases from food poisoning in Halifax during 1960, but in England and Wales there were 25 and of these 13 were due to *Salmonella Typhi* Murium and 2 to *Salmonella heidelberg*. The problem of food poisoning is, therefore, a serious one and as stated in my report for 1959 only better handling, preparation and cooking of food in canteens and restaurants, can minimise the risk, and the department has pursued a relentless system of inspection and control.

The special work involved in relation to following up accidents in the home continues and has been intensified during the year. A statistical analysis of the position is made on page 28.

The accident position on the road and in the home is a high price which social complexity pays for the lack of public safety. The road accident black spots are as follows:—

Huddersfield Road:

Junction at the Calder and Hebble Inn.



Stretch of road from junction of Prescott Street to the Shay Football Ground.

Burnley Road:

Area of Cote Hill.  
Causeway Head.

Leeds and Bradford Road:

Stump Cross.  
Junctions at both ends of North Bridge.

Keighley Road:

Waterhouse Street, junction of North Parade and Corporation Street.  
Bank Top, Lee Mount.  
Junction at Grove Avenue.  
Stretch of road between Beechwood Road Junction and Cousin Lane junction.  
Peat Pitts.  
Causeway Food.  
Junction of Nursery Lane.

Rochdale Road:

Pye Nest.

Great credit is due to the Chief Public Health Inspector for his enthusiasm, hard work and resourcefulness, and to the Health Visitors for the steadfast manner in which they have carried out their difficult duties. As in 1959, the Health Visitors strength has been weak for the heavy burden which is placed on their skill but the position improved with the arrangements already outlined with the appointment of Miss Savage, Superintendent Nursing Officer.

As in previous years, for easy reference, the report is arranged in sections. I take the opportunity of thanking the Lay Administrative Officer and all sections of the staff for their loyalty and the Chairman and Members of the Health Committee for their support.

Yours faithfully,

JOHN G. CAIRNS,

Medical Officer of Health.

Health Department,  
Powell Street,  
Halifax.

# **STATISTICS AND SOCIAL CONDITIONS OF THE AREA**

## **Summary**

Latitude	...	...	...	...	...	53° 44' North
Longitude	...	...	...	...	...	1° 50' West
Mean Height above sea level	...	...	...	...	...	780 feet
Area (Acres)	...	...	...	...	...	14,081
Population (Census 1931) (Males 44,600. Females 53,515)	...	...	...	...	...	98,115
Population (Census 1951) (Males 45,487. Females 52,889)	...	...	...	...	...	98,376
Population (Registrar General's Estimate 1960)	...	...	...	...	...	94,900
Density of population per acre	...	...	...	...	...	6.74
Number of inhabited houses (1931 Census)	...	...	...	...	...	28,488
Number of inhabited houses on 31st December, 1960 according to the Rate Books	...	...	...	...	...	34,661
Average number of persons to each occupied house	...	...	...	...	...	2.74
Rateable Value (31st December, 1960)	...	...	...	...	...	£1,136,521
Sum represented by a Penny Rate (1960-61)	...	...	...	...	...	£4,540

## **Extract from Vital Statistics for the Year**

				Male	Female	Total
Live Births—Legitimate	...	...	...	782	722	1,504
Illegitimate	...	...	...	52	56	108
Total	...	...	...	834	778	1,612
Live Birth Rate per 1,000 Estimated Resident Population						
Crude	...	...	...	...	...	16.99
Adjusted	...	...	...	...	...	17.33
Illegitimate Live Births per cent of total live births	...	...	...	...	...	6.70



# **Extract from Vital Statistics for the Year (cont.)**

	Male	Female	Total
Stillbirths—Legitimate ... ..	14	17	31
Illegitimate ... ..	1	1	2
Total ... ..	15	18	33
Stillbirth Rate per 1,000 Live and Stillbirths ...			20.06
Total Live and Stillbirths ... ..			1,645
Deaths of Infants:—	Male	Female	Total
Under 1 year of age—Legitimate	27	20	47
Illegitimate	—	5	5
Total	27	25	52
Infant Mortality Rates:—			
Total Infant Deaths per 1,000 total live births ...			32.26
Legitimate Infant Deaths per 1,000 Legitimate Live Births ... ..			31.25
Illegitimate Infant Deaths per 1,000 Illegitimate Live Births ... ..			46.30
Deaths of Infants:—	Male	Female	Total
Under 4 weeks of age—Legitimate	18	10	28
Illegitimate	—	4	4
Total	18	14	32
Neo-Natal Mortality Rate per 1,000 total live births ...			19.85
Deaths of Infants: —	Male	Female	Total
Under the age of 1 week—Legitimate	15	8	23
Illegitimate	—	3	3
Total	15	11	26
Early Neo-Natal Mortality Rate per 1,000 total live births ... ..			16.13
Perinatal Mortality Rate (stillbirths and deaths under one week combined per 1,000 total live and stillbirths)			35.87
Maternal Deaths (including abortion) ... ..			1
Maternal Mortality Rate per 1,000 Live and Stillbirths			0.61
	Male	Female	Total
TOTAL DEATHS (all ages) ... ..	668	703	1,371
Death rate per 1,000 Estimated Resident Population			
Crude ... ..			14.45
Adjusted ... ..			13.87
Area Comparability Factors—Births ... ..			1.02
Deaths ... ..			0.96

**TABLE 1**  
**BIRTH RATES, 1951-60**

Years	HALIFAX		ENGLAND AND WALES BIRTH RATE
	No. of Births	Birth Rate per 1,000 Population	
1951	1,516	15.5	15.5
1952	1,400	14.4	15.3
1953	1,414	14.6	15.5
1954	1,422	14.6	15.2
1955	1,383	14.3	15.0
1956	1,543	15.6	15.6
1957	1,501	15.7	16.1
1958	1,524	16.0	16.4
1959	1,512	15.9	16.5
1960	1,612	17.0	17.1

**TABLE II(a)**  
**PREMATURE LIVE BIRTHS, 1959-60**

Premature Live Births Notified	YEARS	
	1960	1959
(a) Born in Hospital:—	110	96
(i) Died within 24 hours of birth	15	5
(ii) Survived 28 days	90	87
(b) Born at home and nursed entirely at home	26	37
(i) Died within 24 hours of birth	1	—
(ii) Survived 28 days	25	37
(c) Born at home and transferred to hospital before 28th day	11	1
(i) Died within 24 hours of birth	—	1
(ii) Survived 28 days	11	—
(d) Born in Nursing Home and nursed entirely there	—	1
(i) Died within 24 hours	—	—
(ii) Survived 28 days	—	1

**TABLE II(b)**  
**PREMATURE STILLBIRTHS 1959-60**

Premature Stillbirths Notified	YEARS	
	1960	1959
(a) Born in Hospital	21	12
(b) Born at home	3	3



**TABLE III**  
**STILLBIRTHS AND PERINATAL MORTALITY**

Year	Total Number of Stillbirths	Deaths in the First Week	Total Perinatal Deaths
1951	32	*	*
1952	35	20	55
1953	27	16	43
1954	31	25	56
1955	28	17	45
1956	34	14	48
1957	33	16	49
1958	24	29	53
1959	29	20	49
1960	33	26	59

\*Not available

**TABLE IV**  
**STILLBIRTHS AND PERINATAL MORTALITY**

Year	No. of Stillbirths Registered during the year per 1,000 live and Stillbirths		Number of stillbirths along with the number of deaths of children under the age of one week per 1,000 live and Stillbirths registered during the same year	
	Stillbirth Rate		Perinatal Mortality Rate	
	Halifax	England & Wales	Halifax	England & Wales
1951	20.67	23.0	*	38.1
1952	24.38	22.7	38.35	37.5
1953	18.74	22.5	29.84	37.0
1954	21.34	23.5	38.54	38.1
1955	19.84	23.2	31.89	37.6
1956	21.56	22.9	30.44	36.8
1957	21.51	22.5	31.94	36.2
1958	15.50	21.6	34.24	35.1
1959	18.82	20.7	31.80	34.2
1960	20.06	19.7	35.87	*

\*Not available

**TABLE V**  
**INFANT MORTALITY RATES 1951-60**

Year	Births	HALIFAX		ENGLAND AND WALES RATE
		Deaths of Infants under one year	Infant Mortality Rate per 1,000 live births	
1951	1,516	43	28.3	29.7
1952	1,381	37	27.1	27.6
1953	1,414	42	29.7	26.8
1954	1,422	47	33.0	25.4
1955	1,383	30	21.7	24.9
1956	1,543	37	24.0	23.7
1957	1,501	28	18.6	23.1
1958	1,524	42	27.6	22.6
1959	1,512	35	23.2	22.0
1960	1,612	52	32.3	21.7

TABLES VI and VII  
NEO-NATAL AND POST-NEONATAL MORTALITY  
1951-60

Years	Total Infant Deaths	NUMBER OF DEATHS AND MORTALITY RATE					
		Neo-Natal Period			Post Neo-Natal Period		
		HALIFAX		ENGLAND & WALES	HALIFAX		ENGLAND & WALES
		Number of Deaths	Mortality Rate per 1000 Live Births	Mortality Rate per 1000 Live Births	Number of Deaths	Mortality Rate per 1000 Live Births	Mortality Rate per 1000 Live Births
1951	43	*	*	18.8	*	*	10.9
1952	37	22	15.71	18.3	15	10.71	9.3
1953	42	25	17.68	17.7	17	12.02	9.1
1954	47	31	21.80	17.7	16	11.25	7.7
1955	30	20	14.06	17.3	10	7.23	7.6
1956	37	23	14.91	16.8	14	9.07	7.0
1957	28	20	13.32	16.5	8	5.33	6.5
1958	42	31	19.70	16.2	11	7.2	6.4
1959	35	21	13.90	15.8	14	9.3	6.2
1960	52	32	19.85	*	20	12.4	*

\*Not available

TABLE VIII  
INFANT MORTALITY

Principal Causes	No.	Percentage of Total Deaths	
		1960	1959
Prematurity .. .. .	12	23.1	28.6
Pneumonia .. .. .	11	21.1	37.1
Congenital Malformations .. ..	17	32.7	20.0



TABLE IX INFANT MORTALITY DURING THE YEAR

Deaths from Stated Causes at Various Ages under 1 Year of Age

CAUSE OF DEATH	AGE GROUPS										Deaths in Institutions
	Under 1 week	1-2 weeks	2-3 weeks	3-4 weeks	Total under 4 weeks	1 Month and under 3 months	3-6 months	6-9 months	9-12 months	Total Deaths under 1 year	
Prematurity ..	12	—	—	—	12	—	—	—	—	12	12
Pneumonia ..	1	2	—	—	3	3	3	2	—	11	8
Congenital Malformations ..	9	2	1	1	13	2	2	—	—	17	15
Enteritis ..	—	—	—	—	—	—	1	—	1	2	2
Heart Disease ..	—	—	—	—	—	1	—	—	—	1	—
Bronchitis ..	—	—	—	—	—	—	1	—	—	1	1
Homicide ..	—	—	—	—	—	—	1	—	—	1	—
Asphyxia ..	—	—	—	—	—	—	—	—	1	1	1
Erythroblastosis Foetalis ..	1	—	—	—	1	—	—	—	—	1	1
Diabetes ..	—	—	—	—	—	—	—	1	—	1	1
Renal Agenesis ..	1	—	—	—	1	—	—	—	—	1	1
Hyaline Membrane Disease of Lung ..	1	—	—	—	1	—	—	—	—	1	1
Influenza ..	—	—	—	—	—	—	1	—	—	1	—
Haemolytic Disease	1	—	—	—	1	—	—	—	—	1	1
TOTAL ALL CAUSES	26	4	1	1	32	6	9	3	2	52	4
CERTIFIED ..	26	4	1	1	32	6	9	3	2	52	44



		Under 1	1-4 years	5-14 years	15-24 years	25-44 years	45-64 years	65-74 years	75-and over
Tuberculosis, Respiratory ..	12	—	—	—	1	1	8	2	—
"  Other ..	—	—	—	—	—	—	—	—	—
Syphilitic Disease ..	—	—	—	—	—	—	—	—	—
Diphtheria ..	—	—	—	—	—	—	—	—	—
Whooping Cough ..	—	—	—	—	—	—	—	—	—
Meningococcal Infection ..	—	—	—	—	—	—	—	—	—
Acute Poliomyelitis ..	—	—	—	—	—	—	—	—	—
Measles ..	—	—	—	—	—	—	—	—	—
Other Infective and Parasitic Disease ..	2	—	—	—	—	—	2	—	—
Malignant Neoplasm, Stomach ..	41	—	—	—	1	1	12	12	15
Lung and Bronchus ..	45	—	—	—	—	2	18	16	9
Breast ..	21	—	—	—	—	2	9	7	3
Uterus ..	16	—	—	—	—	—	5	4	7
Others ..	86	—	—	—	1	4	28	35	18
Leukaemia and Aleukaemia ..	6	—	—	—	—	1	3	—	2
Diabetes ..	12	1	—	—	—	1	2	5	3
Vascular Lesions of Nervous System ..	218	—	—	—	—	7	25	59	127
Coronary Disease, Angina ..	331	—	—	—	—	8	76	121	126
Hypertension with Heart Disease ..	28	—	—	—	—	—	4	7	17
Other Heart Disease ..	157	1	—	—	—	1	28	36	91
Other Circulatory Disease ..	50	—	—	—	—	1	11	12	26
Influenza ..	1	1	—	—	—	—	—	—	—
Pneumonia ..	73	11	1	1	—	—	8	13	39
Bronchitis ..	67	1	1	—	—	—	15	27	23
Other Diseases of Respiratory System ..	8	—	—	—	—	—	2	3	3
Ulcer of Stomach and Duodenum ..	11	—	—	—	—	1	3	7	—
Gastritis, Enteritis and Diarrhoea ..	5	2	—	—	1	—	1	—	1
Nephritis and Nephrosis ..	5	—	—	—	—	—	2	2	1
Hyperplasia of Prostate ..	8	—	—	—	—	—	—	3	5
Pregnancy, Childbirth and Abortion ..	1	—	—	—	—	1	—	—	—
Congenital Malformations ..	19	17	—	1	—	—	1	—	—
Other Defined and Ill-defined Diseases ..	88	16	1	1	1	1	21	16	31
Motor Vehicle Accidents ..	15	—	—	1	4	2	6	1	1
All Other Accidents ..	22	1	2	—	—	1	5	7	6
Suicide ..	21	—	—	—	1	6	12	2	—
Homicide and Operations of War ..	2	1	—	—	—	1	—	—	—
TOTALS ..	1371	52	5	4	10	42	307	397	554



**TABLE X**  
**DEATH RATES 1951-60**

Years	HALIFAX		ENGLAND and WALES
	Number of Deaths	Death Rate per 1,000 Population	
1951	1,478	15.2	12.5
1952	1,376	14.1	11.3
1953	1,471	15.1	11.4
1954	1,457	15.0	11.3
1955	1,522	15.7	11.7
1956	1,495	15.5	11.7
1957	1,482	15.5	11.5
1958	1,422	14.9	11.7
1959	1,400	14.7	11.6
1960	1,371	14.4	11.5

**TABLE XII**  
**CANCER DEATHS 1951-60**

Years	Number of Cancer Deaths	Males	Females	Death Rate Per 1,000 Population	Deaths from all Causes	Per- centage of total Deaths
1951	211	*	*	2.20	1,478	14.28
1952	230	96	134	2.36	1,376	16.71
1953	261	130	131	2.69	1,471	17.74
1954	244	126	118	2.51	1,457	16.75
1955	253	114	139	2.61	1,522	16.68
1956	214	118	96	2.22	1,495	14.31
1957	252	118	134	2.60	1,482	17.01
1958	236	115	121	2.48	1,422	16.60
1959	234	120	114	2.46	1,400	16.71
1960	209	103	106	2.20	1,371	15.24

\*Not recorded

**TABLE XIII**  
**CANCER DEATHS—PARTS OF BODY AFFECTED**

Parts Affected	Age	Under 25		25-44		45-64		65-74		75 & Over		Totals		Total
	Sex	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	1960		195
												M.	F.	M.
Stomach ..	1	—	1	—	6	6	5	7	4	11	17	24	24	
Lung and Bronchus ..	—	—	2	—	17	1	15	1	7	2	41	4	47	
Breast .. ..	—	—	—	2	—	9	—	7	—	3	—	21	—	
Uterus ..	—	—	—	—	—	5	—	4	—	7	—	16	—	
Others ..	1	—	3	1	14	14	21	14	6	12	45	41	49	
TOTALS ..	2	—	6	3	37	35	41	33	17	35	103	106	120	



**TABLE XIV CORONARY DISEASE, ANGINA**

Years	Number of Coronary Deaths	M.	F.	Death Rate per 1,000 Population	Deaths from All Causes	Percentage of Total Deaths
1951	165	*	*	1.69	1,478	11.16
1952	180	119	61	1.85	1,376	13.08
1953	226	131	95	2.53	1,471	15.36
1954	235	136	99	2.42	1,457	16.12
1955	264	164	100	2.73	1,522	17.35
1956	250	137	113	2.59	1,495	16.72
1957	260	153	107	2.72	1,482	17.54
1958	313	184	129	3.29	1,422	22.01
1959	321	178	143	3.38	1,400	22.93
1960	331	185	146	3.49	1,371	24.14

**TABLE XV OTHER HEART DISEASES**

Years	Number of Deaths	M.	F.	Death Rate per 1,000 Population	Deaths from All Causes	Percentage of Total Deaths
1951	303	*	*	3.11	1,478	21.18
1952	274	117	157	2.82	1,376	19.91
1953	225	81	144	2.32	1,471	15.29
1954	264	108	156	2.72	1,457	18.12
1955	256	93	163	2.64	1,522	16.82
1956	269	117	152	2.79	1,495	17.99
1957	249	76	173	2.61	1,482	16.80
1958	221	83	138	2.32	1,422	15.54
1959	191	78	113	2.01	1,400	13.64
1960	185	77	108	1.95	1,371	13.49

**TABLE XVI VASCULAR LESIONS OF NERVOUS SYSTEM**

Years	Number of Deaths	M.	F.	Death Rate per 1,000 Population	Deaths from All Causes	Percentage of Total Deaths
1951	231	*	*	2.37	1,478	15.63
1952	238	110	128	2.44	1,376	17.30
1953	239	90	149	2.46	1,471	16.25
1954	238	98	140	2.45	1,457	16.33
1955	282	99	183	2.91	1,522	18.53
1956	316	124	192	3.28	1,495	21.14
1957	254	102	152	2.62	1,482	17.14
1958	238	75	163	2.50	1,422	16.74
1959	207	91	116	2.18	1,400	14.78
1960	218	84	134	2.30	1,371	15.90

\*Not available

**TABLE XVII DEATHS FROM PRINCIPAL CAUSES IN AGE GROUPS**

CAUSE	Age Sex	Under 25		25-44		45-64		65-74		75 and over		Totals 1960		Totals 1959	
		M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Coronary ..		—	—	5	3	59	17	68	53	53	73	185	146	178	143
Other Heart Diseases ..		—	1	1	—	19	13	20	23	37	71	77	108	78	113
Cerebral Haemorrhage		—	—	5	2	13	12	24	35	42	85	84	134	91	116
Cancer ..		2	—	6	3	37	35	41	33	17	35	103	106	120	114
TOTALS ..		2	1	17	8	128	77	153	144	149	264	449	494	467	486

TABLE XIX

	Year	Birthrate per 1,000 Total Popula- tion	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)	DEATH; under one year
England and Wales	1960	17.1	11.5	*	*	*	*	*	*	21.7
HALIFAX	1950	15.9	14.8	0.00	0.00	0.00	0.00	0.07	1.3	39
	1951	15.5	15.2	0.00	0.00	0.00	0.00	0.18	0.0	28.3
	1952	14.39	14.14	0.00	0.00	0.00	0.00	0.01	0.0	27.14
	1953	14.57	15.15	0.00	0.00	0.00	0.00	0.18	0.0	29.70
	1954	14.60	15.00	0.00	0.00	0.00	0.00	0.02	0.7	33.05
	1955	14.29	15.73	0.00	0.00	0.00	0.00	0.03	0.7	21.69
	1956	15.99	15.50	0.00	0.00	0.00	0.00	0.01	1.3	23.98
	1957	15.73	15.53	0.00	0.00	0.00	0.00	0.06	0.0	18.65
	1958	16.00	14.93	0.00	0.00	0.00	0.00	0.02	0.0	27.56
	1959	15.92	14.74	0.00	0.00	0.00	0.00	0.25	0.0	23.15
	1960	16.99	14.45	0.00	0.00	0.00	0.00	0.01	1.2	32.26



TABLE XX

## 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		Poliomyelitis	
				New Cases	Deaths	New Cases	Deaths	New Cases	Deaths	New Cases	Deaths	New Cases	Deaths	New Cases	Deaths
1940	15.6	45	8.8	118	51	311	15	166	nil	3	1	31	9	2	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	5	nil
1943	15.4	50	1.9	123	68	127	4	411	nil	2	2	nil	2	2	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	3	nil	1	nil
1947	14.8	42	0.52	87	44	21	2	84	nil	2	nil	2	nil	6	nil
1948	13.8	29	0.58	61	32	9	nil	161	nil	*1	1	2	nil	1	1
1949	15.4	33	0.50	77	32	8	nil	222	nil	nil	nil	1	1	7	1
1950	14.8	39	1.23	85	29	1	nil	293	nil	3	nil	nil	nil	3	nil
1951	15.2	28	0.00	179	30	nil	nil	123	nil	15	nil	nil	nil	10	nil
1952	14.1	27	0.69	107	19	nil	nil	191	nil	2	nil	nil	nil	2	nil
1953	15.2	30	0.00	122	22	nil	nil	88	nil	3	nil	1	nil	3	nil
1954	15.0	33.05	1.38	121	19	nil	nil	90	nil	nil	nil	nil	nil	2	nil
1955	15.7	21.69	0.70	105	16	nil	nil	215	nil	1	nil	nil	nil	4	nil
1956	15.5	23.98	0.63	82	13	nil	nil	150	nil	2	nil	nil	nil	3	nil
1957	15.5	18.65	0.65	82	14	nil	nil	32	nil	4	nil	nil	nil	2	2
1958	14.9	27.56	0.65	56	12	nil	nil	52	nil	nil	nil	nil	nil	33	nil
1959	14.7	23.15	0.00	45	6	nil	nil	123	nil	nil	nil	nil	nil	nil	nil
1960	14.4	32.26	0.61	48	12	nil	nil	32	nil	1	nil	nil	nil	nil	nil

\*Transferred

TABLE XXI

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

Year	Pneumonia		Whooping Cough		Smallpox		Cancer Deaths	Heart Diseases Deaths	Cerebral Haemorrhage Deaths
	New Cases	Deaths	New Cases	Deaths	New Cases	Deaths			
1940	156	57	185	2	nil	nil	187	408	232
1941	188	66	240	3	nil	nil	235	381	179
1942	226	61	174	nil	nil	nil	216	374	164
1943	236	55	211	4	nil	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	nil	nil	206	464	182
1947	67	37	237	1	nil	nil	214	455	188
1948	62	39	295	1	nil	nil	206	415	213
1949	85	71	92	1	nil	nil	241	471	203
1950	59	43	374	1	nil	nil	239	505	208
1951	73	49	145	nil	nil	nil	211	468	231
1952	41	30	153	nil	nil	nil	230	454	238
1953	54	65	154	nil	4	nil	261	451	239
1954	23	46	72	nil	nil	nil	244	499	238
1955	80	38	111	nil	nil	nil	253	520	282
1956	71	56	152	nil	nil	nil	214	519	316
1957	34	67	70	nil	nil	nil	252	509	254
1958	36	61	37	nil	nil	nil	236	534	238
1959	23	80	47	nil	nil	nil	234	512	207
1960	8	73	43	nil	nil	nil	209	516	218



TABLE XXII Table showing comparative yearly Vital and Mortal Statistics from 1951 to 1960 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
1951	15.5	15.2	28	nil	162	.30	31	8	73	49
1952	14.4	14.1	27	0.7	99	.17	21	16	41	30
1953	14.6	15.2	29	nil	111	.21	23	30	54	65
1954	14.6	15.0	33	1.4	113	.18	21	25	23	46
1955	14.29	15.7	21.69	0.7	94	.15	10	20	80	38
1956	15.99	15.5	23.98	0.63	77	.13	13	26	71	56
1957	15.73	15.5	18.65	0.65	82	.14	11	26	34	67
1958	16.00	14.9	27.56	0.65	52	.12	12	10	36	61
1959	15.92	14.7	23.15	0.00	39	.06	10	18	23	80
1960	16.99	14.4	32.26	0.61	47	.13	10	24	8	73

Year	Deaths from Heart Disease	Deaths from Cancer	Deaths from Cerebral Haemorrhage	Deaths from Diabetes	Diphtheria		Scarlet Fever	
					New Cases	Deaths	New Cases	Deaths
1951	468	211	231	14	nil	nil	123	nil
1952	454	230	238	13	nil	nil	119	nil
1953	451	261	239	11	nil	nil	88	nil
1954	499	244	238	13	nil	nil	90	nil
1955	520	253	282	18	nil	nil	215	nil
1956	519	214	316	10	nil	nil	150	nil
1957	509	252	254	14	nil	nil	32	nil
1958	534	236	238	6	nil	nil	52	nil
1959	512	234	207	12	nil	nil	123	nil
1960	516	209	218	12	nil	nil	32	nil

TABLE XXIII

**Notification**

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

Disease	Number	
	Notified	Con- firmed
Smallpox .. .. .	—	—
Dysentery .. .. .	8	8
Food Poisoning .. .. .	8	8
Typhoid Fever and Enteric Fever ..	—	—
Para-Typhoid .. .. .	1	1
Scarlet Fever .. .. .	32	32
Malaria .. .. .	—	—
Diphtheria .. .. .	—	—
Puerperal Pyrexia .. .. .	—	—
Erysipelas .. .. .	2	2
Ophthalmia Neonatorum .. .. .	1	1
Encephalitis Lethargica .. .. .	—	—
Acute Poliomyelitis .. .. .	—	—
Cerebro-spinal Fever .. .. .	—	—
Measles .. .. .	432	432
Whooping Cough .. .. .	43	43
Pneumonia—Primary Influenzal ..	8	8
Meningococcal Infection .. .. .	—	—
Tuberculosis—		
Respiratory .. .. .	47	47
Other Forms .. .. .	1	1
Total .. .. .	583	583



## INFECTIOUS DISEASES

I am pleased to report that for the second successive year no cases of poliomyelitis occurred. Influenza caused one death only (in an infant) which is in sharp contrast to last year when 22 influenza deaths occurred. There were fewer cases of scarlet fever notified, 32 as compared with 123 in 1959. Towards the end of the year increasing numbers of measles notifications were being received. Of the 432 cases notified during the year (compared with 59 in 1959) 379 occurred in the last quarter.

### Food Poisoning

Food may be injurious to human beings in various ways:—

- (1) Some foods are poisonous in themselves, e.g. fungi eaten in mistake for mushrooms.
- (2) Food may be contaminated by chemicals—e.g. metals in tinning processes, arsenic from harmful colouring matters, etc.
- (3) Parasites may contaminate food.
- (4) Bacterial infection—much the most important group.

There were no large outbreaks of food poisoning during the year, but 8 notifications were received and 9 cases were discovered which had not been notified. Of the 8 notifications received, the causative agent in 8 cases and *Salmonella typhi-murium* in the and *Salmonella heidelberg* (1 case), whilst the causative agent was not identified in the other two cases.

Of the 9 cases discovered, *Salmonella heidelberg* was the causative agent in 8 cases and *Salmonella typhi-murium* in the other. Extensive enquiries were carried out at the homes and at food preparing premises in order to trace the source of the *Salmonella heidelberg*, but without success.

### Preventive Measures

Preventive measures include skilled meat inspection at the time of slaughter, thorough cleanliness of food premises, general cleanliness in manufacture, sale and distribution of food. Food handlers should be instructed in food hygiene. Simple precautions—like washing the hands after using the toilet—will go a long way in the prevention of food poisoning.

### Road Traffic Accidents

During the year 1,374 reports of road accidents were received by the Police and 10 deaths were attributable to such accidents. The following table affords a comparison with the number of fatal accidents occurring in previous years:—

	1951	1952	1953	1954	1955	1956	1957	1958	1959	1960
Police Report	7	7	14	6	9	12	15	6	9	10
R.G.'s Report for after adjustment Transfers	10	8	14	6	10	11	13	10	9	15



**TABLE XXIV**  
**HOME ACCIDENTS—MONTHLY STATEMENT**

MONTH	Age Groups					
	0-5 yrs.	6-15 yrs.	16-25 yrs.	26-50 yrs.	51-60 yrs.	61 & over
January ..	19	10	7	19	5	17
February ..	14	12	3	15	11	9
March ..	17	9	9	16	12	13
April .. ..	14	13	3	19	8	8
May .. ..	13	10	1	17	3	12
June .. ..	18	6	2	13	3	16
July ..	14	8	7	9	5	14
August ..	19	19	13	14	8	13
September ..	23	9	9	21	6	11
October ..	17	12	6	14	7	16
November ..	22	7	10	17	7	14
December ..	17	7	10	24	9	20
TOTALS ..	207	122	80	198	84	163

**TABLE XXV**  
**HOME ACCIDENTS—TYPES OF INJURIES**

INJURY	Age Groups											
	0-5 yrs.		6-15 yrs.		16-25 yrs.		25-50 yrs.		51-60 yrs.		61 & over	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Head.. ..	12	10	3	—	—	2	1	7	—	2	—	5
Upper Limb	21	23	21	17	7	18	14	31	4	22	9	34
Lower Limb	11	10	9	6	2	7	7	42	2	17	5	42
Cuts ..	39	21	4	10	—	11	2	35	—	10	—	11
Swallowed ..	24	11	4	2	—	1	2	1	—	—	—	1
Chest.. ..	—	—	1	—	2	3	6	2	3	2	9	15
Back ..	2	1	—	—	1	2	3	4	1	—	1	2
Burns ..	15	5	4	2	1	3	5	2	2	1	1	8
Scalds ..	10	2	7	4	—	3	2	2	2	4	1	3
Miscellaneous	12	12	6	7	2	6	8	9	2	7	—	5



TABLE XXVI

## Sickness Figures

The figures shown below represent the number of first sickness certificates submitted to the local insurance office by the working population in Halifax:—

1960				Aug.	2nd	..	258
Jan.	5th	..	481		9th	..	245
	12th	..	412		16th	..	267
	19th	..	416		23rd	..	281
	26th	..	396		30th	..	287
Feb.	2nd	..	382	Sept.	6th	..	267
	9th	..	356		13th	..	252
	16th	..	358		20th	..	277
	23rd	..	397		27th	..	295
Mar.	1st	..	410	Oct.	4th	..	345
	8th	..	425		11th	..	343
	15th	..	400		18th	..	332
	22nd	..	385		25th	..	334
	29th	..	343	Nov.	1st	..	326
April	5th	..	370		8th	..	333
	12th	..	372		15th	..	348
	19th	..	216		22nd	..	412
	26th	..	333		29th	..	427
May	3rd	..	275	Dec.	6th	..	384
	10th	..	264		13th	..	386
	17th	..	294		20th	..	375
	24th	..	272	Jan.	3rd	..	853
	31st	..	289				
June	7th	..	185				17,188
	14th	..	241				
	21st	..	251	Average Weekly			324
	28th	..	244				
July	5th	..	240				
	12th	..	168				
	19th	..	163				
	26th	..	223				

TABLE XXVII  
The Population 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	Borough extended by the additions of Warley and Northowram Wards
1911	101,566	
1921	100,700	
1931	98,115	
1945	89,390	Mid-year density of population per acre 6·3
1946	93,280	
1947	94,580	
1948	96,420	
1949	97,820	
1950	98,840	
1951	97,490	Mid-year density of population per acre 6·9
1952	97,320	ditto
1953	97,070	ditto
1954	97,130	6·88
1955	96,870	
1956	96,440	6·85
1957	95,430	
1958	95,250	
1959	94,980	
1960	94,900	



## **SECTION 2**

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### **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**

## MATERNAL AND CHILD WELFARE SECTION

The Infant Mortality Rate has increased in Halifax this year. There have been 52 deaths of infants under the age of one year in contrast to 1959 when there were 35. The Infant Mortality Rate for these two years is 32.26 and 23.15 respectively. The rate in 1960 (which is the highest since 1954) has been mainly due to the increase in the number of deaths resulting from congenital malformations, 17 in 1960; 7 in 1959. The underlying cause, however, is not apparent although 5 of the 17 deaths occurred in infants born in June. As in previous years prematurity and pneumonia continued to be responsible for a large number of infant deaths.

The Maternal Mortality Rate of 0.61 has been derived from the one maternal death which occurred during the year.

During the year the use of triple vaccine was adopted. This has the advantage of combining protection against tetanus together with diphtheria and whooping cough without recourse to additional injections against tetanus. To enable the infant to be protected against whooping cough at an early age, this triple vaccine is now the first to be given, smallpox vaccine being deferred until the child is one year old. This change in programme has resulted in fewer smallpox vaccinations being performed in the later months of the year (376 smallpox vaccinations were performed in contrast to 503 in 1959), but this deficiency should be made good in 1961. In all, 831 children were protected against diphtheria at the Infant Welfare Clinics in contrast to 620 in 1959.

There were changes in the medical staff, Drs. Townsend and Pickup having left and Dr. Laverick (Deputy Medical Officer of Health) and Dr. Pearson (Assistant Medical Officer of Health) being appointed.

The work of voluntary personnel has been greatly appreciated.

### Births

Total No. of births occurring in the Authority's area during 1960	...	...	...	...	...	...	2,509
No. at Halifax General Hospital	...	...	...	...	...	...	1,752
Local Births occurring in Nursing Homes in other areas							—

**Care of Premature Infants**—i.e., babies weight  $5\frac{1}{2}$  lbs. or less at birth, irrespective of period of gestation. Stillbirths should be excluded.

Number of premature infants notified during the year (including transferred notifications) whose mothers normally reside in the Authority's area:—

(i) Born at home	...	37
(ii) Born in hospital	...	110
(iii) Born in nursing home		—



Premature still births	PREMATURE LIVE BIRTHS						Transferred to hospital	Birth weight
	Nursed entirely at home							
	Died in first 24 hours	Died on 2nd to 7th day	Died on 8th to 28th day	Survived 28 days	Total			
—	—	—	—	—	—	—	2 lb. 3 oz. or less	
6	—	—	—	—	—	—	Over 2 lb. 3 oz. up to 3 lb. 4 oz.	
8	—	—	—	4	4	3	Over 3 lb. 4 oz. up to 4 lb. 6 oz.	
6	—	—	—	—	—	1	Over 4 lb. 6 oz. up to 4 lb. 15 oz.	
4	1	—	—	21	22	7	Over 4 lb. 15 oz. up to 5 lb. 8 oz.	
24	1	—	—	25	26	11	Totals	

### Infectious Diseases

	Ophthalmia Neonatorum		Pemphigus Neonatorum		Puerperal Pyrexia	
	Domiciliary Confinements	Institutional Confinements	Domiciliary Confinements	Institutional Confinements	Domiciliary Confinements	Institutional Confinements
Number of cases notified during the year . .	1	—	—	—	—	—
Number of cases removed to Hospitals . . . .	—	—	—	—	—	—

### CARE OF EXPECTANT AND NURSING MOTHERS

All mothers desiring home confinement attend the ante-natal clinics at the Halifax District Nursing Association, which are conducted weekly by the Medical Officers for Maternity and Child Welfare. There is close co-operation with the Consultant Obstetrician who also attends weekly and sees abnormal cases at the Medical Officer's request.

In addition, there are two midwives' sessions weekly and patients are visited by midwives in their own homes.

Relaxation classes have continued to be very popular, also the talks on Mothercraft which the Health Visitors and Midwives give during the course.

Post-natal examinations are undertaken at the conclusion of the ante-natal sessions.

Special attention is paid to interchange of information between the Consulting Obstetrician, the Clinic Medical Officers and general practitioners, and liaison with the Obstetric Dept. at Halifax General Hospital is excellent.

After delivery at home District Midwives visit until the 28th day after which the Health Visitor takes over the care of mother and baby.

Mothers delivered at the Halifax General Hospital are visited as soon as possible after their return home.

1	No. of Clinics provided at end of year (whether held at Child Welfare Centres or other premises)	No. of sessions now held per month at Clinics included in Col. 2	No. of women in attendance		Total number of attendances made by women included in col. (4) during the year
			No. of women who attended during the year	No. of new cases included in Col. 4, i.e. for A.N. clinics women who had not previously attended any clinic during current pregnancy and for P.N. clinics women who had not previously attended any P.N. clinic after last confinement	
	2	3	4	5	6
Local Health Authority Clinics supervised by L.A.'s Medical Staff					
Ante-Natal clinics	1	13	1104	785	4961
Post-Natal clinics		2	7	7	7

### Child Welfare Clinics

Infant Welfare Centres are provided at North Parade, Queen's Road (Fairfield and St. Paul's Church), Ovenden, Mixenden, Siddal, Northowram and Illingworth. The North Parade Centre is a whole-time clinic. The other clinics are situated in Church Schools and sessions are held as follows:—

Queen's Rd. clinics	Two sessions weekly Tuesday (a.m. and aft)
Ovenden clinic ...	One session weekly (Wednesday) (a.m)
Mixenden clinic ...	One session weekly (Monday) (Aft.)
Siddal clinic ...	One session weekly (Monday) (a.m.)
Northowram ...	One session weekly (Wednesday) (Aft.)
Illingworth ...	One session weekly (Friday) (aft.)



Centres provided by (1)	No. of centres provided at end of year (2)	No. of C.W. sessions now held per month at centres in col. (2) (3)	No. of children who first attended a centre of this L.H.A. during the year, and who at their first attendances were under 1 year of age (4)	No. of children who attended during the year and who were born in			Total No. of children who attended during the year (8)	No. of attendances during the year made by children who at the date of attendance were			Total attendances during the year (12)
				1960 (5)	1959 (6)	1958-55 (7)		under 1 year (9)	1 but under 2 (10)	2 but under 5 (11)	
I.A.	8	41	1,151	962	903	1,131	2,996	11,363	2,387	1,687	15,437

### Artificial Sunlight

Number of sessions	...	...	...	...	75
Number of cases treated	...	...	...	...	15
Number of attendances	...	...	...	...	222
Average attendance at each session	...	...	...	...	3

### Supply of Dried Milk, etc.

Dried Milk was distributed at the C.W. Clinics to the extent of:

Cow and Gate	...	...	...	...	2,017 cartons
Ostermilk	...	...	...	...	17,205 „
Trufood	...	...	...	...	4,496 „

In addition, National Dried Milk, Cod Liver Oil, and Orange Juice were issued at all clinics, to the extent of:—

N.D.M.	...	...	...	...	13,766 cartons
Orange Juice	...	...	...	...	36,392 bottles
Cod Liver Oil	...	...	...	...	5,938 bottles
Vitamin A and D	...	...	...	...	5,072 tablets

### Infant Mortality

There were 52 deaths of infants under 1 year.

16 died under 24 hours.

10 died under 1 week.

6 died under 1 month.

20 died between 1 month and 1 year.

### The Day Nursery and the Health Visitor

The advent of day nurseries, during the latter years of the war, allowed some mothers to become available for work of national importance. Many authorities have continued these institutions.

The admission of children to Day Nurseries to some extent relieves the Health Visiting Service. The Health Visitor knows



that the child will be happy, that the necessary food and rest will be provided for him and that, in addition, he will be trained in the principles of good behaviour, cleanliness, table manners and that it will further health education. The Matron often succeeds in securing vaccination and/or immunisation, where a parent may not have bothered before admission to the nursery.

Day Nurseries are essential in caring for a child where the mother falls ill, sometimes physically, sometimes mentally, or during her stay in hospital for another baby where no relatives or suitable neighbours can look after the child. The child is reunited with his father in the evening thus sustaining home contact. The unmarried mother, in addition, may find happy shelter for her baby during the day while she works for its maintenance.

In addition, the Day Nursery has an important place in the rehabilitation of the problem family. Such mothers are usually not good managers, having baby after baby and not knowing how to care for them or her family. The husband may not be very bright, unskilled at work and not giving the wife and mother the support she so badly needs. The position deteriorates until the woman, oftentimes, sinks to the lowest depths. Rehabilitation is needed and the day nursery does help. The younger children can be taken off her hands in the day-time and, with the assistance of a good home help, the woman can make an effort to redeem her position in society. The health visitor finds the day nursery a considerable help in dealing with these and other problems of young children and distressed parents.

In a variety of cases, a short or long term stay in a day nursery is an invaluable help to the health visitor in her efforts to help a family cope with its difficulties.

The Local Authority provides two Day Nurseries, one at Ling Bob, Pellon, and one at Craigie Lea, Ovenden.

	No.	No. of Approved Places		No. of children on register at end of year		Averagedaily attendance during year	
		0—2	2—5	0—2	2—5	0—2	2—5
Nurseries maintained by Council .. ..	2	50	63	51	81	45	67
Nurseries maintained by Voluntary Organisations .. ..	—	—	—	—	—	—	—

No. of approved places .. ..	Craigie Lea	65
	Ling Bob	48
Average Daily attendance .. ..	Craigie Lea	67
	Ling Bob	45



## Nurseries and Child-Minders' Regulation Act, 1948

	Number registered at 31st December, 1960	Number of Children provided for
Premises ..	—	—
Daily Minders	—	—

## Registration of Nursing Homes (Section 187 to 194 of Public Health Act, 1936)

	Number of Homes	Number of beds provided for		
		Maternity	Others	Totals
Homes first registered .. during 1960 .. ..	—	—	—	—
Homes on the register at the end of 1960 ..	1	—	12	12

### Mother and Baby Home

The Halifax Rural Deanery Moral Welfare Council administer a Mother and Baby Home at St. Margaret's House, 8, Balmoral Place, as agents of the Halifax Corporation. Under an agreement between the Council and the Moral Welfare Council the Corporation agree to pay five-sixths of the cost of maintenance.

### No. of Beds

(1) Total Beds (excluding Maternity, Labour and Cots) ...	12
(2) Labour Beds ... ..	0
(3) Cots ... ..	6
(4) No. of admissions (ignoring re-admissions after confinement during the year) ... ..	47
(5) No. of admissions in item (4) for which the authority was responsible ... ..	6

### Average Length of Stay

(a) Ante-Natal ... ..	6 weeks
(b) Post-Natal* ... ..	6 weeks

No. of cases sent to other homes (payment being made on an "ad hoc" basis).

(1) Expectant Mothers—2.

(2) Post-Natal—0.

\*Exclusive of lying in period.

During 1960 thirty-eight unmarried parents were referred to St. Margaret's from the Halifax County Borough. Advice and help were given for preparing for the birth of the baby and in planning for the future care of the child. The circumstances of each person varies greatly. The majority are girls of twenty or under, one being fourteen, some of whom are living at home with their parents (who may be widowed, divorced or remarried), some working and living away from home, and a few have homes of their own. Five were married women.

Six girls were resident for the last period of their pregnancy and returned on their discharge from hospital generally, until the baby was eight weeks' old. Some arrangements were able to be made both for the baby and the mother.

On the 31st December, 1960, the position was as follows:—

8 girls were in their parents' home with baby.

6 babies were placed with adopters.

4 girls married and have baby with them (two husbands were not the baby's father).

3 mothers had baby with them in their own home.

1 baby died.

1 baby was placed with foster parents.

1 mother is co-habiting with the putative father.

2 putative fathers were being approached to help to maintain children born outside the Borough.

10 were still awaiting the birth of the child.

Active contact was being maintained with many of the girls who, in the previous year, were expectant mothers, or whose babies were still very young.

### **SPEECH THERAPY**

(Details provided by the Speech Therapist)

The Speech Clinic continues to function in adequate premises.

The waiting and observation lists are decreased, though as with last year the observation list carries a number of children requiring treatment. The policy has been continued of seeing children referred as soon as possible for parental guidance, rather than indefinite waiting. This is satisfactory in some cases, particularly those where the emotional background is conducive to speech disorder and may be resolved by guidance rather than direct therapy.



The attendances are down in number, due to the further policy of spending more time with individuals and interviewing parents. A group of children from Quarry House School attend weekly for treatment, but it is hoped in the future that arrangements can be made to attend at the School, as more children could be assisted. This would lead to better co-operation with the Head Master and his staff, an essential in this type of work.

Attendances continue to be very good, but it is noticeable that there are some parents who will not bring their children to the Clinic despite the advice of Medical Officers and Head Teachers.

Little school visiting has been done. This is to be very much regretted but the time available does not permit this.

Audiograms are provided through the School Medical Officers. However, the Michael Reed Hearing Test cards are used for testing hearing together with other tests where necessary.

A course in Audiometric Testing was attended in September at the Department for the Education of the Deaf, Manchester University.

The clinic was visited during the year by an American Orthodontist and a Speech Therapist from New York. Speech Therapy students attended during the vacation for observation.

### Statistics

Number of children on waiting list 1st January, 1960 ...	11
New cases referred ... ..	34
Number of cases under observation ... ..	36
Number of children under treatment ... ..	50
Number of children discharged ... ..	67
Number of children awaiting treatment ... ..	7
Number of attendances ... ..	898
Number of school visits ... ..	4

### Classification of Cases

Cleft Palate ... ..	6
Dystalia ... ..	83
Dystalia/Partially Deaf ... ..	3
Dysaithia ... ..	2
Hyperrrhinophonia ... ..	1
Rhinolalia ... ..	3
Stammer ... ..	46
Stammer/Dystalia ... ..	9

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153

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## Dental Care

(details provided by the Principal School Dental Officer).

1. No of sessions (i.e. equivalent to complete half days) devoted to Maternity and Child Welfare patients during the year ... .. 62

### 2. Dental Treatment Return

- (a) Expectant and Nursing Mothers provided with care.

No. examined	...	...	...	...	...	...	52
No. needing treatment	...	...	...	...	...	...	52
No. treated	...	...	...	...	...	...	48
No. made dentally fit	...	...	...	...	...	...	51

### Children Under Five

No. examined	...	...	...	...	...	...	178
No. needing treatment	...	...	...	...	...	...	175
No. treated	...	...	...	...	...	...	175
No. made dentally fit	...	...	...	...	...	...	54

- (b) Forms of dental treatment provided.

						Expectant and Nursing Mothers	Children Under 5
Scalings and Gum Treatment	...	...	...	...	...	4	—
Fillings	...	...	...	...	...	22	5
Silver nitrate treatment	...	...	...	...	...	—	—
Crowns or inlays	...	...	...	...	...	—	—
Extractions	...	...	...	...	...	226	271
General anaesthetics	...	...	...	...	...	29	159

### Dentures provided—

Full upper or lower	...	...	...	...	31	—
Partial upper or lower	...	...	...	...	13	—
Radiographs	...	...	...	...	3	—



## SECTION 23

### MIDWIFERY

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

#### Midwives

The value of work in this department varies but little. The transfer of the ante-natal clinic to North Parade premises has proved successful. The extra space for clinic activities is an improvement, and its close proximity to the bus station is appreciated by expectant mothers to whom the walk to Kirby Leas must often have been a trial.

	Number of Midwives practising in the area of the Authority at 31st December, 1960		
	Domiciliary Midwives	Midwives in Institutions	Total
Midwives employed by the Authority	—	—	—
Midwives employed by Voluntary Organisations			
(i) Under arrangements with the Local Health Authority in pursuance of Section 23 of National Health Service Act	7	—	7
(ii) Otherwise (including Hospitals not transferred to the Minister under the National Health Service Act)	—	—	—
Midwives employed Hospital Management Committee, etc.	—	23	23
Midwives in Private Practice	3	—	3
TOTAL	10	23	33

The term Maternity Nurse was removed from Central Midwives' Board ruling July, 1960.

## Deliveries attended by Midwives

	Number of Deliveries in the Area of the Local Supervising Authority attended by Midwives during 1960		
	Domiciliary Cases	Cases in Institutions	Total
	As Midwives	As Midwives	As Midwives
Midwives employed by the Authority	—	—	—
Midwives employed by Voluntary Organisations			
(a) Under arrangements with the Local Health Authority in pursuance of Section 23 of National Health Service Act. . . . .	660	—	660
(b) Otherwise (including Hospitals not transferred to the Minister under the National Health Service Act) . . . . .	—	—	—
Midwives employed by Hospital Management Committees, etc.	—	1752	1752
Midwives in Private Practice . .	—	—	—
<b>TOTAL . . . . .</b>	<b>660</b>	<b>1752</b>	<b>2412</b>

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

Number of cases in which medical aid was summoned during the year under Section 14 (1) of the Midwives Act, 1918, by a Midwife:—

### (a) For Domiciliary Cases:—

(i) Where the Medical Practitioner has arranged to provide the patient with maternity medical services under the National Health Service . . . . .	321
(ii) Others . . . . .	3

Medical Aid Forms received during the year on behalf of child . . . . . 83

### Of these:—

Discharging eye(s) . . . . .	40
Lethargic . . . . .	2
Jaundice . . . . .	5
Cerebral . . . . .	1
Prematurity . . . . .	8
Colds . . . . .	9
Asphyxia . . . . .	7
Septic Spots . . . . .	2
Rashes . . . . .	4
Vomiting . . . . .	2
Abnormalities . . . . .	3



Notification received in accordance with Central Midwives Board Rules:—

Intention to resort to artificial feeding	...	...	
Notification of Stillbirth	...	...	4
Notification of having laid out a dead body	...	...	
Liable to be source of infection	...	...	

Intention to resort to Artificial Feeding ruling removed from Central Midwives' Board, July, 1960, to notify change of feeding.

## SECTION 24

### HEALTH VISITING

The transfer of Health Visiting staff to Kirby Leas was accomplished without undue incident and the necessary administrative adjustments made. The settling down process is complete and the advantage of all nursing services being under the one roof are apparent for reference purposes in particular. Pooling of knowledge has proved a great advantage in many cases.

No. of Health Visitors employed at end of year		No. of Visits paid by Health Visitors during the year							
		Expectant Mothers		Children under 1 year of age		Children between the ages of 1-5		T.B.	Other Cases
Whole Time on Health Visiting	Part Time on Health Visiting	First Visits	Total Visits	First Visits	Total Visits	Total Visits			
0	7	2	448	544	1,621	6,070	10,270	758	2,231

## SECTION 25

### HOME NURSING

The Halifax and District Nursing Association carry out the Home Nursing Service as agents of the Corporation, which is adequate to meet the needs of the Borough. The Local Authority have equal representation on the Joint Committee.

#### CLASSIFICATION OF CASES (Home Nursing)

	Cases	Visits
On books 1st January, 1960 ... ..	478	—
Medical ... ..	1140	45998
Surgical ... ..	361	7918
Tuberculosis ... ..	13	1091
Infectious Diseases (Gen.) ... ..	17	178
Maternal Complications ... ..	3	35
Others ... ..	27	1082
<b>TOTAL CASES, 1960</b>	<b>2039</b>	<b>56302</b>
<b>TOTAL CASES, 1959</b>	<b>2242</b>	<b>60258</b>
<b>CASES COMPLETED, 1960</b> ... ..		<b>1546</b>
<b>REMAINING CASES, 31st December, 1960</b> ... ..		<b>493</b>

Number of Nurses employed at the end of the year:—

Whole-time on Home Nursing 20 (incl. 3 student Nurses).

## SECTION 26

### VACCINATION AND IMMUNISATION

#### Diphtheria Immunisation

Children under 5—

Children in this group are immunised either at the Child Welfare Clinic or by their family doctors who are supplied free with immunising agents. In April, 1960, the use of combined antigen (diphtheria and whooping cough) was superseded by triple antigen (whooping cough, diphtheria and tetanus). The value of active immunisation against tetanus cannot be over-emphasised, not only are children protected against this dreaded disease, but we hope also to prevent them from having to have anti-tetanus serum with its attendant disadvantages, every time they fall and cut themselves. To this end the nature of the tetanus immunisation is explained to the parent and it is emphasised on the child's record card that in the event of an accident the doctor responsible for treatment should be informed that the child has received tetanus immunisation. In certain cases it is undesirable to give the whooping cough vaccine. In this case the combined diphtheria-tetanus mixture is available at the Infant Welfare Clinic. Also, the single tetanus antigen is available for those infants who have previously had the diphtheria and whooping cough combination.

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 ending 31st December, 1960			Total No. of Children who were given a secondary or Reinforcing Injection
Age at date of Final Injection		Total	
Under 5	5—14		
1,161	56	1,217	During 12 months ending 31st December 1960 560

## 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 Dec. 1960	Under 1	1—4	5—14	15 or over	Total 1960	1959
No. Vaccinated	482	80	24	36	622	764
No. Re-vaccinated	3	29	12	173	217	175

## VACCINATION AGAINST POLIOMYELITIS

At the end of the year the following people had received two injections by:—

Local Authority Doctors ...	...	...	...	...	13,219
General Practitioners ...	...	...	...	...	9,589
Third injections ...	...	...	...	...	19,688

There were also members of the hospital and ambulance staffs and general practitioners and their families vaccinated.

## SECTION 27

### AMBULANCE SERVICE

The Service has operated throughout the year in accordance with provision of the National Health Service Act, Section 27, as amended by Section 24 of the National Health Service Amendment Act, 1949. At the end of the year the fleet consisted of:—

- 3 Morris ambulances.
- 1 Morris dual purpose ambulance.
- 3 Bedford dual purpose ambulances.
- 2 Austin ambulances.

Fleet maintenance is undertaken by the Transport Department at Water Lane Depot. A system is in operation whereby all ambulances visit this Depot every five weeks to be greased and have the oil changed when it is necessary. At the same time the ignition and electrical systems are examined so that repairs can be carried out if needed. I would like to thank the Transport Manager for his help and advice in this sphere of operation.

One of the Austin ambulances mentioned above was, in fact, a new one, which came into service only in the last week of the year. It is an L.D.4 type, but to improve its performance in ambulance work it has been fitted with Laminaire springs. These are a type of spring which provide a much softer ride for the patient. In the roof of this vehicle there is a panel of unpainted fibre-glass which provides ample lighting within the ambulance during the day-time. The colour has been changed from grey to white with a red strip along the waist of the vehicle which makes them stand out in traffic to be more easily recognised.

**Staff.** The staff consisted of:—

- 1 Ambulance Officer.
- 4 Shift Leaders.
- 16 Driver Attendants.
- 2 Telephone Attendants.

The drivers and shift leaders are all qualified in First Aid. A revision course under the instruction of the Ambulance Officer was held at the Ambulance Station, after which an examination was



held. It is of the greatest importance in my opinion that members of the driving staff should be well qualified in First Aid. With the increasing speed of traffic the injuries resulting from traffic accidents are more severe than ever before.

**Traffic.** The service of conveying patients for institutional treatment, either as in-patients or out-patients, is provided on the recommendation of general practitioners and the hospital authorities, except in the case of accidents and emergencies when Telephone Number 999 is utilised. The attached summary will show an increase in all sections. This increase is not confined to this locality and would appear to be a National increase. With regard to traffic accidents it seems logical that with higher speeds and a denser volume of vehicles on the roads that there would be more accidents. This natural increase can only be countered by road safety propaganda. This aspect also has repercussions in the every day out-patients working; the victims of traffic accidents usually need prolonged physiotherapy and have to be carried to the hospitals by ambulance.

Long distance removals are, when possible, and in accordance with medical recommendation, carried by train, but difficulties in this form of transport present themselves with the introduction of diesel trains where it is virtually impossible to load a stretcher case. The practice adopted with the normal steam corridor train is to off-load the patient from the stretcher. A rubber foam mattress is placed on the long seat of a compartment and the patient placed on it to form a comfortable bed, but with the centre gangway of the diesels this practice is ruled out. This will only apply to stretcher cases; sitting cases will not be affected. Patients conveyed by train have, when necessary, been escorted by members of the St. John Ambulance Nursing Division or Red Cross.

Mileage involved in conveying patients from the West Riding County Council's areas has increased considerably.

**Radio Control.** We have been rather unfortunate with our radio control. It was decided to put a new roof on the water tower at Roils Head, on which the mast for our aerial stands. The mast had to be re-sited on the side of the tower which meant that it was lowered by 15 feet. This reduction in height seriously affected the operation of the transmitter. This, I hope, will be temporary.

Transport Department cars have assisted with the removal of mental cases to Storthes Hall when suitable transport has not been available from the ambulance service.



The following summary gives you a record of the work done by the service fleet over the past ten years.

Year		No. of Vehicles in service 31st Dec.	Total No. of Journeys during the year	Total No. of Patients carried during the year	No. of Accidents and other Emergency during the incl. in Col. 3	Mileage during the year	Total Mileage for the year
1951	Ambulances	8	8,466	10,263	945	82,624	127,397
	Cars Car Amb.	2 1 }	4,173	11,493	5	44,773	
1952	Ambulances	8	9,351	12,920	894	89,474	135,792
	Cars Car Amb.	2 1 }	4,244	11,412	2	46,318	
1953	Ambulances	8	9,123	12,785	883	83,228	125,828
	Cars Car Amb.	2 1 }	4,336	11,277	9	42,600	
1954	Ambulances	8	9,343	13,076	797	82,926	127,184
	Cars Car Amb.	2 1 }	4,743	12,589	6	44,258	
1955	Ambulances	8	9,297	14,532	928	82,454	133,852
	Cars Car Amb.	2 1 }	4,543	12,932	20	51,398	
1956	Ambulances	6	7,448	14,627	1,058	69,241	126,845
	Cars Car Amb.	1 4 }	4,646	13,268	430	57,604	
1957	Ambulances	5	4,560	10,431	2,069	42,245	116,738
	Car Amb.	5	6,641	14,913	1,982	74,493	
1958	Ambulances	5	5,261	14,478	2,162	53,380	123,165
	Car Amb.	4	5,754	14,371	1,942	69,785	
1959	Ambulances	5	5,741	15,789	2,066	60,904	123,360
	Car Amb.	4	5,088	12,931	1,675	62,456	
1960	Ambulances	5	6,104	16,761	2,156	65,771	128,654
	Car Amb.	4	5,066	13,099	1,760	62,883	

### West Riding County Council Mileage

Ambulances	Car Ambulances	
15,868 Miles	14,954 Miles	1960
13,672 Miles	14,995 Miles	1959

### Transported by Rail

No of Patients—48. Estimated Mileage—3,900.



## SECTION 28

### PREVENTION OF ILLNESS, CARE AND AFTER-CARE

#### Convalescent Home Treatment

Convalescent Home Treatment is available for those who need a period of recuperation before returning to their normal duties. A medical certificate is obtained from the patient's own doctor recommending a period of convalescence and if no actual treatment is required the applications are dealt with as vacancies occur in the Home as St. Annes-on-Sea. Nineteen cases were admitted during 1960.

#### Loan Equipment

During 1960, 548 patients were issued with various items of loan equipment. The most called for items included air-rings, bed pans, bed rests and mackintosh sheets. In addition, urinals, bed cradles, wheel chairs, crutches, feeding cups were issued. Our present list of loan equipment includes the following items:—

Air Rings	Mackintosh Sheets
Bed Rests	Urinals
Bed Cradles	Wheel Chairs
Bed Pans	Bed Tables
Crutches	Latex Foam Mattresses
Feeding Cups	Commodes

Special equipment is provided for paraplegics for use at their own homes. Periodical checks on the articles are made by the health visitors.

### HEALTH EDUCATION

18 lectures were given to societies by myself and/or members of my staff on:—

- Food Hygiene
- Prevention of accidents in the home
- Prevention of diseases
- Health Department administration
- Mental Health
- School Health
- The Adolescent
- The Backward Child
- Clean Air
- Hospital After-Care
- Home Helps

Use is made of flannelgraphs, film strips and other visual aids. Health education on the dangers of smoking and lung cancer is given at schools by school doctors and teaching staff in addition to the propaganda directed in public lectures.

## Venereal Diseases

The usual source of infection is a human being suffering from the disease—syphilis or gonorrhoea. Infection is mostly commonly acquired by sexual intercourse. The control of the venereal disease is as much a social as it is a medical problem. From the strictly medical aspect, the first aim is the prompt diagnosis and efficient treatment of patients with a view to tendering them non-infective. Among the general measures directed towards the prevention of venereal disease the most important is suitable health education for young people on the dangers of contracting infection. A number of infections are contracted while under the influence of alcohol, which not only inhibits the control of the higher centres, but also renders the individual less capable of taking precautions which, if sober, he might use. 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	...	...	...	...	10	—
Gonorrhoea	...	...	...	...	24	—
Other conditions	...	...	...	...	122	—
					156	—

## Pathological Work

Microscopical:—

					Specimens examined at Treatment Centre	
For Syphilis	...	...	...	...	4	
Others	...	...	...	...	1,455	

## Attendances

	Syphilis		Gonorrhoea		Other Conditions		TOTALS		
	M.	F.	M.	F.	M.	F.	M.	F.	Tot'l
For individual attention by Medical Officers	283	501	158	49	826	319	1267	969	2136
For intermediate Treatment	198	299	28	6	231	11	457	316	773



## TUBERCULOSIS

This year there were 48 notifications and 12 deaths from Tuberculosis. This is in contrast to 1959 when there were 45 notifications and 6 deaths.

The scheme for B.C.G. Vaccination of 13 year old school children, preceded by a survey of tuberculin testing was introduced in the year under review. The preliminary survey, conducted in the Spring, showed a reaction rate of 20%, a level of 10% higher than the minimum to justify the use of the vaccine. The response was fair. Of the total number in the 13 year age group (1680), there were 800 acceptances = 48%. Reactors were found to be free from tubercular disease. B.C.G. is an avirulent strain of living Tubercle Bacilli, which, when injected in suitable concentration has the power of producing reaction and resistance against the invasion of virulent organisms. If the rapid decline of all forms of tuberculosis, as in the last decade, continues, by 1970 there will be no longer a need to use the vaccine.

Chest Clinics are held at the Royal Halifax Infirmary.

On Wednesday—Morning and Afternoon.

Friday—Afternoon.

Dr. Mann's Clinic—Tuesday and Thursday—10 a.m.

Contacts are invited to the Clinic for clinical and/or radiological examination.

## MASS RADIOGRAPHY

### Statistical Data

Report on Mass Radiography Survey held in Halifax.  
October-November, 1960.

### Examinations Carried Out

	Males	Females	Total
Number of Miniature X-rays taken	3,782	3,052	6,834
Number of large films taken ...	81	50	131

### Analysis of Provisional Findings

	Males	Females	Total
Cases of Active Tuberculosis ...	6	3	9
Cases of Inactive Tuberculosis ...	8	6	14
Other Abnormalities ...	31	17	48



## SECTION 29

### DOMESTIC HELP SERVICE

The Domestic Help Service has continued to work very satisfactorily during the year in review and is still expanding to meet the needs of all classes of cases, the majority of which are the aged and infirm. The maternity cases have increased from 67 to 79. Old and infirm cases from 182 to 218. Total number of cases from 470 to 558, and the hours worked from 62,686 in 1959 to 71,631 this year.

We are still attracting suitable women as Home Helps and the service they are giving is appreciated by the patients and by other departments and voluntary bodies associated with social welfare. Many Multiple Sclerosis cases are being helped as well as other handicapped cases.

I have appreciated the use of more transport which has enabled me to make more visits and has proved of great value.

About 60 cases have been fixed up privately with help from my waiting list of potential home helps and the National Assistance Board. This does help to keep down the cost of the Domestic Help Service and fills a need required by the elderly people for rough work they cannot tackle.

I hope that we shall be able to expand the service further during the next year since it is desirable to keep old persons in their own homes as long as possible and the Domestic Help Service ensures this. When the nature of the illness and home conditions permit, mothers should be encouraged to nurse a sick child at home under the care of the family doctor, and with assistance, where necessary, from the home nurse and the home help. Co-operation between the family doctor and local health authority services, with the help of the hospital and specialist services as necessary, can, in suitable cases, prevent a child being removed from home with all the difficulties attendant upon this.

Appreciation is expressed to all who have contributed to this service, particularly to those home helps who have done duties in their own time.

				1959	1960	Additional
Maternity	...	...	...	67	70	3
Ante-Natal	...	...	...	6	9	3
Husband ill	...	...	...	3	3	—
Housewife ill	...	...	...	30	32	2
Old and Infirm	...	...	...	182	218	36
New Cases				288	332	44
Brought forward from previous year				182	236	44
Totals				470	558	88

No. of Home Helps 31/12/60 = 64    Full Time = 15    Part Time = 49  
 No. of Home Helps 31/12/59 = 59    Full Time = 11    Part Time = 48



## SECTION 51

In order to gain a complete picture of the statistical data relating to the work undertaken in the Mental Health Service during 1960, it is necessary to refer to the several tables which follow. The inception of the Mental Health Act, 1959, on 1st November, 1960, has made it impracticable to present comparative statistics as in former years. Consequently, it will be seen that the figures have been divided into two periods, viz: January to October and November to December.

The total number of patients in all categories referred to the Service during 1960 was 451 compared with 428 in 1959. There was a substantial increase in the number of patients admitted to hospital by compulsory measures (including those admitted under the new legislation)—92 against 54 last year. The figure of 133 voluntary “informal” admissions (174 in 1959) may not represent the true position since the department may only have information concerning patients dealt with by Mental Welfare Officers.

It is assumed, however, that there has been a marked increase in the total number of admissions to hospital, though a proportion of these would not be first admissions. There is a heavy load on the resources of all agencies dealing with mental disorder. Some of the burden on the hospitals could be cleared and the effectiveness of re-socialisation improved if some portion of admissions were diverted to hostels which could also receive a number of patients brought about by an accelerated discharge from mental hospital.

The affairs of the Mental Health Section are the concern of the Mental Health Sub-committee which meets regularly throughout the year.

### Staff

as at 31st December, 1960:—

Medical Officer of Health

John G. Cairns, M.B., Ch.B., D.P.H.

Deputy Medical Officer of Health

Robert C. Laverick, M.B., Ch.B., D.P.H.

Mental Welfare Officers—

Leonard Holdsworth

Arthur Lee (resigned 31st December, 1960)

Welfare Assistant—

Jean Nicholson

Approved under the Mental Health Act, 1959, Section 28 (2)—

John G. Cairns, M.B., Ch.B., D.P.H.

Robert C. Laverick, M.B., Ch.B., D.P.H.

Willis Henry Craven, B.Sc., M.B., Ch.B., D.T.M.

Reginald K. Hyland, M.B., B.S.

David K. Bruce, M.B., Ch.B., D.P.M.



David H. Ropschitz, M.D., D.P.M.

David W. T. Harris, M.R.C.S., L.R.C.P., D.P.M., D.P.H.

Mr. L. Holdsworth was seconded to a Refresher Course for Mental Welfare Officers sponsored by the National Association for Mental Health at Leeds University in September. The help which is given to the section by Dr. Ropschitz, Consultant Psychiatrist is greatly appreciated.

The Junior Training Centre at Furness Park has continued to function satisfactorily throughout the year. The attendance has been fairly constant with an average number of 30 on the register.

Another facet of the Mental Health Act is that in those cases where training would be beneficial attendance at the training centres shall be compulsory between the ages of 5 and 16 years. This clause causes us to review our provision and consider if it is adequate to meet the possible future needs bearing in mind that it is anticipated that fewer such children may be admitted to permanent hospital care. It can be foreseen that more use may be made of short-term care in hospital with the interim periods being catered for by attendance at training centres. In other words there may be a greater movement of patients in and out of hospitals for the mentally sub-normal than has been the case in the past.

The Adult Female Occupation Centre has now become a well-established asset to the community care of these people.

It has been a hive of activity throughout the year and the numbers have slightly increased. Some have come direct from their homes when competition in the open industrial field has proved too fierce for them. Others have progressed from the Junior Training Centre and have quickly settled down in their new surroundings. The handwork undertaken by these young women has varied in nature, but with few exceptions it has been of a high standard. Full use has been made of the laundry unit and, in addition to the useful instruction and experience gained, a valuable contribution has been made to the running of the establishment by the laundering of towels, table cloths, etc., used in the Centres. A very happy atmosphere prevails which we hope will be shared by more in the future.

Some concern was felt during the year for the young men who had been compelled by virtue of age to leave the Junior Centre and some others who had not had the opportunity of attending the Centre in the past. It was decided as an interim measure, until some permanent provision could be made, to devote a section of the new building to these men. It has not been possible to develop any industrial activity which would be more in keeping with their needs and interests, because of the type of building which was, of course, specifically designed for women. Any doubts we may have had at such a venture have been dispelled and the two groups have worked admirably independent of each other. The success of this experiment is due in no small measure to the vigilance and adaptability of the staff.



The children and the adults held their respective Christmas Parties independent of each other although simultaneously. This again was an experiment which proved successful through the corporative efforts of the staff and parents.

We should like to pay tribute to the many voluntary organisations in the town who have unstintingly given of their resources on numerous occasions when the needs of particular patients have fallen outside the ambit of the statutory services. They are too many in number to mention individually, but without exception there has always been a sympathetic response to our appeals for assistance.

We must be circumspect in an assessment of the need for hostel accommodation. It is difficult at this stage to be dogmatic about specific requirements. Whilst we are aware that the mental hospital population is to be reduced, one can assume that the types of patients who no longer require hospital care are either long-stay chronic patients with no relatives, or none willing or able to take care of them; or elderly patients who may well be suited to Part III accommodation under the National Assistance Act. Hostel accommodation for either of this type of patient would, be permanent. This is not to be encouraged since hostel vacancies might be limited. The true function of hostels, particularly in relation to the mentally ill patient, is to provide accommodation during treatment as an out-patient or as a day patient, or during a period of rehabilitation on discharge from hospital (varying according to need) to any who cannot be cared for by relatives, with always a view to them being fully restored and able to take their normal place in the community. It may well be that a number of such patients would be under the guardianship of the Local Authority whilst resident in the hostel including some subject to transfer orders from the hospital.

Provision will no doubt have to be made for sub-normal patients who are competent to follow an occupation, but incapable or attending to their domestic needs. Again many such patients will be long-term residents, because their static level of intelligence will never permit an improvement in their capabilities. In the absence of such facilities the only recourse in such cases is either a common lodging house, to which a patient is inadequately suited, or a hospital. The latter measure is regarded in instances where the patient has the ability to contribute to the productivity of the community labour force. It deprives the patient of the opportunity of demonstrating his initiative, severs his ties with associates who have learned to understand him and commits him to semi-isolationism for the rest of his life.

It is anticipated that the need will more or less be equally divided between the sexes, although experience indicates that males find it more difficult to support themselves and are less tolerated by relatives. In the normal course of events it is the female parent who survives and is left to care for the patient. This situation presents



difficulties as the years pass, particularly where a male patient is concerned.

It may be more economical to establish a hostel for mixed types, but a more careful selection would be necessary. This could cause the exclusion of certain patients who would otherwise be suitable for hostel accommodation. Special precautions would have to be taken if it was necessary to accommodate both sexes in one establishment. Such a project would require careful planning and organisation and would make excessive demands on a supervisory staff. Selection would have to be even more stringent which would be to the detriment of some prospective residents.

By way of illustration of the type of circumstances of patients considered suitable for hostel accommodation a few cases already known to the Service have been selected.

A sub-normal man aged 54 residing with an aged uncle and aunt who have cared for him in the absence of other relatives willing to do so, for a number of years. The patient is working quite satisfactorily in a mill nearby his home and conducts himself properly in the community. His uncle is in very poor health and his aunt has indicated that in the event of her husband's pre-decease she is not prepared to continue to care for the patient. He is quite incapable of managing his own affairs and being possessed of property his uncle is appointed to act on his behalf. The patient could not possibly fend for himself and would be completely misplaced in lodgings.

A psychotic single woman aged 41 with a child aged 2½ years who has had a number of periods in a mental hospital. On each occasion when discharged she has been in a reasonably good condition and has been afforded after-care, but has returned to her home and taken the child from the care of the Authority. She has no relatives who take an interest in her and in spite of every effort being made to sustain her in the community she very soon has a relapse. The sudden change from the security of hospital care to the acceptance of responsibility of working to maintain her home and caring for the child seems to be too much for her. A period in a hostel on discharge would give her the support she needs until she was more confident to return to the fuller responsibilities associated with normal life in the community.

A psychotic single man aged 29, residing with parents who has had many periods of hospital treatment. On discharge, in spite of every encouragement he makes no effort to find work, discontinues taking the tablets prescribed for him and is very soon in difficulty again. His parents are always reticent in taking him back knowing from experience how unco-operative he becomes. Accommodation in a hostel at least for a period would ensure that he continued with his treatment and probably with more direct supervision he could be directed into employment.

A psychotic single woman aged 50, physically handicapped by the loss of an arm who has spent many periods in a mental hospital. She has a home of her own, but cannot bear to live alone as she soon becomes depressed. She is living at the present time with a married friend who occupies a one-bedroomed house. The bedroom is partitioned by a curtain and shared by the patient, her friend and her husband. The patient is unable to obtain suitable employment and when circumstances become difficult she will seek re-admission to the hospital. She could well be accommodated in a hostel and her employment limitations probably utilised within the establishment.

A sub-normal youth aged 17, whose home conditions are very bad. He is unemployable in industry and has attended the Occupation Centre where



he does quite well. He recently ran away from home where he was unhappy. He is too young and incapable of looking after himself. The only recourse was to admit him to hospital mainly to provide him with accommodation. He could well be catered for in a suitable hostel.

A sub-normal woman aged 55, living with an aged father who she looks after to the best of her ability. She is unable to work because of physical handicap. She soon becomes depressed and she is very self-conscious of her handicap. She has very little companionship. In the event of her father's death she will probably have difficulty in looking after herself and the home and would no doubt be admirably cared for in a hostel.

**Summary of work done by Duly Authorised Officers under the Lunacy and Mental Treatment Acts, 1890-1930, and in part the Mental Health Act, 1959—up to 31st October, 1960:**

	1960	1959	1958	1957	1956
Total number of cases referred to Mental Health Service .. .. .	366	414	352	335	279
Total number of enquiries and interviews by Authorised Officers .. .. .	4254	3805	3018	2566	2564
<b>Prevention</b>					
Cases dealt with by preventive measures ..	110	142	128	104	88
<b>Care</b>					
(i) Cases referred for accommodation under National Assistance Act, 1948 (Part III) .. .. .	5	12	7	7	6
(ii) Cases referred to Hospital Management Committee under National Health Service Act, 1946 .. .. .	15	22	33	30	14
(iii) Cases dealt with under Lunacy Acts, 1890-1:					
Section 16 .. .. .	38				
Section 20 .. .. .	43				
	81	54	47	68	81
(iv) Cases dealt with under Mental Treatment Act, 1930 .. .. .	120	174	117	134	103
(v) Cases dealt with by this Local Health Authority on behalf of other local health authorities .. .. .	17	17	24	12	16
(vi) Cases dealt with by other local health authorities on behalf of this Local Health Authority .. .. .	—	1	4	3	1
<b>After Care</b>					
Number of patients afforded after-care during the year .. .. .	55	74	37	27	36

Summary of work under the Mental Deficiency Acts, 1913-38,  
up to the 31st October, 1960.

	1960	1959	1958	1957	1956
1. Total number of cases referred during year	15	14	17	13	13
2. Disposal of cases referred (as para. 1):					
(a) Admitted to hospitals .. .. .	1	3	2	2	2
(b) Placed under Statutory Supervision	13	9	10	8	9
(c) Placed under Voluntary Supervision	—	1	—	—	—
(d) Found not to be defective.. .. .	1	1	4	3	2
(e) Removed from area before disposal arranged .. .. .	—	—	1	—	—
	15	14	17	13	13
3. Movement of patients during year:					
(a) Ceased under Statutory Supervision on account of:—					
(i) Being admitted to hospital ..	1	4	1	6	9
(ii) Removal from this area ..	3	1	2	2	1
(iii) Death .. .. .	2	1	3	—	1
(b) Ceased to be under hospital care .. (including licence leave) on account of:—					
(i) Death .. .. .	—	2	1	3	3
(ii) Discharged from Order (by Board of Control) .. .. .	2	2	—	7	9
(c) Discharged from Order (but remain- ing in hospital on "informal" basis)	11	2	72	—	—
4. Distribution of patients at 31st October:					
(a) In hospitals .. .. .	149	148	144	146	143
(b) On Licence .. .. .	3	4	5	3	9
(c) Under Guardianship .. .. .	—	—	—	—	—
(d) Under Statutory Supervision ..	116	109	108	120	118
(e) Under Voluntary Supervision ..	15	15	11	11	11
Total number of patients ..	283	276	268	280	281
5. Number of patients under training ..	50	34	25	29	29
6. Patients awaiting admission to hospital	3	4	1	—	7
7. Patients who received short-term care ..	6	9	2	7	8
8. Number of enquiries and interviews by Mental Welfare Officers .. .. .	1134	1496	918	1011	1185

Summary of work undertaken by Mental Welfare Officers  
under the Mental Health Act, 1959, between 1st November and 31st  
December, 1960.

1. Number of patients referred to the Mental Health Service by:
  - (a) General practitioners and general hospitals ... .. 27
  - (b) Relatives ... .. 9
  - (c) Psychiatric hospitals ... .. 2
  - (d) Psychiatric clinics ... .. 5



(e) Local Education Authority	...	...	...	...	1
(f) Police	...	...	...	...	9
(g) Other sources	...	...	...	...	17
					<hr/> 70 <hr/>

2. Of the patients referred (as para 1) number:

(a) Admitted to hospitals under					
(i) Mental Health Act, 1959, s.5 (Informal)	...	...	...	...	13
(ii) Mental Health Act, 1959, s.25 (Observation)	...	...	...	...	7
(iii) Mental Health Act, 1959, s.26 (Treatment)	...	...	...	...	1
(iv) Mental Health Act, 1959, s.29 (Emergency)	...	...	...	...	3
(b) Referred to general practitioners and psychiatric clinics					31
(c) Referred for domiciliary visiting	...	...	...	...	13
(d) Referred for Guardianship	...	...	...	...	—
(e) Referred to other social agencies	...	...	...	...	2
(f) Admitted to training centres (included in (c) above)					1
3. Number of sessions attended at psychiatric clinics	...	...	...	...	23
4. Number of enquiries and interviews by Mental Welfare Officers	...	...	...	...	937

Number of patients under the care of the Local Health Authority on 31st December, 1960.

1. Number receiving domiciliary visits:

(a) Mental illness	...	...	...	...	32
(b) Severely subnormal	...	...	...	...	15
(c) Subnormal	...	...	...	...	100
(d) Psychopath	...	...	...	...	3
					<hr/> 150 <hr/>

2. Number receiving training:

(a) Males under 16 years	...	...	...	...	15
(b) Females under 16 years	...	...	...	...	13
(c) Males over 16 years	...	...	...	...	10
(d) Females over 16 years	...	...	...	...	11
					<hr/> 49 <hr/>

3. Number on waiting list for admission to hospital:

(a) Severely subnormal:					
(i) Males under 16 years	...	...	...	...	2
(ii) Female under 16 years	...	...	...	...	1
(b) Subnormal:					
(i) Female over 16 years	...	...	...	...	1
					<hr/> 4 <hr/>

## Miscellaneous

### National Assistance Act, 1948

A few cases have been reported to me under Section 47 of this Act, but I have been able to deal with them satisfactorily without compulsory orders. Information supplied by Mr. F. W. Busfield, Chief Welfare Officer.

### FOLLOW-UP OF REGISTERED BLIND AND PARTIALLY SIGHTED PERSONS

	Causes of Disability			
	Cataract	Glaucoma	Retro-lental Fibro-plasia	Others
(i) Number of cases registered during the year in respect of which Para. 7(c) of Forms B.D.8 recommends:—				
(a) No treatment ..	4	—	—	2
(b) Treatment (Medical, Surgical or Optical) ..	16	4	—	8
(ii) Number of cases at (i) (b) above, which on follow-up action have received treatment ..	16	4	—	8

### Epilepsy

At 31st December, 1960, nineteen persons suffering from epilepsy were registered as handicapped persons, and seven of these were also registered as blind persons.

Nine of these persons were under the care of the local authority in Epileptic homes or residential accommodation, one was receiving treatment in a Mental hospital, and the remaining nine were living in their own homes.

It was possible to arrange a holiday at the seaside for one man who had not had a holiday for several years. This was made possible through the financial assistance received from the Halifax Association for the Disabled and the British Epilepsy Association.

One lady who had been in an Epileptic home since 1948 was discharged to her own home to live with her father in February, 1961, because her epileptic condition was reasonably stabilised and controlled and she had not had an attack for several months. It was



found however that the home conditions were not entirely satisfactory and the Housing Committee co-operated generously in providing more suitable living accommodation. This lady has settled down well since returning home and is now housekeeping for her father. Contact will be maintained with her and she will be given every encouragement in what to her at first must be a new life.

### **Cerebral Palsy**

The number of persons suffering from cerebral palsy and registered as handicapped persons at 31st December, 1960, was twenty-seven.

One person is being provided with residential accommodation in the Cheshire Home, White Windows, Sowerby Bridge, and another is awaiting a vacancy there.

Accommodation was arranged for one person to enable her parents to have a holiday.

The Welfare Officer for Handicapped Persons maintains contact with all those persons on the register and the services provided for all substantially and permanently handicapped persons under Section 29 of the National Assistance Act, 1948, are available to them.

## **MEDICAL EXAMINATIONS**

The undermentioned medical examinations were carried out during the year by the medical staff of the local authority:—

Examinations for employment and superannuation	...	279
Ministry of Education examinations—		
Form 28 R.Q.	... ..	32
Form 4 R.T.C.	... ..	63
	—	95
Examinations on behalf of other local authorities	...	—
Medical examination of employees following prolonged absence due to sickness	... ..	26
Examinations for admission to Outward Bound Schools	—	—
		400

## **PUBLIC MORTUARY**

The Mortuary is situate in Hall Street. There were 130 P.M.'s performed during 1960.



## CREMATIONS

The Medical Officer of Health is the Medical Referee.  
(Information supplied by Mr. T. C. Lazenby, Manager and  
Registrar, Parks and Cemeteries Department)

### Number of Cremations

Total number of Cremations since the opening of Crematorium to 31st December, 1960 ...	6876
Total number of Cremations for the year 1960 ...	1326

### Disposition of Remains for the year 1960

Scattered or buried in Grounds ...	1191
Placed, or to be placed, in Niches ...	—
Placed, or to be placed, in Graves ...	—
Taken away by representatives ...	135
Awaiting instructions for disposal ...	—

There were 722 cremations of Halifax residents during the year.

## WATER SUPPLY

Details provided by Mr. A. L. Gray, Waterworks Engineer and Manager,

(i) The water supply of the area has been highly satisfactory in quantity and quality.

(ii) **Bacteriological examinations of raw water:—**

424 Samples. Results varying from 0 to 180 + pres.  
B. Coli. per 100 c.c.

**Bacteriological examinations of filtered and treated water:—**

796 Samples. Results highly satisfactory.

These samples were taken and examined at the Waterworks Laboratory.

In addition, 164 samples were taken independently by the Borough Analyst and the results of his bacteriological analyses were all highly satisfactory.

Average chemical analyses for Thrum Hall Filtered and Crude Water are attached.

(iii) The soft moorland water supplied to Halifax is liable to have plumbo-solvent action. To counteract this the raw water is treated with lime and the pH factor raised to 8.0 to 8.5.

The number of chemical analyses taken is 43 and the result are averaged on aforementioned enclosures.

(iv) The raw water is chemically treated, filtered and chlorinated before use. All new mains are sterilised and flushed out before being put into service. Number of yards sterilised—4,138.

(v) The number of dwellinghouses and the population supplied:—

(a) Direct to the house—33,500 houses: 99,000 population

(b) By means of standpipe—5 houses



## SEWAGE

Details provided by Mr. H. Ives, Sewage Works Manager, for the following report:—

### **Sewage Purification**

The efficient purification of domestic sewage and industrial wastes is an important and essential link in the chain of public health services.

All drainage from the Borough, with the exception of certain fringe areas referred to later, eventually arrives at the Purification Works sited at the lowest point in the town on three separate but adjacent areas of land at Salterhebble, Copley, and North Dean.

Apart from the small volume from Copley village which has to be raised to the level of the Works by means of sewage ejectors, the liquid wastes gravitate to the Works, where they are purified to the requirements of the Yorkshire Ouse River Board before discharge into the River Calder.

The method of purification in use consists of acid precipitation and settlement followed by biological oxidation effected partly by bacteria beds and partly by activated sludge units. Because of the need to deal with the industrial wastes from about eighty manufacturing premises in the Borough, in addition to the normal domestic sewage, the Works have to be about twice the size that would otherwise be required.

The solid residues, extracted in the form of sludges during purification, are mechanically dewatered and processed to yield by-products in the form of sterile, pulverised, organic fertilisers and industrial grease. These are subsequently sold thereby effecting complete and positive disposal of these otherwise objectionable residues, in a hygienic manner which also produces an income that makes a useful contribution to the overall cost of operating the Works.

During 1960, 2,537,000,000 gallons of sewage and industrial wastes were purified, an average of 6,933,000 gallons for each day of the year, from which 48,519 tons of liquid sludge residues were extracted yielding 2,439 tons of organic fertiliser and 373 tons of grease after processing.

The parts of the Borough which are in different catchment areas and therefore do not drain to the Halifax Purification Works, referred to above, are the Warley and Luddenden district which drains to the Works of Luddenden Foot Joint Sewerage Board on which Halifax is represented and the Northowram area which by agreement drains to the Works of the Brighouse Corporation.



## CLEANSING

Details provided by Mr. B. Fellows, Director of Public Cleansing for the following notes:—

### **Refuse Collection and Disposal**

During the year a total of 30,155 tons of house and trade refuse was handled by the department. Of this quantity 13,582 tons were dealt with at the separation—incineration plant at Charlestown and the remaining 16,573 tons was disposed of by controlled tipping at Birks Hall with a view to land reclamation. It is interesting to record that the percentage of fine dust amounts to about 33%, which in the main is used as covering material at the tip. The composition of house refuse appears to be changing and with the exception of the winter months the refuse yield is, in the main, light and bulky.

### **Salvage Recovery**

The income from reclaimed materials from house refuse together with processed kitchen wastes, Abattoir and Market Offals realised the sum of £20,056.

The communal waste food bins were gradually withdrawn from the streets during the late Summer and early Autumn. Waste food is now only collected separately from School and Industrial Canteens, etc.

### **Street and Gully Cleansing**

The carriageways have received regular cleansing by the use of mechanical sweeper collectors. Footpaths have received as much attention as possible with the staff available. In all a total of 1,984 motor loads of street sweepings were removed. Greater use of the many litter receptacles by the public would help considerably.

During the year 50,657 gullies were cleansed.



## **SECTION 3**

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### **Housing**

### **Sanitary Circumstances**

### **Food (Inspection and Supervision)**

including  
Milk Distribution  
Food and Drugs Sampling  
Meat and other Foods  
Ice Cream, etc.

### **Factories**

### **Rodent Control**

### **Clean Air**

Details provided by Mr. A. W. Perry, D.P.A., A.M.I.P.H.E., M.R.S.H., M.A.P.H.I., Chief Public Health Inspector.

Housing slum clearance work has been concentrated on New Bank. Five further clearance areas were represented and these—together with two areas represented the previous year—were made the subject of two compulsory purchase orders. These orders were the subject of a Public Enquiry in the autumn, the result of which was still awaited at the end of the year. The No. 1 Compulsory Purchase Order, made last year, was confirmed, but although its operative date was further delayed by a challenge of its validity in the High Courts, most of the occupants of this area—and of Holt's Yard, which had been purchased by private negotiation—had been rehoused by the end of the year. A start was made in representing houses in the Great Albion Street area. A small compulsory purchase order was made, Certificates of Unfitness were issued for the houses already owned by the local authority and negotiations were commenced to purchase the remaining houses not already owned by the Corporation.

The demand for Standard Grants and Improvement Grants has been very good, 478 being granted, although it is disappointing to see so few applications for tenanted houses (23 for Standard Grants and 2 for Improvement Grants). The scope of Improvement Grants was enlarged to include the provision of septic tanks, new damp-proof courses, extra windows, etc., and the maximum grant is now £200.

The number of unsatisfactory food and drugs samples showed a welcome decrease to 47, or 26.1%. (There were 59, or 29.8% in 1959). Bread, again, was the item most often complained of (15 instances), yet our local milk supplies continue to maintain a high standard. Out of 121 milk samples taken, only 2 were reported upon adversely. The average quality of the milk—in terms of milk fat and non-fatty solids—was the best for the last ten years.

The statistics relating to atmospheric pollution show a decrease in deposit to 153.08 tons per square mile (1959—159.84 tons) despite a much higher rainfall of 3.42 inches per month (1959—2.25 inches). Sulphur pollution, as recorded by the Lead Peroxide Gauges, also shows an average daily reduction of 6%. More striking and more reliable is the result of the smoke gauge in Powell Street, which shows the reduction in smoke in the area was maintained during the six months of winter.



During the year the Halifax No. 2 (Mixenden) Smoke Control Order was the subject of a Public Enquiry. The Order was later confirmed.

Surveys were made of the No. 3 (Norton Tower), No. 4 (Savile Park and Skircoat) and No. 5 (Wheatley Valley) Smoke Control areas. Orders were made in each case. The No. 3 Order was confirmed, but the confirmation of the other orders was awaited at the end of the year.

The Noise Abatement Act came into force in November. It provides that noise and vibration which is a nuisance can be dealt with summarily, by the service of Abatement Notices and the granting of Nuisance Orders by the courts. Any three residents affected by noise or vibration may take similar action. The Act enlarged the powers already given by a local Act, and the two Acts were used to deal with several noise nuisances ranging from noisy machinery and noisy ventilation fans to the banging of doors during night shift work.

Mr. N. Helliwell resigned and Mr. B. Oversby (District Public Health Inspector) and Mr. K. Hubbard (Clerk of Works—Smoke Control) joined the department. Mr. J. M. Todd, a pupil inspector, qualified and was appointed as Housing Inspector.

# Housing

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During the year, the Corporation's slum clearance programme was enlarged, re-arranged and extended, so that from July, 1960, to June, 1971, approximately 2,635 houses in clearance areas will be represented, in addition to 150 cellar dwellings and 220 individual houses on which demolition or closing orders will be made. This gives a yearly average of 273 to be dealt with.

This change of programme was made to integrate the clearance of unfit dwellings with the demands for redevelopment of domestic houses, industrial sites and educational buildings.

Out of this new programme, 85 houses were represented in the second half of the year, whilst 115 had been represented during the first six months. The progress made in dealing with clearance areas is as shown in the following details:—

## **Clarence Square Compulsory Purchase Order**

Rehousing was completed and the remaining houses demolished.

## **Cote Hill Fold Compulsory Purchase Order**

Rehousing was completed and all the houses were demolished.

## **Sunderland's Yard Clearance Area**

All the houses were demolished, rehousing having been completed previous to the year under review.

## **New Bank Compulsory Purchase Orders**

Early in the year, No. 1 Order was confirmed and by the end of the year most of the rehousing had been carried out and a few of the houses demolished.

Also, at the beginning of the year, a further five clearance areas (Nos. 5, 6, 7, 8 and 9)—comprising 115 houses—were represented, and these areas, together with Nos. 3 and 4, became the basis of Nos. 2 and 3 Compulsory Purchase Orders and at the end of the year confirmation of these Orders was still awaited.

## **Albion Square Compulsory Purchase Order**

Towards the end of the year, this small area of 13 houses was represented for the completion of the clearance of the Great Albion Street area, most of which was already owned by the Corporation.

## **Gibbet Street Compulsory Purchase Order**

During the year, rehousing was completed and at the end of the year the houses were awaiting demolition.



# Closing and Demolition Orders, etc., Housing Act, 1957, Secs. 16-18

Continuing the information given in previous reports, the following table shows the position on the 31st December, 1960:—

No. in Reg.	Address	Date of Report	Date of Closing Order	Date of Demolition Order	Remarks
72	1, Causeway	7/3/60	—	7/4/60	Demolished
73	2, „	7/3/60	—	7/4/60	Demolished
74	3, „	7/3/60	—	7/4/60	Demolished
75	11, Charles Street	7/3/60	—	7/4/60	Demolished
76	1, Broad Tree Terrace	24/3/60	27/5/60	—	House vacated
77	33a, Freedom Street	24/3/60	10/10/60	—	Awaiting vacation by tenant
78	24, Elephant Terrace	24/3/60	27/5/60	—	House vacated
79	17, Crow Point	24/3/60	—	27/5/60	House vacated, awaiting demolition
80	Brierley House, Beacon Hill Road	24/3/60	27/5/60	—	House vacated
81	10 Musgrave Street	19/5/60	12/8/60	—	Awaiting vacation by tenant
82	11, „ „	19/5/60	12/8/60	—	House vacated
83	6, Lower Shaw Hill	19/5/60	12/8/60	—	House vacated
84	6, Elcho Place	21/7/60	12/10/60	—	House vacated
85	5, Paris Gates	25/8/60	—	18/10/60	House vacated awaiting demolition
86	10, Upper Exley	25/8/60	18/10/60	—	House vacated
87	132, Spring Hall Lane	22/9/60	4/11/60	27/1/61	Awaiting demolition
88	5, Croppers Row	24/11/60	27/1/61	—	Awaiting vacation by tenant
89	7, „ „	24/11/60	27/1/61	—	Awaiting vacation by tenant
90	9, „ „	24/11/60	27/1/61	—	Awaiting vacation by tenant
91	3, Rake Bank	24/11/60	—	27/1/61	Awaiting demolition
92	10, Lower Shaw Hill	24/11/60	27/1/61	—	Awaiting vacation by tenant
93	28, Prospect Street	24/11/60	—	—	House vacated Undertaking not to re-let accepted
94	116, Spring Hall Lane	24/11/60	—	27/1/61	Awaiting demolition
95	118, „ „ „	24/11/60	—	27/1/61	„ „
96	120, „ „ „	24/11/60	—	27/1/61	„ „
97	122, „ „ „	24/11/60	—	27/1/61	„ „
98	124, „ „ „	24/11/60	—	27/1/61	„ „
99	126, „ „ „	24/11/60	—	27/1/61	„ „
100	128, „ „ „	24/11/60	—	27/1/61	„ „
101	130, „ „ „	24/11/60	—	27/1/61	„ „
102	134, „ „ „	24/11/60	—	27/1/61	„ „
103	136, „ „ „	24/11/60	—	27/1/61	„ „
104	138, „ „ „	24/11/60	—	27/1/61	„ „
105	140, „ „ „	24/11/60	—	27/1/61	„ „
106	142, „ „ „	24/11/60	—	27/1/61	„ „
107	17, Musgrave Street	15/12/60	27/1/61	—	Unoccupied house
108	3, „ „	15/12/60	31/1/61	—	Awaiting vacation by tenant
109	48, Trafalgar Street	15/12/60	27/1/61	—	Awaiting vacation by tenant



To complete observations made in previous annual reports, the following information is given:—

Ref. Nos. 451—469 Houses still not completely demolished.

Reg. No. 53 Undertaking carried out.

Reg. No. 59 Still awaiting demolition.

Reg. No. 66—70 All houses now vacated.

### Certificates of Unfitness

Eighty-five houses belonging to the local authority were inspected and Certificates of Unfitness given by the Medical Officer of Health. These Certificates enable the local authority to apply for subsidy under the Housing (Financial Provisions) Act, 1958.

### Improvement Grants and Standard Grants

The demand for these grants remained at a very high level, as will be seen from the table below.

During the year, the Council decided to extend the scope of the Improvement Grant to include works other than the provision of bathrooms and septic tanks; e.g. additional bedrooms, kitchens, damp-proof courses, additional lighting and ventilation, etc.

The maximum grant payable, however, remains short of the £400 permitted—£200 for improvements without septic tanks and £250 with them.

The following table shows details of applications submitted to the Housing Committee during the year:—

Type of Grant	No. of applications submitted	Granted	Rejected	Completed	Amount paid in respect of work in previous column	Withdrawn after submission to Committee
Improvement	25	25	—	27	£2,334 15 0	2
Standard	458	453	5	371	£35,981 17 7	12
Total	483	478	5	398	£38,316 12 6	14

### Overcrowding

Thirty-two cases of overcrowding were discovered during the year, found mainly when inspecting houses for defects or for slum clearance. There were 19 cases outstanding at the beginning of the year. Twenty-five cases have been abated.

Of the 26 cases now outstanding, some are already applicants for corporation houses; others will be rehoused within a short time when the clearance areas are dealt with, and the remainder have been requested by letter to abate the overcrowding.



## **Rent Act, 1957. Certificates of Disrepair**

During the year 7 applications for Certificates of Disrepair were received from tenants of houses.

None of these applications was refused and 7 notices of proposal to issue a certificate were served upon owners, following which 3 undertakings to remedy defects were received from Landlords and Certificates of Disrepair were issued in respect of the other cases.

No applications for Cancellation of Certificates of Disrepair were received and 3 Certificates as to the Remedying of Defects were issued to tenants.

## **Cleansing Facilities**

There is a Cleansing Station, which operates under the general supervision of the Chief Public Health Inspector, at the Disinfestation Station, Charlestown. Hot baths and showers, and the usual cleansing materials, are provided.

Men are cleansed by the attendant at the Disinfestation Station, and the cleansing of women is carried out under the supervision of a Health Visitor.

Provision exists for the steam sterilisation of clothing and, if necessary, of bedding, etc. Where necessary, houses are treated with an approved vermicide.

## **Disinfestation**

The HCN plant at Charlestown dealt with 92 cases where household furniture was disinfested prior to removal to Corporation houses.

The two employees also visited 66 other houses and cleared them of vermin (other than bugs) and disinfested 23 bug-infested houses.

They also treated business premises for cockroaches, and were called out to deal with a few wasps' nests. Charges are made for these services.

The Disinfestation Station has been used to a less extent than in previous years. The requirement that the furniture for every household in a slum clearance area must be removed by the department and disinfested in the plant has now been relaxed.

HCN gas is a very effective vermicide but, at the same time, it is dangerous to use if not operated by skilled hands. Furthermore it is costly to operate. New insecticides are on the market and they are equally as effective. Only the furniture from households where precautions are deemed necessary are now disinfested, and that is done by liquid insecticide.

## Housing Statistics

	Houses demolished	Displaced	
		Persons	Families
HOUSES DEMOLISHED			
In clearance areas—			
Houses unfit for human habitation ..	58	166	65
Houses included by reason of bad arrangement, etc. .. .. .	—	—	—
Houses on land acquired under Section 32 (2) Housing Act, 1957 .. .. .	1	11	6
Not in clearance areas—			
As a result of formal or informal procedure under Section 17 (1) Housing Act, 1957	9	15	6
Local authority owned houses certified unfit by the Medical Officer of Health	4	82	32
Houses unfit for human habitation where action has been taken under local acts ..	—	—	—
Unfit houses included in unfitness orders ..	—	—	—
UNFIT HOUSES CLOSED	Number		
Under Sections 16 (4), 17 (1) and 35 (1), Housing Act, 1957 .. .. .	15	60	14
Under Sections 17 (3) and 26, Housing Act, 1957 .. .. .	—	—	—
Parts of buildings closed under Section 18 Housing Act, 1957 .. .. .	1	2	1
UNFIT HOUSES MADE FIT AND HOUSES IN WHICH DEFECTS WERE REMEDIED	By Owner	By Local Authority	
	275	XXXXXXXXXX XXXXXXXXXX	
	39	14	
	1	—	
	—	XXXXXXXXXX XXXXXXXXXX	
PURCHASE OF HOUSES BY AGREEMENT	No. of houses	No. of occupants	
	—	—	
Houses in clearance areas other than those included in confirmed clearance orders or compulsory purchase orders, purchased during the year .. .. .			



# Sanitary Circumstances and Sanitary Inspection of the Area

## Description of the Work of the Public Health Inspectors Inspections and Visits

### Dwellinghouses:—

Primary Inspections under the Housing Acts ...	173
Subsequent inspections under the Housing Acts ...	89
Visits re work in progress under the Housing Acts ...	8
Visits re removals and disinfestation ...	1,091
Inspections on behalf of Housing Manager ...	152
Dwellinghouses re sanitary defects ...	979
Dwellinghouses re notifiable diseases ...	74
Dwellinghouses re dirty and/or verminous conditions	153
Dwellinghouses re Overcrowding ...	40
Common Lodging Houses ...	1
Houses-let-in-Lodgings ...	22
Moveable Dwellings ...	3

### Drainage:—

Public sewers inspected ...	238
Public sewers tested ...	4
Drains inspected (special inspections only) ...	237
Drains tested ...	202
Ditches and watercourses ...	1

### Factories:—

Factories (with power) ...	160
Factories (without power) ...	4
Workplaces (General) ...	43

### Shops:—

Shops Act, 1950, section 38 ...	14
Other visits ...	72

### Food Inspection:—

Milk Distributors ...	12
Dairies ...	35
Milkshops ...	12
Fried Fish Shops ...	17
Bakehouses ...	48
Butchers' Shops ...	33
Ice Cream Premises ...	42
Restaurants, Cafés, etc. ...	109
Mobile Shops ...	62
School Canteens ...	11
Licensed Premises ...	15
Other Food Premises ...	71

**Smoke Control**

Smoke Observations	...	...	...	...	412
Works, etc., re smoke emission	...	...	...	...	80
Works, etc., re Prior Approval	...	...	...	...	6
Works, etc., re Chimney Heights	...	...	...	...	3
Smoke Control Areas	...	...	...	...	2,470
Visits to Atmospheric Pollution Gauges	...	...	...	...	75

**Sampling:—**

Food and Drugs Act, 1955	...	...	...	...	345
Bacteriological Samples—Milk	...	...	...	...	55
Bacteriological Samples—Ice Cream	...	...	...	...	57
Biological Samples—Milk	...	...	...	...	9
Water	...	...	...	...	26
Swimming Baths Water	...	...	...	...	59
Fertilisers and Feeding Stuffs	...	...	...	...	20
Pathological Specimens	...	...	...	...	56

**General:—**

Premises re Food Poisoning	...	...	...	...	11
Premises re Fertilisers and Feeding Stuffs Act	...	...	...	...	14
Premises re Pharmacy and Poisons Act	...	...	...	...	26
Stables re nuisances	...	...	...	...	6
Fowls, Swine and other animals	...	...	...	...	18
Pet Shops	...	...	...	...	9
Knackers' Yards	...	...	...	...	2
Schools	...	...	...	...	2
Places of Public Entertainment	...	...	...	...	7
Public Sanitary Conveniences	...	...	...	...	264
Accumulations of Refuse	...	...	...	...	115
Noise Nuisances	...	...	...	...	74
Offensive Trades	...	...	...	...	1
Abattoir	...	...	...	...	113
Rodent Control	...	...	...	...	79
Certificates of Disrepair	...	...	...	...	39
Interviews	...	...	...	...	986
Miscellaneous Visits	...	...	...	...	3,060
Total number of Inspections and Visits	...	...	...	...	12,726
Total number of re-inspections	...	...	...	...	6,080

**Particulars of work done****Dwellinghouses:—**

	Informal Action
General repairs	249
Dirty houses cleansed	69
Council houses found bug-infested and disinfested	5
Other houses found bug-infested and disinfested	18
Houses cleared of vermin (other than bugs)	62
Houses-let-in-Lodgings—Nuisances abated or improvements effected	6
Overcrowding abated	25



**Drainage:—**

Sewers cleansed ... ..	138
Drains cleansed and/or repaired ... ..	132
Drains reconstructed or new drains provided ... ..	62
Public sewers repaired and/or reconstructed ... ..	19

**Factories:—**

Factories (with power)—Nuisances abated or improvements effected ... ..	108
Factories (without power)—Nuisances abated or improvements effected ... ..	1
Workplaces (General)—Nuisances abated or improvements effected ... ..	1
Outworkers' Premises—Nuisances abated or improvements effected ... ..	1

**Shops:—**

Shops Act, 1950, section 38—Nuisances abated or improvements effected ... ..	1
(General)—Nuisances abated or improvements effected	13

**Food Premises:—**

Fried Fish Shops—Nuisance abated or improvements effected ... ..	5
Bakehouses—Nuisances abated or improvements effected ... ..	9
Butchers' Shops—Nuisances abated or improvements effected ... ..	8
Restaurants, Cafés, etc.—Nuisances abated or improvements effected ... ..	14
Other Food Premises—Nuisances abated or improvements effected ... ..	7
Licensed Premises—Nuisances abated or improvements effected ... ..	1
Ice Cream Premises—Nuisances abated or improvements effected ... ..	6

**Smoke Control:—**

Boiler plants improved re emission of smoke ... ..	9
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**General:—**

Premises cleared or rats—Dwellinghouses ... ..	273
Other premises ... ..	233
Premises cleared of mice—Dwellinghouses ... ..	175
Other premises ... ..	266
Pathological specimens obtained ... ..	91
Fowls, Swine and other animals—Nuisances abated or improvements effected ... ..	3
Stables—Nuisances abated or improvements effected ... ..	4
Schools—Nuisances abated or improvements effected ... ..	1
Accumulation of Refuse—Nuisances abated ... ..	49



Public Sanitary Conveniences—Nuisances abated or improvements effected ... ..	94
Noise—Nuisances abated or improvements effected ...	14
Miscellaneous sanitary improvements effected ... ..	113

### **Common Lodging Houses**

There is only one Common Lodging House in the Borough, occupied by the Salvation Army Trustee Company. There is accommodation for 120 male lodgers, but usually no more than 75 beds are in use.

The premises are visited regularly and are clean and well kept.

### **Houses-Let-in-Lodgings**

There are several houses-let-in-lodgings in the town. The number is not increasing at a very fast rate and standards of housing remain low. It is hoped that new regulations will be issued shortly which will provide for the proper maintenance and management of this type of property.

### **Fertilisers and Feeding Stuffs Act, 1926**

#### **Fertilisers and Feeding Stuffs Regulations, 1932**

Of the 20 samples obtained during the year, 10 were of fertilisers and 10 were of feeding stuffs. Six samples of fertilisers were unsatisfactory and the manufacturers were warned.

### **Pharmacy and Poisons Act, 1933**

#### **Pharmacy and Medicines Act, 1941**

At the end of 1960 there were 159 registered sellers of Part II poisons, occupying 219 registered premises.

There were 26 inspections of these premises during the year.

### **Rag Flock and Other Filling Materials Act, 1951**

At the end of the year there were 7 premises registered under this enactment and all were in a satisfactory condition.

No samples were taken.

### **Pet Animals Act, 1951**

Section 1 of the above-mentioned legislation, which came into operation on the 1st April, 1952, enacts that no person shall keep a Pet Shop except under a licence granted by the Local Authority.

Nine applications were received during the year and licences were granted in each case.

### **Places of Public Entertainment**

During the year 7 inspections were made of theatres, cinemas and other premises for which theatre licences are necessary, and conditions, generally, were found to be satisfactory.



## **Swimming Baths**

The swimming pool at Woodside Baths—the only public baths in the borough—is 75 feet long and 36 feet wide, the capacity of the pool being approximately 84,000 gallons.

The water is drawn from the town's main and is constantly being circulated, purified and sterilised, circulation being at the rate of 31,500 gallons per hour. Thus, in effect, the whole of the bath water is circulated through the filters, purified and sterilised every  $3\frac{3}{4}$  hours.

The bath water is being chemically treated for 15 hours per day by Alumina, Chlorine and Sodium Carbonate.

The swimming pool is open throughout the year and there are also 26 slipper baths for men and 20 for women. Foam baths are also available.

Samples of swimming bath waters are obtained each month from the Public Baths and from all School Swimming Baths, and are submitted to bacteriological and chemical examination, and results generally are quite satisfactory.

Caretakers at all schools where swimming baths are installed are instructed in the chlorination and proper treatment of the bath water.

Only at the Warley Road School Swimming Bath did the samples give rise to concern. The makers of the purification plant were called in and they advised the renewal of a pump, some chemical equipment and the sand in the filter. Provision was made for this work to be done next year.

## **Public Sanitary Conveniences**

Under the Control of the Health Department there are 47 public sanitary conveniences, consisting of 17 sanitary conveniences for males, 17 for females, and 13 public urinals.

At the two main conveniences in town—Bull Green and George Square where there are full-time attendants and where lavatory accommodation is provided, facilities are available for the free washing of hands after use of the toilets. For this purpose wash-basins with hot and cold water have been installed and cream-soap and paper towels are provided. The service still proves very popular, but at the same time suffers a certain amount of abuse.

A considerable amount of misuse and wanton damage takes place at the unattended conveniences, automatic locks and fittings being in constant need of repair or replacement.

The Bankfield convenience was renovated during the year.

## **Food** **(Inspection and Supervision)**

### **FOOD AND DRUGS ACT, 1955**

#### **Sampling of Food and Drugs**

A total of 345 samples of Food and Drugs was obtained during the year and submitted to the Public Analyst.

These included 121 samples of milk, 44 samples of Ice Cream and 180 samples of food and drugs.

Samples of milk "not genuine" according to the Sale of Milk Regulations numbered 2, giving a percentage of 1.65.

All the 44 samples of ice cream were reported as satisfactory.

Of the 180 samples of other food and drugs, 47 (or 26.11%) were reported not genuine.

All samples of food are examined for preservatives in accordance with the Public Health (Preservatives, etc., in Food) Regulations.

Details of all samples will be found in the following tables:—



TABLE 1

Nature of Sample	No. of samples taken			No. not genuine		
	Formal	In-formal	Total	Formal	In-formal	Total
Milk .. .. .	112	1	113	2	—	2
Milk—Channel Islands	6	—	6	—	—	—
Milk—Sterilized .. ..	—	2	2	—	—	—
Ale .. .. .	4	3	7	—	—	—
Almonds, Ground .. ..	—	3	3	—	—	—
Blackcurrant Syrup .. ..	—	1	1	—	1	1
Bread (various) .. ..	—	19	19	—	15	15
Butter .. .. .	—	4	4	—	—	—
Butter Toffee .. .. .	—	1	1	—	—	—
Cake Mix .. .. .	—	3	3	—	—	—
Chicken Rolls .. .. .	—	1	1	—	—	—
Chicken Fillets .. .. .	—	1	1	—	—	—
Chicken and Ham .. ..	—	1	1	—	1	1
Chicken Teacakes .. ..	—	1	1	—	—	—
Coconut Desiccated .. ..	1	2	3	—	1	1
Chocolate Tree Decorations	—	1	1	—	1	1
Coffee and Chicory Essence	—	4	4	—	—	—
Confectionery:						
Cornish Pasty .. .. .	—	2	2	—	1	1
Cream Doughnuts .. ..	—	1	1	—	—	—
Cream Sponge Cake .. ..	—	1	1	—	1	1
Dairy Cream Cake .. ..	—	1	1	—	—	—
Fresh Cream Cake .. ..	—	1	1	—	—	—
Fruit Cake .. .. .	—	1	1	—	1	1
Mince Pie .. .. .	—	1	1	—	1	1
Strawberry Flan .. ..	—	1	1	—	1	1
Swiss Roll .. .. .	—	1	1	—	1	1
Viennese Crescents .. ..	—	1	1	—	1	1
Corned Beef .. .. .	—	1	1	—	1	1
Corn Flakes .. .. .	—	1	1	—	—	—
Crumpets .. .. .	—	2	2	—	1	1
Double Cream .. .. .	—	2	2	—	—	—
Dried Fruit:						
Currants .. .. .	—	7	7	—	—	—
Dates .. .. .	—	2	2	—	—	—
Sultanas .. .. .	—	3	3	—	—	—
Dripping Teacakes .. ..	—	1	1	—	1	1
Fish Cakes .. .. .	—	7	7	—	—	—
Flour:						
Plain .. .. .	—	5	5	—	1	1
Self-Raising .. .. .	—	5	5	—	—	—
Ice Cream .. .. .	—	44	44	—	—	—
Margarine .. .. .	—	4	4	—	1	1
Meat Pie .. .. .	—	1	1	—	1	1
Milk Chocolate Caramels	—	1	1	—	—	—
Oatmeal .. .. .	—	1	1	—	1	1
Oranges .. .. .	—	1	1	—	—	—
Pears, Tinned .. .. .	—	1	1	—	1	1
Peas, Processed .. .. .	—	4	4	—	—	—
Peas, Tinned .. .. .	—	1	1	—	1	1

TABLE 1—*continued*

Nature of Sample	No. of samples taken			No. not genuine		
	Formal	In-formal	Total	Formal	In-formal	Total
Preserves:						
Lemon Cheese .. ..	—	3	3	—	—	—
Lemon Curd .. ..	—	3	3	—	—	—
Marmalade .. ..	—	1	1	—	1	1
Mincemeat .. ..	—	4	4	—	—	—
Puddings:						
Assorted .. ..	—	1	1	—	—	—
Christmas .. ..	—	5	5	—	1	1
College .. ..	—	1	1	—	1	1
Creamed Sago Milk ..	—	1	1	—	—	1
Rice, Ground .. ..	—	2	2	—	—	—
Raspberries, Tinned ..	—	1	1	—	1	1
Rose Hip Syrup .. ..	—	1	1	—	—	—
Salmon Rolls .. ..	—	1	1	—	—	—
Salmon, Tinned .. ..	—	1	1	—	—	—
Sausages:						
Beef .. ..	—	7	7	—	1	1
Tinned .. ..	—	1	1	—	—	—
Meatless .. ..	—	1	1	—	—	—
Pork .. ..	—	4	4	—	—	—
Sherry Trifle .. ..	—	1	1	—	—	—
Soft Drinks:						
Bottle (empty) .. ..	—	1	1	—	1	1
Grapefruit Crush .. ..	—	1	1	—	—	—
Grapefruit Squash .. ..	—	1	1	—	—	—
Lemon Barley Water ..	—	1	1	—	—	—
Lime Juice Cordial ..	—	1	1	—	—	—
Orange Crush .. ..	—	3	3	—	—	—
Orange Drink .. ..	—	1	1	—	—	—
Orange Squash .. ..	—	2	2	—	—	—
Spirits:						
Gin .. ..	1	—	1	—	—	—
Rum .. ..	1	—	1	—	—	—
Whisky .. ..	2	—	2	—	—	—
Sugar .. ..	—	3	3	—	1	1
Teacake .. ..	—	1	1	—	1	1
Teacake Buttered .. ..	—	4	4	—	—	—
Teacake Currant .. ..	—	1	1	—	1	1
Toffee .. ..	—	1	1	—	—	—
Toffee Lollies .. ..	—	2	2	—	1	1
Vegetable Juice .. ..	—	1	1	—	—	—
Vinegar .. ..	—	1	1	—	1	1
Vitamin Tablets .. ..	—	1	1	—	—	—
	127	218	345	2	47	49

(Note:—Three "Appeal to Cow" samples, obtained from an outside authority on behalf of the County Borough of Halifax, are excluded from this table).



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
1	Christmas Pudding Musty and containing dead mites.	Informal sample — submitted for analysis following complaint. The Public Analyst reported that the sample was musty, had an unpleasant appearance and contained a number of dead mites. The Town Clerk was instructed to send a letter of warning to the seller.
2	Portion of Small White Loaf containing a fly.	Informal Sample — submitted for analysis following complaint. The Public Analyst reported that the sample contained in the crust an embedded fly. The manufacturers' attention was drawn to the matter.
3	Toffee Lolly containing a piece of glass foreign matter.	Informal sample—submitted for analysis following complaint. The Public Analyst reported that the sample contained a piece of glass. The facts were reported to the Health Committee, who authorised legal proceedings. The case was heard at the Halifax Borough Magistrates' Court on the 16th March, 1960, when the defendants were fined £10 with costs totalling £2 10s. 0d. after pleading "guilty" by their Solicitor.
5	Cream Sponge Cake containing foreign matter.	Informal sample—submitted for analysis following complaint. The Public Analyst reported that the sample contained a piece of twisted paper in the cream layer. The manufacturers' attention was drawn to the matter.
6	Mince Pie containing foreign matter.	Informal sample—submitted for analysis following complaint. The Public Analyst reported that the mincemeat in the pie contained jute fibres. The manufacturers' attention was drawn to the matter.
14	Currant Teacake containing foreign matter.	Informal sample—submitted for analysis following complaint. The Public Analyst reported that the sample contained a piece of cotton cloth. The Town Clerk was instructed to send a letter of warning to the manufacturers.
15	College Pudding containing foreign matter.	Informal sample—submitted for analysis following complaint. The Public Analyst reported that the sample contained a metal lid. The Town Clerk was instructed to send a letter of warning to the manufacturers.



TABLE 2—*continued*

No. of Sample	Nature of Sample and Result of Analysis, etc.	Administrative action taken
23	Sugar— containing foreign matter.	Informal sample—submitted for analysis following complaint. The Public Analyst reported that the sample contained para-chloro-meta-cresol. The matter was referred to the Police when it was admitted by a member of the complainant's family she had placed the substance in the sugar. As it appeared from Police enquiries there was no criminal intent they did not think further action necessary.
24	Teacake— containing foreign matter.	Informal sample—submitted for analysis following complaint. The Public Analyst reported that the sample contained a piece of scorched dough. The manufacturers' attention was drawn to the matter.
35	Creamed Sago Milk Pudding— containing foreign matter.	Informal sample—submitted for analysis following complaint. The Public Analyst reported that the sample had a bitter taste, and there were significant traces of iron and tin therein. The manufacturers' attention was drawn to the matter.
36	Margarine— containing foreign object.	Informal sample submitted for analysis following complaint. The Public Analyst reported that the sample contained a small stone. Investigations later resulted in the opinion being formed that the margarine had been dropped after purchase by a boy when the stone had entered the product.
41	Portion of Small White Loaf— containing foreign matter.	Informal sample submitted for analysis following complaint. The Public Analyst reported that the sample contained pellets of dough and oil stained with iron and carbon. A verbal warning was given to the manufacturers.
42	Sliced Loaf— containing foreign matter.	Informal sample submitted for analysis following complaint. The Public Analyst reported that the sample contained a piece of black material composed of oil and charred flour (or dough). A verbal warning was given to the manufacturers.



TABLE 2—*continued*

No. of Sample	Nature of Sample and Result of Analysis, etc.	Administrative action taken
53	Marmalade— Deficient in Soluble Solids.	Informal sample reported by the Public Analyst to be deficient in Soluble Solids containing only 64.8 per cent. instead of the required 68.5 per cent. The manufacturers' attention was drawn to the matter, who changed their methods of manufacture to comply with the standards laid down.
79	Fruit Cake— containing foreign matter.	Informal sample submitted for analysis following complaint. The Public Analyst reported that the sample contained a portion of stem, most probably raisin vine, and whilst not harmful, unsatisfactory. No further action necessary.
80	Tinned Raspberries— containing insect.	Informal sample submitted for analysis following complaint. The Public Analyst reported that the tin contained a black beetle. The Packers' attention was drawn to the matter.
81	Crumpets— containing mould.	Informal sample submitted for analysis following complaint, The Public Analyst reported that the sample was affected by green mould and was unfit for human consumption. The Town Clerk was instructed to send a letter of warning to the distributor.
82	Sliced Brown Bread— containing foreign matter.	Informal sample submitted for analysis following complaint. The Public Analyst reported that the sample contained grease and traces of iron and carbon. The manufacturers' attention was drawn to the matter.
121	Cornish Pasties— containing mouldy growth.	Informal sample submitted for analysis following complaint. The Public Analyst reported that the sample was unfit for human consumption due to mould. Legal proceedings were instituted and the case was heard at the Halifax Borough Magistrates' Court on the 17th August, 1960, when the Defendants were fined £25 with costs totalling £2 10s. 0d. after pleading "guilty".
122	Dripping Teacakes— containing fly.	Informal sample submitted for analysis following complaint. The Public Analyst reported that the sample contained the major portion of a blow-fly. The Town Clerk was instructed to send a letter of warning to the seller.



TABLE 2—*continued*

No. of Sample	Nature of Sample and Result of Analysis, etc.	Administrative action taken
131 132	Milks— deficient in fat.	Formal samples taken from a distributor which the Public Analyst reported were 14.6 per cent. and 8.6 per cent. deficient in fat. "Appeal to Cow" samples—W.R.C.C.—5731, 5732, and 5733, were taken and although below the normal standards in milk fat and non-fatty solids, were reported as genuine milks naturally of poor quality. The Milk Production Officer, Ministry of Agriculture Fisheries and Food was notified.
144	Plain Flour— containing foreign object.	Informal sample submitted for analysis following complaint. The Public Analyst reported that the sample contained rodent droppings. The Town Clerk was instructed to send a letter of warning to the retailers drawing their attention to the provisions of Section 8 of the Food and Drugs Act, 1955.
155	Strawberry Flan— containing foreign matter.	Informal sample submitted for analysis following complaint. The Public Analyst reported that the sample contained a piece of glass. The Town Clerk was instructed to send a letter of warning to the manufacturers.
156	Large Sliced Loaf— containing foreign object.	Informal sample submitted for analysis following complaint. The Public Analyst reported that the sample contained a house fly. Legal proceedings were instituted, and the case was heard at the Halifax Borough Magistrates' Court on the 28th September, 1960. The Defendants pleaded "not guilty" through their counsel, but the case was found proved, and they were fined £25 with £3 18s. 0d. costs.
157	White Sliced Loaf— containing foreign matter.	Informal sample submitted for analysis following complaint. The Public Analyst reported that the sample contained extraneous paper fibres. The Chief Public Health Inspector sent a letter of warning to the manufacturer.
164	Soft Drink Bottle (Empty) — containing foreign object.	Informal sample submitted for analysis following complaint. The Public Analyst reported that the empty Soft Drink Bottle contained a woodlouse. The Town Clerk was instructed to send a letter of warning to the manufacturer.



TABLE 2—*continued*

No. of Sample	Nature of Sample and Result of Analysis, etc.	Administrative action taken
168	Beef Sausage—containing preservative.	Informal sample reported by the Public Analyst to contain preservative without the required declaration to that effect and therefore classified unsatisfactory. The Chief Public Health Inspector wrote to the retailer-manufacturer drawing his attention to the requirements of the Public Health (Preservatives, etc., in Food) Regulations.
182	Desiccated Coconut—containing foreign object.	Informal sample reported by the Public Analyst to contain rodent droppings. A formal sample (No. 185) was taken but found to be satisfactory. No further action.
187	Two Large Loaves—containing mouldy growth.	Informal sample submitted for analysis following complaint. The Public Analyst reported that both the loaves were mouldy. The Chief Public Health Inspector sent a letter of warning to the manufacturer.
188	Three Currant Teacakes containing foreign object.	Informal sample submitted for analysis following complaint. The Public Analyst reported that the sample contained a piece of stone. The Chief Public Health Inspector sent a letter of warning to the manufacturer.
189	Part of White Loaf—containing foreign object.	Informal sample submitted for analysis following complaint. The Public Analyst reported that the sample contained a beetle. The Chief Public Health Inspector sent a letter of warning to the manufacturers.
209	Viennese Crescents—containing foreign matter.	Informal sample submitted for analysis following complaint. The Public Analyst reported that the sample contained a black object being a being a mixture of fragments of fruit and spices. Although very unpleasant in appearance, the foreign body in this sample was harmless and clean. No further action necessary.
219	Milk Loaf.	Informal sample. The Public Analyst reported that he was unable to find milk or milk powder in the sample. Formal sample unobtainable.
220	Chocolate Flavoured Swiss Roll—containing foreign matter.	Informal sample submitted for analysis on complaint. The Public Analyst reported that the sample contained a splinter of wood. The Town Clerk was instructed to send a letter of warning to the manufacturer.



TABLE 2—*continued*

No. of Sample	Nature of Sample and Result of Analysis, etc.	Administrative action taken
232	Portion of Milk Loaf—containing foreign matter.	Informal sample submitted for analysis on complaint. The Public Analyst reported that the sample contained fine splinters of wood. The Chief Public Health Inspector sent a letter of warning to the manufacturer.
243	Tinned Pears—contents mouldy.	Informal sample submitted for analysis following complaint. The Public Analyst reported that the contents of the tin were mouldy, and unfit for human consumption. There was a leak in the tin. The Chief Public Health Inspector sent a letter of warning to the seller.
244	Chopped Chicken and Ham—containing foreign object.	Informal sample submitted for analysis following complaint. The Public Analyst reported that the sample contained a piece of metal. The Chief Public Health Inspector sent a letter of warning to the manufacturers.
245	Meat Pie—containing mouldy growth.	Informal sample submitted for analysis following complaint. The Public Analyst reported that the sample was mouldy. The Town Clerk was instructed to send a letter of warning to the seller.
246	Sliced Loaf—containing foreign matter.	Informal sample submitted for analysis following complaint. The Public Analyst reported that the sample contained disinfectant. It was suspected that the bread may have been in contact with a similar kind of disinfectant found at the complainant's house. No further action necessary.
247	Plain Teacake—containing foreign matter.	Informal sample submitted for analysis following complaint. The Public Analyst reported that the sample contained hard dough coloured with iron oxide. The Chief Public Health Inspector sent a letter of warning.
248	Crumpets—containing mouldy growth.	Informal sample submitted for analysis following complaint. The Public Analyst reported that the sample was mouldy and unfit for human consumption. The facts were reported to the Health Committee, who authorised legal proceedings. The case was heard at the Halifax Magistrates' Court on the 4th January, 1961. The case was found proved, and the Defendants fined £15 with £4 0s. 6d. costs.



TABLE 2—*continued*

No. of Sample	Nature of Sample and Result of Analysis, etc.	Administrative action taken
265	Cheese and Tomato Sandwich— containing foreign matter.	Informal sample submitted for analysis following complaint. The Public Analyst reported that the sample contained a piece of cobweb. The Chief Public Health Inspector sent a letter of warning to the seller.
269	Fine Oatmeal— containing foreign object.	Informal sample submitted for analysis following complaint. The Public Analyst reported that the sample contained rodent droppings. The facts were reported to the Health Committee, who authorised legal proceedings. The case was heard at the Halifax Magistrates' Court on the 8th February 1961, and a plea of not guilty was entered. The case was, however, found proved, and the Defendants were fined £25 with costs of £5 7s. 10d.
270	Bread— containing foreign object.	Informal sample submitted for analysis following complaint. The Public Analyst reported that the sample contained part of a fly. The Chief Public Health Inspector sent a letter of warning to the manufacturer.
305	Tinned Peas— containing foreign object.	Informal sample submitted for analysis following complaint. The Public Analyst reported that the sample contained a piece of coke. The Chief Public Health Inspector sent a letter of warning to the manufacturer.
343	Vinegar— containing foreign matter.	Informal sample submitted for analysis following complaint. The Public Analyst reported that the sample contained paraffin. The matter was reported to the Health Committee who authorised the Town Clerk to send a letter of warning to the seller.
344	Chocolate Tree Decorations— containing foreign objects.	Informal sample submitted for analysis following complaint. The Public Analyst reported that the sample contained webbing and other traces of chrysalis and caterpillar. The Chief Public Health Inspector sent letters of warning to the seller and manufacturer.

**TABLE 3**  
**Monthly Average Composition of Milk Samples**

Month	No. of Samples	Milk Fat per cent.	Non-fatty Solids per cent.	Channel Islands and South Devon Milk		
				No. of Samples	Milk Fat per cent.	Non-fatty Solids per cent.
January ..	—	—	—	—	—	—
February ..	6	3.74	8.70	1	4.45	8.96
March ..	6	3.72	9.80	—	—	—
April ..	11	3.79	8.88	—	—	—
May ..	22	3.69	8.80	—	—	—
June ..	22	3.80	8.87	—	—	—
July ..	6	3.73	8.77	—	—	—
August ..	9	3.75	8.94	1	5.80	9.79
September ..	7	3.83	8.97	—	—	—
October ..	7	3.93	8.84	4	5.45	9.30
November ..	19	3.92	8.31	—	—	—
December ..	—	—	—	—	—	—
Total ..	115			6		
Average for year 1960		3.80	8.90		5.34	9.14
" " " 1959		3.72	8.68		4.85	9.10
" " " 1958		3.73	8.69		5.21	9.32
" " " 1957		3.81	8.74		5.13	9.40
" " " 1956		3.67	8.58		—	—
" " " 1955		3.67	8.79		—	—
" " " 1954		3.80	8.71		—	—
" " " 1953		3.68	8.78		—	—
" " " 1952		3.67	8.78		—	—
" " " 1951		3.72	8.73		—	—
" " " 1950		3.66	8.75		—	—

The figures given in the third and fourth columns of the above table represent the average milk fat and non-fatty solids in the 115 chemical milk samples of Tuberculin Tested (Farm Produced), Tuberculin Tested (Pasteurised), Pasteurised and Sterilised milk taken during the year. The presumptive standards are 3.0 per cent. and 8.5 per cent., respectively, as laid down by the sale of Milk Regulations, 1939.

Similarly, the monthly averages relative to the 6 samples of Channel Islands milk are given. The legal standard is 4.0 per cent. by weight of milk fat, as laid down by the Milk and Dairies (Channel Islands and South Devon Milk) Regulations, 1956, with a presumptive standard of 8.5 per cent. of non-fatty solids.

## **MILK AND DAIRIES**

*Milk and Dairies (General) Regulations, 1959.*

*Milk (Special Designation) (Raw Milk) Regulations, 1949 to 1954.*

*Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949 to 1953.*

## **Milk Distribution**

At the end of the year there were 317 registered distributors of milk (excluding dairy farmers) within the Borough, and there were 14 registered dairy premises.



Licences under the Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949, and the Milk (Special Designation) (Raw Milk) Regulations, 1949, were granted as follows:—

Pasteurised Milk—Pasteuriser's Licence	...	...	1
Pasteurised Milk—Dealers' Licences	...	...	70
Pasteurised Milk—Supplementary Licences	...	...	14
Sterilised Milk—Dealers' Licences	...	...	209
Sterilised Milk—Supplementary Licences	...	...	4
Tuberculin Tested Milk—Dealers' Licences	...	...	71
Tuberculin Tested Milk—Supplementary Licences	...	...	9

### Bacteriological Examination of Milk

During the year 55 samples of milk—as shown below—were submitted to bacteriological examination.

Designation	Samples taken	Satisfactory	Unsatisfactory
Pasteurised .. .. .	45	45	—
Pasteurised (Channel Islands)	1	1	—
T.T. (Pasteurised) .. .. .	7	7	—
Sterilised .. .. .	2	2	—
TOTAL .. .. .	55	55	—

### Biological Examination of Milk

Twelve samples of milk were submitted to biological examination by the Public Health Laboratory Service. Of these samples, 11 were of milk produced within the borough and 1 of milk produced outside the borough. Nine samples were reported as negative, whilst in the other three cases the guinea pigs died of intercurrent infection before the tests were completed.

### Brucella abortus

Particulars are given, in the following table, of the 28 samples submitted to the Public Health Laboratory Service for examination for *Brucella abortus*:—

Produced	No. of samples	Satisfactory	Positive on culture
In Borough .. .. .	25	17	8
Outside of Borough ..	3	2	1
TOTAL .. .. .	28	19	9



## Manufacture and/or Sale of Ice Cream

*Food and Drugs Act, 1955. Section 16.*

*Ice Cream (Heat Treatment, etc.) Regulations, 1959.*

Ice cream, like milk, is a food which is easily contaminated, and there are Regulations which require the ice cream mix to be heated to a specified temperature for a given time. In other words, it has to be pasteurised so that harmful bacteria may be killed or be prevented from multiplying. The heated mix must then be cooled to a certain temperature, and during storage must be kept below regulation temperatures. Apart from these safeguards, it is necessary for a high standard of cleanliness to be maintained throughout the whole process, and experience has shown that this can only be achieved by systematic and regular cleansing of all machines, pipe-lines, valves, etc.

Apart from visual inspection and microscopical examination, it is possible to use the bacteriological examination of ice cream to indicate its cleanliness and purity.

During the year 42 inspections were made of 438 registered premises:—

Manufacturers	...	...	...	...	...	1
Vendors only	...	...	...	...	...	437

A total of 57 samples was submitted to bacteriological examination by the Methylene blue reduction test, particulars of which are given in the following Table:—

Produced	No. of Samples	Grade 1 Highly Satisfactory	Grade 2 Satisfactory	Grade 3 Unsatisfactory	Grade 4 Very Unsatisfactory
In Borough	4	2 (50.00 %)	—	1 (25.00 %)	1 (25.00 %)
Outside of Borough	53	37 (69.81 %)	10 (18.87 %)	6 (11.32 %)	—
TOTAL	57	39 (68.42 %)	10 (17.55 %)	7 (12.28 %)	1 (1.75 %)

I am pleased to be able to report that all mobile vans and carts selling ice cream in this borough are so constructed as to comply with the Bye-laws made under Section 15 of the Food and Drugs Act, 1955, and the Food Hygiene Regulations, 1955, being equipped with means for providing hot water and washing of hands. Soap and towels are provided and, in addition, sterilising agents are available for the treatment of the servers. Twenty-seven vans, etc., were inspected by the department, prior to the granting of Street Traders' Licences by the Markets Department.



## **Preparation or Manufacture of Sausages, etc.**

*Food and Drugs Act, 1955. Section 16.*

At the end of the year there were 83 premises registered for the preparation or manufacture of sausages, potted, pressed, pickled or preserved foods.

## **Fried Fish Shops**

During the year 17 inspections were made of 63 premises. Improvements were effected in 5 cases.

## **Bakehouses**

The number of bakehouses on the register at the end of the year was 79.

There were 48 inspections made, and improvements were effected in 9 cases.

There is only one basement bakehouse now in use in the town, and a Certificate of Suitability—under the provisions of Section 54 of the Factories Act, 1957—was granted during the year.

## **Food Hygiene**

The new Food Hygiene (General) Regulations, 1960, came into force during the year, consolidating and amending the existing regulations. They lay down requirements in respect of:—

- (i) the cleanliness of premises, ships, stalls, vehicles, etc., used for the purposes of the food business and of apparatus and equipment used for those purposes;
- (ii) the hygienic handling of food;
- (iii) the cleanliness of persons engaged in the handling of food and of their clothing, and the action to be taken where they suffer from or are the carriers of certain infections liable to cause food poisoning;
- (iv) the construction of premises and ships used for the purposes of a food business and the repair and maintenance of such premises and ships and of stalls, vehicles, etc.;
- (v) sanitary conveniences and the provision of a water supply and washing facilities;
- (vi) the temperatures at which certain foods which are particularly liable to transmit disease are to be kept on catering premises.

In the Borough Market, all the meat stalls have now been provided with protective plate glass screens or have installed refrigerated show cases. Many other shops in the town have been refitted with improved counter fittings, wall and floor surfaces, and a steady improvement in the handling of food is discernible.

During the year 66 mobile food shops and vans have been inspected prior to a licence being issued by the Markets Depart-



ment. I am pleased to report that the owners of these mobile shops have co-operated wholeheartedly in attaining a high standard. Every mobile shop selling food in the borough has washing equipment, soap, towels and supply of hot water (where open food is sold for immediate consumption) as required by the Food Hygiene Regulations.

There are 1,022 food shops in the borough. The number and type of business is set out below:—

Grocers ... ..	347
Butchers ... ..	123
Fish and Fruit ... ..	120
Mixed ... ..	141
Sweets ... ..	55
Snack Bars ... ..	40
Cooked Meats ... ..	12
Fish Friers ... ..	67
Chemists ... ..	39
Confectioners ... ..	78

and visits to food premises numbered 467.

### Meat Inspection

The Ministry of Agriculture's attestation scheme was completed during the year and from the 1st October, the whole of England, Scotland and Wales became fully attested. The success of this scheme can be judged from the following figures:—

	Oct. 1—Dec. 31 1959	Oct. 1—Dec. 31 1960
Cattle affected with Tuberculosis	157	4

Apart from a few cases of avian type tuberculosis found in pigs—this type being non-communicable to man—tuberculosis in food animals has virtually disappeared.

Swine fever was a disease “in the news” during the year and, because of its increased incidence, the Ministry considered it necessary to re-introduce legislation to control movement of pigs.

Farmers are only too well aware of the damage caused by the disease and, usually, promptly seek veterinary advice, but occasionally infected pigs reach the abattoirs and one such incident was dealt with at our abattoir. This involved nine pigs and was of the chronic type, the pigs being unthrifty, emaciated, having the typical bowel damage and caecal ulceration. Fortunately these animals had been delivered straight into the killing pens, otherwise extensive cleansing and sterilisation of the lairage would have been necessary.

Another newsworthy disease—foot and mouth disease—although not actually found in the abattoir, caused us a good deal of anxiety, and the Markets Department a great amount of extra work.



On two occasions we had contact cattle in the abattoir and, as a result of pressure from the Ministry, the butchers were "persuaded" to kill up at short notice, followed by an intensive clean-up by the Markets Department.

Whilst one can see the Ministry's object in asking for this to be done, cattle—possibly infectious—passing through the abattoir and infecting it, but being slaughtered before showing signs of the disease, with a possibility of cattle becoming infected at a later date owing to the very short incubation period of 3—5 days; one must also sympathise with the butchers, who are required to slaughter cattle when it is uneconomical to do so and who receive no compensation. Similarly, the local authority is put to considerable expense for which there is no recompense.

During the year, the Slaughterhouse Hygiene Regulations came into operation, in part, and the Markets Committee have carried out most of the necessary work. Other work is planned to enable the whole of the Regulations to be operated at an early date. Work carried out, or planned, includes additional toilet accommodation, steriliser for wiping-cloths and knives, wash-basins in slaughter-halls, detention cage and condemned meat and offal cages, rooms for emptying bellies and intestines, isolating lairage accommodation, additional feeding troughs, hayracks and water bowls. It can also be reported that, on the whole, excellent co-operation has been received from all persons working in the abattoir in respect of the wearing of clean overalls and head coverings and in respect of smoking.

The Markets Committee purchased a steam cleaner, which has been of great benefit in keeping clean the walls and equipment at the abattoir.

A complaint from a member of the public regarding maggots in bacon resulted in the local branch of a national grocery organisation being fined £150 and costs, in the magistrates' court, a plea of guilty having been entered.

There are now two poultry packing establishments in the borough, one alone of which deals with over ten thousand birds per week. Although the premises are visited from time to time, with present staff commitments it is impossible to inspect the carcasses daily.

Throughout the year numerous specimens for examination have been submitted to the Pathological Laboratory at the Royal Halifax Infirmary, and sincere thanks are extended to Dr. Phelon and his staff for their continued courtesy and co-operation.

### **Exchequer Grant Towards Meat Inspection**

To assist those local authorities on which the cost of inspecting meat imposes an unduly heavy burden because much of the meat inspected is not for local consumption, the Ministry of Agriculture, Fisheries and Food instituted a grant system in 1957.



For this purpose, the total slaughterings have been converted to "inspection units", which take account of the different times needed for inspection. One cattle beast has been regarded as ten units, one calf or one pig as three units and one sheep as two units. A per capita figure (1.5) multiplied by the population of any local authority area, is the datum figure for that authority, *i.e.*, the minimum number of inspection units the authority should be prepared to inspect at its own expense.

The number of inspection units for the financial year 1959-60 was 219,302, and the sum of £320 2s. 8d. was claimed.

### Carcases Inspected and Condemned

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

	Public Abattoir					
	Cattle excluding Cows	Cows	Calves	Sheep and Lambs	Pigs	Horses
Number killed .. .. .	4,547	6,871	1,094	37,202	12,009	—
Number inspected .. .. .	4,547	6,871	1,094	37,202	12,009	—
ALL DISEASES EXCEPT T.B. & CYSTICERCI						
Whole carcases condemned .. .. .	5	23	7	29	38	—
Carcases of which some part or organ was condemned .. .. .	536	766	20	1,027	659	—
Percentage of the number inspected affected with disease other than T.B. and cysticerci ..	11.9	11.5	2.5	2.8	5.8	—
TUBERCULOSIS ONLY .. .. .						
Whole carcases condemned .. .. .	1	5	—	—	1	—
Carcases of which some part or organ was condemned .. .. .	85	211	—	—	51	—
Percentage of the number inspected affected with Tuberculosis .. .. .	1.9	3.1	—	—	0.4	—
CYSTICERCOSIS						
Carcases of which some part or organ was condemned .. .. .	17	10	—	—	—	—
Carcases submitted to treatment by refrigeration generalised and totally condemned .. .. .	—	—	—	—	—	—

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

	lbs.
Total amount of Meat destroyed .. .. .	23,338
Total amount of offals destroyed .. .. .	37,050
Total amount of Meat destroyed on account of Tuberculosis .. .. .	3,382
Total amount of Offals destroyed on account of Tuberculosis .. .. .	7,985
Total amount of Meat destroyed from other causes .. .. .	19,956
Total amount of Offals destroyed from other causes .. .. .	29,065
Total Meat and Offals destroyed .. .. .	60,388



## Food Inspection

The following Table shows the amount of foods condemned:—

Food Condemned	Quantity in lbs.
34 Carcases of Beef .. .. .	15,300
Beef not in carcase .. .. .	1,721
7 Carcases of Veal .. .. .	197
29 Carcases of Mutton .. .. .	894
39 Carcases of Pork .. .. .	4,214
Pork not in carcase .. .. .	1,012
Offals .. .. .	37,050
Bacon and Ham .. .. .	220
Canned Food .. .. .	4,743
Cereals .. .. .	28
Dried Fruit .. .. .	40
Fish .. .. .	394
Fruit .. .. .	160
Imported Meat and Offal .. .. .	214
Lard .. .. .	28
Poultry .. .. .	16
Sausages .. .. .	15
Vegetables .. .. .	6,464
Total Weight .. .. .	72,710

## Disposal of Condemned Food

Diseased carcase meat and offal are disposed of to a firm at Kirkhamgate, where it is sterilised before manufacturing into fertiliser. The plant is subject to inspection by the public health inspector of the district, whose report is satisfactory. The condemned meat is transported in vehicles complying with the Meat (Staining and Sterilization) Regulations, 1960.

All other condemned food is disposed of by controlled tipping on the Corporation tips.

## Water Supplies

During the year, 26 samples of water were taken, mainly from houses with private supplies in outlying areas. In 11 of the cases, the samples were taken in connection with applications for Improvement or Standard Grants.

Six of the samples were satisfactory; 7 not wholly satisfactory, and 8 were reported as not safe for human consumption.

Steps were taken to trace the sources of pollution. Filters were put on one supply and another supply was dispensed with following connection to the town's mains.

### PROSECUTIONS DURING 1960

Date of Hearing	Act	Offence	Penalty
19/1/60	Food & Drugs Act, 1955, Section 32 (3)	Offering for sale milk to which had been added at least 24.2 % extraneous water	Defendants (partners) fined £5 each—total £10—with £11 17s. 0d. costs
16/3/60	Food & Drugs Act, 1955, Section 2	Selling food not of the substance demanded. (Toffee lollipop containing piece of glass).	Defendants fined £10, with £2 10s. 0d. costs
15/6/60	Food & Drugs Act, 1955, Section 2.	Selling food not of the substance demanded. (Loaf containing part of beetle).	Defendants fined £10, with £2 10s. 0d. costs
17/8/60 adj'd. from 29/7/60	Food & Drugs Act, 1955, Section 8 (1)	Selling Cornish pasties unfit for human consumption	Defendants fined £25, with £2 10s. 0d. costs
28/9/60	Food & Drugs Act, 1955, Section 2	Selling food not of the substance demanded. (Fly in slice of bread)	Defendants fined £25, with £3 18s. 0d. costs
7/12/60	Food & Drugs Act, 1955, Section 8 (1)	(a) Selling bacon unfit for human consumption; (b) Exposing for sale bacon unfit for human consumption; (c) Being in possession, for the purpose of sale, of bacon unfit for human consumption.	Defendants fined £50 in respect of each offence (total £150).



## Factories

H.M. Inspector of Factories sent 29 notices (comprising 43 items) under Section 9 of the Factories Act, 1937. In addition there were 25 complaints (36 items) brought forward from 1959.

Of these, 26 complaints (33 items) were remedied during the year, and 28 complaints (46 items) from H.M. Inspector of Factories were outstanding at the end of the year.

The Public Health Inspectors found and remedied 78 other defects.

There were 9 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 and 6 are to be enforced by Local Authorities .. .. .	19	4	6	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authorities .. .. .	705	160	58	—
(iii) Other premises in which Section 7 is enforced by the Local Authority* (excluding outworkers' premises) .. .. .	6	42	—	—
<b>TOTAL .. .. .</b>	<b>730</b>	<b>206</b>	<b>64</b>	<b>—</b>

\*i.e., Electrical Stations (S.103) (1), Institutions (S.104) and sites of Building Operations and Works of Engineering Construction (Sections 107 and 108).

**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)	1	3	—	1	—
Overcrowding (S.2) ..	—	—	—	—	—
Unreasonable temperature (S.3) .. ..	—	—	—	—	—
Inadequate Ventilation (S.4)	—	—	—	—	—
Ineffective drainage of floors (S.6) .. ..	—	—	—	—	—
Sanitary Conveniences (S.7)—					
(a) Insufficient ..	8	9	—	1	—
(b) Unsuitable or defective ..	65	88	—	27	—
(c) Not separate for sexes .. ..	4	4	—	—	—
Other offences against the Act (not including offences relating to Outwork) ..	—	—	—	—	—
TOTAL .. ..	78	104	—	29	—



## Rodent Control

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During the year 445 complaints of rats and 388 of mice were received, and treatments were carried out as shown below:—

	Rats	Mice	Total
Local Authority premises ...	82	127	209
Private Dwellinghouses ...	386	256	642
Corporation Houses ...	26	74	100
Private Business premises ...	206	411	617

It is estimated that 4,008 rats were killed.

No charge is made for the service to householders, but business premises are charged at a rate of 8/- per hour. Normal treatment (as recommended by the Ministry of Agriculture, Fisheries and Food) consists of two or three pre-baits, followed by poisoning, or the use of a blood anti-coagulant, in which case there is no pre-baiting, the poison-baits being "topped up" until there are no more "takes".

No treatment of the town's sewers was made by the Borough Engineer's Department during the year, due to manpower shortage.

One meeting of the Workable Area Committee No. 4, of the Ministry of Agriculture, Fisheries and Food, was held in Halifax during the year. At this meeting representatives of the Ministry discussed with local authorities' representatives the difficulties met with and new poisons available for insect, pest and rodent control.

A joint meeting of representatives of each of the five Workable Area Committees in Yorkshire was held in Leeds towards the end of the year. This meeting was convened by the Ministry of Agriculture, Fisheries and Food to co-ordinate work done in each area.

# Clean Air

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## Smoke Control Areas

### No. 1 Area

The volumetric gauge in this area showed that for the months of January, February and March, 1960, there was an average daily reduction of 37% in the amount of smoke in the atmosphere as compared with the same period in 1959, before the area became smoke controlled.

At the same time there was a 20% reduction in sulphur pollution.

In January, 1960,—compared with January, 1959—there was an average daily reduction of 49% smoke and 36% sulphur dioxide.

A sum of £307 8s. 7d. was repaid to applicants in respect of adaptations to fireplaces in private dwellinghouses within the area, the total amount so far repaid being £1,051 17s. 3d.

### No. 2 (Mixenden) Area

Consequent upon the receipt of objections to the confirmation of the Halifax (No. 2) Mixenden Smoke Control Order, the Minister of Housing and Local Government caused a local enquiry to be held on the 9th March, 1960.

Having received the report of his Inspector, Mr. H. C. Harris, F.R.I.C.S., and after consideration of the the circumstances, the Minister decided to confirm the Order, subject to the following modifications:—

(a) The date of operation of the Order shall be postponed until 1st September, 1961, in order to allow time for works of conversion;

(b) Kindling sticks and paper or chemical firelighters are to be exempted for the lighting of fires but only in those houses without a gas supply;

(c) The exemption from the operation of the Order of Nos. 1—11, Jumpsles Crag (dwellings which are due for demolition under the Council's housing clearance programme).

Mobile exhibition vans, provided by the Solid Smokeless Fuels Federation, the Yorkshire Electricity Board and the North Eastern Gas Board, visited the area for a period of one week each during January and the exhibitions were well attended despite inclement weather.



### **No. 3 (Norton Tower) Area**

The Council decided that an area at Norton Tower—bounded on the south side by Newlands Road, and the east side by the Boundary wall of Norton Tower and the gardens of existing dwellings in Roils Head Road, to the north by the moorland near the Roils Head Reservoir, and on the west by a cart road and the western boundary wall of agricultural land (marked on the map as field 997), should be the third area.

The land is undeveloped at present, but has been zoned by the Town Planning Department for residential purposes.

An estimated amount of 960 tons of smokeless fuel will be required plus a small amount of gas or electricity.

The decision in principle was confirmed by the Minister and on the 7th September, 1960, the Council made a Smoke Control Order. There will be no cost for the Local Authority or the Exchequer.

The Order was confirmed by the Minister—without modification—on the 22nd November, 1960, and will come into operation on the 1st June, 1961.

### **No. 4 (Savile Park and Skircoat) Area**

This smoke control area comprises an area bounded by Fountain Street, Wards' End and Horton Street on the north; on the east by Union Street South, Hunger Hill, Shay Syke and the western embankment of the railway line; on the south by Haigh Lane, Dryclough Lane and Skircoat Moor Road, and on the west by Savile Park, Savile Park Road and Bull Close Lane.

In the area are 2,100 premises, including 1,811 dwellings, 182 commercial premises, 30 industrial premises and 77 other buildings.

The decision in principle of the Council regarding this area was approved by the Minister and a detailed survey of the premises in the area was undertaken.

No. 6 Clare Road—a house within the area—was in use as a demonstration house, to show how fireplaces are converted and to demonstrate the use of smokeless fuels, during the period 25th November to 10th December. There were over 2,000 visitors to the exhibition.

A smoke filter was installed at Heath Grammar School, within the area, and daily readings have been recorded by the students—on behalf of the department—since 1st November, 1960.

### **No. 5 (Wheatley Valley) Area**

This area is bounded by Shroggs Road, Wheatley Road and Crag Lane on the north; by the railway embankment on the west and south, and on the east by Brackenbed Lane and Hebble Lane.



In the area are 225 premises, including 206 dwellings (17 of which are scheduled for demolition in 1963 and will not be included in the Order); 4 industrial premises; 7 commercial premises and 8 other buildings.

The Minister of Housing and Local Government gave provisional clearance to the Council's proposals for this area and a detailed survey of the premises in the area was commenced.

## **General**

### **Industrial Smoke**

The number of smoke observations made during the year was 412.

Visits to works—some in connection with smoke emission—numbered 80, and boiler plants were improved to reduce smoke emission in 9 cases. The majority of cases of smoke emission were found to be due to old types of stokers, difficult to handle.

There were three applications to the Council requesting prior approval of new furnaces, and in each case approval was granted.

In accordance with Section 10 of the Clean Air Act, 1956, 3 plans showing the proposed construction of new industrial chimneys—were examined. Two of the chimneys were considered to be of adequate height, whilst, in the third case, arrangements were made to connect the new flue into an existing chimney, as the site of the proposed new chimney was considered to be unsuitable, having regard to the proximity of existing buildings.

### **Railway Engines**

Shunting operations in Halifax are now carried out smokelessly. Since October, 1960, three diesel shunters have replaced the steam engines formerly used for this purpose.

It is anticipated that by the end of next year all the regular passenger services from Halifax will be diesel-operated.



TABLE 1—DEPOSITED ATMOSPHERIC POLLUTION, 1960

Month	WADE STREET (Central)				BELLE VUE PARK ( $\frac{1}{4}$ -mile West)				AKROYD PARK ( $\frac{1}{2}$ -mile North)				INFIRMARY ( $\frac{1}{2}$ -mile South)				WEST VIEW PARK ( $1\frac{1}{2}$ 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	5.52	8.78	10.81	19.59	5.40	6.09	8.79	14.88	6.03	5.73	8.40	14.13	4.81	4.88	7.61	12.49	5.59	6.29	7.88	14.17
February	0.75	4.62	2.44	7.06	2.48	7.87	6.35	14.22	2.56	6.31	5.35	11.66	2.37	6.67	5.03	11.70	3.51	12.91	6.93	19.84
March	1.85	13.91	11.66	25.57	1.77	8.10	7.11	15.21	1.77	6.69	4.57	11.26	1.66	7.60	6.97	14.57	1.97	12.11	10.81	22.92
April	1.81	9.56	8.36	17.92	1.97	6.68	7.34	13.92	1.69	11.50	6.21	17.71	1.77	5.69	6.32	12.01	1.93	4.85	5.01	9.86
May	1.77	11.82	9.77	21.59	1.85	7.60	5.53	13.13	*	*	*	*	1.73	8.62	4.71	13.33	1.93	11.04	6.18	17.22
June	0.75	13.87	4.38	18.25	0.79	8.61	4.02	12.63	*	*	*	*	0.71	8.21	3.48	11.69	1.06	9.62	4.13	13.75
July	4.53	9.71	7.83	17.54	4.85	4.58	7.19	11.77	*	*	*	*	4.61	4.64	6.23	10.87	*	*	*	*
August	4.69	8.75	8.04	16.79	5.05	4.95	6.23	11.18	*	*	*	*	4.73	4.93	6.12	11.05	5.28	5.04	11.70	16.74
September	2.60	8.09	5.43	13.52	2.84	4.04	4.78	8.82	1.81	3.48	3.53	7.01	2.64	3.78	4.19	7.97	2.92	4.08	5.69	9.77
October	5.59	12.21	11.03	23.24	5.48	6.93	7.58	14.51	5.59	5.92	6.46	12.38	5.09	7.19	7.01	14.20	*	*	*	*
November	5.67	9.18	11.72	20.90	5.87	4.98	9.07	14.05	6.11	7.26	11.09	18.35	5.21	5.32	7.11	12.43	5.80	4.23	9.39	13.62
December	3.94	8.84	9.54	18.38	3.82	6.29	7.90	14.19	*	*	*	*	3.78	5.52	6.45	11.97	3.90	6.31	5.56	11.87
Aggregates	39.471	19.341	01.012	20.35	42.177	6.72	81.791	58.51	25.56	46.89	45.61	92.50	39.11	73.05	71.231	44.28	33.89	76.48	73.281	49.76
MONTHLY AVERAGES	3.29	9.95	8.42	18.36	3.51	6.39	6.82	13.21	3.65	6.98	6.52	13.21	3.26	6.09	5.94	12.02	3.39	7.65	7.33	14.98

\* Records spoilt by unlawful interference

Monthly average for Borough:—

Rainfall in inches ... 3.42  
 Insoluble Solids ... 7.41 tons per square mile  
 Soluble Solids ... 7.00  
 Total Solids ... 14.36

Total Annual Deposit for whole Borough = 153.08 tons per square mile

**Total Annual Deposit for the whole Borough for  
the past ten years**

						Tons per square mile
1960	...	...	...	...	...	153.08
1959	...	...	...	...	...	159.84
1958	...	...	...	...	...	166.16
1957	...	...	...	...	...	163.86
1956	...	...	...	...	...	172.08
1955	...	...	...	...	...	159.36
1954	...	...	...	...	...	186.59
1953	...	...	...	...	...	154.33
1952	...	...	...	...	...	171.30
1951	...	...	...	...	...	185.04

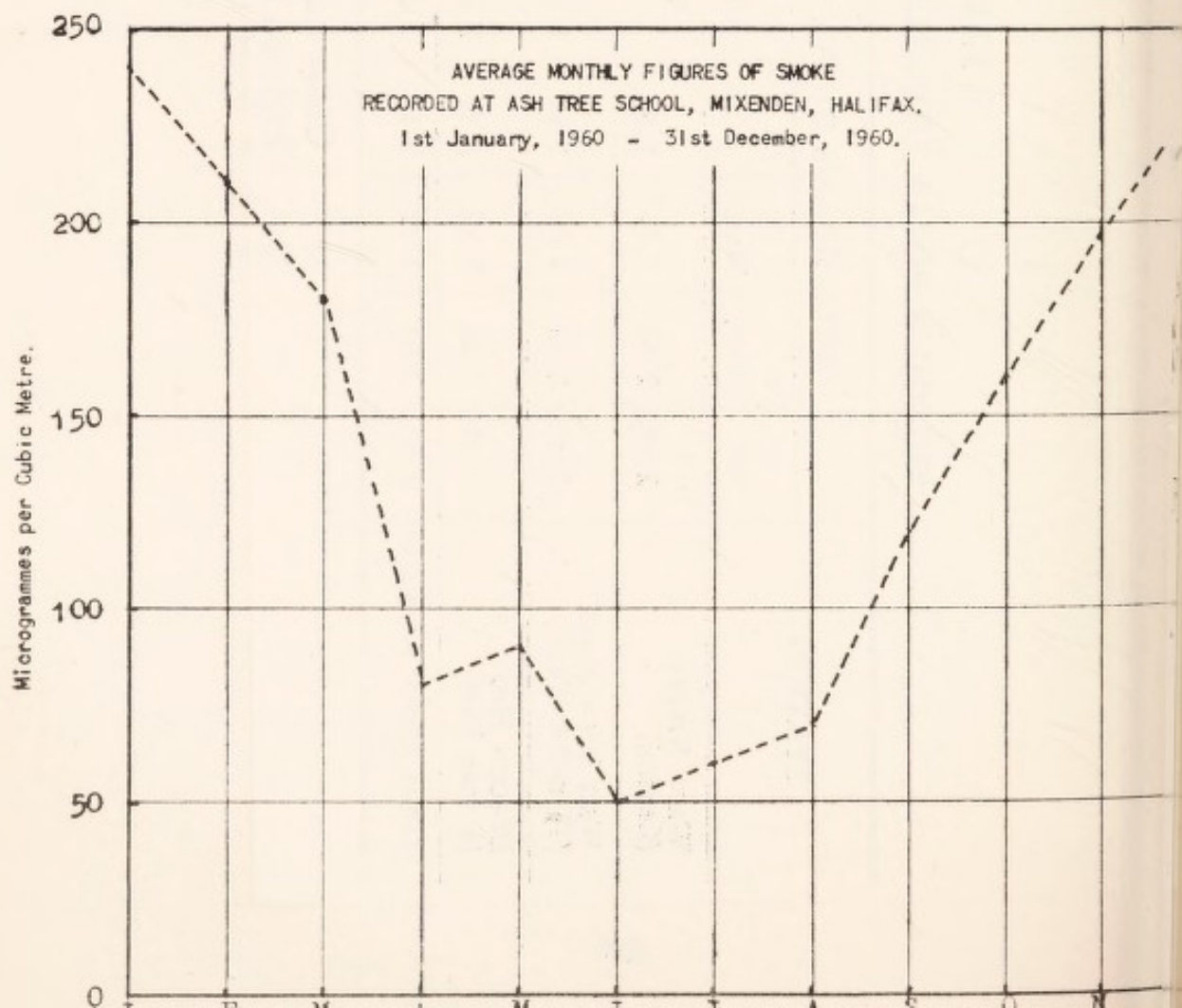
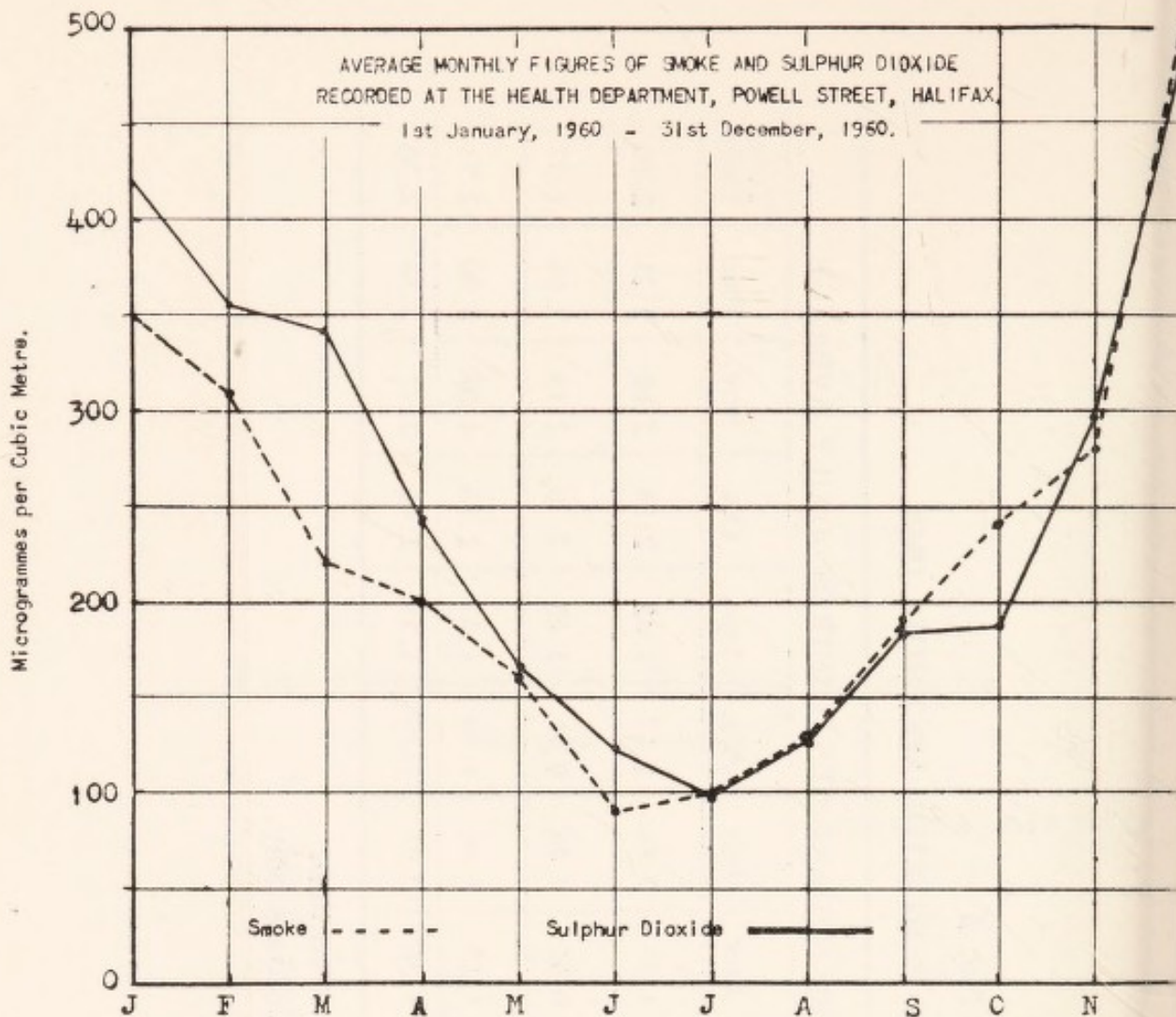


**TABLE No. 2**  
**SULPHUR POLLUTION—LEAD PEROXIDE METHOD, 1960**

STATION	MILLIGRAMS OF SO <sub>3</sub> per 100 SQUARE CENTIMETRES—DAILY AVERAGE											
	Jan.	Feb.	March	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
WADE STREET (Central) .. ..	2.39	2.64	3.06	1.94	† —	* 1.33	0.86	1.17	1.42	2.34	2.69	3.21
WEST VIEW PARK (1½ miles West) ..	2.60	2.59	4.05	1.68	1.86	0.96	0.46	0.81	1.40	2.70	2.13	2.58
BEACON HILL (½ mile East) ..	3.54	3.60	2.84	2.78	2.18	1.85	1.40	1.58	1.83	2.16	4.09	4.90
TOTAL DAILY AVERAGES	2.91	2.94	3.32	3.13	2.02	1.38	0.91	1.19	1.55	2.40	2.97	3.58
												2.20

† Guage not in operation.

\* Exposed for 28 days only.





**General Summary of Meteorological Observations taken at the Central Public Library, Belle Vue, Halifax, from January 1st to December 31st, 1960.**

Prepared by Mr. F. C. Pritchard, F.L.A., Chief Librarian.

Latitude of Station: 53° 43' N.

Longitude: 1° 52' W.

Altitude 625 feet (Barometer 632 feet).

1960  MONTH	Barometer		Air Temperatures						Mean Temperature		Relative Humidity	Vapour Pressure	Mean Reading of Thermometers			Wind										Mean Amount of Cloud	Rainfall		
	Mean at 32°F. and Sea Level	Range	Maximum	Minimum	Range	Mean			Air	Dew Point			Maximum in sun's rays	Minimum on grass	Earth 4 feet Down	Estimated Strength	Relative Proportion										No. of Raindays	Amount collected	
						Maxima	Minima	Range									N.	N.E.	E.	S.E.	S.	S.W.	W.	N.W.	Calms				
	ins.	ins.	°F	°F	°F	°F	°F	°F	°F	°F	%	Mb.	°F	°F	°F												Oktas		ins.
January ..	29.952	1.362	53.6	24.5	29.1	41.7	34.1	7.6	37.9	34	88	6.8	52.6	31.7	44	3	1	8	7	4	0	7	2	14	4	6	19	5.30	
February ..	29.714	1.722	60.6	24.1	36.5	42.2	33.3	8.9	37.7	34	82	6.7	67.8	30.4	42	3	0	14	1	6	0	8	1	12	3	6	21	2.54	
March ..	29.912	1.050	55.2	29.9	25.3	45.2	36.7	8.5	40.9	35	80	7.0	63.0	35.1	42	3	0	13	11	20	1	3	0	1	0	7	16	1.84	
April ..	30.058	0.737	61.4	29.3	32.1	54.5	40.8	13.7	47.6	39	68	8.0	92.1	37.6	45	4	0	10	0	6	0	13	0	16	0	5	16	1.84	
May ..	30.076	0.648	72.8	34.4	38.4	60.9	45.9	15.0	53.4	46	68	10.3	100.7	43.0	49	3	1	12	5	12	0	15	0	4	0	5	10	1.80	
June ..	30.062	0.911	78.8	42.3	36.5	68.5	51.5	17.0	60.0	49	61	11.7	111.9	46.7	54	4	0	5	4	6	0	15	1	15	0	5	12	.85	
July ..	29.819	0.837	69.1	42.4	26.7	63.6	50.9	12.7	57.2	49	74	12.2	105.2	47.1	55	3	0	3	0	4	0	20	2	13	1	7	26	4.70	
August ..	29.848	0.514	72.0	44.4	27.6	63.8	51.4	12.4	57.6	49	72	12.2	104.0	47.3	56	3	0	10	0	8	0	13	1	17	0	6	24	4.88	
September ..	29.934	0.997	71.0	42.2	28.8	60.0	49.5	10.5	54.7	47	76	11.1	95.7	46.2	55	3	0	2	6	6	0	19	0	11	2	6	18	2.75	
October ..	29.678	0.856	62.8	34.7	28.1	53.0	45.3	7.7	49.2	46	86	10.4	72.6	42.9	52	3	1	9	5	16	0	6	0	9	1	6	24	5.96	
November ..	29.506	1.332	56.0	33.4	22.6	47.9	39.6	8.3	43.8	40	85	8.4	64.8	36.5	48	3	0	2	0	11	1	21	0	9	4	6	24	7.12	
December ..	29.742	1.047	50.1	26.1	24.0	42.5	34.1	8.4	38.3	35	87	7.1	51.4	31.3	45	2	0	6	0	2	0	14	1	14	7	6	19	3.88	
Annual Means	29.858	1.001	63.6	34.0	29.6	53.7	42.8	10.9	48.2	42	77	9.3	81.8	39.7	49	3	0	8	3	8	0	13	1	11	2	6	Total 229	Total 43.46	

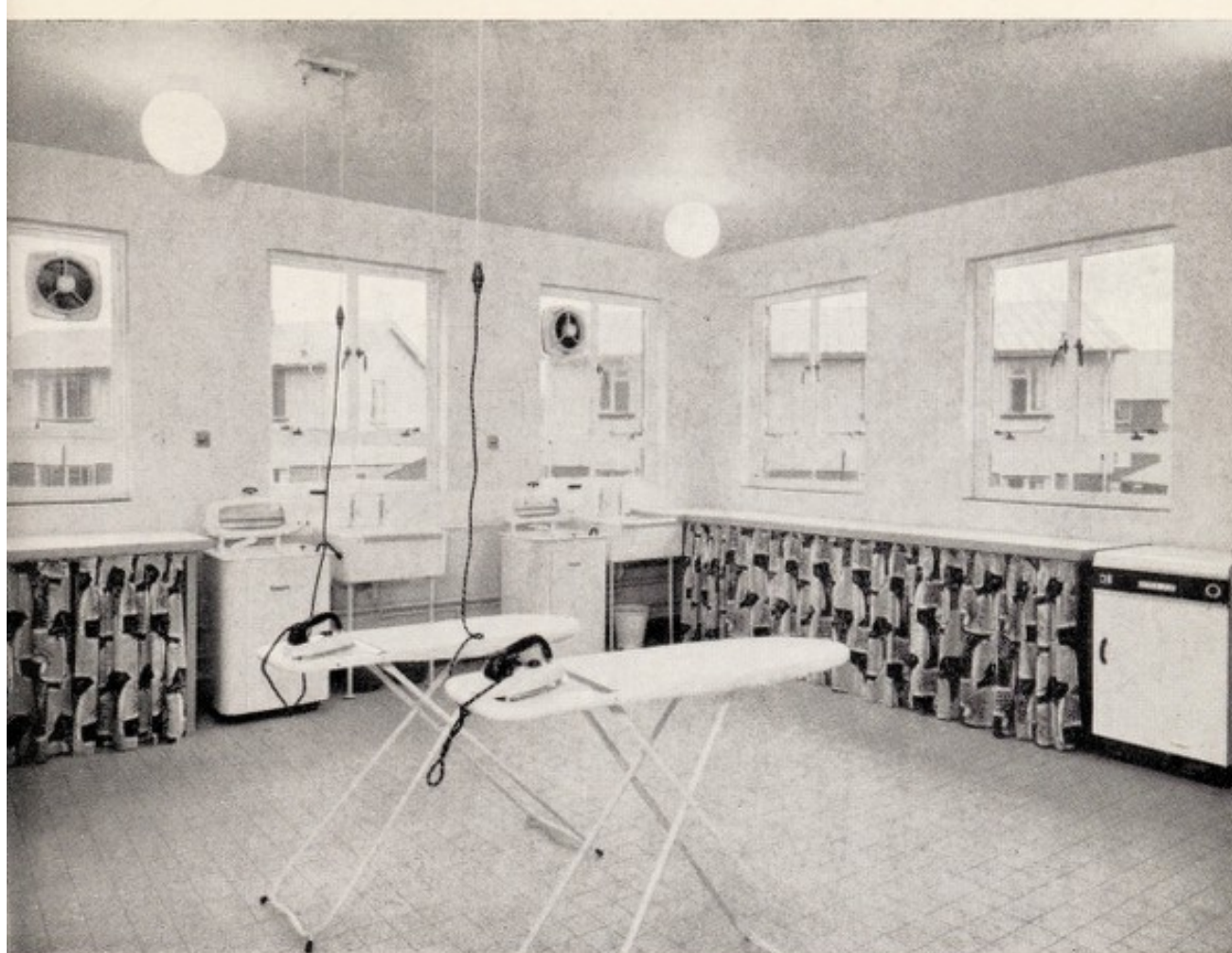












*Furness Park Training Centres, Illingworth*

