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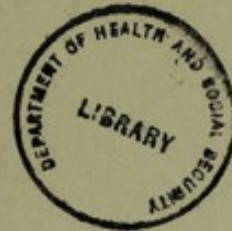


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COUNTY BOROUGH OF HALIFAX

Health Department



A N N U A L R E P O R T
on the Health of the Borough
for the Year 1973

V. R. RAO
B.Sc., M.B., B.S., D.P.H., F.R.S.H., M.F.C.M.
Acting Medical Officer of Health



HEALTH COMMITTEE

(as at 31st December, 1973)

STAFF ---ooOoo---

The Worshipful, The Mayor
Councillor R. TALBOT

---ooOoo---

Chairman: Alderman F. H. SWIRE

Vice Chairman: Councillor Dr. B. T. MANN

Councillor L. A. MITCHELL

Councillor A. E. NICHOLLS

Councillor J. BLACKBURN

Councillor G. WEBB

Councillor N. T. HOWE

Councillor A. OAKES

Councillor G. E. CHADWICK

Councillor J. E. SCHOFIELD

Councillor J. J. McGOWAN

Councillor J. THELWELL

---ooOoo---

SUB-COMMITTEES

Personal Health Sub-Committee

THE CHAIRMAN, THE VICE-CHAIRMAN,
Councillors MITCHELL, THELWELL, McGOWAN, OAKES, NICHOLLS and WEBB

Co-opted Members:

Mrs. J. GREENWOOD

Dr. B. M. ROSOVSKA

Mrs. M. HORNE

Mr. L. S. TAYLOR

There has been a great increase in the Family Planning Services in this area. The Health Committee accepted Scheme 2 of the Family Planning Association under which family planning advice and treatment was provided for

STAFF OF THE HEALTH DEPARTMENT

(as at 31st December, 1973)

---ooOoo---

Acting Medical Officer of Health

Dr. V. R. RAO, B.Sc., M.B., B.S., D.P.H., F.R.S.H., M.F.C.M

Chief Public Health Inspector

ARTHUR W. PERRY, M.R.S.H., F.A.P.H.I., D.P.A., Dip. San. Sc.

Deputy Chief Public Health Inspector:

JAMES E. BANKS

Senior Inspectors

G. A. WOODHEAD

A. LUM

D. W. WRIGHT

Public Health Inspectors

D. P. KAYE

N. HELLIWELL

J. F. BARRACLOUGH, D.M.A.

A. HARDWICK

R. COLLINGE

K. COE

J. M. RILEY

Technical Assistants 9

Director of Nursing Services

Miss S. M. GRAYSON, S.R.N., S.C.M., H.V.(Cert.)

Ambulance Officer:

Mr. W. FITTON

Obstetrician:

Mr. R. F. HEYS

Analyst:

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

Senior Admin. Officer (L.A.O.)

Mr. JOHN M. FLETCHER

ANNUAL REPORT 1973

To the Chairman and Members of the Council,

I have pleasure in presenting the Annual Report for 1973 to provide information concerning the state of Public Health of the County Borough of Halifax.

I would like to wish a happy retirement to Dr. J. G. Cairns, Medical Officer of Health for this County Borough for the last 15 years, who retired in October, 1973. I am most grateful to the Council for appointing me as Medical Officer of Health and Principal School Medical Officer.

The information relating to the vital statistics of this County Borough and England and Wales has not yet been received from the Registrar General and the following comments and information are from fairly accurate, locally compiled statistical data.

The estimated population of the Halifax County Borough for 1973 was 93,020 (90,320 in 1972), and it is evident that there was a slight increase in population in 1973.

The total number of live births in 1973 was 1,281 (1,368 in 1972). There was a decrease in the number of births in 1973. The live birth rate for 1973 was 13.77 (15.1 in 1972). These rates are unadjusted rates as the area comparability factor for 1973 is not yet available. These figures show that there was a decrease in the birth rate.

The infant mortality rate for 1973 was 19 (23 in 1972). This reduction in infant deaths in 1973 could be due to many factors. In 1973 the living conditions in Halifax improved considerably. More houses were improved under the 75% Improvement Grant Scheme and also more rate and rent rebates were given by the Council, giving more money to the people. The unemployment rate in 1973 was also very low, i.e. 1.5% (2.7% in 1972). The Health Visitors and other Domiciliary Nursing Staff were attached to all General Practitioners at the Frank Swire Health Centre, at the group practice premises and also to individual practices. This resulted in better infant care. The post-neonatal death rate in 1973 was 7.25 (10.96 in 1972) and this shows a decrease in this rate when compared to 1972.

The crude death rate for 1973 was 14.22 (15.1 in 1972). As the area comparability factor for 1973 is not yet available, the above comparisons are made on crude rates.

Health Centre planning programmes were very active in 1973. The new Frank Swire Health Centre is functioning extremely well and two dental surgeons are also accommodated at this centre. Proposals to build three more Health Centres have been approved by the Health Committee, and the locations of these centres will be at Laura Mitchell Clinic, St. John's Hospital site and at the site of Baldwin and Walker Mills, King Cross. Most of the family doctors in Halifax are very much interested to practise from Health Centres. The plans to convert the Laura Mitchell Clinic into a Health Centre were approved by the Department of Health but the project could not be started due to the economic crisis. It is hoped that the financial approval to build this centre will be given by the Government in the very near future.

There has been a great increase in the Family Planning Services in this Area. The Health Committee accepted Scheme 5 of the Family Planning Association under which family planning advice and treatment was provided for

social cases also. A Domiciliary Family Planning Case Worker was appointed under the Urban Aid Programme, and this officer contributed a great deal in encouraging mothers, especially of social classes 4 and 5, to avail themselves of the Family Planning Clinic Services and there was an excellent response.

Regarding fluoridation of the water supply, unfortunately, there is still opposition in this area although it is now well established that this procedure will reduce tooth decay in young children, and I hope the Council will seriously look into this matter again.

Health Education activities progressed extremely well in 1973. In view of the impending National Health Service Reorganisation, we were unable to appoint a Health Education Officer. However, Health Visitors have started small discussion groups with parents, during the infant welfare sessions, to discuss various aspects, including dangers of smoking during pregnancy, home accidents and all aspects of home safety.

Health Education Sessions for immigrant Asian mothers were also recently started, emphasis being made on nutrition and general hygiene to prevent such diseases as rickets and osteomalacia which are due to lack of vitamin D and calcium in the diet and also due to lack of exposure to sunshine. Immigrant mothers were encouraged to have their children immunised regularly and this experiment is proving to be highly successful.

Anti-smoking literature was widely publicised in Halifax.

The National Recall Scheme for Cervical Cytology was adopted in Halifax, in addition to the local scheme, which now screens mothers who are under 35 years of age.

The Annual Home Safety Meeting was held on the 13th February, 1973, at the Town Hall and the speaker on this occasion was Dr. M. Segal, Consultant Psychiatrist of Halifax. The subject discussed was "Playing it Safe" which mainly centred around drug safety. This meeting was followed by a drug collection campaign with the joint effort of hospitals, local health authorities of Halifax and Division 18 of the West Riding County Council, Pharmaceutical Society, and the Drug Squad. The campaign was a great success and a very large number of drugs were collected and destroyed.

Now the National Health Service is being reorganised, all the services now run by the Local Health Authority will be integrated with Hospital and Family Practitioner Services. An Area Medical Officer and three Specialists in Community Medicine will run this integrated service in Calderdale Area which is coterminous with the Calderdale District Council Area and I hope this new set up may further improve patient care services in the community and in hospitals.

Yours faithfully,

V. R. RAO

Acting Medical Officer of Health

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)	98,115
(Males 44,600. Females 53,515)										
Population (Census 1951)	98,376
(Males 45,487. Females 52,889)										
Population (Census 1961)	96,873
Population (Registrar General's Estimate 1967)	94,280
Population (Dec., 1973)	93,020
Density of population per acre	6.60
Number of inhabited houses (1931 Census)	28,488
Number of inhabited houses on 31st December, 1973	34,284
according to the Rate Books										
Average number of persons to each occupied house	2.71
Rateable Value (31st December, 1973)	£7,295,972
Sum represented by a Penny Rate (1973-74)	£69,200

EXTRACT FROM VITAL STATISTICS FOR THE YEAR

	Male	Female	Total
Live Births	660	621	1,281
Live Birth Rate per 1,000 Estimated Resident Population:			
Crude	..	..	13.77
Adjusted	..	..	15.28
Stillbirths	4	11	15
Stillbirth Rate per 1,000 Live and Stillbirths	..	..	11
Total Live and Stillbirths	..	..	1,296
Deaths of Infants:-			
Under 1 year of age	16	9	25
Infant Mortality Rate:-			
Total Infant Deaths per 1,000 total live births	..	..	19
Deaths of Infants:-			
Under 4 weeks of age	12	4	16
Neo-Natal Mortality Rate per 1,000 total live births	..	..	12
Deaths of Infants:-			
Under the age of 1 week	11	4	15
Early Neo-Natal Mortality Rate per 1,000 total live births	..	..	11
Perinatal Mortality Rate (stillbirths and deaths under one week combined per 1,000 total live and stillbirths)	..	..	23

EXTRACT FROM VITAL STATISTICS FOR THE YEAR (Cont.)

	Male	Female	Total
TOTAL DEATHS (all ages)	604	708	1,320
(Total includes 8 inward transfers for December which have not yet been received from the Registrar General therefore the sex is not yet known.)			

Death Rate per 1,000 Estimated Resident Population:-

Crude	14.22
Adjusted	12.65
Area Comparability Factors - Births	1.11
Deaths .. .. .	.89

The Population of the Borough as at 31st December 1973 was 93,020.

BIRTH RATES, 1964-73

HALIFAX		
Years	No. of Births	Birth Rate per 1,000 Population
1964	1,752	18.35
1965	1,662	17.57
1966	1,679	17.68
1967	1,685	17.80
1968	1,615	17.10
1969	1,627	17.4
1970	1,650	17.7
1971	1,551	17.0
1972	1,368	15.1
1973	1,281	14.18

DEATH RATES, 1964-73

HALIFAX		
Year	No. of Deaths	Death Rate per 1,000 Population
1964	1,379	14.4
1965	1,421	14.9
1966	1,475	15.53
1967	1,319	13.91
1968	1,381	14.64
1969	1,386	14.8
1970	1,374	14.7
1971	1,362	15.0
1972	1,362	15.1
1973	1,320	14.61

CAUSE OF DEATH

Enteritis and other Diarrhoeal Diseases	2
Tuberculosis of Respiratory System	1
Other Infective and Parasitic Diseases	3
Malignant Neoplasm, Buccal cavity and Pharynx	2
Malignant Neoplasm, Oesophagus	4
Malignant Neoplasm, Stomach	11
Malignant Neoplasm, Intestine	12
Malignant Neoplasm, Larynx	1
Malignant Neoplasm, Lung, Bronchus	31
Malignant Neoplasm, Breast	7
Malignant Neoplasm, Uterus	7
Malignant Neoplasm, Prostate	4
Leukaemia	3
Other Malignant Neoplasms	110
Diabetes Mellitus	6
Avitaminoses and other Nutritional deficiency	3
Other endocrine, nutritional and metabolic diseases	3
Anaemias	4
Mental Disorders	1
Meningitis	1
Multiple Sclerosis	2
Other Diseases of Nervous System and Sense Organs	26
Chronic Rheumatic Heart Disease	1
Hypertensive Disease	1
Ischaemic Heart Disease	194
Other forms of Heart Disease	231
Cerebrovascular Disease	178
Other Diseases of the Circulatory System	38
Influenza	1
Pneumonia	134
Bronchitis, Emphysema	3
Asthma	2
Other Diseases of the Respiratory System	29
Peptic Ulcer	6
Intestinal Obstruction and Hernia	7
Cirrhosis of Liver	2
Other Diseases of Digestive System	22
Nephritis and Nephrosis	4
Other Disease of the genito-urinary system	2
Diseases of the Skin and Subcutaneous Tissue	2
Congenital Anomalies	2
Birth Injury, Difficult Labour and other anoxic and hypoxic conditions	8
Other Causes of Perinatal Mortality	4
Symptoms and Ill-defined Conditions	156
Motor Vehicle Accidents	9
All other Accidents	15
Suicide and Self-inflicted Injuries	10
All other External Causes	7
<hr/>	
Male	604
Female	708
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Total	1,320

(Total includes 8 inward transfers for December which have not yet been received from the Registrar General therefore the causes of death are not yet known.)

SICKNESS CERTIFICATES

		1973	1972			1973	1972
Jan.	2	1,234	910	July	3	615	528
	9	1,485	1,052		10	611	532
	16	1,026	892		17	533	360
	23	894	832		24	353	361
	30	828	839		31	413	489
Feb.	6	816	930	Aug.	7	605	566
	13	756	910		14	628	604
	20	797	674		21	615	556
	27	606	708		28	525	502
March	6	829	643	Sept.	4	624	574
	13	607	734		11	584	514
	20	610	686		18	567	502
	27	678	683		25	668	614
April	3	602	436	Oct.	2	683	623
	10	652	603		9	765	676
	17	610	608		16	734	711
	24	367	503		23	743	693
May	1	536	534	30	689	667	
	8	631	538	Nov.	6	659	700
	15	620	554		13	697	673
	22	589	506		20	717	625
29	449	441	27		704	743	
June	5	581	525	Dec.	4	707	862
	12	611	492		11	718	1,227
	19	620	510		18	696	1,337
	26	624	544		24	521	1,233
				31	264	-	

MINIATURE RADIOGRAPHY IN HALIFAX

	Males	Females	Total
1. Examinations Carried out:-			
(a) Miniature X-rays taken	3,047	3,524	6,571
(b) Number recalled for large film	20	14	34
2. Analysis of Provisional Findings:-			
(a) Cases of active tuberculosis	3	2	5
(b) Cases of inactive tuberculosis	-	1	1
(c) Other abnormalities (see below)	13	10	23
(d) Failed to re-attend for large film	-	-	-
3. Analysis of Abnormalities other than Tuberculosis (2(c) above):-			
(a) Bacterial or Virus Pulmonary Infection	4	2	6
(b) Bronchiectasis	1	2	3
(c) Pulmonary Fibrosis; Tuberculous	2	2	4
(d) Pneumoconiosis	2	-	2
(e) Benign Neoplasms of Lungs and Mediastinum	-	1	1
(f) Sarcoidosis	1	-	1
(g) Pleural Thickening	1	-	1
(h) Abnormalities of Diaphragm and Oesophagus	2	1	3
(i) Cardiovascular Lesions: Acquired	-	2	2

SUICIDES 1964-1973

The total number of suicides during 1973 was ten. During 1972 the total was twelve.

	15-24	25-44	45-64	65-74	75 and over	Total	Males	Females
1964	-	3	4	1	2	10	7	3
1965	1	4	4	2	1	12	8	4
1966	1	2	5	1	2	11	10	1
1967	2	4	7	1	2	16	8	8
1968	-	-	6	-	1	7	2	5
1969	1	3	5	2	1	12	7	5
1970	1	1	7	4	2	15	6	9
1971	1	4	2	1	2	10	4	6
1972	-	4	3	5	-	12	6	6
1973	-	4	4	1	1	10	5	5
Total over 10 years	7	29	47	18	14	115	63	52

Distribution - Seasonal

	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.
1972	-	1	-	2	1	1	2	1	-	-	1	3
1973	1	-	1	-	2	2	-	-	3	-	-	1

DENTAL TREATMENT

	No. examined	Treatment commenced	Treatment completed	Treatment Provided					
				Scaling	Fillings	Extractions	Genl Anaes.	Dentures	Radio-graphy
Expectant and nursing mothers	-	-	-	-	-	-	-	-	-
Children under five	141	97	-	2	19	173	102	-	-

HEALTH VISITING

In order to relieve the chronic shortage of qualified Health Visitors it was decided to establish a Health Visitor Reserve Bank. This scheme is designed to attract Health Visitors who live locally, married with a young family or other home commitments that prevent them from being employed full-time, to return to the service for hours of mutual convenience between themselves and the Health Department. From this scheme it was possible to recruit two Health Visitors for sessional duties.

Routine developmental assessments and screening for deafness in infants and young children by Health Visitors have been introduced. This is in order to identify any deviation from the normal in child development and institute further investigations and treatment where necessary at the earliest age possible.

The immigrant Asian mothers and babies attend the child health centres regularly. However, some difficulty is being found in establishing communications because the majority of Asian mothers understand very little English. With the enthusiastic help of Mrs. Malik, interpreter, and of the Health Visitors, small group Health Education sessions have been arranged on Tuesdays in the Health Education Room at the Laura Mitchell Clinic. These sessions have only just been put into operation but already many Asian mothers are attending and gaining information on all aspects of child health, the different type of nutrition required to cope with the English climate and on family planning. They are all able to discuss their own particular problems with the Health Visitors.

MIDWIFERY

The General Practitioner Maternity Unit was opened in the Autumn. This unit is designed for the use of general practitioners who may arrange for mothers in lieu of a domiciliary delivery to be delivered in the unit. The unit is being staffed by Domiciliary Midwives from the whole of Calderdale on a rota basis and the scheme is running well.

Mothers may stay in the unit for as little as forty-eight hours after the delivery of their babies or as long as ten days, depending on their own wishes and any medical or social needs that have to be taken into consideration.

DOMICILIARY MIDWIFERY TRAINING

The Health Committee has agreed that the Single Period Training for Pupil Midwives as recommended by the Central Midwives Board for England and Wales should be adopted in Halifax in place of the present two part training. It is expected that it will be implemented in 1974.

The Single Period involves only one examination at the end of the training instead of two examinations as under the present system of training.

DISTRICT NURSES

The attachment of Nursing Staff to General Practitioners continues to develop and in a small number of practices the District Nurses are actually based and carry out nursing procedures at the doctors' surgeries. A Nursing Sister is now occupied full-time in the treatment room at the Frank Swire Health Centre

and it is envisaged that a second sister will be required there to help to cope with the increased case load of patients referred by the doctors. This is most encouraging for it cuts down the waiting time for patients and ensures that they receive prompt attention. It saves the doctors' time by relieving them of having to administer many treatments which can be adequately dealt with by the Nursing Sister, and it saves many unnecessary home visits by the District Nurses.

COMMUNITY EXPERIENCE FOR STUDENT NURSES

The Halifax Hospital School of Nursing continues to send pupil and student nurses to spend days with the community nursing staff, gaining some insight into the nursing of patients at home.

In accordance with the recommendations of the General Nursing Council it has been possible to establish a Community Option for student nurses at the end of their first year of training in the hospital, to spend eight weeks with the Community Nursing Services.

These students work closely with the District Nursing Sisters in nursing patients in their own homes. They also see some health visiting and school nursing, and are introduced into all aspects of community care. A programme of visits and experience to be gained is carefully worked out for them and the first group of eight student nurses have completed their eight weeks experience and appear to have enjoyed the module very much indeed. It is expected that there will be three groups per year.

HOSPITAL/DOMICILIARY NURSING SISTERS EXCHANGE PROGRAMME

In order to establish closer relationship between the Nursing Sisters in the community and hospital staff, Ward Sisters from Northowram Hospital and District Nursing Sisters have taken turns to spend a week at a time in each others Departments.

This has proved to be very popular and is leading to a closer understanding of each others various roles in the work situation. It is hoped that in the near future it will be possible for the District Nurses and Ward Sisters from the general wards of the Halifax General Hospital and the Royal Halifax Infirmary to arrange a similar exchange programme.

STAFF MANAGEMENT COURSES

The half day release management courses for community nursing staff are being continued and twelve nurses take part in each course at the Percival Whitley College.

These management appreciation courses are proving to be most helpful and are enjoyed by the nurses who have participated so far. It is hoped to have a further two courses, each lasting ten weeks, in order that all the nurses should have had an opportunity to attend.

SOCIAL SERVICES/DOMICILIARY NURSING SISTERS LIAISON

Close liaison between the Social Services and the Community Nursing continues with meetings between staff members of various levels considering the most suitable ways of dealing with a variety of problems that arise from time to time. A mutual referrals system is in operation among Doctors, Social Workers, Hospital and Community Nurses in order that a person in need may receive all the help that is required from any of the services.

NURSING HOMES

The following table shows the position of nursing homes in the town.

	Number of Homes	Number of beds provided for		
		Maternity	Others	Totals
Nursing Homes first registered during 1967	-	-	-	-
Nursing Homes on the register at the end of 1973 ..	3	-	63	63

AMBULANCE SERVICE

The Ambulance Service has operated throughout the year in accordance with the Health Service Act, conveying patients to hospitals within the County Borough and also to other towns when requested by hospital authorities and general practitioners. During the year the number of patients carried was as follows:

Stretcher cases	9,311
Sitting cases	41,628
Total number of patients	50,939
Mileage covered by the ambulances during the year	208,025

Of the total number of patients, Out-patients were the most numerous having carried 40,323

The following list shows the categories and numbers of patients carried. It will be seen from these figures that there is a decrease this year in the number of both miles travelled and patients carried and this may be due to more care being taken in the ordering of transport for patients. If this trend continues then only the patient really needing transport will be travelling by ambulance in future.

The Day Care Unit is still operating at Northowram Hospital and seems to be providing beneficial service to a large number of patients. In the near future, it is expected that the Psychiatric Day Unit will also be functioning at the same hospital.

At the end of the year the staff consisted of 1 Ambulance Officer, 4 Shift Leaders, 2 Telephonist/Clerks, 23 Driver/Attendants, 3 Part-time Female Attendants, 1 Administrative Clerk and 1 Part-time Cleaning Lady.

Two Drivers have attended a six week training course and both were successful in qualifying.

Morale at the moment is good and staff are anxiously waiting to be transferred to the Regional Health Authority on 1st April, 1974.

Home accidents during 1973 totalled 413; 114 of these involved children under 5 years and 42 involved elderly people over the age of 61 years. There has been a steady fall in home accidents over the past few years and, no doubt, the publicity given to this type of accident has tended to make people more aware of the risks in the home.

CATEGORIES	1973												
	January	February	March	April	May	June	July	August	September	October	November	December	TOTAL
Street Accidents	60	58	59	58	69	76	86	57	67	63	68	71	792
Street Illness	31	26	35	30	28	40	37	35	46	50	31	34	423
Works Accidents	9	13	8	14	10	11	10	6	9	14	7	12	123
Works Illness	3	11	13	9	7	9	4	9	4	7	7	8	91
Home Accidents	54	78	84	90	70	103	109	107	88	89	70	74	1016
Maternity	62	47	49	57	73	50	53	56	46	59	46	57	655
Obstetrical	11	15	19	20	17	13	20	12	10	16	11	13	177
Mental	6	8	7	6	3	6	1	0	1	2	2	-	42
House Transfers	1	4	4	4	6	6	9	5	8	6	3	-	56
Hospital Transfers	100	74	101	94	116	90	108	131	126	121	67	29	1157
Out-Patients	3889	3425	3850	3363	3907	3918	3577	4085	3747	4224	2299	39	40323
Admissions	439	310	348	334	319	365	352	365	352	371	321	334	4210
Discharges	173	160	175	169	138	197	180	190	182	206	103	1	1874
TOTAL	4838	4229	4752	4248	4763	4884	4546	5058	4686	5228	3035	672	50939

1973	Journeys	Recumbent	Sitting	Total Patients Carried	Total Miles
January	1132	887	3951	4838	19924
February	1017	755	3474	4229	17500
March	1114	848	3904	4752	19074
April	1040	812	3436	4248	17607
May	1158	810	3953	4763	18657
June	1182	849	4035	4884	19447
July	1106	805	3741	4546	18170
August	1172	801	4257	5058	20105
September	1116	779	3907	4686	18662
October	1136	887	4341	5228	20263
November	839	642	2393	3035	12849
December	546	436	236	672	5767
Totals	12558	9311	41628	50939	208025

LOAN EQUIPMENT

Under Section 28 of the National Health Service, various items of equipment were issued to 230 patients during 1973 (compared with 182 patients in 1972). These items included bed pans, bed rests, commodes, air rings, wheelchairs, enuresis alarms, special equipment for paraplegics, and nursing aids.

During the year a number of commodes, bed rests, sorbo rings, male and female urinals were purchased, there being a greater demand for these items.

INCONTINENT PAD SERVICE

During 1973 there was an increase in the demand for this service. 283 patients were supplied with the various types of incontinent pads from the Laura Mitchell Clinic (compared with 226 in 1972). Of the 283 patients 206 were served by the delivery service and 77 came personally to the Clinic.

Polythene sheeting was supplied to 61 patients, and rubber sheeting to 24.

The following table shows the distribution compared with previous years.

	1968	1969	1970	1971	1972	1973
Bed Pads	5542	4888	10095	18824	29344	30733
Personal Pilch Pads	7300	7600	8577	6400	12996	10190
Disposable Roll Linings	-	-	-	13	57	74
Personal Garments	19	16	18	26	41	49
Rubber Sheeting	-	-	-	-	42	24
Polythene Sheeting	-	-	-	-	-	61

The number of patients needing the service for collection of colostomy and dirty dressings was 224 (compared with 149 in 1972).

CHIROPODY

During 1973 the Chiropodists completed 1,512 sessions, compared with 1,073 in 1972. The additional sessions were achieved after a full year's service of Mr. H. Stenson, full-time Senior Chiropodist, and the employment of another part-time Chiropodist, Mr. S. Paling, in addition to the three other part-time Chiropodists already employed by our authority. During the year Mr. H. Stenson was promoted to Chief Chiropodist.

There was an increase in new cases referred - 594 (187 in 1972) and an increase in the number of domiciliary treatments - 4,177 (3632 in 1972) and also in clinic treatments - 3,675 (2171 in 1972).

The following table, showing comparative figures in 1972 in parentheses, indicates the amount of work done.

Total Number of Sessions	1512	(1073)
<u>New Cases referred</u>		
Aged	582	(183)
Handicapped over 65 years	5	(2)
Handicapped under 65 years	7	(2)
Ante-Natal	-	(-)
	<u>594</u>	<u>(187)</u>
Total number of Treatments	7852	(5803)
Total number of Visits	4177	(3632)
Total number of Treatments at Clinic	3675	(2171)

CERVICAL CYTOLOGY

During the seventh complete year for Cervical Cytology a total of 55 Clinics were held, and 1014 women were examined. The number of repeat tests rose to 806 compared with 748 in 1972.

The following table gives a breakdown of the women examined, according to age and social class:

Attendances	Single		Widowed or Divorced		Husband Retired		Social Class Classification					TOTAL					
	1st Rep.		1st Rep.		1st Rep.		1		2		3		4		5		
							1st Rep.	1st Rep.	1st Rep.	1st Rep.	1st Rep.	1st Rep.	1st Rep.	1st Rep.	1st Rep.	1st Rep.	
Ages																	
Under 35 years	14	3	3	9	-	-	4	5	10	27	62	23	61	4	5	76	154
% of age group	6.1%	1.4%	1.4%	3.2%	-	-	1.7%	2.3%	4.3%	11.7%	27.0%	10.0%	26.9%	1.7%	2.3%	230	100%
Over 35 years	4	6	11	58	9	29	-	13	70	48	257	42	206	5	26	132	652
% of age group	0.5%	0.7%	1.4%	7.4%	1.1%	3.7%	-	1.6%	8.9%	6.1%	33.4%	5.2%	26.2%	0.6%	3.2%	784	100%
All ages	18	9	14	67	9	29	-	4	80	75	319	65	267	9	31	208	806
% of total	1.7%	0.9%	1.4%	6.6%	0.9%	2.9%	-	0.4%	7.9%	7.4%	31.6%	6.4%	26.3%	0.9%	3.0%	1014	100%

* Denotes Positive Cases.

1 Positive Case found in 1014 women examined.

ORTHOPAEDICS

Orthopaedic Clinic	Under 1 year	1-5 years	Total
No. of new cases	5	55	60
No. of first attendances	5	55	60
No. of subsequent attendances	26	581	607
Total Attendances	31	636	667

Classification:	No. of Cases	Attendances
Bow Legs	5	28
Congenital Deformities	2	32
Hernia	-	-
Intoeing	7	58
Knock Knees	17	263
Metatarsus Varus	1	20
Overlapping Toes	5	34
Others	23	232
	<u>60</u>	<u>667</u>

Disposal:

No. of cases referred for x-ray examination ..	-
No. of cases referred for admission to hospital ..	-
No. of cases discharged	28

CONGENITAL MALFORMATIONS

INCIDENCE OF CONGENITAL MALFORMATIONS

In accordance with the requirements of the Chief Medical Officer of the Ministry of Health, information is supplied to the General Register Office concerning congenital defects apparent at birth.

A summary and analysis of the notifications received during 1973 are given below:

SUMMARY OF NOTIFICATIONS

Number of notifications received during year ..	25
Number of live births included in (i) above ..	21
Number of stillbirths included in (i) above ..	4
Total number of malformations diagnosed at birth ..	30
Number of children with multiple abnormalities ..	3

ANALYSIS OF MALFORMATION NOTIFIED

Diagnostic Group	Sub-Group	Malformations	Cases
0	.1	Central Nervous System:	
	.4	Anencephalus	2
	.6	Hydrocephalus	1
	.8	Other specified malformations of brain or spinal cord	3
	.9	Spina bifida	2
		Unspecified malformations of brain, spinal cord and nervous system ..	1
2	.1	Alimentary System:	
	.2	Cleft lip	1
		Cleft palate	2
3	.0	Heart and Circulatory System:	
	.9	Unspecified malformations of heart and circulatory system	4
		Specified malformations of heart and circulatory system	3
5	.0	Urino-genital System:	
	.1	Unspecified malformations of urino- genital organ	2
		Renal Agenesis	1
6	.5	Limbs:	
	.7	Talipes	4
	.9	Other specified malformations of upper limb or shoulder	1
		Unspecified limb malformations ..	2
8	.3	Other Systems:	
		Pigmented naevus	1

CREMATIONS

I am indebted to Mr. J. B. Dunn for the following report:

Total number of cremations since the opening of the crematorium ..	29,398
Total number of cremations for 1973	1,959
(a) Halifax Area	998
(b) Others	961
Disposal of remains during 1973:	
(a) Scattered in the crematorium grounds	1,725
(b) Placed or to be placed in niches	-
(c) Placed or to be placed in graves	-
(d) Taken away by representatives	230
(e) Awaiting instructions for disposal	4

DOMICILIARY FAMILY PLANNING SERVICE

Information provided by
Domiciliary Family Planning Case Workers, Mrs. M. Chambers

The number of new patients visited in 1973 totalled 177. Of these, 89 attended the Family Planning Clinic and were advised regarding methods of contraception. The remainder either said they were going to their own General Practitioner for advice or were already using some form of contraception.

A few women were attending the clinic for a short period only whilst their husbands were waiting for vasectomy operations. There has been a marked increase in the numbers of men who are interested in vasectomy.

On the whole the response to the Domiciliary Family Planning Service has been very good. There is a small number of patients who need constant reminders to keep up with their clinic visits.

STATISTICS

MIDWIFERY SERVICES

Number of Confinements completed as midwife during the year	..	..	197
Lying in visits by midwife	..	..	5203
Ante-Natal Clinic - Number of Sessions	..	..	189
1st Attendances at Ante-Natal Clinics	..	..	338
Attendances during the year at Ante-Natal Clinics	..	..	1454
Number of Ante-Natal Domiciliary Visits	..	..	1857
Number of Post-Natal Domiciliary Visits	..	..	250
Relaxation Classes - Number of Sessions	..	..	76
Number of attendances at Relaxation Classes	..	..	290

HOME NURSING SERVICES

Number of Cases on the Books beginning of year	..	..	8932
Number of Cases undertaken	..	..	2051
Number of Cases completed during year	..	..	1996
Number of Cases remaining end of year	..	..	8987
Total visits during year	..	..	73166
- Medical	..	..	45010
- Surgical	..	..	28156

DOMICILIARY FAMILY PLANNING

New Patients	..	..	185
Appointments made	..	..	64
Appointments kept	..	..	57
Follow-up visits	..	..	753
Total number of visits	..	..	938

HEALTH VISITING

Children born in 1973	..	..	1514
Other children aged under 5 years	..	..	1818
Persons aged between 5 and 16 years	..	..	165
Persons aged between 17 and 64 years	..	..	405
Persons aged 65 years and over	..	..	530
Households visited on account of Tuberculosis	..	..	117
Households visited on account of other Infectious Diseases	..	..	164
Households visited for any other reason	..	..	157

Number of Cases seen at special request of Hospital or General Practitioner	486
Number of Persons included in above who are Mentally Handicapped	6
Mentally Ill	10
Immigrants	750
Number of ineffectual and revisits	24659
CHILD WELFARE CLINICS	
Number of Sessions held during the year	381
First attendances of children born in 1973	957
First attendances of children born in 1972	1000
First attendances of children born in 1971/68	856
Number of subsequent attendances - ages 0-5 years	8566
Remedial Exercises - Number of Sessions	106
Number of attendances at remedial exercises	880
IMMUNISATION AND VACCINATION	
Number of persons immunised all doses	2649
Poliomyelitis vaccination (Oral) - 1st dose	957
- 2nd dose	880
- 3rd dose	753
- 4th dose	123
Measles	578
NOTIFIED DISEASES	
Scarlet Fever	4
Measles	272
Infective Hepatitis	12
Meningitis	2
Food Poisoning	4
Encephalitis	1
Malaria	2
Typhoid	2
Dysentery	4
Pulmonary Tuberculosis	25
Other Tuberculosis	13
CHIROPODY SERVICE	
Number of Sessions	1512
Number of New Cases Referred:	
(a) Aged	582
(b) Handicapped under 65 years	7
(c) Handicapped over 65 years	5
(d) Ante-Natal	-
	<u>594</u>
Number of Cases Treated:	
(a) 1st Treatments	594
(b) Follow-up Treatments	7258
	<u>7852</u>
Number of Domciliary Visits	3059
Number of Clinic Treatments	3675
	<u>6734</u>

CALDERDALE WATER BOARD

I am indebted to Mr. Arnold L. Gray, B.Sc., M.I.C.E., F.I.W.E., Engineer and Manager, for the following report:

The quantity of water supplied by the Board was adequate for all domestic and industrial consumers. 719 bacteriological samples were carried out on filtered and treated waters at Thrum Hall and Ogden Filter Houses and at various points throughout the distribution system. 99.0% of these samples were found to be free from coliforms in 100 mls.

Of the seven samples found to contain coliform organisms three only contained E Coli the maximum number being 6 per 100 mls.

Chemical Analyses

Chemical analyses were carried out on six samples each of Filtered Water and Crude water at Thrum Hall Filter House. The samples were taken at monthly intervals during 1973. The average values appear below:

	Crude Water	Filtered Water
Total solids dried at 180°C	60.3	67.7
Chloride (chlorides)	13.0	12.2
Free Ammonia (N)	0.04	0.03
Albuminoid Ammonia (N)	0.01	0.01
Oxygen absorbed from Permanganate in 4 hours at 80°F	1.28	0.25
Carbinate Hardness (Ca CO ₃)	NIL	4.7
Non-carbonate Hardness (Ca CO ₃)	23.6	26.1
Nitrite Nitrogen	NIL	NIL
Nitrate Nitrogen	0.26	0.33
Lead (Pb)	NIL	NIL
Lead absorbed in 24 hours (Pb)	1.7	NIL
Manganese (Mu)	0.14	0.11
Iron (Fe)	0.52	0.06
ph value	4.5	8.7
Colour in Hazen	24	5
Turbidity	4.8	0.25
Total Residual Chlorine	-	0.28
Free Carbon Dioxide	8.3	NIL
Calcium Hardness (as Ca CO ₃)	11.5	20.3
Aluminium (Al)	0.46	0.09
Sulphate (SO ₄)	23.7	21.6
Fluoride (F) ⁴	-	0.1

All results expressed in milligrams per litre.

The treatment at Thrum Hall Filter House includes the addition of lime and sodium aluminate before filtration and lime and chlorine after filtration. During 1973 pre-chlorination was carried out in which a small dose (approximately 0.2 mgms/lit) of chlorine was added to the water before filtration as an additional safeguard.

From Chemical Analyses it can be seen that the treatment effectively controls any tendency to plumbo-solvency present in the untreated new water.

During 1973, 11.7 million gallons of water were treated and filtered daily at Thrum Hall Filter House.

The treatment at Ogden Filter House is similar to that at Thrum Hall except that sodium carbonate is used instead of lime and the volume of water treated daily is much less, being approximately 600,000 gallons.

SEWERAGE

I am indebted to Mr. J. S. Crabtree, C.Eng., M.I.Mun.E., Borough Engineer and Surveyor, for the following report:

The Main Drainage Section of my Department has continued its investigations into the main sewerage system of the Borough and a closed circuit television survey of some of the old brick and stone sewers has been completed.

The sewer in Emscote Street South, together with a length upstream of this continuing to Haugh Shaw Road has been partially lined with precast concrete segments.

The replacement of the sewer in Hopwood Lane above Queens Road has been completed. This was done to alleviate flooding in factory premises.

The new sewer between Bradshaw Lane and Perseverance Road to serve 21 properties which were not served by the main drainage system has now been completed.

Work will begin in February, 1974, on the construction of a new storm overflow at the junction of Raglan Street and Pellon Lane.

WATER POLLUTION CONTROL

I am indebted to Mr. H. Ives, C.Eng., M.I.Mech.E., F.I.P.H.E., M.I.W.P.C., Manager, for the following report:

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

All drainage from the Borough, with the exception of certain fringe areas referred to later, gravitates to the Water Pollution Control Works sited at the lowest point in the town on three separate but adjacent areas of land at Salterhebble, Copley and North Dean, where it is purified to the requirements of the Yorkshire River Authority before discharge to the River Calder.

The method of purification in use consists of settlement followed by biological oxidation by means of the activated sludge process. Because of the need to deal with 131 discharges of industrial wastes from 79 different premises in the Borough, in addition to the normal domestic waste, the Works have to be about twice the size that would otherwise be required.

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

During 1972/73 an average daily volume of 6,239,000 gallons of domestic and industrial wastes were given full treatment. From these, 98,020 tons of wet solids were extracted yielding after processing 2,034 tons of organic fertilisers and 152 tons of grease.

The Warley and Luddenden area and Northowram drain to the Works of the Calder and Ryburn Joint Sewerage Board and Brighouse Corporation respectively.

A scheme to modernise and extend the Halifax Works, so as to be able to deal satisfactorily with a daily dry weather flow of $10\frac{1}{2}$ million gallons,

including 2 3/4 million gallons from the Elland U.D.C., has been approved by both Councils and the Department of the Environment. This involves the estimated expenditure of £6.9 million over the next few years, both to replace the worn out and obsolete plant and equipment, some of which is now more than 60 years old, and to extend its capacity to enable it to comply with the requirements of the Yorkshire River Authority.

The design of the Scheme by the Council's Consulting Civil Engineers, Messrs. Howard Humphreys & Sons, Epsom, commenced in October, 1963, and the construction is planned to be carried out in three phases.

Construction of Phase 1 commenced in February, 1967, and due to it being extended to cater for sewage and industrial effluents from the Elland U.D.C. is still not complete. During the year, however, work was completed on the additional primary and secondary treatment plant on the Copley site for Halifax and tenders invited for the secondary treatment plant to cater for the Elland sewage.

The reconstruction and provision of additional units on the Salterhebble site proceeded (Phase 2) and design of the major combined Sludge Treatment Plant intended for the North Dean site was completed.

Reorganisation of the Water Industry in line with the provisions of the Water Act, 1973 will take place from 1st April, 1974, when responsibility for the treatment of sewage will devolve upon the Yorkshire Water Authority.

I am indebted to Mr. E. J. Jones, Chief Engineer, M.I.W.A., for the following report:

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

All discharges from the Borough, with the exception of certain large areas referred to later, gravitate to the Water Pollution Control Works sited at the lowest point in the town on three separate but adjacent areas of land at Salterhebble, Copley and North Dean, where it is purified to the requirements of the Yorkshire River Authority before discharge to the River Calder.

The method of purification in use consists of settlement followed by biological oxidation by means of the activated sludge process. Because of the need to deal with 137 discharges of industrial wastes from 79 different premises in the Borough, in addition to the normal domestic wastes, the Works have to be about twice the size that would otherwise be required.

The solid residues extracted during purification are mechanically dewatered and processed to yield by-products in the form of stibite, gypsum, organic fertilizers. These are subsequently sold, thereby contributing in a typical manner complete and positive disposal of these otherwise objectionable residues, and at the same time producing an income which makes a useful contribution to the overall cost of operating the Works.

During 1972/73 an average daily volume of 6,238,000 gallons of domestic and industrial wastes were given full treatment. From these, 28,030 tons of wet solids were extracted yielding after processing 2,024 tons of organic fertilizers and 152 tons of gypsum.

The Wapley and Ledwith areas and Longwood drain to the Works of the Calder and Wharfe Joint Sewerage Board and Rishworth Corporation respectively,

A scheme to modernise and extend the Wapley Works, so as to be able to deal satisfactorily with a daily dry weather flow of 10 million gallons, has been submitted to the Yorkshire Water Authority.

ENVIRONMENTAL HEALTH

by

A. W. PERRY D.P.A., F.A.P.H.I., M.R.S.H., M.I.P.R.E.CHIEF PUBLIC HEALTH INSPECTOR.

This report is not as detailed in many respects as in previous years due to its production in February. The information called for by Government departments has been given together with such other information which had been prepared up to the time of going to press.

1973 will be remembered by the continued high number of applications for standard and improvement grants. This necessitated a great effort by those working on grant work to the exclusion of time normally spent on inspecting those houses too far gone for improvement. Consequently the clearance programme was in arrears.

The General Improvement Area programme was on schedule and good progress was made in persuading owners to improve their houses. The refusal of the Minister to confirm the Gladstone Road Compulsory Purchase Orders was disappointing but the area is constantly under review and gradually the unimproved houses are being improved.

In the private section of housing, applications approved for the improvement of tenanted houses declined from 23.13% to 12.41% but this is offset by the number of local authority tenanted houses submitted for improvement.

The section of the report on noise is interesting in that it shows an average of one complaint a week and that of the 50 complaints, 40 were justified. Action taken means invariably obtaining readings with a noise meter late at night or in the early hours of the morning but the facts once presented to Managements, have been accepted and positive steps taken to abate the noise.

Many complaints were made during the year about odour from an offensive trade situated near the town centre. The Health Committee were kept informed of the situation and towards the end of the year authorised the institution of legal proceedings.

Domestic smoke control now receives the full support of the public. No objections were raised to the making of the latest Smoke Control Order. Houses now dealt with number 27,743 (80% of all premises in the town).

Latest results, issued by the Warren Spring Laboratory for Research in Atmospheric Pollution show that the pollution in Halifax is now no more than was to be found in seaside resorts. The worst station in Halifax (Powell Street) had a daily average of 61 ng/cu.m., the best (Northowram) 43 ng/cu.m.

Housing Statistics

HOUSES DEMOLISHED

In or adjoining clearance areas	Unfit for human habitation Included by reason of bad arrangement On land acquired under Section 43(2) Housing Act, 1957	415 - 15
Not in or adjoining clearance areas	As a result of formal or informal procedure under Section 16 or Section 17(1) Housing Act, 1957 Local authority owned houses certified unfit by the Medical Officer of Health Houses unfit for human habitation where action has been taken under local Acts Houses included in unfitness orders made under para 2 of the Second Schedule to the land compensation Act 1961	5 - - -
Number of houses included above which were previously reported as closed in pursuance of closing orders or undertakings		3
UNFIT HOUSES CLOSED IN PURSUANCE OF CLOSING ORDERS OR UNDERTAKINGS		
Under Sections 16(4), 17(1) and 35(1) Housing Act 1957 and Section 26 Housing Act, 1961		12
Under Sections 17(3) and 26 Housing Act, 1957		-
Parts of Buildings Closed under Section 18 Housing Act 1957		-
PERSONS DISPLACED		
From houses to be demolished in or adjoining clearance areas		627
From houses to be demolished not in or adjoining clearance areas		4
From houses to be closed		3
From parts of buildings to be closed		-
FAMILIES DISPLACED		
From houses to be demolished in or adjoining clearance areas		209
From houses to be demolished not in or adjoining clearance areas		3
From houses to be closed		2
From parts of buildings to be closed		-
UNFIT HOUSES MADE FIT		
After informal action by local authority:		
By owner		109
After formal notice under Sections 9 and 16 Housing Act 1957:		
By owner		-
By local authority		-
After formal notice under Public Health Acts		15
Previously included in a clearance order which has been or will be modified or revoked under Section 24, Housing Act, 1961		-
Previously included in a demolition order which has been or will be revoked under Section 24, Housing Act, 1957		-
Previously included in a closing order which has been or will be determined under Section 27, Housing Act 1957		-

HOUSES IN WHICH DEFECTS WERE REMEDIED

(Other than unfit houses made fit)

After formal notice under Public Health Acts 73

PURCHASE OF HOUSES BY AGREEMENT

Houses in clearance areas other than those included in confirmed orders or compulsory purchase orders :

Number of houses	60
Number of occupants	105

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

The following 12 houses had Closing Orders placed upon them under the provisions of the above Act during the year :

1 & 2 Back Providence Place
 Bank House Cottage, Jowler, Luddenden.
 5 Drake Street
 97a Gibbet Street
 189 King Cross Road
 Mixenden Hall Lodge
 27 & 29 Phoebe Lane
 23 Stoney Royd Terrace
 18 Sutcliffe Street
 27 The Hough

The following 5 houses had demolition orders placed upon them during the year :

21/21a Blaithroyd Lane
 1, 2 & 3 Copley Terrace
 Peat House, Bradford Old Road.

Under the provision of the Housing Act, 1957, Section 27, Sub-section 2, a Closing Order on Far Littlemoor House was determined during the year following the satisfactory improvement of the property to Housing Act fitness standard.

Compulsory Improvement of Properties

During the year there were two representations made by tenants for the compulsory improvement of their homes by the addition of one or more of the standard amenities. In one case, after a letter to the owner pointing out the powers of the Local Authority, a standard grant application was subsequently received and approved.

In the second case, a letter was sent to the owner towards the end of the year pointing out the powers of the Local Authority.

A preliminary Improvement notice was served in respect of a tenant's representation made in 1972. Following the service of this notice an improvement grant application was received and approved. A further case where an Immediate Improvement notice was served during 1972 was complied with by way of Standard Grant. A house, which was the subject of a tenant's request made in 1970, subsequently changed ownership, resulting in delays to improvement being carried out. Finally, however, an improvement grant in this case was approved towards the end of the year.

HOUSES IN MULTIPLE OCCUPATION

During the year 59 visits were made in connection with houses in multiple occupation; and letters were sent to owners regarding requirements of the Chief Fire Officer. Notices under Section 16 of the Housing Act, 1961, requiring the provision of satisfactory means of escape from fire were served in respect of 8 properties. In 6 of these cases the notices were complied with during the year. In the other two cases committee approval for the commencement of proceedings was obtained.

HOUSING

Action Taken on Clearance Areas.

Beech Hill Terrace Compulsory Purchase Order. This was confirmed on the 24th October, 1973.

Bradshaw Row Compulsory Purchase Order. This was confirmed on the 8th January 1973. All 7 houses were demolished during the year.

Francis Street Compulsory Purchase Order. This was represented on the 30th August, 1973. It comprised 23 houses.

Green's Square Compulsory Purchase Order. By the end of the year all except 13 houses had been demolished.

Handel Street Compulsory Purchase Order. This was represented on 29th November, 1973. It comprised 62 houses.

Haugh Shaw Terrace Compulsory Purchase Order. This was represented on the 30th August, 1973. It comprised 8 houses.

High Street Compulsory Purchase Order. This was confirmed on the 13th April, 1973.

Lentilfield Street Compulsory Purchase Order. This was confirmed on the 23rd. February, 1973, and by the end of the year all 15 houses had been demolished.

Miscellaneous Properties Compulsory Purchase Order. By the end of the year all 40 houses had been demolished.

Old Lee Bank Compulsory Purchase Order. By the end of the year all 79 houses had been demolished.

Parkinson Lane Compulsory Purchase Order. This was confirmed on the 15th January, 1973, and by the end of the year all 9 houses had been demolished.

St. Augustines Compulsory Purchase Order. By the end of the year all 205 houses had been demolished.

Shroggs Road Compulsory Purchase Order. By the end of the year all 52 houses had been demolished.

Simpson Street Compulsory Purchase Order. This was confirmed on the 30th March, 1973.

Wadsworth Street Compulsory Purchase Order. This had not been confirmed at the end of the year.

Wheatley Lane Compulsory Purchase Order. This was represented on the 7th June, 1973. It comprised 38 houses.

Whitby Street Compulsory Purchase Order. By the end of the year all 30 houses had been demolished.

A total of 131 houses were represented during the year.

IMPROVEMENT AND STANDARD GRANTS.

In 1973 the number of grant applications received decreased from 925 in 1972 to 913 in 1973 but the number approved increased from 549 to 699.

The number of grants completed increased from 292 in 1972 to 558 in 1973.

Of the 140 approved Standard Grants, 26 applications were for tenanted properties and of the 559 approved Improvement Grants, 62 were for tenanted properties. The percentage, therefore, of applications for grants for tenanted properties has decreased from 23.13% in 1972 to 12.41 in 1973.

The Ingram Square Improvement Area was completed during the year.

The response to improve the properties in the St. Augustine G.I.A. and the Lee Mount G.I.A. (declared in November) was encouraging, but the Gladstone G.I.A. plodded on, the Secretary of State for the Environment refusing the Local Authority power to compulsory purchase and improve the few outstanding unimproved properties.

The following table shows details of applications submitted during the year :-

	19	11	11	52
--	----	----	----	----

Type of Grant	Number of Applications Submitted.	Granted	Refused	Completed	Amount paid in respect of work in previous column.	Withdrawn after being approved.
Standard	171	140	46	162	£38,923.24	14
Improvement	740	559	20	396	£208,778.72	11
Special	2	NIL	1	NIL	NIL	NIL
TOTAL	913	699	67	558	£247,701.96	25

An Analysis of the 162 completed Standard Grants shows that the amenities provided are as shown below :-

OWNER - OCCUPIED HOUSES.

TENANTED HOUSES								
Total Grants	Baths	Wash Basins	Hot Water	Water Closets	Septic Tanks	Mains Water	Sinks	Outbuilt Bathrooms
142	118	112	129	125	3	2	50	1
Total Grants	Baths	Wash Basins	Hot Water	Water Closets	Septic Tanks	Mains Water	Sinks	Outbuilt Bathrooms
20	19	19	19	19	-	-	8	-

There were no special grants paid in 1975.

An analysis of the 396 completed Improvement Grants shows that the amenities provided were as shown below:-

OWNER - OCCUPIED HOUSES

Total Grants	Baths	Wash Basins	Hot Water	Water Closets	Foodstores	Septic Tanks	Kitchens	Dormer-Windows
332	162	156	165	160	229	6	61	111

TENANTED HOUSES

Total Grants	Baths	Wash Basins	Hot Water	Water Closets	Foodstores	Septic Tanks	Kitchens	Dormer Windows
64	49	51	49	51	48	3	11	14

OWNER - OCCUPIED HOUSES

An analysis of the 105 completed Improvement Grants shows that the amenities provided are as shown below:-

Offices, Shops and Railway Premises Act 1963.

The total number of premises registered at the end of 1973 was 991 compared with 977 the previous year. Adjustments are made to the register as new premises are opened, or when existing premises go out of business.

The number of newly registered premises during the year was 24.

There were 7 accidents notified during the year, none of them fatal.

Five notices were served regarding 7 contraventions.

Routine inspections were carried out by the District Public Health Inspectors, due to the loss of a Specialist Inspector in October of the previous year, when he left to take up a post with another authority.

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	16	16	-
Outside of Borough	12	12	-
Total	28	28	-

There were no positive cases found either on special samples or when samples were obtained during street deliveries.

DISEASES OF ANIMALS ACT 1950.

During the year no case of notifiable disease under the following Orders was reported to the Department:-

- Anthrax Order 1938,
- Foot and Mouth Disease Orders 1928 to 1969,
- Swine Fever Order 1963,
- Fowl Pest Order 1936 as amended,
- Sheep Scab Order 1938 as amended.

Live Poultry (Movement Restrictions) Order 1971 as amended.

No licence was applied for to hold a sale of store poultry. A licence was applied for and issued in connection with the Bantam Section of the Halifax Agricultural Show in August.

Transit of Animals Order 1931 as amended.

Vehicles used for the transit of animals have been checked as to washing out and cleansing; and the drivers' movement of animals records inspected.

Animals (Landing from Channel Islands, Isle of Man, Northern Ireland and the Republic of Ireland) Order 1955 as amended.

During the year 21 cattle were licensed under the Order to premises in Halifax. The arrival and detention of these animals was checked by visits to the farms concerned.

The Markets (Protection of Animals) Order 1964.

During the weekly visits to the Halifax Auction Mart no irregularity under the Order was noticed.

Movement of Animals (Records Order) 1960 as amended.

The records of the movement of animals under this Order have been checked. One person was cautioned for an irregularity under the Order and advised as to the future.

The Tuberculosis Order 1964.

Two irregularities under this Order in the matter of ear-marking of animals came to notice during the year. In both cases the person concerned was cautioned and advised as to the requirements in the future.

Disease of Animals (Waste Foods) Order, 1957.

Prior to 20th April 1973 sixteen persons were licensed in Halifax to process Waste Foods under the Order. The Movement of Pigs (Waste Food Precautions) Order 1973 came into operation on 20th April 1973 and seven persons licensed to process Waste Foods under the 1957 Order reported ceasing to do so because of the requirements under the 1973 Order. Nevertheless all the persons licensed were given a copy of each Ministry circular relating to the precautions to be taken in processing Waste Foods, not only for their guidance but to impress upon them the necessity to take every care to avoid the spread of disease, particularly in the matter of the recurring outbreaks of Swine Vesicular Disease throughout Britain.

Two persons were advised during the year that their premises should be cleaner, and in each case an improvement was made.

Movement of Pigs (Waste Foods Precautions) Order 1973.

This Order came into force on the 20th April 1973 and under the Order swill fed pigs can only be moved under a licence.

Fifty one licences were issued for the movement of 574 pigs to slaughter houses for slaughter.

One irregularity in the movement of pigs came to notice, and in this case the pig keeper, the haulier, and the butchers concerned were cautioned and advised as to the requirements in the future.

Regulation of Movement of Swine Order 1959.

The Halifax Auction Mart on Victoria Road was visited each week and licences were issued for the movement of 12,525 pigs from the market. Licences were received from different markets in respect of 2,072 pigs consigned to Halifax Abattoir. A weekly visit was made to the Abattoir to check the arrival and disposal of these pigs.

Licences were also received from other markets in respect of 3,870 consigned to farms in Halifax. The movements of these pigs and detention on the farms concerned were checked by visits to these farms.

Sheep Scab Order 1938 as amended.

Following an outbreak of Sheep Scab in Lancashire and part of the West Riding of Yorkshire 213 sheep were consigned under licence to Halifax Abattoir. The arrival and disposal of these sheep was checked.

SWINE VESICULAR DISEASE

The Swine Vesicular Disease Order 1972 as amended.

On 24th February 1973 due to outbreaks of Swine Vesicular Disease, Yorkshire became part of a Controlled Area under the Foot and Mouth Disease Orders and the Swine Vesicular Disease Order 1972 as amended. This Order remained in force until 20th April.

Between the 24th February and 18th March due to an outbreak of Swine Vesicular Disease at Wilsden an Infected Area was declared under the above Orders resulting in those parts of Halifax west and north of the A6036; A58 and A646, being included in the infected area, whilst the remainder of Halifax remained inside the controlled area.

The movement of all pigs was by licence only and during the period the Controlled Area Order was in force 456 licences were issued authorising the movement of 5,007 pigs, including 1,373 store pigs to farms; 2,211 fat pigs to Halifax Abattoir, and 1,423 to Halifax Auction Mart for sale for slaughter.

Due to further outbreaks of Swine Vesicular Disease, Yorkshire became subject to a new Controlled Area Order between 29th June and 14th July, and during this period 130 licences were issued for the movement of 1,648 pigs including 389 store pigs to farms; 527 fat pigs to Halifax Abattoir; and 732 pigs to Halifax Auction Mart for sale for slaughter.

The movements of all these pigs during these periods were checked as to detention on farms, disposal at the abattoir, and destination from the Auction Mart.

On both occasions when these Orders were in operation a licence was issued authorising the holding of the Halifax Auction Mart for the sale of pigs for slaughter only.

Between 16th November and 6th December, Lancashire became a Controlled Area under the above Orders and during this period 137 pigs were licenced from Halifax Auction Mart for movement into the controlled area of Lancashire for slaughter.

On 21st. December once again Lancashire became a controlled area, and due to further outbreaks of Swine Vesicular Disease, this controlled area was extended on 31st December to cover the whole of the North-of-England including the whole of Yorkshire thus necessitating once again the licencing of the movement of all pigs.

	Hens	Chickens	Numbers processed
Total	111,217	2,247,212	2,358,429
(a)	1,980	40,619	42,599
(b)	1,778	1,238	3,016
Estimated weight of condemned poultry:	27,000 lb.		
	127,797 lb.		

(a) Number of supplies taken for poultry processing
 (b) Number of supplies taken for poultry consumption

MEAT INSPECTION

<u>CARCASES INSPECTED AND CONDEMNED</u>	<u>CATTLE</u>		<u>CALVES</u>	<u>SHEEP AND LAMBS</u>	<u>PIGS</u>
	<u>EXCLUDING COWS</u>	<u>COWS</u>			
Number killed	6622	1524	101	38310	14150
Number <u>Not</u> inspected	-	-	-	-	-
<u>All diseases except Tuberculosis and Cysticerci</u>					
Whole carcasses condemned	-	4	5	99	40
Carcasses of which some part or organ was condemned	514	306		2127	1113
<u>Tuberculosis only</u>					
Whole carcasses condemned	-	-	-	-	-
Carcasses of which some part or organ was condemned	-	-	-	-	-
<u>Cysticerci</u>					
Carcasses of which some part or organ was condemned	-	-	-	-	-
Carcasses submitted to refrigeration	-	-	-	-	-
Generalised and totally condemned	-	-	-	-	-

POULTRY

There are three Poultry Slaughtering Establishments in Halifax and the following table shows the numbers of poultry slaughtered in 1973.

	<u>Chickens</u>	<u>Hens</u>	<u>Total Birds.</u>
Numbers processed	3,247,213	111,975	3,359,188
Number condemned	40,619	1,980	42,599
% Condemned.	1.25%	1.77%	1.27%

Estimated weight of condemned poultry: 57968.7 kg.

or 127,797 lbs.

FOOD SURRENDERED OR CONDEMNED.

1. Meat.	Tons (nearest)	Tons (nearest).
(a) slaughterhouses		
(i) carcass meat	7	19
(ii) Offal	12	
(b) wholesale premises.		
(i) carcass meat	-	-
(ii) offal	-	
(c) retail shops		
(i) carcass meat	-	
(ii) offal	-	lbs.
2. Cooked meat and meat products.		3,614
3. Canned meats.		
4. Other canned foods.		
5. Fish (fresh)		168
6. Fruit and vegetables (fresh).		23831
7. Frozen foods due to cabinet breakdown.		3513
8. Other foods.		478
		31604
	Total	31604

FOOD AND DRUGS SAMPLING

	(i) Number of Samples. Unsatisfactory Reports.				Legal Proceedings Instituted	Total Number of convictions secured.
	Formal	Informal	Analysis	Labelling.		
FOODS.	28	201	51	11	3	3
DRUGS.	-	-	-	-	-	-

(ii)	Commodity	No. of Samples Taken.	Number unsatisfactory	
			Analysis	Labelling
	Milk	20	4	
	Cream	1		
	Soft Drinks	13	1	
	Wine	1		
	Ice Cream	12		
	Sausages	12	2	
	Meat Products	14	7	1
	Tinned Meat Products	10	1	

- (iii) (a) Number of samples taken for pesticide residues 4
Number of samples containing residues above recommended limits. -
- (b) Number of samples taken for metallic contamination. -
Number found to contain metals above statutory limits. -

(I.) BACTERIOLOGICAL SAMPLING.

Total number of all samples taken

54

Results of ice-cream samples.

Grade	Mobiles.				Premises.			
	I	II	III	IV	I	II	III	IV
Soft Ice-cream								
Other " "					24	5	2	1

Other Foods.

Sample	No. taken.	No. Unsatisfactory.
Sausages (all types)	4	
Meat Pie		
Sliced Meats.	2	
Flour Confectionery	2	
Fresh Cream	1	
Milk	54	3

5. Number of samples of milk submitted for examination for brucella

28

6. Number of samples Ring test positive.

1

7. Number of Ring test positive samples found positive after Cream culture.

-

FOREIGN MATTER AND MOULD

The number of cases of foreign matter or mould in food dealt with during the year was as set out in the table below.

COMMODITY	<u>Foreign Matter.</u>		<u>Mould.</u>
	Home produced food.	Imported food.	
Milk	1	-	1
Butter		-	1
Cheese		-	3
Bread	3	-	
Canned Meat	1	-	
Cooked Meat		-	1
Meat Pies	1	-	
Fish		-	1
Fruit		-	1
Jan	1	-	
Vegetables		-	
Cereals	2	-	
Sweets	1	-	
Flour		-	
Confectionery	5	-	1
Other Food	2	-	1

(iii) (a) Number of samples taken for pesticide residues
 Number of samples containing residues above
 recommended limits.
 (b) Number of samples taken for pesticide residues
 Number found to contain residues above statutory limits.

CLEAN AIR

Dark Smoke

Clean Air Acts 1956, 1968, Section 1.

	CAA 1956	CAA 1968
(a) number of contraventions recorded	4	1
(b) successful prosecutions	1	1
(c) unsuccessful prosecutions	-	-

Furnaces

Clean Air Act 1956, Section 3

(a) notifications received	2
(b) applications for prior approval	-
(c) number of cases in which alterations were required	-
(d) number of applications granted	-

Chimney Heights

Clean Air Act 1968, Section 6

(a) number of applications	3
(b) number of cases in which alterations were required	-
(c) number approved	3
(d) number refused	-

B - DOMESTIC

SMOKE CONTROL AREAS

SALE OF FUELS

Clean Air Act 1968, Section 9

(a) number of contraventions	1
(b) successful prosecutions	-
(c) unsuccessful prosecutions	-

Total

FACTORIES

H.M. Inspector of Factories sent 5 notices (comprising 5 items) under Section 9 of the Factories Act, 1961. There were no complaints brought forward from 1972.

All complaints were remedied during the year.

There were 4 outworkers on the register at the end of the year. There were no cases of outwork being carried on in unwholesome premises (Section 134).

PART VIII OF THE ACT

Outwork

(Sections 133 and 134)

Nature of Work (1)	Section 133			Section 134		Prosecutions (7)
	No. of outworkers in August list required by Section 133 (c) (2)	No. of cases of default in sending lists to the Council (3)	No. of prosecutions for failure to supply lists (4)	No. of instances of work in unwholesome premises (5)	Notices Served (6)	
Wearing apparel) Making etc.	4	-	-	-	-	-
	) Cleaning and Washing	-	-	-	-	-
Total		4	-	-	-	-

NOISE ABATEMENT ACT 1960

SECTION 2

Ice Cream Chimes - Loudspeakers etc.

Number of:-

Complaints received	
Cases complained of	
Cases pursued	
Cases remedied informally	
Prosecutions	
Convictions	

NIL

6 complaints were received of noise sources exempt from proceedings under the Noise Abatement Act, or to which action under the Act was not appropriate:-

OPERATIONS OF STATUTORY UNDERTAKERS	TRAFFIC NOISE	AIRCRAFT NOISE	OTHER	TOTAL
5	1	-	-	6

Viz 5 from operators of Statutory undertakers and 1 from Traffic Noise.

EDUCATION COMMITTEE

EDUCATION COMMITTEE

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ANNUAL REPORT

on the

SCHOOL HEALTH SERVICE

for the Year 1973

Go-opted Members:

- Mrs. K. Wilson
- Mr. J. Green
- Mr. G. Greenwood

VALLURI R. RAO, B.Sc., M.B., B.S., D.P.H., M.F.C.M., F.R.S.H.
Acting Principal School Medical Officer

Mr. A. Pinnane

Mrs. M. S. ...

Chief Clerk: Mr. T. ...

Charital Staff:

- Mr. J. ...
- Mrs. C. ...

EDUCATION COMMITTEE

EDUCATION COMMITTEE

The Worshipful the Mayor,
Councillor R. Talbot

Chairman:
Councillor K. G. Lord

Vice-Chairman:
Councillor Mrs. B. Wildsmith

on the

Alderman J. Burdock	Councillor Mrs. E. Helliwell
Alderman T. Enderby	Councillor I. Jones
Alderman G. M. Hackett	Councillor T. Lawler
Alderman M. Jagger	Councillor J. P. Thompson
Councillor J. Blackburn	Councillor Mrs. J. Tidswell
Councillor E. Cavanagh	Councillor J. Tolan
Councillor Mrs. M. Fletcher	

Co-opted Members:

Mrs. K. Walton
Mr. J. Green
Mr. G. Greenwood

Chief Education Officer: Mr. A. Pickvance

Mr. A. Pickvance

STAFF OF THE SCHOOL HEALTH SERVICE

(as at 31st December, 1973)

Acting Principal School Medical Officer:

Dr. Valluri R. Rao, B.Sc., M.B., B.S., D.P.H., F.R.S.H., M.F.C.M.

Senior Departmental Medical Officer:

Dr. Mary Brayshaw, M.B., Ch.B. (Leeds)

School Medical Officers:

Dr. Abdul Wahid Awan, M.B., B.S.

Dr. Anwar Ali, M.B., B.S.

Dr. Brendan Fernandez, M.B., B.S., D.C.H.

Ophthalmic Surgeon:

S. Robertson, M.B., Ch.B., D.O.M.S. (retired August 1973)

B. Holroyd, F.R.C.S., D.O. (commenced August 1973)

Orthopaedic Surgeon:

J. G. Gill, M.A., M.B., B.Ch., F.R.C.S. (Eng.).

Child Guidance Clinic:

Dr. G. F. J. Goddard, M.R.C.S., L.R.C.P., D.P.M. (Medical Director)

P. Monaghan, Educational Psychologist

Mrs. C. Berry, Social Worker

Miss J. Sharples, Social Worker

Mrs. J. Riley, Trainee Social Worker

Dental Officers:

William E. Crosland, B.Ch.D., L.D.S., D.D.H. (Principal Dental Officer)

K. G. Brayshaw, B.Ch.D., L.D.S. (Senior Dental Officer)

N. Mayson, L.D.S. (Senior Dental Officer)

Dental Auxiliary:

Miss B. Sheldon

Dental Assistants:

Maureen Slingsby, Shirley Crossley, Patricia Pollard (part-time),

Jeannie Tiffney

Dental Anaesthetist:

Dr. J. B. MacFarlane, M.B., Ch.B. (part-time)

Director of Nursing Services:

Miss S. M. Grayson

School Nurses:

Mrs. Kaye (Senior Nurse), Mrs. F. Scaggs, Mrs. M. Smith, Mrs. C. Wood,

Miss. I. Holdsworth, Mrs. N. Hobbs, Mrs. J. Wilson, Miss G. Brearley

Orthopaedic Staff:

Gregor S. Stewart, M.C.S.O., S.R.P.

Mrs. M. S. Rawson, M.C.S.P. (part-time)

Speech Therapist: vacant

Chief Clerk: Mr. T. K. Boothman

Clerical Staff:

Mr. J. Winduss (Senior Clerk), Mrs. A. Carr, Mrs. B. Bonner,

Mrs. C. Allcock, Miss M. L. Wilson

To:

The Chairman and Members of the Education Committee

I submit a shortened report on the work of the School Health Service for the year 1973, owing to the limited time and facilities for printing the report before 31st March 1974.

Dr John G Cairns, who had been the Principal School Medical Officer for the last fifteen years has retired in October 1973 and tribute must be paid for his excellent contribution in managing and improving the School Health Service under very difficult conditions of staff shortage. We wish him good health and happiness in his retirement period.

I am most grateful to the Education Committee for appointing me as Principal School Medical Officer from October 1973.

Another member of the School Health Staff, Mrs D B Parkinson, who was Senior School Nurse also retired, in April 1973, after 27 years of loyal and trustworthy service with this Authority and we wish her happiness and good health in her retirement period. Mrs Kaye was appointed in her place, in May 1973 and we hope she will be with us for many years to come.

There was always a shortage of School Dentists but, for the first time for many years, the shortage has been alleviated by the appointment of two full time dentists, Mr K G Brayshaw and Mr N Mayson, and we were very lucky in obtaining the services of these two very able Dental Officers. Mr Crosland, Principal School Dental Officer, has maintained a very efficient School Dental Service and I am very grateful to him for this. A Dental Auxiliary has also been appointed and the School Dental Service has now become a more comprehensive service in all aspects. From 1st April, 1974, this service will be managed by Calderdale Area Health Authority as an integral part of integrated Child Health Service. An Area Dental Officer will be appointed shortly by the Area Health Authority and he will be in complete charge of this service.

We were unable to provide Speech Therapy Service due to the general shortage of Speech Therapists in the country. Perhaps after the 1st April, 1974, when the new Calderdale Area Health Authority takes over this service and appoints an Area Speech Therapist establishing a career structure the problems of recruitment to this speciality will be alleviated.

From 1st April, 1974, the new Calderdale Area Health Authority will be responsible for an integrated Child Health Service, under the powers of the National Health Services Re-organisation Act, 1973. But so far as assessment and provision of special educational facilities for handicapped children are concerned, this aspect of the service will still be the responsibility of the Education Committee and not of the Area Health Authority. A specialist in Community Medicine is being appointed and he will be directly accountable to the Area Health Authority.

A close liaison between the Area Health Authority and the Calderdale Education Authority will be maintained through Joint Consultative Committees which are being established now.

The programme of school routine medical examinations has been carried out in full but the shortage of medical staff has restricted visits to schools for re-inspections and follow-ups, but, for the first time, we are now able to achieve a full staffing position with regard to Medical Officers with the appointment of Dr L Lord.

We are very grateful for the co-operation of the specialist services at the hospitals in our work over the past year, particularly in relation to Paediatrics, ophthalmic, orthopaedic and otolaryngology.

Consultation Clinics at the Laura Mitchell Clinic have continued and parents have been only too willing to attend when requested and their attendance at school medical inspections has remained constant during 1973.

A very close liaison has been established between school nurses and other nursing staff in Personal Health Services after the appointment of Miss S M Grayson as Director of Nursing Services.

The school nurses continued to supervise the health and well-being of all children at school. They attended at school medical examinations and routine immunisation programmes and carried out hygiene inspections at regular intervals. They arranged routine screening of children for hearing and visual defects.

The school nurses are present at the minor ailment clinics giving treatment and, where necessary, referring children to their own family doctor or to the hospital. School nurses have also taken a very active part in discussing various problems with parents on matters of hygiene and health and to refer them to other agencies as required.

The Employment Medical Advisory Service came into operation on 1st February 1973 under the Employment Medical Advisory Service Act 1972. This service is mainly concerned with the welfare of children under the age of 18 who are employed in industry and other agencies. Very close liaison has been established between the School Health Service and Employment Medical Advisory Service.

May I take this opportunity of thanking the Education and School Health Staff for their loyalty and work during 1973 and I thank the Chief Education Officer and the Education Committee for their support in all matters appertaining to school health.

Yours faithfully,

VALLURI R. RAO

Acting Medical Officer of Health
Acting Principal School Medical Officer

Ophthalmic Clinic

During 1973 Dr S Robertson who for over twenty years has attended the Clinic as Ophthalmic Consultant, retired and he has been replaced by Mr B Holroyd. During the year 685 children were examined and 362 pairs of glasses were prescribed. Children who need more intensive treatment, e.g. squints etc., are referred to the Royal Halifax Infirmary. The continuation of this twice weekly clinic does provide a good service and relieves the pressure on the Ophthalmic Services in the hospitals.

Speech Clinic

Since December 1972 we have been without the services of a Speech Therapist. Some of the more urgent cases are dealt with by the part-time Speech Therapist at the hospital but this service is only limited and referrals can only be made to it from the Paediatricians at the Halifax General Hospital. In the meantime a waiting list is kept at the School Clinic so that as soon as staff is available this serious situation can be dealt with. We have an establishment for two full-time Speech Therapists but this establishment has never been completed since it was agreed on.

Orthopaedic Clinic

The main function of this clinic is to provide an efficient remedial and physiotherapy service and children are referred from the School Medical Officers as a result of the school medical inspections. The Orthopaedic Surgeon attended only 4 times during 1973 as much of the initial work is now carried out at the Royal Halifax Infirmary. The statistics shown at the end of this report do, however, show that Mr Stewart and his part-time assistant, Mrs Rawson, treat a large number of children each year and the facilities we have to offer are unique in the Calderdale area and many of the children seen by Mr Gill at the Infirmary are passed to the School Health Service for a continuation of recommended physiotherapy treatment.

Audiometry

The screening of children has continued in 1973 with the first screening at school and suspected hearing losses re-screened at the clinic with the necessary referrals to the Consultant Otolaryngologist, through the general practitioner when necessary.

Number screened during 1973	1635
Number re-screened	333
Number referred to Otolaryngologist	25

Infectious Diseases

No T B cases were referred to the Chest Clinic during 1973 and the usual programme of B.C.G. vaccinations was carried out. No case of Diphtheria was notified during 1973 but this happy state can only be maintained if the full programme of immunisations is carried out and parents are constantly made aware of the necessity of protection for their children. Details of immunisations are given in the statistics at the end of this report.

Tonsils and adenoids

During 1973, 271 children were operated upon at the Royal Halifax Infirmary for the removal of tonsils and adenoids and in addition, 44 other children were referred to the Ear, Nose and Throat Department for other types of treatment.

Miscellaneous Examinations

192 children were examined for newspaper delivery and 60 for assistant duties in shops.

The number of candidates for the teaching profession examined was 121 and the number of teachers entering the profession was 14

The number of immigrant children examined in 1973 was 142. This is not a great problem in Halifax and the provision made in schools for immigrant children and their education has been developed during the year.

Bermerside Open Air School

The new Physically Handicapped School which will replace the present Bermerside School is now well on the way to completion and when completed its scope will be widened to take not only delicate children but also physically handicapped children from a wide area. At present Bermerside is catering for many maladjusted children, on the recommendation of the school Psychiatrist, in need of a form of treatment in a school geared to individual needs where psychological upsets can be more fully dealt with. What will happen to such children in future is a matter of conjecture. Perhaps the Education Service will develop its Psychological Service more fully to cope with this type of child. It is, however, good to note that the delicate child will still be able to benefit from attendance at the new school. Mr. Kendall, the Headmaster, has guided this school very successfully over the past years and he and his staff have had, of necessity, to widen their scope to take in children that the school was never intended to cope with when it was first opened in Halifax. It has more than served a need in the past and many children, both past and present, have need to be grateful for the help they have received there.

Child Guidance Clinic

STATISTICS:	Pre-school attendances	7
	5 - 7 years of age	14
	8 - 10	43
	11 - 15	79
	over 15	25

Total Attendances:

	Psychiatrist	229 sessions: 605 patients
	Educational Psychologist	126
	Social Worker	1241
	Domestic visits by Social Worker	1109
New cases:	Boys	116
	Girls	52

A glimpse at the statistics for the year shows that there has been no substantial change in the numbers referred to the clinic, or in their age distribution and sex ratio.

Towards the end of the year an analysis was undertaken of one thousand consecutive new cases referred to the clinic in the period March 1967 to November 1973. The cases were grouped under various "reasons for referral" and although the number of headings had to be extended to 18, 82% of the new cases could be placed in only one of six statistically significant categories. These categories, with percentage of the total in brackets, are as follows:

Absence from school	(25%)
Theft	(17%)
Temper Tantrums (violence, destructiveness)	(13%)
Depression	(12%)
Rebelliousness	(8.5%) and
Educational retardation	(7%)

The other twelve categories ranged from less than 1% to 3% of the total referred. Although the statistical significance of the latter groups is apparently nil one has to bear in mind that the clinic team has been seeing only 2% of the total school population and if this number were doubled then a different pattern might emerge.

I think one would be right in assuming that the absentee rate is an index of a school's effectiveness as a socio-tutorial unit and if one were to add to the school absentees those children who are extremely reluctant to attend and/or steal money from their mother's purse so that they may make life easier for themselves at school by "buying off" their tormentors, then a "popularity poll" in respect of most schools would be alarmingly low. I suppose one has to accept that no child really likes going to school and they only go because they have to. The most enthusiastic response I ever get to my question "Do you like going to school?" is "Oh, it's alright" but never "I love it!" and never a hint, except from the parents, that the school holidays are too long.

The clinic team members spend a great deal of time in persuading children to attend school but a great deal more time is spent in reassuring parents that their child is normal - that he bullies his younger siblings because he is bullied

at school - that he shouts and screams at home because he is too frightened to express his anger and frustration at school. With painstaking interrogation, care being taken never to put an answer in a child's mouth, parents frequently hear for the first time straight from the mouths of their children something of the humiliation, injustices and persecution that they suffer on the way to school, at school and on returning home from school at the hands of other children.

I have one final observation to make and that is that only one of the thousand new cases analysed earlier in this report was a "persecutor" as opposed to one of the "persecuted". I can only assume that the parents of children who are "able to look after themselves" (at the expense of the smaller and less aggressive child) see no reason why they should bring their child to a clinic such as ours even allowing that the school suggested it, but it seems a great pity that at school, as in the world outside, a handful of aggressive, usually unintelligent psychopaths - bully-boys (or girls) - are allowed to terrorise the members of their group and undermine its social structure, plus the authority of the establishment even to the extent of intimidating its administration. This minority of aggressive trouble makers should be weeded out and placed in schools of their own, preferably residential ones, because these are the children from disturbed homes about whom one hears so much but of whom one sees far too little.

G F J GODDARD, M.R.C.S., L.R.C.P., D.P.M.

School Dental Service

It is pleasant to write my last report as Principal School Dental Officer with at least a modicum of optimism for the future. Staffing problems have received notice in many of my earlier reports, but this year, for the first time, the establishment is complete. In February, Mr Brayshaw joined the staff on a full time basis as the second Senior Dental Officer to be appointed in recent times, and Miss Sheldon came to us from Leeds to fill the vacancy for a Dental Auxiliary. I must say however, that the present staffing situation, gratifying though it is, may not be ideal, and it will be for the Area Health Authority to decide what are the realistic staffing requirements.

Dental inspections in schools commenced again on a limited basis, and as the backlog of treatment is reduced, it is anticipated that the inspection programme can be accelerated in the coming year.

I would be happy to be in a position to say that an improvement in the condition of the teeth of school children in Halifax had taken place but it is my opinion that this is not so. It is difficult to be precise in assessing the over all condition of the teeth of the school population without a scientifically designed oral survey and I consider this to be a matter requiring serious consideration in the not too distant future.

New methods of preventing dental decay have received much publicity of late, and it is likely that some of these preventive procedures will prove to be extremely valuable. However, for these methods to be significantly effective it is of advantage for them to be used together with a programme of fluoridation of drinking water supplies. Put simply, fluoridation reduces dental caries by half when both the deciduous and permanent dentitions are considered. The principal benefits are to the surfaces of teeth which are difficult or impossible to treat by methods used in dental surgery. Fluoridation is safe, effective and cheap. The other methods of prevention referred to earlier, are relatively expensive in that they require the attention of professional staff; they also require conscientious attendance

of the patient at his source of dental care. Fluoridation of the public water supplies is then of the utmost importance as a public health measure is any real inroads are to be made on a community basis into the near universal disease of dental decay. This, I feel, is the message that I must pass on to our new employers, the Area Health Authority and to the Calderdale Council.

W E CROSLAND, Principal School Dental
Officer

SCHOOL HEALTH SERVICE REPORT

for year ending - 31st December 1973

<u>Medical Inspections</u>	<u>Routine Inspections</u>	<u>Re-Inspections</u>
Number of schools at which inspections were carried out	55	10
Number of children examined	4283	455
Number of special cases brought forward by Head Teachers	—	
Number of parents who attended with their children for consultation with the School Medical Officers	2870	
<u>Inspection at School Clinic</u>		
Number of sessions at which the Doctors attended School Clinic for consultations and inspections		88
Number of children examined	-	
New cases		419
Further examinations and advice		255
TOTAL number of cases		<u>674</u>
Number of parents who attended with their children for consultation with the Doctors		674
Number of children examined and passed fit for part-time work		252
<u>Medical Treatment</u>		
Treatment given at Minor Ailment Clinics - New defects		5296
Further treatment of cases previously dealt with		6080
Number of exposures to artificial sunlight included in above treatment		405
<u>Bermerside Special School</u>		
Number of children examined by School Medical Officer		403
<u>Nurses work</u>		
Number of sessions with School Medical Officer at schools		364
Number of sessions for minor ailment treatments at school clinics		1487
Number of sessions with School Medical Officers at Insp. Clinic		133
Number of sessions devoted to Ultra Violet Ray treatment at School Clinic		114

Miscellaneous Work continued

Polionyelitis - inoculations - orally on sugar	1545
Triple Antigon injections	-
Anti-tetanus serum	462
Anti-tetanus and diphtheria injections	965
Number of candidate teachers examined by School Medical Officers	133
Number of immigrant children examined by School Medical Officers	142

Summary of Inspections, Treatments, etc.

Examinations at schools :-	by Doctors	5141
	by Dentists	2334
	by Nurses	64970
Examinations and Treatments at Clinics		30287
		<u>102732</u>
Parents interviewed by School Medical Officers		3544



