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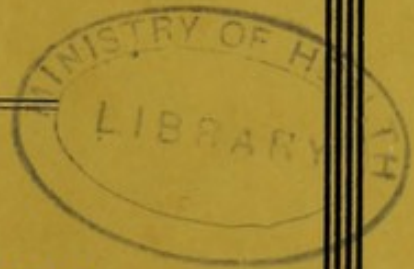
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**Haydock
Urban District Council**

**Annual Report
of the
Medical Officer of Health
1951.**

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Annual Report
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Medical Officer of Health
1881

**HAYDOCK URBAN DISTRICT COUNCIL
1951**

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Medical Officer of Health :
A. C. CRAWFORD, T.D., M.B., Ch.B., D.P.H., D.T.M.

Sanitary Inspector :
R. V. WATKIN, Cert.S.I.B., M.S.I.A.
Qualified Meat and Other Foods Inspector (R.S.I.)

CONTENTS

Preface	Page
.....	5
SECTION 1—General Statistics and Social Conditions	8
SECTION 2—Vital Statistics	9
SECTION 3—Infectious Diseases	14
SECTION 4—Sanitary Circumstances of the Area	18
SECTION 5—Housing	23
SECTION 6—Industrial and Commercial Hygiene	24
SECTION 7—Sanitary Inspection, Summary of Inspections, etc.	25
SECTION 8—Provision of General Health and Ancillary Services in the District	27
Alphabetical Index	34

To the Chairman and Members of the Haydock U.D.C.

I have the honour to submit for your perusal the following Annual Report on the health and sanitary circumstances of the Urban District during the year 1951—the turn of the second half of the twentieth century, which has seen such remarkable progress in so many fields, not least in the science and art of medicine, both preventive and curative. Pioneer work by those engaged in both these fields—which must be complementary, and should indeed be integral components—has resulted in the relatively healthy environment in which we of the present generation live, in contrast to the filth, want and squalor of the masses of the people less than a century ago. Recent legislation, which has changed the face of medicine in all branches, has tended to over-emphasise the importance of curative measures, to the relative exclusion of the prevention aspect: largely because whereas prior to this legislation (The National Health Service Act of 1946) the great public health environmental services, so utterly vital and fundamental, had so usually been taken for granted in that they did not involve any personal and direct cost to the individual as an individual, but only as a rate-payer. The Health Service Act effected no change in this respect, and so invoked little thought or comment: on the other hand, the curative medical services, both general and specialist and hospital, which had hitherto been accepted as an individual responsibility and expense, became “free” or apparently so. Little wonder, therefore, that in general the public attention was directed to this branch of medicine rather than to the preventive side, but it cannot be gainsaid that without the healthy environment in which we live to-day as the foundation on which to lay the many spectacular achievements of curative medicine the benefits of much of the latter would largely be rendered nugatory.

It seems, therefore, only just, at the beginning of this second half of the century, that tribute should be paid by all to those pioneers in the preventive or “public health” field—doctors, veterinary surgeons, sanitary inspectors, chemists, bacteriologists, laboratory technicians, *etc.*, whose devoted endeavours in their day and generation have resulted in the vastly improved amenities and environment which we at present enjoy. In our own Health Department can be found very convincing evidence of the painstaking, highly skilled and determined endeavours of my predecessors in the office of Medical Officer of Health; and I should like to pay to them and to their Sanitary Inspector colleagues, a sincere personal tribute of admiration and respect.

To consider first the vital statistics for the current year, the “crude live birth rate” of 17.8/1000 population is slightly above the analogous figure for 1950 (17.6/1000), which shows of course a favourable reversal of the general trend of the live birth rate to decline. Still-births, 5 in number, giving a Still-birth rate of 23/1000 total births, and a rate per 1000 population of 0.42, shew no change, as against the previous year, and these rates are somewhat higher than for England and Wales as a whole (0.36). The number of deaths was 122 (138 in

1950) giving a crude death rate of 10.4/1000, and an "adjusted" rate of 12.5/1000, as compared with 11.5/1000 and 13.9/1000 last year. The excess of live births over deaths is thus 87—the "natural increase" of the population.

Turning next to the Infant Death Rate, (of infants under the age of 12 months), the number registered was 6, a figure which is just half that of a year ago, and which gives an infant death rate, for every 1000 live births, of 29, which is almost identical with that for England and Wales as a whole (29.6). When dealing with such small actual numbers one must, of course, always treat them with considerable reserve, because of the great fluctuations which may occur purely as "chance variations"; but to the best of my knowledge this rate is the lowest ever recorded in this district, and is almost 16/1000 less than the mean rate for the previous quinquennial period (Incidentally, in 1941, the rate was 126/1000 live births, over four times the present ratio, but 1941 must of course have been a phenomenally unfortunate year from this point of view).

Of the babies who died, 5 out of the 6 were less than four weeks old: in fact, 4 lived less than 48 hours, and all were premature.

Analysis of the general death rate shews that diseases of the heart and circulatory system, which caused 55 deaths if we include the 13 cases of "stroke," is the major group causing death: but that the cancer group (20 deaths) has been displaced from second position by the group of diseases of the respiratory system, (excluding tuberculosis) which in fact resulted in 22 deaths, of which no fewer than 12 were due to influenza in the early weeks of the year. Deaths due to tuberculosis totalled 3, (as compared with 7 in 1950) and those from violence 4, of which 2 were due to vehicle accidents, and 1 to suicide. It may be said, in general terms, that the only really unusual feature in regard to the deaths which occurred during the year was the high number directly attributable to Influenza. Apart from pneumonia and tuberculosis, no deaths occurred from any notifiable diseases, nor were there any "maternal deaths" (due to or associated with pregnancy or childbirth) during the year.

There was, however, a rather heavy incidence of notifiable disease—the infectious fevers) mainly measles, which accounted for no fewer than 407 cases out of a total of 578, and contrasted strongly with the low incidence last year (37). An unusual incidence of pneumonia (74 cases) also swelled the figure, and these two diseases dominated the statistical picture, and obscured the lighter incidence of scarlet fever (28 cases) and of whooping cough (58 cases) both of which were considerably lower than in 1950. Cases of erysipelas, 5 in number, continued to be reported: but neither poliomyelitis (infantile paralysis) nor meningitis notifications were received. An unusual illness, paratyphoid fever (3 cases) occurred synchronously with a similar outbreak in St. Helens and in neighbouring county districts: a special note on this is contained in the body of the report, as also is comment on the influenza outbreak.

Information relating to the Local Health Authority's Services provided under the National Health Service Act, 1946, the National Assistance Act, 1948, and the Childrens Act, 1948 is again included for the information of Members of the Council, as having an intense interest, and influencing very materially the public health and welfare. Among the statistics there given it will be noted with satisfaction that with a percentage of 76% of children under 15 immunised against diphtheria Haydock still maintains its pride of place in the Health Division in this regard. Long may it continue to do so. Of the 3 cases of diphtheria notified, only 1 was immunised : none were fatal.

But vaccination still lags behind : repeal of the Vaccination Acts has led to the unfortunate inference that it is no longer necessary, and has fallen into disuse. Once again I reiterate the statement that such a view is against the balance of authoritative medical opinion, and that as the years pass, and the future generations arise, the point will be reached, at no very distant date, when the percentage of the community protected against smallpox will be so low that the danger of a phenomenal outbreak will become very real.

From the public health aspect the first and foremost and most urgent requirements are undoubtedly the provision of more houses, the effective repair and reconditioning of existing properties, and the abolition of overcrowding. The unsatisfactory nature of the housing position cannot be overestimated or over emphasized, because of its adverse influence on the physical, psychological and moral health of the people. Improvements in drainage and sewerage systems, the paving of back streets, the more effective control of refuse disposal by tipping, and the prevention of pollution of streams and watercourses are also necessary : but to my mind the great and outstanding need is better housing accommodation. The slogan I would advocate would be :— "Houses at whatever (financial) cost."

In conclusion to this preface, I would like to express to you, Mr. Chairman, and to all members of the Council and of the Public Health Committee, my appreciation of and my thanks for the interest you have evinced in and the support you have given to the work of the officers of your Health Department, and I would like to include in this expression of thanks the Chief Officers and staff of the other Departments of the Council, who have so willingly and helpfully co-operated with us. Last, but not least must I add the gratitude which I owe to Mr. Watkin, who so ably "holds the fort" with me in the Department, and who so often undertakes at my request duties which we both realise must be undertaken and which, though seemingly of a routine and humdrum character at times, yet constitute the individual bricks of the defence ramparts of the public health and well-being.

I have the honour to be,
Mr. Chairman and Gentlemen,
Yours obediently,
A. C. CRAWFORD

SECTION 1

GENERAL STATISTICS AND SOCIAL CONDITIONS

Area (acres)	2,395
Population (Census 1931)	10,352
Population (Registrar-General's estimate for mid-1951)	11,760
Number of inhabited houses (Census 1931)	2,029
Number of inhabited houses at end of 1951, according to Rate Books	2,978
Rateable Value	£47,000
Sum represented by 1d. rate	£176

The Township of Haydock extends from St. Helens C.B. in the West to the Urban District of Golborne in the East, a distance of approximately $3\frac{3}{4}$ miles. It is bounded on the North side by the Urban District of Ashton-in-Makerfield and on the South side by the Urban District of Newton-le-Willows.

The district is without any marked undulation of surface, the height above mean sea-level varying from 65 feet at the bottom of West End Road to 200 feet at the top of Millfield Lane.

The sub-soil consists of clay and marl with occasional beds of sand. Surface water gravitates via the various brooks and streams in the district to Sankey Brook.

The occupations of the working population are principally coal mining, engineering in connection with the Collieries and general light engineering.

SECTION 2

VITAL STATISTICS

Summary

Live Births

Legitimate—111 Male, 93 Female	.....	Total	204
Illegitimate—0 Male, 5 Female	.....	Total	5
Total Live Births	.....		209
Crude Birth Rate per 1,000 population	.....		17.8
Adjusted Birth Rate per 1,000 population	.....		18.1

Stillbirths

4 Male, 1 Female	.....	Total	5
Rate per 1,000 total (live and still) births	.....		23

Deaths

70 Male, 52 Female	.....	Total	122
Crude Death Rate per 1,000 population			10.4
Adjusted Death Rate per 1,000 population			12.5

Maternal Mortality			Nil
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Deaths of Infants under one year of age			6
Rate per 1,000 live births			29

Neo-Mortality

Deaths of Infants under 4 weeks of age	.....		5
Mortality rate per 1,000 live births	.....		24

Population : At the Census in 1931 the population enumerated was 10,352. The Registrar-General's estimate for mid-1951 was 11,760 and this figure has been used in calculations of statistics in this report.

Births : During the year there were registered 209 births, being 111 males and 98 females, to Haydock parents, representing a crude birth rate of 17.8 per 1,000 of the population ; the birth rate for England and Wales was 15.5.

There were 5 stillbirths giving a rate per thousand (live and still) births of 23.

Deaths : The total number of deaths of Haydock residents whether within or without the district was 122, comprising 70 males and 52 females. The crude death-rate for 1951 was therefore 10.4 per 1,000 of the population as compared with a death-rate of 12.5 per 1,000 for England and Wales as a whole.

It will be noticed that the increase of births over deaths—the “ natural increase ”—for Haydock during the year was 87.

Infant Mortality : Deaths of infants under one year of age numbered 6, giving a rate per 1,000 live births of 29. The rate for England and Wales was 29.6.

There were no deaths from Measles or Whooping Cough.

Maternal Mortality : There were no "Maternal deaths," i.e. deaths due to or associated with pregnancy or parturition during the year.

Comparability of Crude Live Birth and Death Rates : If the populations of all areas were similarly constituted as regards the proportions of their sex and age groups, their crude rates for live births and deaths (per 1000 population) could be accepted as valid for purposes of comparison with other areas and with the country as a whole.

As the populations of the areas are not thus similarly constituted the Registrar-General supplies "comparability factors" to each area, by which the crude live birth and death rates of the area are weighted to give the "adjusted" rates, which are truly comparable with the adjusted rates of other areas.

For this area the live birth rate comparability factor is 1.02 and the adjusted Live Birth-rate becomes 18.1 per 1000. The Death-rate comparability factor is 1.21 and the adjusted Death-rate is therefore 12.5 per 1000.

Comparisons of Births, Deaths, etc. : The tables on the following pages give comparisons of the Births, Deaths, etc., for the year 1951 and the preceding 5 years ; also the causes of death in the Haydock Urban District for the year 1951.

	Live Births		Deaths (all causes)		Stillbirths		Maternal Mortality		Infant Mortality			
	No. regis- tered	Rate per 1,000 pop'n	No. regis- tered	Rate per 1,000 pop'n	No. regis- tered	Rate per 1,000 total births	No. of deaths regis- tered	Rate per 1,000 total births	No. of deaths regis- tered	Rate per 1,000 live births	No. of deaths regis- tered	Rate per 1,000 live births
HAYDOCK U.D.												
Year 1951....	209	*17.8	122	*10.4	5	23	Nil	Nil	6	29	5	24
Year 1950....	211	17.6	138	11.5	5	23	Nil	Nil	12	57	7	33
1949....	225	18.9	121	10.2	5	22	Nil	Nil	8	36	—	—
1948....	207	17.4	111	9.3	5	23	Nil	Nil	8	38	—	—
1947....	282	24.4	123	10.6	7	24	3	10.38	13	46	—	—
1946....	251	22.1	89	7.8	6	23	1	3.89	12	47	—	—
Average 5 years 1946-1950	—	20.1	—	9.9	—	23	—	3.32	—	45	—	—

* Adjusted (live-birth rate comparability factor, 1.02) = 18.1 per 1,000.
(death-rate comparability factor, 1.21) = 12.5 per 1,000.

**COMPARATIVE BIRTH-RATES, DEATH-RATES, ANALYSIS OF
MORTALITY, AND CASE-RATES FOR CERTAIN INFECTIOUS
DISEASES IN THE YEAR 1951**

	Haydock Urban District	England and Wales	126 County Boro's and Great Towns including London	148 smaller towns (Resident population 25,000 to 50,000 at 1931 census)	London adminis- trative County
Births—	Rates per 1,000 Home Population				
Live Births	17.8	15.5	17.3	16.7	17.8
Still Births	0.42	0.36	0.45	0.38	0.37
Deaths—					
All Causes	10.4	12.5	13.4	12.5	13.1
Typhoid and Paratyphoid	0.00	0.00	0.00	0.00	—
Whooping Cough	0.00	0.01	0.01	0.01	0.01
Diphtheria	0.00	0.00	0.00	0.00	0.00
Tuberculosis	0.25	0.31	0.37	0.31	0.38
Influenza	1.00	0.38	0.35	0.38	0.23
Smallpox	0.00	0.00	0.00	0.00	—
Acute poliomyelitis and polio-encephalitis	0.00	0.00	0.01	0.01	0.00
Pneumonia	0.25	0.61	0.65	0.63	0.61
Notifications (corrected)					
Typhoid Fever	0.00	0.00	0.00	0.00	0.01
Para-typhoid Fever	0.25	0.02	0.03	0.02	0.01
Meningococcal Infection	0.00	0.03	0.04	0.03	0.03
Scarlet Fever	2.38	1.11	1.20	1.20	1.10
Whooping Cough	4.93	3.87	3.62	4.00	3.11
Diphtheria	0.25	0.02	0.02	0.03	0.01
Erysipelas	0.42	0.14	0.15	0.12	0.15
Smallpox	0.00	0.00	0.00	0.00	—
Measles	34.60	14.07	13.93	14.82	14.64
Pneumonia	6.29	0.99	1.04	0.96	0.72
Acute poliomyelitis (including polio-encephalitis)					
Paralytic	0.00	0.03	0.03	0.03	0.02
Non-paralytic	0.00	0.02	0.02	0.03	0.02
Food Poisoning	0.00	0.13	0.15	0.08	0.23
Deaths—	Rates per 1,000 Live Births				
All causes under 1 year of age	29	29.6	33.9	27.6	26.4
Enteritis and Diarrhoea under 2 years of age	0.00	1.4	1.6	1.0	0.7
Notifications (corrected)	Rates per 1,000 Live and Still Births				
Puerperal fever and pyrexia	0.00	10.66	13.77	8.08	14.90

Maternal Mortality	Rates per 1,000 Live and Still Births	
	Haydock	England and Wales
Sepsis of Pregnancy, Childbirth and the Puerperium	0.00	0.01
Abortion with Toxaemia	0.00	0.00
Other Toxaemias of Pregnancy and the Puerperium	0.00	0.24
Haemorrhage of Pregnancy and Childbirth	0.00	0.13
Abortion without mention of Sepsis or Toxaemia	0.00	0.05
Abortion with Sepsis	0.00	0.09
Other Complications of Pregnancy, Childbirth and the Puerperium	0.00	0.18

CAUSES OF DEATH—HAYDOCK U.D. 1951

Causes of Death	Males	Females	Total
All Causes	70	52	122
Tuberculosis, respiratory	2	1	3
Tuberculosis, other forms	—	—	—
Syphilitic disease	—	—	—
Diphtheria	—	—	—
Whooping Cough	—	—	—
Meningococcal Infections	—	—	—
Acute Poliomyelitis	—	—	—
Measles	—	—	—
Other infective and parasitic diseases	—	—	—
Malignant Neoplasms—			
Stomach	6	4	10
Lung, Bronchus	1	1	2
Breast	—	2	2
Uterus	—	—	—
Other malignant and lymphatic neoplasms	3	3	6
Leukaemia, aiukaemia	—	—	—
Diabetes	1	—	1
Vascular lesions of nervous system	8	5	13
Corony disease, angina	5	3	8
Hypertension with heart disease	—	1	1
Other heart disease	14	13	27
Other circulatory disease	3	3	6
Influenza	5	7	12
Pneumonia	1	2	3
Bronchitis	5	—	5
Other diseases of respiratory system	1	1	2
Ulcer of stomach and duodenum	—	—	—
Gastritis, enteritis and diarrhoea	—	—	—
Nephritis and nephrosis	—	2	2
Hyperplasia of prostate	—	—	—
Pregnancy, childbirth, abortion	—	—	—
Congenital malformations	1	—	1
Other defined and ill-defined diseases	10	4	14
Motor vehicle accidents	2	—	2
All other accidents	1	—	1
Suicide	1	—	1
Homicide and operations of war	—	—	—

SECTION 3

Infectious Diseases—Prevention and Control

578 cases of infectious disease were notified as compared with 250 in 1950. This considerable increase was due to the large number of cases of measles, 407 compared with 37 in 1950 and to the increase in the notified cases of acute pneumonia from 17 to 74.

These increases were offset to some extent by decreases in the number of cases of scarlet fever from 44 to 28, and of whooping cough from 140 to 58.

Influenza and Influenzal Pneumonia

No account of the health of the population during the year 1951, would be complete without reference to the wave of influenza (Virus Type "A") which struck the areas of the North East coast, and Merseyside, during the early days of January, and which is believed to have been imported from the Scandinavian Countries.

As Influenza is not normally a notifiable disease, it is not possible to publish accurate statistics of the outbreak, the extent of which can only be assessed by inference and deduction from sources such as the death returns, the notification of pneumonia, the reports, of a verbal character, of local doctors, returns of school attendance officers, information received unofficially from Executive Officers of the Ministry of National Insurance, and from the managers of large factories and industries, and so on. From these it is clear that the epidemic reached material proportions in Haydock, e.g. in December, 1950, no notifications of pneumonia were received, and in February, 1951, the number was only one, whereas in the intervening month of January no fewer than 63 notifications of influenzal pneumonia were received. Again, the locally registered deaths, in December 1950 were 13, in February 1951, 5, whilst in January 1951, the number was no less than 26. Sickness benefit claims were, generally between five and six times the numbers usual during the month of January, and it seems clear that great increase could only have been accounted for by the influenza epidemic.

Fortunately, in the great majority, serious complications were unusual, nor was the initial shock of the attack individually very severe: so that the death roll was very materially smaller than during the outbreak of "Spanish" influenza in 1918, and in addition, the rate of recovery was much more rapid. Nevertheless, influenza and influenzal pneumonia accounted for no fewer than 16 deaths registered locally during January, of which 12 were of Haydock residents.

Acute Pneumonia

74 cases were notified during the year, the majority of these being associated with the influenza epidemic which occurred early in the year. There were 15 deaths.

Measles and Whooping Cough

The incidence of measles was mainly confined to the first half of the year, as also was that of whooping cough. All the patients except one case of whooping cough were treated at home and all recovered.

Scarlet Fever

Cases were generally of a mild nature and there were no fatalities.

Diphtheria

Six cases of diphtheria were notified but on further diagnosis at the infectious diseases hospital 3 of these cases proved to be tonsillitis. Of the 3 confirmed cases, 2 patients had not been immunised.

Para-tyhoid Fever

Three cases of paratyphoid fever were notified, in the western end of the district, during the early part of the year, at a time when a number of cases of this disease were occurring in the St. Helens County Borough, and in areas of the administrative county adjacent to St. Helens. Of the three Haydock cases—all in one family—only two were finally confirmed by bacteriological investigation, which also shewed that the strain of the organism (Vi-phage type 3 (a)) was unlike the infecting agent in the St. Helens, and in other County District cases. Despite strenuous endeavours, which included the sampling of foods, confectionery and ice-cream, both in Haydock, St. Helens, and Birkenhead, the precise origin of this small outbreak was never finally determined.

Isolation and Disinfection

The Infectious Diseases Hospital at Peasley Cross, St. Helens, is available for the treatment of Haydock cases.

38 cases from Haydock were admitted during 1951.

The use of the steam disinfector at the hospital is also available for the disinfection of bedding and clothing as and when required.

In all cases of diphtheria and scarlet fever, disinfection of rooms, bedding and other articles is effected by means of Formic Aldehyde fumigation after the removal of the patient to hospital, or, if nursed at home, when the patient is certified free from infection.

NOTIFIABLE DISEASES DURING 1951

EXCLUDING TUBERCULOSIS, NOTIFICATIONS IN RESPECT OF NOTIFIABLE DISEASES NUMBERED 581. THE SUB-JOINED TABLE GIVES THE CORRECTED FIGURES AND THE NUMBER OF CASES REMOVED TO HOSPITAL.

Disease	Total cases at	Cases Notified Age Periods—Years										Total Deaths	Total cases removed to hospital
		0—	1—	3—	5—	10—	15—	25—	45—	65 and over			
Scarlet Fever	28	—	4	11	12	—	1	—	—	—	—	—	25
Diphtheria	3	—	—	2	—	—	—	1	—	—	—	—	3
Paratyphoid Fever.....	3	1	1	—	—	—	1	—	—	—	—	—	3
Measles	407	13	102	135	153	2	1	1	—	—	—	—	1
Whooping Cough	58	4	22	23	9	—	—	—	—	—	—	—	—
Acute pneumonia (primary and influenzal)	74	1	3	5	1	—	2	10	23	29	15	6	6
Meningococcal infection	—	—	—	—	—	—	—	—	—	—	—	—	—
Acute poliomyelitis	—	—	—	—	—	—	—	—	—	—	—	—	—
Erysipelas	5	—	—	—	—	—	—	1	3	1	—	—	—
TOTALS	578	19	132	176	175	2	5	13	26	30	15	38	38

Tuberculosis

Under the Public Health (Tuberculosis) Regulations, 1930, 21 new cases of respiratory and other forms of tuberculosis were notified. There were 3 deaths from tuberculosis of the respiratory system.

Age Periods	New Cases				Deaths			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	M	F	M	F	M	F	M	F
Years								
0-2	—	—	—	—	—	1	—	—
2.....	—	—	—	1	—	—	—	—
5.....	1	—	—	—	—	—	—	—
10	—	—	—	2	—	—	—	—
15	1	2	1	—	—	—	—	—
20.....	—	1	—	—	—	—	—	—
25.....	1	2	—	1	—	—	—	—
35.....	1	1	—	—	—	—	—	—
45.....	3	—	—	—	1	—	—	—
55.....	2	—	—	—	—	—	—	—
65.....	1	—	—	—	1	—	—	—
75 and upwards	—	—	—	—	—	—	—	—
TOTALS	10	6	1	4	2	1	—	—
	16		5		3		—	

SECTION 4

SANITARY CIRCUMSTANCES OF THE AREA

Water Supply

The district is supplied with water from the Rivington reservoirs belonging to the Liverpool Corporation.

The Haydock reservoir situated at the top of Millfield Lane has a capacity of 1,000,000 gallons, equal to approximately 5 days normal consumption.

The total consumption for the year was 95,925,774 gallons, or 22.64 gallons per head per day for all purposes.

The total estimated consumption for trade purposes was 12,075,285 gallons, or 2.85 gallons per head per day so that 19.79 gallons per head per day was used for domestic purposes.

The reservoir is emptied and cleansed periodically.

With the exception of one out-lying farm, all houses in the area are connected to the public water mains and the supply has been satisfactory in regard to both quality and quantity.

INSPECTION AND SUPERVISION OF FOOD SUPPLIES

Milk

Under the Milk and Dairies Regulations, 1949, the number of Registered distributors were as follows :—

Distributors operating from :—

Dairies in the district	1
Shops in the district other than dairies	24
Premises outside the district	7

Licences issued by the local authority under the Milk (Special Designation) Regulation, 1949 in respect of the several designated milks were as follows :—

Tuberculin Tested	6
Pasteurised	9
Sterilised	24
Total....	39

Samples of milk as under were taken periodically from all milk producers and retailers in the area and tested by the Public Health Laboratory Service for keeping quality and for the presence of the tubercle bacillus.

Raw Milk

Tuberculosis biological tests. No. of samples 18

No. negative 14. No. positive 4

Methylene Blue reduction test. No. of samples 18

No. satisfactory 15. No. unsatisfactory 3

"Heat Treated" Milk

Phosphatase test. No. of samples 6

No. satisfactory 6. No. unsatisfactory 0

The Divisional Veterinary Inspector of the Ministry of Agriculture and Fisheries was notified of the 4 samples of tuberculous milk and as a result of Ministry investigation at the farms, 3 cows were seized under the Tuberculosis Order, 1938.

Meat and Other Foods

There are no slaughter-houses in operation in the area. Four persons are licenced by the local authority to slaughter animals under the Slaughter of Animals Act, 1933.

25 pigs were slaughtered on behalf of pig-keepers in the district for their own consumption. All were inspected after slaughter and found to be fit for human consumption.

All food shops and premises were inspected systematically in addition to Special visits.

The following foodstuffs were condemned as unfit for human consumption and destroyed :—

Foodstuff	Package	Quantity
Milk	57 tins	109 pints
Meat	130 tins	180-lbs., 12-ozs.
Fruit	154 tins	175-lbs., 6 -ozs.
Vegetables	39 tins	43-lbs., 6-ozs.
Fish	192 tins	57-lbs., 0-ozs.
Soup	2 tins	1-lb., 10-ozs.
Sandwich Spread	37 jars	6-lbs., 5-ozs.
Coffee	1 tin	0-lbs., 8-ozs.
Sponge Pudding	12 packets	6-lbs., 0-ozs.
Cheese	—	10-lbs., 4-ozs.
Lard	—	4-lbs., 8-ozs.
Ground Almonds	—	2-lbs., 6-ozs.

No cases of food poisoning have occurred.

Two shops were registered under the Lancashire County Council (Rivers Board and General Powers) Act, 1938, for the sale of ice-cream, making a total of thirteen shops on the register at the end of the year. In each case a refrigerator is installed in the shop and the ice-cream is sold wrapped as delivered to the shop.

There are no ice-cream manufacturers in the district.

The local authority is not a Food and Drugs Authority and sampling of food (under the Food and Drugs Act, 1938), for adulteration etc., is carried out by County Council inspectors.

Samples taken in the district during the year and submitted for analysis were :—

Milk	30	Beef Sausage	1
Sugar	2	Glace Cherries	2
Soup, Canned	4	Nutmegs, Whole	1
Caster Sugar	1	Ground Ginger	1
Icing Sugar	1	Ground Mixed Spice	1
Butter	5	Mustard Compound	1
Epsom Salts	1	Cut Mixed Peel	1
Semolina	1	Almonds	3
Oatmeal	1	Sponge Pudding Mixture	
Ice Cream	3	(unsweetened)	1

All the samples were reported by the County Analyst to be genuine, with the exception of the following :—

Sample	Result of Analysis	Action taken
1 Sponge Pudding Mixture, unsweetened.	Deficient 0.08 per cent. available carbon dioxide and carton dirty and damp.	Stock examined and surrendered.
1 Beef Sausage.	Deficient 3 per cent. of the minimum percentage of meat.	No action advised.
1 Almonds, ground	Acid value of oil 30 and sample had rancid taste.	Stock surrendered and destroyed.
1 Formal Milk.	Deficient 6.6. per cent. fat.	Vendor notified.

Rivers and Streams

Some pollution of the streams running through the district occurs from the Sewage Works effluent. The extent of the pollution is kept under observation and the streams cleansed when necessary of accumulations of silt and debris.

Drainage and Sewerage

With the exception of a few out-lying premises all property is drained and sewered by gravitation to 4 sewage disposal works.

Sewage disposal is effected by means of screening, settlement, filtration and aeration, and is carried out under the supervision of the Council's Surveyor.

Having regard to the fact that the disposal works were constructed in the days of dry conservancy, and consequently now tend to become overloaded, the standard of effluent is reasonable. This is checked periodically by Inspectors of the Mersey Rivers Board.

Pollution, to some extent, of the brooks to which the effluent is discharged is unavoidable under the circumstances and it is hoped that new schemes of sewage disposal now envisaged will take effect in the not too distant future. Such schemes demand full agreement with and the co-operation of neighbouring local authorities both County Borough and County District.

Sanitary Accommodation (Houses and Schools)

The numbers of the various types of conservancy measures in the district at the end of 1951 are as follows :—

Privy Middens	.....	5
Pail Closets	.....	1
Trough Closets	.....	Nil
Waste-water Closets	.....	Nil
Fresh Water Closets	.....	2971
Dry Ashpits	.....	Nil
Ashbins	.....	2971

During 1951 4 privy middens, 2 pail closets and 1 trough closet were converted to the fresh-water system.

All the schools in the district now have reasonably satisfactory sanitary accommodation and are connected to the public mains for water supply and to the public sewers for sewage disposal.

Washing and drinking facilities however are generally inadequate.

Public Cleansing and Salvage

The collection of refuse is carried out under the control of the Council's Surveyor. Two motor vehicles are in operation and all dustbins are emptied weekly. Refuse is disposed of by means of controlled tipping ; paper, cardboard etc., is collected separately, baled at the Council's Depot and sold as salvage.

Rodent Control

Although infestations of rats and mice in the district are generally of a minor nature, the sewers, sewage works and refuse tip are subject to constant observation. Regular treatments in accordance with the methods recommended by the Ministry of Agriculture and Fisheries Infestation Control Division are carried out.

In addition to the annual 10% test of all the sewers in the area and to two treatments of infested portions of the sewers, the numbers of infestations found and treated were as follows :—

Dwelling Houses.....	78
Business Premises	1
Sewage Works	9
Refuse Tip	3

Disinfestation

Infestations of houses with insect pests were dealt with by the use of insecticide containing D.D.T. and/or Gammexane dust, with good results.

The main source of infestation in the area is the refuse tip and this was treated twice with tip dressing to reduce the incidence of crickets, cockroaches and flies.

The number and types of infestations of houses dealt with during the year are as follows :—

Cockroaches	38 houses
Ants	12
Flies	7
Bugs	6
Crickets	2
Silverfish	6
Wood-beetles	3

Offensive Trades

Only one establishment, used for tripe dressing, falls into this category.

Periodical inspections showed that the premises are clean and well maintained.

SECTION 5

HOUSING

At the end of 1951, according to the Rate books, the total number of houses in the area was 2,978.

More than half of this number are of the two-bedroom type, the majority of the remainder having three bedrooms.

During 1951, 34 traditional permanent houses were erected by the local authority and 1 by private enterprise.

At the end of the year 68 houses were in process of building on the Church Road site and a further 56 contemplated.

The number of dwellings in the district which are overcrowded, though not accurately known, constitutes a problem for which there appears to be no immediate solution. It is estimated that the main causes of the overcrowding are the natural increase of families, and members of families getting married and continuing to live at home.

Efforts to secure adequate repairs to older houses are impeded by shortage of labour and materials, and the high cost of repairs compared with existing low rentals.

1. Inspection of dwelling-houses during the year :—

(1) (a)	Total number of houses inspected formally or informally for housing defects (under Public Health or Housing Acts)	508
(b)	Number of inspections made for the purpose	1195
(2)	Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	Nil
(3)	Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	480

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

Number of defective dwelling-houses rendered fit in consequence of informal action by the local authority or their officers	471
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3. Action under Statutory powers during the year :—

(a) Proceedings under sections 9, 10 and 16 of the Housing Act, 1936	Nil
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(b) Proceedings under the Public Health Acts :—	
(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	28
(2) Number of dwelling-houses in which defects were remedied after service of formal notices :—	
(a) by owners	11
(b) by local authority in default of owners....	3
(c) Proceedings under Sections 11 and 13 of the Housing Act, 1936	Nil
(d) Proceedings under Section 12 of the Housing Act, 1936	Nil

SECTION 6

Industrial and Commercial Hygiene

There are 19 registered factories in the district comprising 10 factories in which mechanical power is used, and 9 without mechanical power.

The types of factory are :—

Engineering	6
Bakehouses	6
Brick-making	1
Boot and Shoe Repairs	3
Joinery	1
Pre-cast concrete goods	1
Laundry	1

31 visits of inspection were made during the year.

Defects found and remedied were as follows :—

Unsuitable or defective sanitary conveniences	3
---	---

Conditions generally were good and in no case was it found necessary to resort to written notice.

One reference was received from H.M. Inspector of Factories.

SECTION 7

SANITARY INSPECTION

SUMMARY OF INSPECTIONS, VISITS, Etc.

Dwelling-houses (under Public Health and Housing Acts)	508
Re-inspections and re-visits to above	687
Housing conditions and overcrowding	37
Water supply (inspections and re-inspections)	26
Drainage (inspections and re-inspections)	130
Conversions of Privy-middens (inspections and re-inspections)	24
Ditches and Water Courses (inspections and re-inspections)	10
Accumulations of refuse	8
Piggeries and keeping of animals	21
Tents, vans and sheds	37
Schools	7
Cinemas	1
Offensive Trades	2
Rodent Control	205
Disinfestation of dwelling houses	74
Infectious disease enquiries and disinfections	49
Dairies and Milkshops	27
Food shops and premises	166
Other Shops	139
Ice-cream premises	26
Factories	31
Interviews with Owners and Contractors	27
Pigs inspected after slaughter	25
Milk samples	24
Water samples	5
Miscellaneous	23
Petroleum	17
Total	2336

Number of Nuisances or Defects discovered	672
Number of Informal Notices served	223
Verbal Notices and/or letters	130
Number of Statutory Notices served	28
Number of Notices complied with at the end of 1951	391
Number of Nuisances or defects abated at end of 1951	673
Legal Proceedings	1

ANALYSIS OF DEFECTS

Type of Defect	No discovered	No remedied
Water Closets	210	262
Drains	57	58
Water Supply	10	3
Sinks	2	5
Waste Pipes	8	3
Dustbins	115	117
Washboilers	3	5
Roofs	33	32
Chimneys and Flues	5	4
Eavesgutters	64	66
Downspouts	6	8
Brickwork and/or Pointing	25	13
Plastering	19	18
Floors	8	4
Windows	28	15
Doors	11	4
Firegrates	5	8
Dampness	22	11
Yard Paving	2	4
Miscellaneous	39	33
Total	672	673

SECTION 8

PROVISION OF GENERAL HEALTH AND ANCILLARY
SERVICES IN THE DISTRICT(1) **Laboratory Arrangements****(Public Health Laboratory Service, and County Analyst's
Department)**

Pathological specimens, samples of milk, foodstuffs, "swabs," etc., for bacteriological investigation are dealt with by the Public Health Laboratory Service either at the Public Health Laboratory, Mount Pleasant, Liverpool, or at the Public Health Laboratory, Monsall Green, Monsall, Manchester. The chemical analysis of water samples, and of samples of food and drugs, is undertaken at the County Analyst's Department, County Offices, Preston.

(2) **Hospital Arrangements****(Liverpool Regional Hospital Board, St. Helens and District
Hospital Management Committee, and Warrington and
District Hospital Management Committee)**

The Haydock Cottage Hospital is the only hospital situated in the district ; it is a General Hospital with a nominal establishment of 13 beds, but in view of its small size it is not equipped to deal with major surgical cases. The district is mainly served, for general cases, by the St. Helens Hospital, and also by the Providence Hospital, St. Helens. Maternity cases requiring hospital treatment are admitted either to the County Hospital, Whiston, the St. Helens Maternity and Welfare Hospital, the General Hospital, Warrington, or to the Warrington Maternity Home, Victoria Park, Latchford, Warrington. Cases requiring isolation on account of Infectious Disease are normally admitted to the Peasley Cross Isolation Hospital, St. Helens.

In addition to the above, cases requiring highly specialised treatment for pediatric, orthopaedic, ophthalmic, ear, nose, throat and gynaecological disabilities may be admitted, by arrangements, to any of the 'teaching hospitals' attached to the Universities of Liverpool or Manchester, and situated within, or in close proximity to those cities.

(3) **Ambulance Arrangements**

Full responsibility for the Ambulance Service (provided under Section 27 of the National Health Service Act, 1946) rests with the Lancashire County Council—the "Local Health Authority"—under the Act, and the Urban District is serviced by staff and vehicles maintained at the County Ambulance Station, Gas Street, Earlestown, Telephone No. Newton-le-Willows 3134.

This Service deals with all types of case where such transport is required by reason of illness (including mental illness), or mental defectiveness, whether accident or emergency, general illness or infectious disease. In cases of emergency any person having reason to do so may summon an ambulance : in other cases the calls for this service are made either by a doctor, dentist, midwife, nurse or other duly qualified person.

Three Stretcher-carrying ambulance vehicles and two " Sitting case " cars are stationed at the Newton-le-Willows Depot, manned by an appropriate staff, all qualified in First Aid. During 1951 the following numbers of calls were dealt with from this district :—

Emergency 335, General 1887, Infectious 37, Total 2,259.

(4) **Treatment Centres and Clinics**

- (i) **School Health**—School Clinic, Station Road, Haydock.
Assistant Divisional Medical Officer, Dr. E. A. Lumley.
School Nurse/Health Visitor, Miss S. N. Hodgson.

Sessions " Minor Ailments " and Medical Inspection.

Doctors Sessions : Weekly—Tuesday a.m. during School term.

Nurses Re-Dressing Sessions : Weekly—Friday a.m. during School term.

Ophthalmic

Ophthalmic Surgeon—Mr. E. Allan.

Health Nurse in Charge—Miss Hodgson.

Sessions : Fortnightly—Thursday a.m. (by appointment only)

Orthopaedic

Orthopaedic Surgeon—Mr. Almond.

Orthopaedic Physiotherapist—Miss Graham.

Sessions : Surgeon's sessions—monthly, morning of the first Monday (by appointment only).

Physiotherapist—Weekly (by appointment only).

Dental

It is regretted that no facilities for the dental treatment of School children, nor yet of Expectant or Nursing mothers, have been available during the current year.

- (ii) **Ante-Natal Clinic** (Held at the School Clinic, Station Road, Haydock).

Obstetrician—Mr. V. Corbett.
Health Visitor in Charge—Miss Hodgson.

Sessions : Fortnightly—alternate Tuesday afternoons. These sessions are attended whenever possible by the local County Midwives, who assist at the examination of their patients. Where hospital confinement is advisable, either on obstetrical or social grounds, the necessary arrangements are made for admission.

During the current year a total of 84 expectant mothers made 314 attendances.

(iii) **Maternity and Child Welfare Clinic** (Held at the School Clinic, Station Road, Haydock).

Assistant Divisional Medical Officer—Dr. E. A. Lumley.
Health Visitor in Charge—Miss Hodgson.

Sessions : Weekly—each Wednesday morning.

The purpose of these Clinics is to facilitate the medical examination and general supervision of infants and small children up to the age of 5 years, and to advise the mothers regarding their nurture and welfare. As an ancillary service, in order to help the parent to implement the advice received regarding feeding methods, a number of artificial infant foods, and of vitamin preparations etc., are available to those regularly attending, at cost price. In addition, expectant mothers who attend with infants or other young children are advised regarding the maintenance of their general health, and on other problems connected with their pregnancy : and are of course referred for special obstetrical advice to the Ante-Natal Clinic.

The following figures show the use made of the Child Welfare Clinic during the year :—

No. of individual children in attendance				No. of attendances
Age under 1 year	....	....	225	2,454
Age 1 to 2 years	....	....	29	358
Age 2 to 4 years	....	....	9	16

(5) **Midwifery Arrangements**

Two whole-time salaried Midwives are employed by the County Council—the “ Local Health Authority ” and “ Local Supervising Authority ”—for the purpose of conducting domiciliary confinements, either as midwives (when assuming sole responsibility for the delivery, etc.), or as maternity-nurses (when assisting at delivery in conjunction with the Doctor). Each midwife possesses a car, in order to enable her to respond speedily to urgent calls, and to transport analgesia apparatus.

The names and addresses of these midwives are : Mrs. E. Bramhall, 103, Kenyons Lane, Haydock. Telephone Ashton-in-Makerfield 7396. Mrs. E. J. Pye, 57, Kenyons Lane, Haydock. Telephone Ashton-in-Makerfield 7376.

No private midwife practises within the district, nor is there any private Maternity Home so situated. These ladies were therefore responsible, either as midwives or maternity-nurses, for the 103 domiciliary confinements which took place during the year. The fact that there were no cases of puerperal pyrexia or puerperal fever, and no "maternal deaths" associated with childbirth, is surely a high tribute to the skill and care bestowed on these mothers.

(6) Health Visiting Arrangements

This work has in Haydock been carried out for many years by one Health Visitor, who combines with her Health Visiting duties those of School Nurse. The scope of her work has been considerably increased by the responsibility which now rests on Health Visitors to advise on general health matters relating to the family as a whole, and not solely in relation to infants, young children and school children. Further-more she has a specific responsibility in relation to advice on immunisation against Diphtheria.

These domiciliary visits, so necessary as regards not only supervision, but also health education, are of course complementary so far as pre-school children are concerned with the work carried out at the Child Welfare Centre.

The name of the School Nurse/Health Visitor for the District is Miss S. H. Hodgson, with whom contact may be established at the School Clinic, Station Road, Haydock.

(7) Mental Health Arrangements

The District is covered for this purpose by the Authorised Officer of the Local Health Authority attached to No. 10 Health Division, assisted by a lady mental welfare worker. These workers deal with all aspects of mental health, including cases for which investigation, supervision and appropriate action is required under the Lunacy Acts, Mental Deficiency Acts and the Mental Treatment Act.

The names and addresses of these officers are :

Mr. P. D. Parker	No. 10 Divisional Health Offices, The Old Rectory, Winwick, Nr. Warrington
Miss M. Hargan,	ditto.

(8) Home Help Arrangements

This is a permissive service provided by the County Council through its divisional Health Scheme (No. 10 Divisional Health

Committee), and is one which is not necessarily provided free of cost to the public. It aims to provide domestic help where required by reason of the presence in a household of sickness, pregnancy, maternity, young children or a mentally defective person. This service has been used during the present year to a moderate degree only, probably because the public, not having full knowledge of the recently instituted scheme, have yet to experience its full benefits.

The "Home Helps" engaged are all part-time workers, none are full time, nor do any receive a "retaining fee." The Home Help Organiser and Welfare Worker, responsible for the day to day operation of the scheme in this District, is Miss P. Butler, No. 10 Divisional Health Office, The Old Rectory, Winwick, near Warrington.

(9) Home Nursing Arrangements

Nursing help in the home, formerly provided by the District Nursing Associations, is now afforded by the Local Health Authority, the former District Nurse, as an Officer of that Authority continues her beneficent work in the homes of the sick. The public demand for this onerous work has grown considerably during the year, and the assistance of a part-time relief nurse has been required from time to time.

The "Home Nurse" for the District is :—
Miss V. M. Dunn, 99, Central Drive, Haydock.

(10) Arrangements for the Prevention of Illness, Care and After Care of Sick persons (including those suffering from Tuberculosis) and the provision of convalescent accommodation

Responsibility for the above rests with the Local Health Authority, partly an obligatory, and partly on a permissive basis: 'illness' also includes mental defectiveness. The scope of such arrangements is very wide, and includes all the methods of "Health Education" and propaganda relating to health matters, health visiting in the homes, including those of persons suffering from Tuberculosis, the provision of ancillary nursing equipment, the after-care of patients who have suffered from illness, whether at home or in hospital, and the provision of convalescent accommodation and rehabilitation measures where these are required to enable those recently sick to regain full health and strength.

The Tuberculosis Health Visitor for the District is Miss Webster, She maintains supervision of patients in their homes, and arranges for their examination, re-examination, and for that of "contacts," (including X-ray investigation), at the Chest Clinic (formerly the Tuberculosis Dispensary), at St. Helens, which is a branch of the principal Chest Clinic for the area situated at Waterloo, Liverpool, and is administered by the Liverpool Regional Hospital Board.

As regards Health Education—a very important and essential factor in the prevention of illness—it is pertinent here to emphasise that although some responsibility for this side of preventive medicine may be accepted (as is the case), by the County Council as Local Health Authority, the permissive powers of the Urban District Council, (as a Local Sanitary Authority), to carry out measures of health education under Section 179 of the Public Health Act, 1936, are still extant, and should in my view continue to be exercised, particularly in respect of the dissemination of information relating to the spread of infectious diseases.

(11) Vaccination and Immunisation Arrangements

Vaccination, and immunisation against Diphtheria, are available to all who desire it, either through the family doctor, who carries it out as part of his duties to his patients, or by attendance at one of the Immunisation Sessions held at approximately monthly intervals at the School Clinic, Station Road, where the work is carried out either by one of the local doctors, or by the Assistant Divisional Medical Officer.

Whilst the immunisation position shows no grounds for complacency, the situation as regards the "immunisation state" of children under 15 years of age is more satisfactory than in most areas: on 31st December, 1951, the proportion was 76%, as compared with 59% for No. 10 Health Division as a whole. Unfortunately the vaccination state is not so satisfactory as one could wish, although here again the Urban District is securing a higher proportion of infant vaccinations than is the majority of County Districts in the Health Division. If one deducts from the 209 births notified in 1950 the 6 infant deaths recorded in 1951, out of the 203 survivors, 107 were vaccinated, 104 successfully; a proportion of 51% of the newly born babies.

(12) The Children Act, 1948

This Act became effective on 5th July, 1948.

In the main it provides for the care and welfare of children and young persons up to the age of 18 years who for one reason or another are deprived of normal home life, and it thus has an important bearing on the mental and physical health of such children.

The County Council, which is the Local Authority for the purposes of this Act, exercises its functions through its Children's Committee and the Children's Officer, who is responsible to the Committee for the efficient administration and day to day operation of the Service, which is carried out on a regional area basis.

The Haydock Urban District lies administratively within the purview of the Area Children's Officer of the Huyton Area, who is assisted by Children's Social Workers, the latter being responsible for

all matters relating to "deprived" children, e.g. the provision of accommodation, the inspection of and report on prospective foster homes, infant life protection, supervision of adopted children during the probationary period, and the care and conveyance to suitable places of safety of children committed by the Courts to the care of the Authority as a "fit person," under the provisions of the Children and Young Persons Act, 1933, and so on.

The Area Children's Officers and their visitors work in close co-operation with the Divisional Medical Officers and their staffs, and I am happy to say that in this district (included in No. 10 Health Division) the relationship is most effective and cordial.

The Huyton Area Children's Officer is :—

Mr. S. H. Pitt, Nutgrove Villa, 76, Derby Road, Huyton, near Liverpool, and the Children's Visitor for the Urban District is :—

Miss J. W. Cole, Nutgrove Villa, 76, Derby Road, Huyton, near Liverpool.

(13) **National Assistance Acts, 1948**

The Local Authority carrying responsibility for the implementation of Parts III and IV of this Act is the County Council, and the administrative machinery, in this case, is also on the divisional basis. The main provisions of Part III relate to accommodation for the disabled and aged, to temporary accommodation for persons who, by virtue of circumstances which could not reasonably have been foreseen, are without lodging, and to welfare services in general, for persons handicapped by infirmities such as blindness, deafness, dumbness, crippling physical defects and other disabilities.

The approved scheme of the County Council in regard to welfare utilises very fully the services rendered by the various voluntary agencies already in existence prior to this legislation.

Section 47 of this Act prescribes the procedure whereby aged or infirm persons, if not receiving adequate care and attention in their own homes may, by Court Order, be removed to a suitable hospital following a hearing by the Court of Evidence in Support of a Certificate issued by the Medical Officer of Health after due consideration of all the circumstances of the case. One case—an aged woman very seriously ill, was admitted to hospital under this Section during the year; very regrettably she died, several weeks after admission from heart disease, and within the period of two months ordered by the Court.

Section 50 of the Act is of importance in that it places on this County District Authority the duty of arranging for the burial or cremation of the body of any person who has died or been found dead within the district when it appears to the Authority that no suitable arrangements for the disposal of the body have been or are being made otherwise than by the Authority.

INDEX

Ambulance Arrangements	27	Maternity and Child Welfare	
Ante-Natal Clinic	28	Clinic	29
Care and After-Care of Sick	31	Meat and Other Foods	19
Causes of Death	13	Mental Health Arrangements	30
Children's Act, 1948	32	Midwifery Arrangements	29
Clinics	28	Milk	18
Dental Sessions	28	National Assistance Acts, 1948	33
Disinfection	15	Offensive Trades	22
Disinfestation	21	Officers of the Council	3
Drainage and Sewerage	20	Ophthalmic Sessions	28
Food Inspection	19	Orthopaedic Sessions	28
Health Committee	3	Public Cleansing and Salvage	21
Health Department	3	Rodent Control	21
Health Visiting	30	Rivers and Streams	20
Home Helps	30	Sanitary Accommodation	20
Home Nursing	31	Sanitary Inspector's Summary	
Hospital Arrangements	27	of Inspections, etc.	25
Housing	23	Schools	21
Ice Cream	19	Statistics—General	8
Immunisation Arrangements	32	Statistics—Vital	9
Industrial and Commercial		Treatment Centres	28
Hygiene	24	Tuberculosis	17
Infectious Diseases	14	Vaccination Arrangements	32
Introductory Preface	5	Water Supply	18
Isolation Hospital	15		
Laboratory Arrangements	27		



