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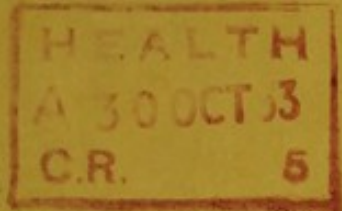
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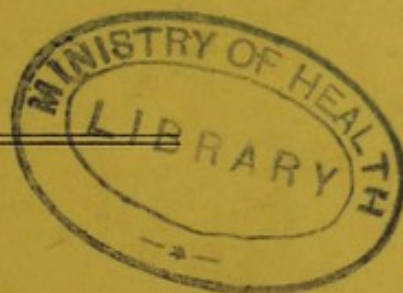


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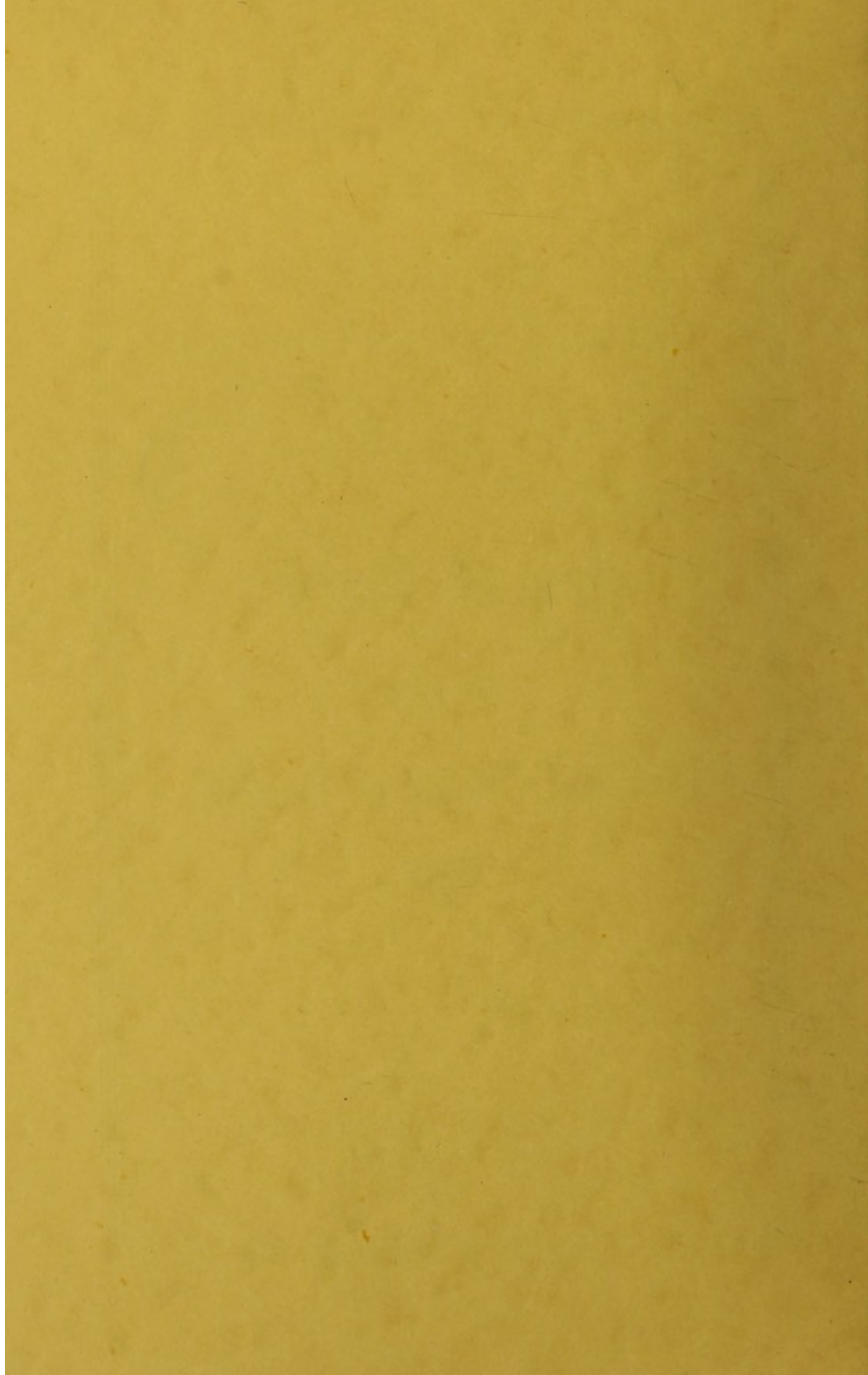
Annual Report

of the

Medical Officer of Health

1952.

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**HAYDOCK URBAN DISTRICT COUNCIL
1952**

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HEALTH DEPARTMENT :

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.)

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**To the Chairman, and Members of the Health Committee,
Haydock Urban District Council.**

Mr. Chairman, and Gentlemen,

I have pleasure in presenting for your consideration my Annual Report for the year 1952, which deals with the following matters:—Vital Statistics, and other statistics relating to the incidence of disease and the health of the Urban District: the work of your Health Department generally, the Report of your Sanitary Inspector being included herein and information relating to the more personal, (as distinct from environmental) services provided by the Local Health Authority under Part III of the National Health Service Act, 1946, and those administered by the Liverpool Regional Hospital Board, through its Hospital Management Committees, under Part II of the same Act. Included also is information concerning duties carried out by the appropriate Authorities under the Children Act, 1948, the Children and Young Persons Act, 1933, the Education Act, 1944, and the National Assistance Act, 1948.

Considering first the Vital Statistics relating to births and deaths for the current year, the number of live births was 182, (of which only 3 were illegitimate), giving a "crude birth rate" of 15.1 per 1,000 population, and an "adjusted rate" of 15.3/1,000—which is not only below that for 1951, when it was 17.8/1,000, but is substantially below the average rate for the preceding five years (19.2/1,000). It is therefore clear that the birth-rate in Haydock is steadily falling in conformity with that of the country generally. The still-births registered totalled 6, giving a rate of 32/1,000 total births—a figure also higher than in 1951, when the rate was only 23/1,000, with an actual figure of 5. If evaluated on another basis—that of population—we find that in Haydock our still-birth rate is 0.5 per 1,000, as compared with a rate for the whole country of 0.35/1,000; but undue importance need not be attached to this in view of the very low actual figures involved.

The number of deaths assigned to the District was 104, giving a "crude death rate" of 8.6/1,000 population, and an "adjusted death rate" of 10.5/1,000—both figures substantially lower than in the preceding year, when they were 10.4/1,000 and 12.5/1,000 respectively. Adjusted death rates are not available for the years preceding 1950, but the year's crude death-rate, quoted above, is also well below the mean crude rate for the previous quinquennium, which figure is 10.4/1,000.

Infant Deaths (under 1 year of age) were 5 in number, giving an Infant Mortality rate of 27 per 1000 live births, as compared with 29/1,000 a year ago, and with 28/1,000 for England and Wales in the current year. Reference to the succeeding comparative tables will shew clearly that the Infant Mortality rate has continued its downward trend—a circumstance which may be recorded with some degree of satisfaction, if also with some reserve when contemplating the future. Of these 5 deaths, no fewer than 4 occurred within the first four weeks of life, giving a Neo-natal death-rate of 22/1,000 live births, as compared with 24/1,000 in 1951, and 33/1,000 in 1950. The great majority

of neo-natal deaths, of course, occur in small and premature babies, and are often associated with congenital abnormalities and malformations. Their prevention lies mainly in better and closer ante-natal care, understanding and supervision : co-operation by the expectant mother is a vital preventive factor also.

Once again I am happy to record that no deaths due to or associated with pregnancy, abortion, or child birth occurred during the year ; the Maternal Mortality Rate is therefore Nil.

Turning next to a scrutiny of the causes of death in general, it is found that once again the principal cause of death has been the group of diseases of the heart and circulation, which accounted for approximately one third (35) of the total 104 deaths. Next in line comes the dreaded cancer group, with 14, followed closely this year by the "strokes" (13), by diseases of the respiratory system, pneumonia and bronchitis, with 12 deaths, and by pulmonary tuberculosis, with 6. Of the great "heart group", as they may be called, over one half (19) were caused by disease of the coronary arteries—coronary thrombosis—a reflection on the great stress and strain of life under our present-day social and industrial conditions.

The incidence of notifiable diseases, (exclusive of Tuberculosis), has been unusually light, only 185 cases being recorded, as against 578 in 1951, and a quinquennial mean for the five previous years of 340. Not since 1949, when the total was 131, has this figure been so satisfactory. The chief factor in the reduction has undoubtedly been the lessened frequency of Measles, (of which only 82 cases were notified as against 407 in 1951), of pneumonia, (only 12 cases as against 74 in 1951), and to a *smaller* ~~similar~~ extent of Whooping Cough, (48 cases, as compared with 58 the previous year). Scarlet Fever, on the other hand, shewed a very unwelcome increase in incidence from 28 in 1951 to 38 cases this year. One case each of meningitis, dysentery and diphtheria also occurred, the last named in a young woman in her early twenties.

No cases of Puerperal Pyrexia, nor of Ophthalmia Neonatorum occurred during the year—a most satisfactory record.

Consideration of the section dealing with the personal services rendered by the Local Health Authority under the Divisional Health Administration Scheme shews that steady progress has been maintained in all aspects of the work, except perhaps in that of School Health, where owing to the retirement of Dr. E. A. Lumley no Medical Officer was available until Dr. McTaggart's appointment nearly six months later. Despite this the position in regard to the Immunisation State of the District was well maintained, 186 children undergoing primary immunisation during the year, of which 182 were under 1 year of age ; in addition to these, 157 received "booster" injections before attaining school leaving age, so that at the end of the year some 79% of all children under fifteen had received protective inoculation—an

increase of 3% on last year's figure. In contrast to this, only 94 children received primary vaccination against smallpox, of which 92 were successful ; whilst an additional 21 persons were re-vaccinated, 18 proving satisfactory. Thus we find that out of approximately 200 children born in 1951 and surviving to reach the age of 1 year in 1952, rather less than one-half were satisfactorily protected against smallpox, throughout the centuries a deadly enemy of mankind, and still capable, as the events of the current year have shewn in East Lancashire and elsewhere, of mounting local attacks which cause considerable dislocation of industry and general public anxiety.

In so far as the principal health needs of the Districts are concerned, with special reference to the sanitary requirements, there is little to add to my comments in the last Annual Report. The housing need is still a very real and very pressing problem : figures indicating the houses newly erected do not give a true conception of the nett gain, because year by year, as the new houses rise, the oldest become more and more decrepit until they finally become genuinely unfit for human habitation. Improvements and repairs to existing houses have been carried out extensively during the year, notably by the National Coal Board, a policy which undoubtedly helps materially to relieve the over-all housing position, or at all events, to prevent it worsening : but the leeway to be made up is very great, and so far as one can foresee the community must live in sub-standard conditions of housing for a number of years to come. Improvement in the drainage and sewerage systems is still required, with the early closure of the East End Sewage Works, the effluent from which is the main source of pollution of Ellams Brook : whilst the paving and draining of back streets and passages still demand attention.

In conclusion, I would express to you, Mr. Chairman, and to all individual members of the Health Committee and of the Council, my very real pleasure in, and thanks to you all for the spirit of good-will and mutual loyalty which I feel cements a very happy relationship : and for the trust and confidence which you repose in the Officers of your Health Department, Mr. Watkin, your Sanitary Inspector, and myself. In the inherent nature of my part-time appointment it is inevitable that the day-to-day problems of hygiene and sanitation, and of departmental administration, must devolve on Mr. Watkin. I count myself fortunate indeed in having his very loyal and efficient help in our joint responsibilities for the health of this District, and ask him to accept my thanks and appreciation. With the other Chief Officers and Staff of the Authority I am again happy to record the fullest co-operation and cordial relationships—to them also I would convey my gratitude in this Report.

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 1951)	11,838
Population (Registrar-General's estimate for mid-1951)	12,030
Number of inhabited houses (Census 1931)	2,029
Number of inhabited houses at end of 1951, according to Rate Books	3,065
Rateable Value	£47,940
Sum represented by 1d. rate	£186

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—88 Male, 91 Female	.....	Total	179
Illegitimate—2 Male, 1 Female	.....	Total	3
Total Live Births	.....		182
Crude Birth Rate per 1,000 population	.....		15.1
Adjusted Birth Rate per 1,000 population	.....		15.3

Stillbirths

3 Male, 3 Female	.....	Total	6
Rate per 1,000 total (live and still) births	.....		32

Deaths

64 Male, 40 Female	.....	Total	104
Crude Death Rate per 1,000 population	.....		8.6
Adjusted Death Rate per 1,000 population	.....		10.5

Maternal Mortality		Nil
--------------------	-------	--	-----

Deaths of Infants under one year of age	.....		5
Rate per 1,000 live births	.....		27

Neo-Mortality

Deaths of Infants under 4 weeks of age	.....		4
Mortality rate per 1,000 live births	.....		22

Population : At the Census in 1951 the population enumerated was 11,838. The Registrar-General's estimate for mid-1952 was 12,030 and this figure has been used in calculations of statistics in this report.

Births : During the year there were registered 182 births, being 90 males and 92 females, to Haydock parents, representing a crude birth rate of 15.1 per 1,000 of the population ; the birth rate for England and Wales was 15.3.

There were 6 stillbirths giving a rate per thousand (live and still) births of 32.

Deaths : The total number of deaths of Haydock residents whether within or without the district was 104, comprising 64 males and 40 females. The crude death-rate for 1952 was therefore 8.6 per 1,000 of the population and the adjusted rate 10.5 as compared with a death-rate of 11.3 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 78.

Infant Mortality : Deaths of infants under one year of age numbered 5, giving a rate per 1,000 live births of 27. The rate for England and Wales was 27.6.

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 1.01 and the adjusted Live Birth-rate becomes 15.3 per 1000. The Death-rate comparability factor is 1.21 and the adjusted Death-rate is therefore 10.5 per 1000.

Comparisons of Births, Deaths, etc. : The tables on the following pages give comparisons of the Births, Deaths, etc., for the year 1952 and for the preceding 5 years ; also the causes of death in the Haydock Urban District for the year 1952.

VITAL STATISTICS—COMPARATIVE TABLE

HAYDOCK U.D.	Live Births		Deaths (all causes)		Stillbirths		Maternal Mortality		Infant Mortality			
									Total		Neo-Natal	
	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
Year 1952.....	182	*15.1	104	*8.6	6	32	Nil	Nil	5	27	4	22
1951.....	209	17.8	122	10.4	5	23	Nil	Nil	6	29	5	24
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	—	—
Average 5 years 1947-1951	—	19.2	—	10.4	—	23	—	2.07	—	41	—	—

* Adjusted (live-birth rate comparability factor, 1.01) = 15.3 per 1,000.
(death-rate comparability factor, 1.21) = 10.5 per 1,000.

**COMPARATIVE BIRTH-RATES, DEATH-RATES, ANALYSIS OF
MORTALITY, AND CASE-RATES FOR CERTAIN INFECTIOUS
DISEASES IN THE YEAR 1952**

	Haydock Urban District	England and Wales	160 County Boro's and Great Towns including London	160 smaller towns (Resident population 25,000 to 50,000 at 1951 census)	London adminis- trative County
Births—	Rates per 1,000 Home Population				
Live Births	15.3	15.3	16.9	15.5	17.6
Still Births	0.50	0.35	0.43	0.36	0.34
Deaths—					
All Causes	10.5	11.3	12.1	11.2	12.6
Typhoid and Paratyphoid	0.00	0.00	0.00	0.00	—
Whooping Cough	0.00	0.00	0.00	0.00	0.00
Diphtheria	0.00	0.00	0.00	0.00	0.00
Tuberculosis	0.50	0.24	0.28	0.22	0.31
Influenza	0.00	0.04	0.04	0.04	0.05
Smallpox	0.00	0.00	—	—	—
Acute poliomyelitis and polio-encephalitis	0.00	0.01	0.01	0.00	0.01
Pneumonia	0.58	0.47	0.52	0.43	0.58
Notifications (corrected)					
Typhoid Fever	0.00	0.00	0.00	0.00	0.00
Para-typhoid Fever	0.00	0.02	0.02	0.03	0.01
Meningococcal Infection	0.08	0.03	0.03	0.03	0.02
Scarlet Fever	3.16	1.53	1.75	1.58	1.56
Whooping Cough	3.99	2.61	2.74	2.57	1.66
Diphtheria	0.08	0.01	0.01	0.03	0.01
Erysipelas	0.17	0.14	0.15	0.12	0.14
Smallpox	0.00	0.00	0.00	0.00	—
Measles	6.82	8.86	10.11	8.49	9.23
Pneumonia	1.00	0.72	0.80	0.62	0.57
Acute poliomyelitis (in- cluding polio-enceph- alitis)					
Paralytic	0.00	0.06	0.06	0.06	0.06
Non-paralytic	0.00	0.03	0.03	0.02	0.03
Food Poisoning	0.00	0.13	0.16	0.11	0.18
Deaths—	Rates per 1,000 Live Births				
All causes under 1 year of age	27	27.6	31.2	25.8	26.4
Enteritis and Diarrhoea under 2 years of age	0.00	1.1	1.3	0.5	0.7
Notifications (corrected)	Rates per 1,000 Live and Still Births				
Puerperal fever and pyrexia	0.00	17.87	23.94	10.22	30.77

Maternal Mortality	Rates per 1,000 Live and Still Births	
	Haydock	England and Wales
Sepsis of Pregnancy, Childbirth and the Puerperium	0·00	0·09
Abortion with Toxaemia	0·00	0·02
Other Toxaemias of Pregnancy and the Puerperium	0·00	0·21
Haemorrhage of Pregnancy and Childbirth	0·00	0·09
Abortion without mention of Sepsis or Toxaemia	0·00	0·04
Abortion with Sepsis	0·00	0·07
Other Complications of Pregnancy, Childbirth and the Puerperium	0·00	0·20

CAUSES OF DEATH—HAYDOCK U.D. 1952

Causes of Death	Males	Females	Total
All Causes	64	40	104
Tuberculosis, respiratory	3	3	6
Tuberculosis, other forms	—	—	—
Syphilitic disease	—	—	—
Diphtheria	—	—	—
Whooping Cough	—	—	—
Meningococcal Infections	1	—	1
Acute Poliomyelitis	—	—	—
Measles	—	—	—
Other infective and parasitic diseases	—	—	—
Malignant Neoplasms—			
Stomach	2	2	4
Lung, Bronchus.....	2	—	2
Breast	—	1	1
Uterus	—	1	1
Other malignant and lymphatic neoplasms.....	3	3	6
Leukaemia, alukaemia	—	—	—
Diabetes	—	1	1
Vascular lesions of nervous system	8	5	13
Corony disease, angina	15	4	19
Hypertension with heart disease	—	—	—
Other heart disease	9	6	15
Other circulatory disease	1	—	1
Influenza.....	—	—	—
Pneumonia	3	4	7
Bronchitis	3	2	5
Other diseases of respiratory system	2	—	2
Ulcer of stomach and duodenum	2	1	3
Gastritis, enteritis and diarrhoea.....	—	—	—
Nephritis and nephrosis	2	1	3
Hyperplasia of prostate	1	—	1
Pregnancy, childbirth, abortion	—	—	—
Congenital malformations	—	1	1
Other defined and ill-defined diseases	3	5	8
Motor vehicle accidents	—	—	—
All other accidents	2	—	2
Suicide	2	—	2
Homicide and operations of war	—	—	—

SECTION 3

Infectious Diseases—Prevention and Control

The year was one with a low incidence of notifiable diseases, there being a very considerable fall in Measles notifications from 407 to 82, in primary and influenzal pneumonia from 74 to 12, and in whooping-cough from 58 to 48—with a slight increase in scarlet-fever cases to 38 from 28 in 1951. Tuberculosis notifications have also been fewer than in 1951, being 13 as compared with 21 : this current figure of 13 compares closely with the quinquennial mean of 14 for the five years 1947-51. Only one case of diphtheria occurred, in a young adult woman : there were also 1 case each of dysentery and of meningitis, the latter being fatal.

The current year's incidence (inclusive of tuberculosis) of 198 cases of notifiable disease is not only considerably below that for 1951, when the figure was 597, but also substantially less than the quinquennial mean of 354.

It is felt that a comparative table can serve a very useful purpose in assessing trends and periodicities of notifiable illnesses, and such a table is therefore presented in this Section. A study of this makes clear the following points :—

- (1) The 3 year periodicity of measles.
- (2) A smoothing of the whooping-cough periodicity.
- (3) The relative absence of change in scarlet-fever incidence in recent years : and the apparent stability of the incidence of Tuberculosis.
- (4) The downward trend of diphtheria—and the continued freedom from food poisoning, ophthalmia-neonatorum and puerperal pyrexia, of which no cases have been notified during the last six years.

Isolation and Disinfection

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

37 cases from Haydock were admitted during 1952.

The use of the steam disinfectant 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 1952

EXCLUDING TUBERCULOSIS, NOTIFICATIONS IN RESPECT OF NOTIFIABLE DISEASES NUMBERED 185. 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	38	—	1	13	23	1	—	—	—	—	—	—	35
Diphtheria	1	—	—	—	—	—	1	—	—	—	—	—	1
Dysentery	1	—	—	—	1	—	—	—	—	—	—	—	—
Measles	82	5	24	27	23	2	1	—	—	—	—	—	—
Whooping Cough	48	7	20	10	10	1	—	—	—	—	—	—	—
Acute pneumonia (primary and influenza)	12	1	2	1	1	—	1	3	1	2	1	2	2
Meningococcal infection	1	—	—	—	1	—	—	—	—	—	1	1	1
Acute poliomyelitis	—	—	—	—	—	—	—	—	—	—	—	—	—
Erysipelas	2	—	—	—	—	—	—	1	1	—	—	—	—
TOTALS	185	13	47	51	59	4	3	4	2	2	2	39	39

HAYDOCK URBAN DISTRICT

NOTIFIABLE DISEASES—COMPARATIVE TABLES

Disease	1952		1951		1950		1949		1948		1947		Quinquennial Mean 1947-1951	
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
Scarlet Fever	38	—	28	—	44	—	24	—	44	—	25	—	33	—
Diphtheria	1	—	3	—	5	1	2	—	2	—	7	—	4	0.2
Measles	82	—	407	—	37	—	32	—	354	—	147	—	195	—
Whooping Cough	48	—	58	—	140	—	51	—	108	—	9	—	73	—
Enteric Group Fevers	—	—	3	—	—	—	1	—	—	—	—	—	1	—
Dysentery	1	—	—	—	1	—	—	—	1	—	—	—	—	—
Food Poisoning	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Ophthalmia Neonatorum	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal Pyrexia	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Acute poliomyelitis and polio- encephalitis	—	—	—	—	1	1	1	1	—	—	3	1	1	0.6
Meningococcal Infection	1	1	—	—	2	—	1	—	1	—	—	—	1	—
Primary and Influenzal Pneumonia	12	1	74	15	17	2	13	1	16	2	14	6	27	5
Erysipelas	2	—	5	—	3	—	6	—	4	—	4	—	4	—
Tuberculosis, Respiratory	8	6	16	3	8	6	10	4	8	6	10	7	10	5
Tuberculosis, Non- Respiratory	5	—	5	—	4	1	3	—	4	1	6	—	5	0.4
Total	198	8	599	18	262	11	144	6	542	9	225	14	354	11.6

Tuberculosis

Under the Public Health (Tuberculosis) Regulations, 1930 and 1952, 13 new cases of respiratory and other forms of tuberculosis were notified.

There were 6 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	—	—	—	—	—	—	—	—
2.....	—	—	1	—	—	—	—	—
5.....	1	—	2	1	—	—	—	—
10.....	1	1	—	—	—	—	—	—
15.....	1	—	—	—	—	—	—	—
20.....	—	—	—	—	—	1	—	—
25.....	—	1	—	—	—	—	—	—
35.....	—	1	—	—	1	—	—	—
45.....	2	1	—	—	2	2	—	—
55.....	—	—	—	—	—	—	—	—
65.....	—	—	—	—	—	—	—	—
75 and upwards	—	—	—	—	—	—	—	—
TOTALS	4	4	3	2	3	3	—	—
	8		5		6		—	

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 98,446,312 gallons, or 22.93 gallons per head per day for all purposes.

The total estimated consumption for trade purposes was 14,699,000 gallons. 20.09 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, which is served by a well in the farm yard, all houses in the area are connected to the public water mains. During the year 6 samples of the public supply and 6 of the well water were taken and submitted for examination to the Liverpool City Bacteriologist. All were reported to be Class 1 or "Highly Satisfactory."

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	28
Premises outside the district	7

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

Tuberculin Tested	7
Pasteurised	11
Sterilised	29
Total	47

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 22
 No. negative 21. No. positive 1

Methylene Blue reduction test. No. of samples 22
 No. satisfactory 16. No. unsatisfactory 6

"Heat Treated" Milk

Phosphatase test. No. of samples 5
 Turbidity test. " " " " 3
 No. satisfactory 8. No. unsatisfactory 0

The Divisional Veterinary Inspector of the Ministry of Agriculture and Fisheries was notified of the 1 sample of tuberculous milk and as a result of Ministry investigation at the farm, 1 cow was seized under the Tuberculosis Order, 1938.

Meat and Other Foods

There are no slaughter-houses in operation in the area. Five persons are licenced by the local authority to slaughter animals under the Slaughter of Animals Act, 1933. One licence to slaughter was granted in 1952.

24 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 or returned to wholesaler.

Foodstuff	Package	Quantity
Milk	10 tins	20 pints
Meat	61 tins	183-lbs.,
Fruit	100 tins	102-lbs.,
Vegetables	40 tins	32-lbs.,
Soup	1 tin	1-lb.,
Desiccated Coconut	1 Case	130-lbs.
1 Carcase Mutton	—	39-lbs.
Cooked Ham	—	4-lbs.
Cheese	—	5-lbs.

No cases of food poisoning have occurred.

Six 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 nineteen 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	45
Cheese	4
Jam	4
Shredded Beef Suet with Flour	1
Butter	4
Malt Vinegar	2
Rolled Oats	2
Oatmeal	1
Ice Cream	1
Liquorice Powder	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 Formal Milk	Deficient 3.3. per cent. fat	Vendor notified
1 Formal Milk	Deficient 8.3 per cent, Slightly low in solids not 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 1952 are as follows :—

Privy Middens	....	....	....	....	....	....	5
Pail Closets	....	....	....	....	....	....	1
Trough Closets	....	....	....	....	....	....	Nil
Waste-water Closets	....	....	....	....	....	....	Nil
Fresh Water Closets	....	....	....	....	....	....	3450
Dry Ashpits	....	....	....	....	....	....	Nil
Ashbins	....	....	....	....	....	....	3250

During 1952 3 privy middens, 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....	24
Business Premises	1
Sewage Works	4
Refuse Tip	3
Smallholdings, Piggeries, etc.	19

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	47 houses
	1 canteen
Ants	30 houses
Flies	9
Bugs	4
Silverfish	1
Wood-beetles	5

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 1952, according to the Rate books, the total number of houses in the area was 3,065.

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

During 1952, 80 traditional permanent houses were erected by the local authority and 7 by private enterprise.

At the end of the year 24 houses were in process of building on the Folds Road site.

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)	614
(b)	Number of inspections made for the purpose	1381
(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	553

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	522
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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	25
(2) Number of dwelling-houses in which defects were remedied after service of formal notices :—	
(a) by owners	25
(b) by local authority in default of owners....	Nil
(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 18 registered factories in the district comprising 10 factories in which mechanical power is used, and 8 without mechanical power.

The types of factory are :—

Engineering	6
Bakehouses	6
Brick-making	1
Boot and Shoe Repairs	2
Joinery	1
Pre-cast concrete goods	1
Laundry	1

34 visits of inspection were made during the year.

Defects found and remedied were as follows :—

Unsuitable or defective sanitary conveniences	2
Want of Cleanliness	1

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

SECTION 7

SANITARY INSPECTION

SUMMARY OF INSPECTIONS, VISITS, Etc.

Dwelling-houses (under Public Health and Housing Acts)	614
Re-inspections and re-visits to above	767
Housing conditions and overcrowding....	44
Water supply (inspections and re-inspections)	141
Drainage (inspections and re-inspections)	183
Conversions of Privy-middens (inspections and re-inspections)	10
Ditches and Water Courses (inspections and re-inspections)	6
Accumulations of refuse	13
Piggeries and keeping of animals	34
Tents, vans and sheds	14
Schools	6
Cinemas	1
Offensive Trades	2
Rodent Control	240
Disinfestation of dwelling houses	109
Infectious disease enquiries and disinfections	46
Dairies and Milkshops	61
Food shops and premises	171
Other Shops	110
Ice-cream premises....	38
Factories	28
Interviews with Owners and Contractors	39
Pigs inspected after slaughter	24
Milk samples	30
Water samples	18
Petroleum	15
Miscellaneous	24
Total	2788

Number of Nuisances or Defects discovered	857
Number of Informal Notices served	312
Verbal Notices and/or letters	276
Number of Statutory Notices served	25
Number of Notices complied with at the end of 1952	522
Number of Nuisances or defects abated at end of 1952	840
Legal Proceedings	Nil

ANALYSIS OF DEFECTS

Type of Defect	No discovered	No remedied
Water Closets	263	268
Drains	80	78
Water Supply	64	47
Sinks	5	2
Waste Pipes	16	11
Dustbins	92	92
Washboilers	1	3
Roofs	45	55
Chimneys and Flues	10	3
Eavesgutters	41	32
Downspouts	15	3
Brickwork and/or Pointing	36	24
Plastering	21	26
Floors	7	12
Windows	44	41
Doors	25	17
Firegrates	7	5
Dampness	21	45
Yard Paving	3	1
Miscellaneous	61	75
Total	857	840

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 1952 the following numbers of calls were dealt with from this district :—

Emergency 391, General 2240, Infectious 41, Total 2,672.

(4) Treatment Centres and Clinics

- (i) **School Health**—School Clinic, Station Road, Haydock.
Assistant Divisional Medical Officer, Dr. D. K. McTaggart.
School Nurse/Health Visitor, Miss M. Luckett.

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 M. Luckett

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

Orthopaedic

Orthopaedic Surgeon—Mr. Almond.

Orthopaedic Physiotherapist—Mrs. Garratt

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

Physiotherapist—Weekly (by appointment only).

Dental

It is good to be able to record that Mr. A. E. Shaw returned to duty in the District early in September, being assisted, as before, by Miss Entwistle, the Dental Attendant. All school-children in Haydock, expectant and nursing mothers and those with children of pre-school age, will wholeheartedly welcome his return.

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

Obstetrician—Mr. V. Corbett.

Health Visitor in Charge—Miss M. Luckett.

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 sociological grounds, the necessary arrangements are made for admission.

During the current year a total of 87 expectant mothers made 272 attendances.

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

Assistant Divisional Medical Officer—Dr. D. K. McTaggart.

Health Visitor in Charge—Miss M. Luckett.

Sessions : Weekly—each Wednesday-morning and afternoon. 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 Centre during the year :—

	No. of individual children in attendance	No. of attendances
Age under 1 year	218	2,963
Age 1 to 2 years	40	817
Age 2 to 4 years	14	55
Total	272	3835

(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 : Miss W. Stirrup, 2, Folds Road, Haydock. Telephone St. Helens 7135 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 77 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 to the work carried out at the Child Welfare Centre.

The name of the School Nurse/Health Visitor for the District is Miss M. Luckett, 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
Mrs. M. Cooper,	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, but some do receive a "retaining fee" in recognition of their availability to undertake work when required. 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, and 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 on 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, 1952, the proportion was 79%, as compared with 60% 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 204 births notified in 1951 the 5 infant deaths recorded in 1952, out of the 199 survivors, 94 were vaccinated, 92 successfully; a proportion of 46% 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 and development 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. The scheme opens up a tremendous field of activity for all, both voluntary and salaried workers.

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. No cases were admitted to hospital under this section during the year.

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. No action under this section was required during the year.

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