[Report 1957] / Medical Officer of Health, Haydock Local Board / U.D.C.

Contributors

Haydock (England). Local Board.

Publication/Creation

1957

Persistent URL

https://wellcomecollection.org/works/u3xe7bnk

License and attribution

You have permission to make copies of this work under a Creative Commons, Attribution license.

This licence permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited. See the Legal Code for further information.

Image source should be attributed as specified in the full catalogue record. If no source is given the image should be attributed to Wellcome Collection.

Wellcome Collection
183 Euston Road
London NW1 2BE UK
T +44 (0)20 7611 8722
E library@wellcomecollection.org
https://wellcomecollection.org

Library

Haydock
Urban District Council

Annual Report
of the
Medical Officer of Health
1957.

Lockie Press Ltd., Golborne. Tel.: 237

Haydock
Urban District Council

Annual Report

of the

Medical Officer of Health

1957.

Haydock

Urban District Council

Annual Report

of the

Medical Officer of Health

1957.

HAYDOCK URBAN DISTRICT COUNCIL
1957

Chairman of the Council:
Councillor R. FINNEY, J.P.

Vice-Chairman of the Council:
Councillor J. BROWN (Died 22/5/58)

Clerk of the Council:
C. LEDGER, F.C.C.S.

Engineer and Surveyor:
R. MAIN, A.I.A.S.

HEALTH COMMITTEE:

Chairman:
Councillor Mrs. S. PIMBLETT, C.C.

Vice-Chairman:
Councillor J. PARR

Members:

Councillor J. BROWN
Councillor J. CAUNCE, J.P.
Councillor H. CORCORAN (Died 29/11/57)
Councillor W. DIXON
Councillor R. FINNEY, J.P.
Councillor W. FOSTER
Councillor H. HUNT,
Councillor A. Lloyd
Councillor W. TICKLE, J.P.
Councillor H. T. WILCOCK

HEALTH DEPARTMENT:

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

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

CONTENTS

	Page
Preface	5
SECTION 1—General Statistics and Social Conditions	9
SECTION 2—Vital Statistics	10
SECTION 3—Infectious Diseases	16
SECTION 4—Sanitary Circumstances of the Area	19
SECTION 5—Housing	25
SECTION 6—Industrial and Commercial Hygiene	27
SECTION 7—Sanitary Inspection, Summary of Inspections, etc.	28
SECTION 8—Provision of General Health and Ancillary Services in the District	30

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

Madam Chairman and Gentlemen,

I have pleasure in submitting for your consideration and approval my Annual Report for the year 1957, which closely follows in its design similar reports for previous years, and includes certain details of the more personal health services provided by the Local Health Authority under Part III of the National Health Service Act, 1946.

The general over-all vital statistics for the year have been favourable and shew material improvement in the majority of those rates which are generally considered as reliable indices of the state of health of a community, i.e. the birth rate, death rate, still birth rate, and infant and neo-natal death rates. Live births totalled 194, giving a crude birth rate of 16.4 per 1,000 population and an adjusted live birth rate of 15.8/1000, as compared with 181, and rates of 15.8/1000 and 15.2/1000 respectively in 1956. Still births were 5 in number, representing a still birth rate of 25. per 1000 total (live and still) births, as against 7, and a comparable rate of 36 per 1000 last year. The number of deaths allocated to the district was 100, giving a crude death rate of 8.4/1000 and an adjusted death rate of 10.7/1000, in contrast to the total of 134 deaths, and rates of 11.4/1000 and 14.6/1000 respectively in 1956: and a "natural increase" or excess of births over deaths of 94, almost double last year's figure of 53.

Infant deaths, 6 in number, with a rate of 31/1000 live births, is only slightly higher than a year ago, when the numbers were 5 and 27/1000 respectively: of these 6 deaths, 4 were in the first 4 weeks of life, the neo-natal period, and the neo-natal death rate 21, as compared with 16 in 1956. Where one is dealing with such relatively small *actual* numbers a single death more or less means an appreciable change in rate per thousand, so that the interpretation and significance should be assessed accordingly and the smaller the numbers, of course, the greater part is played by chance variations. This may be exemplified by reference to maternal deaths, of which there were none, and the maternal death rate nil this year, as compared with one actual maternal death, giving a rate of 5/1000.

An analysis of the grouped causes of death in order of frequency is very similar to that experienced for some years past, except that the place taken by cancer has been less prominent this year. Out of the total registered deaths, 100, no fewer than 35, or more than one third, were due to diseases of the heart and circulation, exclusive of "strokes," which accounted for a further 21: of the 35 recorded, almost one third (13) resulted from disease of the coronary arteries. In third place comes the group of diseases concerned initially with the respiratory system, which, excluding specifically tuberculosis, caused 13 deaths

from bronchitis, pneumonia and influenza: and this group is followed by "cancer" with an unusually low actual figure of 7, as against last year's total of 21—almost certainly a fortuitous compensatory variation. Other "defined and ill-defined" diseases caused 6 deaths, whilst 4 were due to violance in some form or another—three were accidental, of which only 1 was a street accident, and 1 was due to suicide. Finally 3 deaths were ascribed to gastritis, enteritis and diarrhoea, all in children—a disturbing feature in this present day and age, when so much time, thought and energy has been expended over the last three decades in efforts to inform, advise, and "educate" the parents of young children on the steps to be taken to avoid such types of infection, acquired of course by digestion with food or drink. Since 1950 the years have shewn fluctuating figures: for several years no deaths from this cause were recorded at all, as last year, whereas in others one or two did occur. Yet frankly, there should be none, and the three now recorded must be accepted as a black mark—and as a further challenge.

The 312 notifications of notifiable disease, which included 9 cases of tuberculosis, is considerably higher than the number of those received in 1956 (231) and the mean quinquennial figure of 267. Most of these 312 were due to Measles (256 cases), 18 to Whooping cough, 11 to Scarlet Fever, 9 to Tuberculosis, of which 8 related to the respiratory type of the disease, 7 to influenzal or primary pneumonia cases, and 5 to erysipelas. There were also 3 notifications of acute poliomyelitis, and 1 of meningococcal meningitis; and one case of poliomyelitis died. This small child, most tragically, developed this illness in 1956: respiratory paralysis developed early, and it was necessary to transfer him to Fazackerly Hospital, Liverpool and place him in an "iron lung," in which his life was maintained for some fourteen months by devoted medical and nursing skill and care: a wonderful tribute to the hospital service which one feels should be made widely known.

Once again there were no cases of diphtheria, (the last was in 1952), the enteric group fevers, (typhoid and paratyphoid), dysentery, or ophthalmia Neonatorum, but there were 2 cases of puerperal pyrexia, neither of which was serious.

An analysis of the health services provided by the County Council under the scheme of divisional administration, prepared to discharge the Local Health Authority's duties under the provisions of Part III of the National Health Service Act 1946, shews that in the current year there has been a slight reduction in a number of the figures. The Ambulance Service, for instance, dealt with a total of 2,256 calls, of which 383 were classified as "emergency," and 1873 as "non-urgent," as compared with 2741 cases in 1956, when the toal of "non-urgent" cases was 2355. Attendances at the ante-natal clinic, and at the Child Welfare Centre, were also lower both as regards the number of individuals attending and the number of attendances made. A total of 61 expectant mothers made 299 attendances at the fortnightly ante-

natal sessions, as compared with 73 and 313 respectively last year: whilst at the Child Welfare Centre 558 children made 6032 attendances, as against the comparable figures of 624 and 8808 in 1956. There was however a slight increase in the number of home confinements, 73 in all, compared with 70 last year: this proportion of home to hospital confinements (37%) has remained fairly constant over the past few years. As the scope of the health visitors' responsibility continues to widen, more work has been done in the health education field by the formation of a "mothers club" which meets each Thursday evening in the School Clinic, Station Road: these meetings discuss a wide range of health topics, particularly those of special interest to expectant mothers, to newly married couples, and to the younger and less experienced parents. Welfare work both for the aged and for the handicapped has been strenuously pursued, with very encouraging results and increasing local interest. Vaccination and immunisation procedures against smallpox, diphtheria, whooping cough, tetanus and also poliomyelitis have been continued, with much the same response to smallpox vaccination and diphtheria immunisation as during the last few years, some 71% of babies under 1 year being vaccinated, and 51% receiving diphtheria antigen in some form or another, usually the triple antigen which protects also against whooping cough and tetanus. At the end of the year the "immunisation" of all children under 15 years of age was 86%—not quite so high a figure as at the end of 1956, but still a very satisfactory level by Divisional and County standards. "Vaccination" against poliomyelitis—an unfortunate term—was extended during the year so that all children under the age of 15 years became eligible for protection: the age limit was first of all raised to include children born in 1955 and 1956, and towards the fall of the year, to include all children between the ages of 1 to 14 years. In all, 333 Haydock children received the normal course of (two) injections during the year—a not unsatisfactory figure, but one which leaves considerable room for improvement, as more vaccine could have been made available had the demand been greater.

Mention has been made of the midwifery and health visiting services of the local health authority, and it is only equitable that the other services should receive honourable mention—those of the Home Nurses and Home Helps, which contribute so largely to the needs of individuals, particularly those who are sick and/or elderly. During the course of the year the Haydock "District Nurse" paid 3746 visits to 154 patients, whilst 19 part-time home-helps assisted in 58 homes, in 42 of which the person assisted was aged 65 years or over. On an average, each case received help for 3 hours per day, for 3 days per week, throughout the year.

The principal sanitary needs of the district remain as listed in last years report: the erection of more houses, and the demolition and clearance of unfit and slum property: improvement in school buildings,

particularly in relation to sanitary facilities, including adequate ablutions: the cleansing of watercourses, particularly Ellams Brook and Clipsley Brook; and clearer air. Lying as it does to the immediate east of St. Helens, and north east of Bold and Prescot, Haydock must inevitably suffer by reason of the prevailing winds, but it should and would effect a material improvement in its air conditions by the substantial reduction of domestic smoke.

This report would be incomplete without an acknowledgement of my appreciation of and sincere gratitude for all the help which I have received during the year—from my Committee under your Chairmanship and guidance, Madam Chairman, from my colleagues in other departments, particularly those of the Clerk and of the Surveyor, from Mr. Watkin, your Public Health Inspector, who holds a particularly onerous post, and from the County Medical Officer and his staff at Preston, at all times ready with helpful advice and encouragement. To each and all I offer sincere thanks.

I have the honour to be,
Madam Chairman and Gentlemen,
Your Obedient Servant,
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-1957)	11,820
Number of inhabitated houses (Census 1931)	2,029
Number of inhabited houses at end of 1957 according to Rate Books	3,445
Rateable Value	£81,033
Sum represented by 1d. rate	£300

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 3¾ 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—94 Male, 98 Female	Total 192
Illegitimate—1 Male, 1 Female	Total 2
Total Live Births	194
Crude Birth Rate per 1,000 population	**16.4**
Adjusted Birth Rate per 1,000 population	**15.8**

Stillbirths

1 Male, 4 Female	Total 5
Rate per 1,000 total (live and still) births	**25**

Deaths

54 Male, 46 Female	Total 100
Crude Death Rate per 1,000 population	**8.4**
Adjusted Death Rate per 1,000 population	**10.7**
Maternal Mortality	Nil
Deaths of Infants under one year of age	**6**
Rate per 1,000 live births	**31**

Neo-Mortality

Deaths of Infants under 4 weeks of age	**4**
Mortality rate per 1,000 live births	**21**

Population : At the Census in 1951 the population enumerated was 11,838. The Registrar-General's estimate for mid-1957 was 11,820 and this figure has been used in calculations of statistics in this report.

Births : During the year there were registered 194 births, being 95 males and 99 females, to Haydock parents, representing a crude birth rate of 16.4 per 1,000 of the population and an adjusted birth rate of 15.8; the birth rate for England and Wales was 16.1.

There were 5 stillbirths giving a rate per thousand (live and still) births of 25.

Deaths : The total number of deaths of Haydock residents whether within or without the district was 100, comprising 54 males and 46 females. The crude death-rate for 1957 was therefore 8.4 per 1,000 of the population and the adjusted rate 10.7 as compared with a death-rate of 11.5 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 94.

Infant Mortality : Deaths of infants under one year of age numbered 6, giving a rate per 1,000 live births of 31. The rate for England and Wales was 23.0.

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.

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 population of the areas are not thus similarly constituted the Registrar-General supplied "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 0.96 and the adjusted Live Birth-rate becomes 15.8 per 1000. The Death-rate comparability factor is 1.28 and the adjusted Death-rate is therefore 10.7 per 1000.

Comparisons of Births, Deaths, etc. : The tables on the following pages give comparisons of the Births, Deaths, etc., for the year 1957 and for the preceding 5 years; also the causes of death in the Haydock Urban District for the year 1957.

VITAL STATISTICS—COMPARATIVE TABLE

HAYDOCK U.D.	Live Births		Deaths (all causes)		Stillbirths		Maternal Mortality		Infant Mortality			
									Total		Neo-Natal	
	No. registered	Rate per 1,000 pop'n	No. registered	Rate per 1,000 pop'n	No. registered	Rate per 1,000 total births	No. of deaths registered	Rate per 1,000 total births	No. of deaths registered	Rate per 1,000 live births	No. of deaths registered	Rate per 1,000 live births
Year 1957....	194	*16·4	100	*8·4	5	25	Nil	Nil	6	31	4	21
1956....	187	15·8	134	11·4	7	36	1	5·15	5	27	3	16
1955....	189	15·9	151	12·7	11	55	Nil	Nil	4	21	4	21
1954....	196	16·5	148	12·5	6	30	1	4.95	5	26	5	26
1953....	186	15·7	126	10·7	4	21	Nil	Nil	6	32	5	27
1952....	182	15·1	104	8·6	6	32	Nil	Nil	5	27	4	22
Average 5 years 1952-1956	—	15·8	—	11·2	—	35	—	—	—	27	—	22

* Adjusted (live-birth rate comparability factor, 0·96) = 15·8 per 1,000.
(death-rate comparability factor, 1·23) = 10·7 per 1,000.

COMPARATIVE TABLES

GENERAL VITAL STATISTICS

Rates per 1,000 Population

	Haydock U.D.	Municipal Boroughs and Urban Districts of Lancashire (Adj.)	England and Wales
Live Births Rate adjusted	15.8	16.2	16.1
Still Births Rate....	25	25	22.4 (a)
Neo-natal Deaths	21	18	16.5 (b)
Total Infant Deaths	31	25	23.0 (b)
Maternal Mortality	Nil.	0.55	0.47
Total Death Rate adjusted	10.7	14.2	11.5

(a) Per 1,000 total (live and still) births

(b) Per 1,000 related births

NOTIFICATION RATES AND DEATH RATES OF THE PRINCIPAL NOTIFIABLE — AND OTHER IMPORTANT DISEASES AND CONDITIONS

All rates are shewn per 1,000 population

Disease	Haydock U.D.		Municipal Boros and Urban Districts of Lancashire		England and Wales	
	Notifications	Deaths	Notifications	Deaths	Notifications	Deaths
Typhoid and Paratyphoid Fever	0·00		0·00		0·01	
Dysentery	0·00		1·46		0·64	
Food Poisoning	0·00		0·20		0·20	
Diphtheria	0·00		0·00		0·00	
Scarlet Fever	0·90		0·79		0·66	
Whooping Cough	1·52		1·54		1·89	
Measles	21·66		15·30		14·11	
Meningococcal Infection	0·09		0·02		0·02	
Acute Poliomyelitis Paralytic	0·25		0·04		0·07	
Acute Encephalitis Infective	0·00		0·00		0·00	
Pneumonia (Primary)	0·58		0·69		0·73	
Tuberculosis (Respiratory)	0·77	0·17	0·55		0·65	0·09
(Non-respiratory)	0·09	0·00	0·09		0·09	0·01
Total	0·86	0·17	0·63		0·74	0·11
Diseases of Heart and Circulation:						
Coronary Disease Angina		1·10		1·85		
Strokes		1·78		2·05		
Hypertension		0·09		0·32		
Other		1·69		2·16		
Total—All Forms		4·66		4·34		
Cancer:						
Stomach		0·00		0·37		
Lungs and Bronchus		0·17		0·44		0·43
Other		0·34		1·29		1·67
Total—All Forms		0·51		2·17		2·09
Violence:						
Accidents (motor vehicle)		0·09		0·08		
(Other)		0·09		0·29		
Total		0·18		0·37		
Suicide and Homicide		0·09		0·14		
Total due to Violence		0·27		0·53		

CAUSES OF DEATH—HAYDOCK U.D. 1957

Causes of Death	Males	Females	Total
All Causes	54	46	100
Tuberculosis, respiratory	1	1	2
Tuberculosis, other forms	—	—	—
Syphilitic disease	1	—	1
Diphtheria	—	—	—
Whooping Cough	—	—	—
Meningococcal Infections	—	—	—
Acute Poliomyelitis	1	—	1
Measles	—	—	—
Other infective and parasitic diseases	1	—	1
Malignant Neoplasms—			
Stomach	—	—	—
Lung, Bronchus	2	—	2
Breast	—	—	—
Uterus	—	—	—
Other malignant and lymphatic neoplasms	4	—	4
Leukaemia, alukaemia	—	1	1
Diabetes	—	—	—
Vascular lesions of nervous system	5	16	21
Coronary disease, angina	9	4	13
Hypertension with heart disease	1	—	1
Other heart disease	9	11	20
Other circulatory disease	3	1	4
Influenza	—	1	1
Pneumonia	1	3	4
Bronchitis	6	—	6
Other diseases of respiratory system	2	—	2
Ulcers of stomach and duodenum	—	1	1
Gastritis, enteritis and diarrhoea	1	2	3
Nephritis and nephrosis	—	—	—
Hyperplasia of prostrate	1	—	1
Pregnancy, childbirth, abortion	—	—	—
Congenital malformations	—	1	1
Other defined and ill-defiend diseases	3	3	6
Motor vehicle accidents	1	—	1
All other accidents	1	1	2
Suicide	1	—	1
Homicide and operations of war	—	—	—

SECTION 3

Infectious Diseases — Prevention and Control

In the preface to this Report I have made comment on the general incidence of notifiable disease in the Urban District throughout the current year, and have also indicated the variations in the statistics which relate to specific types of infectious illness.

Isolation and Disinfection

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

20 cases from Haydock were admitted during 1957.

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

NOTIFIABLE DISEASES DURING 1957

NOTIFICATIONS IN RESPECT OF NOTIFIABLE DISEASES NUMBERED 312. THE SUB-JOINED TABLE GIVES THE CORRECTED FIGURES AND THE TOTAL DEATHS

Disease	Total cases at all ages	Cases Notified Age Periods—Years										Total Deaths
		0—	1—	2—	3—	4—	5—	10—	15—	25 and over	Age Un-k'wn	
Scarlet Fever	11	—	1	1	3	1	4	1	—	—	—	—
Whooping Cough	18	4	—	2	—	4	8	—	—	—	—	—
Acute Poliomyelitis—Paralytic	3	—	—	2	—	—	1	—	—	—	—	1
Acute Poliomyelitis—Non-Paralytic	—	—	—	—	—	—	—	—	—	—	—	—
Measles	256	9	26	37	38	32	111	2	—	1	—	—
Meningococcal Infection	1	1	—	—	—	—	—	—	—	—	—	—

		0—	5—	15—	45—	65 and over	Age Unknown	
Acute Pneumonia	7	1	2	2	2	—	—	—
Erysipelas	5	—	—	—	5	—	—	—
Tuberculosis—Respiratory	8	—	3	2	3	—	—	2
Tuberculosis—Other	1	—	—	1	—	—	—	—
Puerperal Pyrexia	2	—	—	2	—	—	—	—

HAYDOCK URBAN DISTRICT

NOTIFIABLE DISEASES—COMPARATIVE TABLES

	1957		1956		1955		1954		1953		1952		Quinquennial Mean 1952-1956	
Disease	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
Scarlet Fever	11	—	21	—	37	—	20	—	33	—	38	—	30	—
Diphtheria	—	—	—	—	—	—	—	—	—	—	1	—	0·2	—
Measles	256	—	167	—	171	—	63	—	192	—	82	—	135	—
Whooping Cough	18	—	23	—	43	—	9	—	40	—	48	—	33	—
Enteric Group Fevers	—	—	—	—	—	—	2	—	—	—	—	—	0.4	—
Dysentery	—	—	1	—	35	—	198	—	—	—	1	—	47	—
Food Poisoning	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Opthalmia Neonatorum	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal Pyrexia	2	—	—	—	—	—	1	—	1	—	—	—	0.4	—
Acute poliomyeletis and polio-encephalitis	3	1	—	—	2	—	—	—	—	—	—	—	0.4	—
Acute Enchepalitis—infective	—	—	—	—	1	—	—	—	—	—	—	—	—	—
Meningococcal Infection	1	—	—	—	2	—	—	—	1	—	1	1	0·8	0.2
Primary and Influenzal Pneumonia	7	—	5	—	10	—	4	—	2	—	12	1	7	0·2
Erysipelas	5	—	1	—	—	—	—	—	2	—	2	—	1	—
Tuberculosis, Respiratory	8	2	12	—	6	—	11	4	14	2	8	6	10	2·4
Tuberculosis, Non-Respiaratory	1	—	1	—	—	1	1	—	2	—	5	—	2	0·2
Total	312	3	231	—	307	1	309	4	287	2	198	8	267	3.0

SECTION 4

SANITARY CIRCUMSTANCES OF THE AREA

Water Supply

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

Two reservoirs situated at the top of Millfield Lane, with a storage capacity of approximately 2,000,000 gallons, are in use.

The total consumption for the year under review was 114,318,750 gallons, 26.18 gallons per head per day for all purposes. Of this quantity 98,000,000 gallons approx. was Liverpool water and 16,000,000 gallons approx. St. Helens water.

The total estimated consumption for trade purposes was 13,393,000 gallons. 23.77 gallons per head per day was used for domestic purposes.

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 were taken and submitted for examination to the Liverpool City Bacteriologist. All proved satisfactory.

INSPECTION AND SUPERVISION OF FOOD SUPPLIES

Milk

Under the Milk and Dairies Regulations, 1949 to 1954, the numbers of Registered distributors were as follows:—

Distributors operating from:—	
Dairies in the district	1
Shops in the district other than dairies	35
Premises outside the district	4

Licences issued by the local authority under the Milk (Special Designation) Regulations, 1949 to 1954 in respect of the several designated milks were as follows:—

Tuberculin Tested	11
Pasteurised	14
Sterilised	46
Total	71

The Haydock Urban District forms part of a "Specified Area" under the Milk (Special Designations) (Specified Areas) (No. 3) Order, 1953 and all milk sold by retail in Haydock is either "Tuberculin Tested (Pasteurised)", "Pasteurised" or "Sterilised."

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.

"Heat Treated" Milk

Methylene Blue reduction test. No. of samples	11
No. satisfactory 11. No. unsatisfactory Nil.	
Phosphatase test. No. of samples	11
Turbidity test. „ „ „	8
No. satisfactory 19. No. unsatisfactory Nil.	

Meat and Other Foods

There are no slaughter-houses in operation in the area. Eight persons are licenced by the local authority to slaughter animals under the Slaughter of Animals Acts, 1933 to 1954.

The number and types of food premises in the area at the end of 1957 were as hereunder:—

Grocers and Provision Dealers	47
Greengrocers and Fruiterers	4
Meat Shops	7
Bakers and/or Confectioners	4
Fried Fish Shops	7
Shops, selling mainly Sweets, Minerals, Ice-Cream etc.	16
Licensed Premises, Clubs, Canteens, Restaurants, Snack-bars and similar Catering Establishments	22

All were inspected systematically during the year, in addition to special visits.

The following foodstuffs were condemned as unfit for human consumption and destroyed by means of incineration or burial.

Foodstuff	Quantity
Tinned Meat	81 lbs.
Miscellaneous Tinned Goods	48 lbs.

No cases of food poisoning have occurred.

26 shops in the district are registered under the Lancashire County Council (Rivers Board and General Powers) Act, 1938, for the sale of ice-cream. 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
Fresh fruit	4
Oatmeal	2
Cornflour	2
Tapioca	2
Aspirin tablets	2
Custard powder	2
Cake and pudding mixture	2
Table jelly	2
Flour	1
Lard	1
Salmon Spread	1
Baking Powder	1
Golden raising powder	1
Gravy powder	1
Rice	1
Barley	1
Pudding mix	1
Golden syrup	1
Treacle	1

With the exception of 2 of the samples of fresh fruit all were reported by the County Analyst to be genuine.

The 2 samples of fresh fruit referred to were of dessert apples. These, on analysis, were found to contain an excess of lead and arsenic.

The apples remaining in the consignment from which the samples were obtained were subsequently withdrawn and destroyed. The Importers, Port Health Authority and Ministry of Agriculture, Fisheries and Food were informed.

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, maintenance of which is under the direction 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.

Some pollution of the brooks to which the effluent is discharged is unavoidable in the circumstances, but an immediate improvement is anticipated in this regard when the new Parr Sewage works, St. Helens, comes into operation early in 1958. This will take all the sewage from the Western half of Haydock.

Sanitary Accommodation (Houses and Schools)

The numbers of the various types of conservancy measures in the district at the end of 1957 are as follows:—

Privy Middins	5
Pail Closets	1
Trough Closets	Nil
Waste-water Closets	Nil
Fresh-water Closets	3824
Dry Ashpits	Nil
Ashbins	3624

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, and require modernisation.

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 tips are subject to constant observation and regular treatments in accordance with the methods recommended by the Ministry of Agriculture and Fisheries Infestation Control Division.

Occupiers of dwelling houses are encouraged to report infestations of rats and mice, no charge being made for disinfestation work carried out by the local authority at this type of property.

Total inspections (including reinspections) carried out, and number of infestations found and treated were as follows:—

	Inspected	Treated
Dwelling Houses	488	67
Business Premises	307	9
Local Authority Premises	29	12
Agricultural, etc.	21	2

Disinfestation

Infestations of houses with insect pests were dealt with by the use of D.D.T. insecticide and powder, with good results.

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

Cockroaches	33 houses
Ants	37
Flies	6
Bugs	5
Earwigs	4
Woodbeetles	2
Silverfish	1 house
Fleas	1
Lice	1
Red-mite	1

In addition, infestations of steam-flies at two Colliery Canteens were cleared.

Offensive Trades

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

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

MOVABLE DWELLINGS

Two sites in the district were used for camping purposes. Licences were issued by the local authority under Section 269 of the Public Health Act, 1936, to the occupiers of 3 individual movable dwellings to station and use their caravans on the sites.

SHOPS ACT, 1950

The Shops Authority in this area is the Lancashire County Council, but inspectorial duties are carried out by the Public Health Inspector who, for that purpose, has been appointed Shops Inspector by the County Council.

There are 140 shops in the district and inspections during the year numbered 277.

The provisions of the Act relating to ventilation, temperature and sanitary accommodation are the concern of the local sanitary authority, and in this regard, several minor contraventions were noted and remedied by informal action.

PETROLEUM (REGULATION) ACTS, 1928 and 1936

15 premises were licenced to keep petroleum spirit and one to keep petroleum mixtures. Visits of inspection to new and existing installations numbered 31.

One licence to keep carbide of calcium was renewed.

Income from licence fees amounted to £12 18s. 9d.

SECTION 5

HOUSING

At the end of 1957, according to the Rate books, the total number of houses in the area was 3,445.

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

During 1957, 61 traditional permanent houses were erected by the local authority and 29 by private enterprise.

It is estimated that relatively few houses in the district are overcrowded, mainly due to natural increase in families and to members of families getting married and continuing to live at home.

Under the Housing Repairs and Rents Act, 1954, the Council proposed to deal with 75 houses by clearance and demolition procedure.

During 1957, Demolition Orders were made in respect of 2 houses and a Clearance Order affecting 17 houses was confirmed by the Minister.

Applications for improvement grants were made in accordance with the provisions of the Housing Act, 1949, by the owner/occupiers of six houses.

All were approved by the Local Authority and at the end of the year, work of improvement had been completed at four of the houses.

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)	329
	(*b*)	Number of inspections made for the purpose	758
(2)		Number of dwelling-houses in the area considered to be so dangerous or injurious to health as to be unfit for human habitation	74
(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 but capable of being rendered fit	289

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 312

3. Action under Statutory powers during the year:—

(*a*) Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936 .... Nil

(*b*) Proceedings under the Public Health Acts:—

(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied 11

(2) Number of dwelling-houses in which defects were remedied after service of formal notices:—

(*a*) by owners 13

(*b*) by local authority in default of owners .... Nil

(c) Proceedings under Sections 11 and 13 of the Housing Act, 1936 .... Nil

Number of dwelling-houses in respect of which undertakings "not to occupy" were accepted by the local authority 1

(d) Proceedings under Section 12 of the Housing Act, 1936 Nil

RENT ACT, 1957

This Act came into force on the 6th July, 1957, one of its objects being to improve the lot of both landlords and tenants of houses remaining in control.

The Act makes provision for the landlord to increase the rent, within limits, and for the tenant to require the landlord to remedy such defects in the house which ought reasonably to be remedied having due regard to the age, character and locality of the dwelling.

To achieve this object, the tenant is required to serve a notice on his landlord specifying the defects which he thinks should be remedied. The landlord has six weeks in which to do the work or give an undertaking that the work will be done. If he does neither of these things, the tenant may apply to the local authority for a certificate of disrepair in relation to the defects specified in his notice to the landlord.

When the local authority have decided that the issue of a certificate of disrepair is justified they must notify the landlord and allow him three weeks to reconsider the giving of an undertaking.

If no undertaking is given, and a certificate of disrepair is issued, the landlord may apply to the local authority for cancellation of the certificate if he subsequently does the work.

For the tenant, the effect of the granting of a certificate, or of failure to carry out an undertaking within six months of the giving of it, is an abatement of the rent.

At the end of the year 48 applications for certificates of disrepair had been received and in each case the landlord was notified of the authority's intention to issue a certificate for all or some of the defects on the notice served by the tenant on the landlord.

As a result, 21 undertakings were accepted from landlords and 18 certificates of disrepair were issued to tenants.

Two successful applications for cancellation of certificate of disrepair were received from landlords.

SECTION 6

Industrial and Commercial Hygiene

There are 22 registered factories in the district comprising 14 factories in which mechanical power is used, and 8 without mechanical power.

The types of factory are:—

Engineering	7
Bakehouses	5
Brick-making	1
Boot and Shoe Repairs	2
Joinery	2
Pre-cast concrete goods	1
Laundry	1
Hinge-making and Electro-plating	1
Scrap-yard	1
Cycle and Radio Repairs	1

34 visits of inspection were made during the year.

SECTION 7

SANITARY INSPECTION

SUMMARY OF INSPECTIONS, VISITS, Etc.

Dwelling-houses (under Public Health and Housing Acts)	329
Re-inspections and re-visits to above	429
Housing conditions and overcrowding	32
Application for Certificate of disrepair (Inspections and visits)	63
Application for Improvement Grants (,, ,, ,,)	10
Water supply (inspections and re-inspections)	65
Drainage (inspections and re-inspections)	87
Ditches and Water Courses (inspections and re-inspections)	23
Accumulations of refuse	18
Piggeries and keeping of animals	21
Movable Dwellings	12
Schools	6
Cinemas	2
Offensive Trades	2
Rodent Control	357
Disinfestation of Premises	137
Infectious disease enquiries and disinfections	13
Daries	2
Food shops and premises	204
Other shops	126
Factories	34
Interviews with Owners and Contractors	28
Milk samples	19
Water samples	8
Petroleum	31
Miscellaneous	66
Total	2124

Number of Nuisances or Defects discovered	423
Number of Informal Notices served	90
Verbal Notices and/or letters	199
Number of Statutory Notices served	11
Number of Notices complied with, (including Verbal notices)	308
Number of Nuisances or defects abated	473

ANALYSIS OF DEFECTS

Type of Defect	No. discovered	No. remedied
Water Closets	26	30
Drains	31	34
Water Supply	26	18
Sinks	2	2
Waste Pipes	6	5
Dustbins	160	181
Washboilers	—	—
Roofs	20	25
Chimneys and Flues	4	1
Eavesgutters	24	31
Downspouts	3	10
Brickwork and/or Pointing	17	17
Plastering	8	17
Floors	8	14
Windows	26	31
Doors	6	14
Firegrates	6	3
Dampness	12	16
Yard Paving	—	—
Miscellaneous	38	24
Total	423	473

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 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, Borron Road, Earlestown, Telephone No. Newton-le-Willows 2013 (for emergency calls 3233).

This service deals with all types of cases where such transport is required by reason of illness (including mental illness) or mental defectiveness, whether accident, other 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 three "Sitting case" cars are stationed at the Newton-le-Willows Depot, and manned by an appropriate staff, all qualified in First Aid. During 1957 the following numbers of calls were dealt with from this district:—
Emergency 383. Non-urgent 1,873. Total 2,256.

(4) Treatment Centres and Clinics

(i) **School Health**—School Clinic, Station Road, Haydock.
Assistant Divisional Medical Officer, Dr. E. I. Smiddy.
School Nurse/Health Visitors, Mrs. A. Boyes and Mrs. B. Green.

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

Opthalmic Surgeon—Mr. E. Allan.
Health Nurse in Charge—Mrs. A. Boyes
Sessions: Fortnightly—Thursday a.m. (by appointment only)

Orthopaedic

Orthopaedic Surgeon—Mr. Almond.
Orthopaedic Physiotherapist—Mrs. Garrett.
Sessions: Surgeon's sessions—monthly, morning of the first Monday (by appointment only).
Physiotherapist—Weekly (by appointment only).

Dental

Mr. A. E. Shaw, ably assisted as in the past by Miss Entwistle, the Dental Attendant, has continued the periodic inspection and treatment of school children, the treatment of expectant and nursing mothers and of children of "pre-school" ages.

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

Obstetrician—Mr. V. Corbett.

Health Visitor—Mrs. B. Green.

Sessions: Fortnightly—alternate Thursday 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 61 expectant mothers made 299 attendances at the Clinic.

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

Assistant Divisional Medical Officer—Dr. E. I. Smiddy.

Health Visitors—Mrs. A. Boyes and Mrs. B. Green.

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 at cost price to those regularly attending, and Ministry of Health "Welfare Foods," i.e., cod liver oil, orange juice and vitamin tablets are also dispensed at these sessions. 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
Born in 1957	157	3041
,, ,, 1956	135	1485
,, ,, 1952/1955	266	1506
Total	558	6032

(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-nurse, (when assisting at delivery in conjunction with a Doctor). The general policy is that each midwife should use 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. M. E. Brown, 31 Pimblett Road, Haydock. Telephone Ashton-in-Makerfield 7477.

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 73 domiciliary confinements which took place during the year.

(6) **Health Visiting Arrangements**

The scope of this work is steadily expanding; the responsibility now rests on Health visitors to advise on general health matters relating to the family as a whole, also on the welfare of the aged and handicapped, and not solely in relation to infants, young children and school children. Furthermore they have a specific responsibility to advise on immunisation against Diphtheria and Whooping Cough, and on the importance of vaccination.

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

Two Health Visitors, Mrs. A. Boyes and Mrs. B. Green, share the Health-visiting and School-Health responsibilities of the district, the former covering mainly the western half, and the latter the eastern portion of the township.

(7) **Mental Health Arrangements**

The District is covered for this purpose by the two Authorised Officers (one full time, one part time) 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:

	No. 10 Divisional Health Offices, The Old Rectory, Winwick, Nr. Warrington
Mr. F. L. S. Griffin	ditto
Mr. D. Ryan	ditto
Miss M. V. Phillips	ditto

The services of a duly authorised officer may be obtained in emergency at any time: during normal office hours, by communicating with the Divisional Health Office, (Tel. Warrington 33144), outside these hours, and at week-end, by telephone to the Newton-le-Willows Ambulance Station, (Newton-le-Willows 2013).

(8) Home Help Arrangements

This is a permissory 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, a parturient woman, children under compulsory school age or a mentally defective person. A steadily increasing demand for such help has been satisfied during the current year, most of the help being given in the homes of the aged and disabled. In some cases also, "night helps" are made available to meet the urgent need for night attendance of people seriously ill.

The "Home Helps" engaged are all part-time workers; none is full time, but all must undertake a minimum of 22 hours per week if 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, who is assisted by Miss M. McLean.

During the current year 58 cases in the district have been helped by a staff of 19 part-time home-helps, each case receiving, on average, assistance in the home for 3 hours on 3 days of every week throughout the year. Of these 58 cases, 42 were persons of the age of 65 years or over, and 16 persons under the age of 65.

(9) Home Nursing Arrangements

Nursing help in the home is now provided by the Local Health Authority, which employs fully trained and registered Home nurses for this purpose. The public demand for this onerous work has grown considerably, and the assistance of part-time relief nurses has been required from time to time.

The "Home Nurse" for the District is:—
Miss V. M. Dunn, 99 Central Drive, Haydock. Tel. St. Helens 7302.

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

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. Extra nourishment may also be provided where necessary for cases of Pulmonary Tuberculosis, on the recommendation of the Chest Physician.

The Tuberculosis Health Visitor for the District is Mrs. Evans. She maintains supervision of patients in their homes, and arranges for their examination and re-examination, also for that of "contacts" (inclung X-ray investigation), at the Chest Clinic at St. Helens, administered by the St. Helens and District Hospital Management Committee of the Liverpool Regional Hospital Board.

As regards Health Education—a very important and essential factor in the prevention of illness—it is emphasised that although some responsibility for this side of preventive medicine is accepted, 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, particularly in respect of the dissemination of information relating to the control of infectious diseases.

(11) Vaccination and Immunisation Arrangements

Vaccination, and immunisation against Diphtheria, Whooping Cough and Tetanus, are available free of cost to all who desire it, either through the family doctor, who carries it out as part of his duty 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. Infants and young children may also be immunised at the normal Child Welfare sessions on Wednesdays.

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, 1957, the proportion was 86%, as compared with 67% for No. 10 Health Division as a whole. Fortunately the vaccination state has improved, and 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 181 births notified in 1956 the 6 infant deaths recorded in 1957, out of the 175 survivors, 124 were vaccinated, a proportion of 71% of the newly born babies. (The rate of the County as a whole—in 1957—was 41.4.

During the year 333 under the age of 15 received two injections against poliomyelitis.

(12) The Children Act, 1948. The Children and Young Persons Act, 1953. The Adoption Act, 1950.

In the main the Children Act of 1948 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 a 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 Leigh Area, who is assisted by Children's Visitors, and is 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.

During the course of the year a number of case conferences have been held at regular meetings, under the Chairmanship of the Divisional Medical Officer, of a co-ordinating Committee of Officers whose spheres of work are concerned in some measure with the welfare of children, and which includes representatives not only of local government and of statutory bodies, but also of voluntary organisations, such as the National Society for the Prevention of Cruelty to Children—the N.S.P.C.C. The principal aim of this Committee is really two-fold; firstly, following discussion, to decide on the most appropriate measures to relieve a specific case of child neglect or cruelty, and secondly, to agree as to the officer most appropriate and most likely to succeed in any given case. As an indication of the comprehensive nature of the discussion, it may be mentioned that the following persons have regularly attended these meetings, which have been held at two-monthly intervals: The Divisional Medical Officer (as Chairman), the Divisional Education Officer or his represenatives, Assistant Divisional Medical Officers, School Attendance Officers, Health Visitors, Duly authorised officer, Mental Health Worker, Home Help Organiser, the Area Children's Officer and her Children's Visitors, Probation Officers, Public Health Inspectors, Inspectors of the N.S.P.C.C., and the Area Officer of the National Assistance Board.

The Area Children's Officer and her visitors work in close liaison 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 co-operation is excellent.

The Area Children's Officer is:—

Miss J. W. Cole, Area Office, 89/91, Railway Road, Leigh, and the Children's Vistor for the Urban District is:—

Miss J. Thompson, Area Office, 89/91 Railway Road, Leigh.

(13) National Assistance Acts, 1948 (and 1951)

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 also, is on the divisional basis. The main provisions of Part III relate to residential 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 infirmatives such as blindness, deafness, dumbness, crippling physical defects and other disabilities of a permanently handicapping character.

The approved scheme of the County Council in regard to Welfare utilises very fully the services rendered by 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 1948 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: the 1951 Act prescribes emergency procedures on similar lines. No cases were admitted to hospital under this section during the year.

Section 50 of the Act places on each 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.