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Haydock (England). Local Board.

Publication/Creation

1958

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HEALTH

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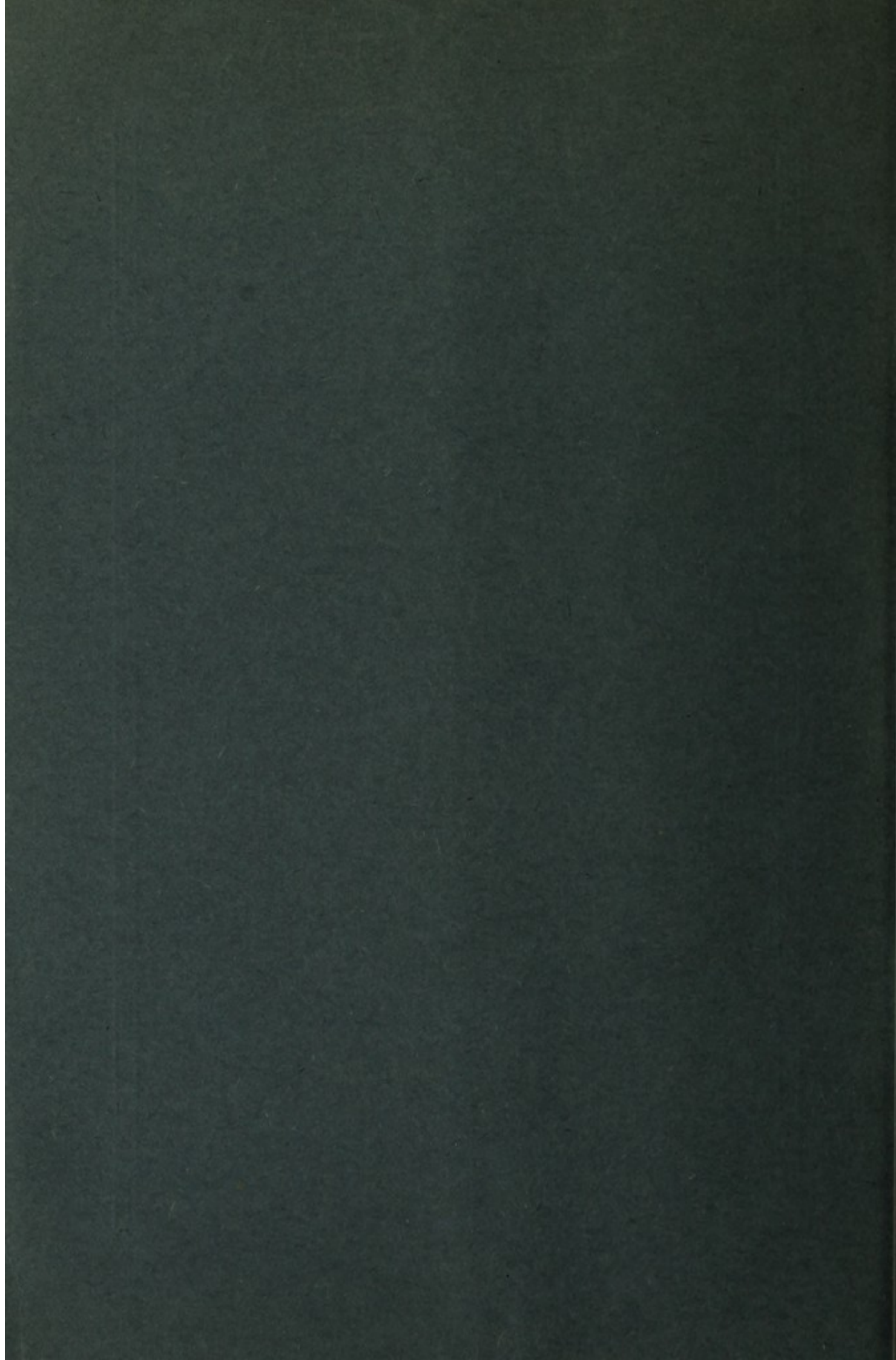
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**Haydock
Urban District Council**



Annual Report
of the
Medical Officer of Health
1958.

Lockie Press Ltd., Golborne. Tel.: 237



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HAYDOCK URBAN DISTRICT COUNCIL

1958

Chairman of the Council:

Councillor H. T. WILCOCK, J.P.

Vice-Chairman of the Council:

Councillor J. CAUNCE, J.P.

Clerk of the Council:

C. LEDGER, F.C.C.S.

Engineer and Surveyor:

R. MAIN, A.I.A.S.

HEALTH COMMITTEE:

Chairman:

Councillor J. PARR

Vice-Chairman:

Councillor Mrs. S. PIMBLETT, C.C.

Members:

Councillor J. BROWN (Died 22/5/58)

Councillor J. CAUNCE, J.P.

Councillor W. DIXON

Councillor R. FINNEY, J.P.

Councillor W. FOSTER

Councillor H. HUNT,

Councillor A. LLOYD

Councillor T. H. MIDDELHURST

Councillor W. TAYLOR

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

Preface	Page 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.**

Mr. Chairman, Madam, and Gentlemen,

I present for your approval my Annual Report as Medical Officer of Health for the year 1958, and include therein information about the more personal services relating to the health and welfare of the population of the Urban District, which are provided by the County Council under the provisions of the National Health Service Act, 1946, Part III, the approved Scheme of Divisional Health Administration formulated thereunder, and the National Assistance Act, 1948.

An analysis of the vital statistics for the year, as compared with the year 1957 and with the mean figures for the previous five years—the so-called “quinquennial mean” figure—shows unfortunately that there has been a decline from the relatively satisfactory position which has been maintained throughout this present decade. Although the live-birth-rates, both “crude” and “adjusted,” shew no appreciable changes, and the still-birth rate has been held steady at approximately 25 per 1000 total births, there has been an increase of 2 in the number of infant deaths, from 6 last year to 8 in the current year, making the infant mortality rate 41 per 1000, the highest since 1950, and the neo-natal rate 31, also the highest since 1950, both being 10 per 1000 more than in 1957.

A closer look at the causes of the neo-natal and infant deaths shows that of the total of 8, no less than 5 were either due directly to, or were associated with, prematurity; 4 lived less than 2 hours and only 2 were more than 4 weeks old at the time of death. Of these, one death resulted from acute influenzal pneumonia, and one from disease of the middle ear.

The general “crude death rate” of 11.0 per 1000 population, (adjusted rate 13.5/1000), although higher than last year's figure, is not appreciably different from the quinquennial mean of 11.1/1000, and the maternal death rate, fortunately, has remained at “Nil.” The 132 total deaths shew much the same distribution as regards causation as in previous years. Diseases of the heart and circulation, exclusive of lesions of the blood vessels of the central nervous system or “strokes”, accounted for 48 deaths, 22 of which were caused by coronary disease or angina, 16 by other types of heart disease, mainly rheumatic, and 10 by other types of circulatory disease. “Strokes” were the cause of death in 33 cases, fairly evenly distributed as between the sexes, so that in all more than 60% of the total death roll was attributable to diseases of the heart and circulation. In second place comes the group of respiratory diseases, bronchitis and pneumonia, which, if we include also influenza, resulted in some 15 deaths in all, of which 12 were due

to bronchitis. Next comes the cancer group, responsible for 13 deaths, 8 women and 5 men, among which were 2 cases of lung cancer, one male and one female, an unusual distribution, because in this condition of course there is usually a heavy preponderance of males. Following the cancer group in 4th place we have "other defined and ill-defined diseases"—a heterogenous group—which caused 12 deaths: and finally there were 3 deaths from violence in one form or another, 2 due to road accidents and 1 to suicide.

The incidence of notifiable disease has been very light indeed, only 44 cases being recorded: which constitutes an all-time record so far as I have been able to ascertain. Of this total, 27 were notifications in respect of measles, 9 of scarlet fever, 2 of whooping-cough, 2 of dysentery, 2 of tuberculosis of the respiratory type, 1 of meningitis, and 1 of primary pneumonia. When one considers that the quinquennial mean figure for the years 1953-57 was 290, or nearly seven-times the current figure, it will be appreciated how phenomenal the year has been in this respect.

Coming next to the personal health services of the County Council as the local health authority and welfare authority by virtue respectively of the National Health Service Act, 1946, and the National Assistance Act 1948, these have in general remained in much the same order as in the previous year, some showing a minor degree of increase and some a similar decrease in magnitude. Thus, in the ambulance section it is found that the total number of cases moved rose from 2256 to 2421, the increase in non-urgent cases from 1873 to 2071, more than off-setting a slight fall in the number of urgent cases from 383 to 350. At the antenatal clinic, on the other hand, some 60 expectant mothers attended on 292 occasions, as compared with 61 who made 299 visits to the clinic in 1957. Child welfare attendances fell from 6032 to 5465, and the individual children in attendance from 558 to 439. These reductions applied to children of all the pre-school age-groups: the "under ones," the "one to twos," and the "two to fives," and they continue the downward trend which has been evident over the past two years, and which may possibly be associated with two factors,—the distribution of the Ministry of Health Welfare Foods, ("National Dried Milk," Orange Juice, and Cod Liver Oil) at separate sessions, and the fact that it became necessary to re-emphasise the County Council policy regarding the provision of proprietary infant foods, and especially ancillary foodstuffs, at concessionary rates. It must be admitted, too, that the attendances may well have been affected by a feeling of resentment on the part of some mothers engendered by the County Education Committee's decision that the School Clinic premises should be used for legitimate health education purposes only by members of the Haydock Mothers' Club and not as an all-purpose club headquarters for social gatherings.

Some 84 mothers had their babies at home during the course of the year, as compared with 73 in 1957: these constituted some 44% of the 192 babies which were live-born, against 38% last year; and as previously mentioned, there were no cases of puerperal pyrexia and no maternal deaths, an outspoken tribute to the care and attention which these mothers received from their doctors and also from the two domiciliary midwives who cover the district. The work of the Home Nurse has remained at much the same level, and has, as always, been carried out quietly, efficiently and without fuss or publicity: it is indeed only when her services are required that the value of the Home-Nurse really comes to be appreciated. Home-helps have worked consistently throughout the year in 78 homes, as compared with 58 in 1957, each case receiving on average help for 3 hours on 3 days every week. The great majority of those who benefited from this Service, some 60 in all, were pensioners over the age of 65 years.

Vaccination and immunisation against small pox, diphtheria, whooping cough, tetanus and especially against poliomyelitis presents on the whole an encouraging picture, particularly as regards small-pox vaccination, some 161 babies under one year of age being protected in this way, a proportion of 82% of those babies born in 1957 who reached the age of one year. This compares very favourably indeed with other districts in Lancashire, where the "acceptance rate" for vaccination in 1958 was only 46.5, which however is a substantial improvement on the 41.4 shown in 1957. In the case of diphtheria, it is estimated that at the end of the current year some 85% of the children under 15 years of age had received this protection, as compared with 67% for the whole of the divisional area: whilst in the case of poliomyelitis the number of "under fifteens" protected by two injections was 683, or more than twice the number (333) so "vaccinated" last year.

Reverting finally to questions of environmental sanitation and circumstances, the fitness and suitability of houses for "reasonable" occupation are still matters of concern, and in my view the five year clearance programme is certainly one which should be adhered to: closure of the East End Sewage Works, dependent on connections and trunk sewers on the Sankey Valley Sewerage Scheme whereby sewage from the eastern half of the Urban District is conveyed to Newton-le-Willows, is still awaited anxiously, as a necessary step in controlling the pollution of Ellams Brook, and subsequently of Sankey Brook: improvements in the fabric of many of the older schools in Haydock, particularly in regard to closet and ablution facilities, are long overdue; and every effort should be made in order that the district may play its part by helping to secure a purer, cleaner atmosphere through the control of smoke, some 60% of which emanates at low levels from house chimneys, and which is so very costly in causing ill-health, deterioration of buildings, fabrics and furnishings: in soap, detergents and the time of the housewife spent unprofitably in maintaining proper standards of home cleanliness for herself, her husband, and her children.

In concluding this opening commentary of the Report I would like to express my thanks to you, Mr. Chairman, and to each Member of the Housing Committee and the Council for your continuing interest in and support of the work undertaken by your Officers in the Health Department, and for the confidence which you place in us. To my colleagues also, in their differing spheres of responsibility, I extend my gratitude and thanks for their friendly and always helpful advice and co-operation in matters of mutual concern: and finally, within my own department, I ask Mr. Watkin, your Public Health Inspector, to accept my very sincere appreciation of his most loyal, conscientious, and effectual control of the multitude of day-to-day problems, technical, administrative, statistical, (and not infrequently legal), with which, in his office, he is called upon to deal.

I have the honour to be,

Madam Chairman and Gentlemen,

Yours obediently,

A. C. CRAWFORD.

Medical Officer of Health.

SECTION 1

GENERAL STATISTICS AND SOCIAL CONDITIONS

Area (acres)	2,395
Population (Census 1951)	11,838
Population (Registrar-General's estimate for mid-1958)	11,950
Number of inhabited houses (Census 1931)	2,029
Number of inhabited houses at end of 1958 according to Rate Books	3,504
Rateable Value	£82,501
Sum represented by 1d. rate	£310

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—104 Male, 88 Female	.....	Total	192
Illegitimate—1 Male, 4 Female	.....	Total	5
Total Live Births	.....		197
Crude Birth Rate per 1,000 population	.....		16.5
Adjusted Birth Rate per 1,000 population	.....		15.8

Stillbirths

3 Male, 2 Female	.....	Total	5
Rate per 1,000 total (live and still) births	.....		24.8

Deaths

66 Male, 66 Female	.....	Total	132
Crude Death Rate per 1,000 population	.....		11.0
Adjusted Death Rate per 1,000 population	.....		13.5
Maternal Mortality	.....		Nil
Deaths of Infants under one year of age	.....		8
Rate per 1,000 live births	.....		40.6

Neo-Mortality

Deaths of Infants under 4 weeks of age	.....		6
Mortality rate per 1,000 live births	.....		30.5

Population : At the Census in 1951 the population enumerated was 11,838. The Registrar-General's estimate for mid-1958 was 11,950 and this figure has been used in calculations of statistics in this report.

Births : During the year there were registered 197 births, being 105 males and 92 females, to Haydock parents, representing a crude birth rate of 16.5 per 1,000 of the population and an adjusted birth rate of 15.8; the birth rate for England and Wales was 16.4.

There were 5 stillbirths giving a rate per thousand (live and still) births of 24.8

Deaths : The total number of deaths of Haydock residents whether within or without the district was 132, comprising 66 males and 66 females. The crude death-rate for 1958 was therefore 11.0 per 1,000 of the population and the adjusted rate 13.5 as compared with a death-rate of 11.7 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 65.

Infant Mortality : Deaths of infants under one year of age numbered 8 giving a rate per 1,000 live births of 40.6. The rate for England and Wales was 22.5.

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 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 0.96 and the adjusted Live Birth-rate becomes 15.8 per 1000. The Death-rate comparability factor is 1.22 and the adjusted Death-rate is therefore 13.5 per 1000.

Comparisons of Births, Deaths, etc. : The tables on the following pages give comparisons of the Births, Deaths, etc., for the year 1958 and for the preceding 5 years; also the causes of death in the Haydock Urban District for the year 1958.

VITAL STATISTICS—COMPARATIVE TABLE

HAYDOCK U.D.	Live Births		Deaths (all causes)		Stillbirths		Maternal Mortality		Infant Mortality			
	No. regis- tered	Rate per 1,000 pop'n	No. regis- tered	Rate per 1,000 pop'n	No. regis- tered	Rate per 1,000 total births	No. of deaths regis- tered	Rate per 1,000 total births	Total		Neo-Natal	
									No. of deaths regis- tered	Rate per 1,000 live births	No. of deaths regis- tered	Rate per 1,000 live births
Year 1958.....	197	*16.5	132	*11.0	5	24.8	Nil	Nil	8	40.6	6	30.5
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
Average 5 years 1953-1957	—	16.1	—	11.1	—	33	—	—	—	27	—	22

* Adjusted (live-birth rate comparability factor, 0.96) = 15.8 per 1,000.
(death-rate comparability factor, 1.22) = 13.5 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	16.49	16.4
Still Births Rate.... (a)	24.8	23.7	21.6 (a)
Neo-natal Deaths (b)	30.5	18.3	16.2 (b)
Total Infant Deaths (b)	40.6	25.5	22.5 (b)
Maternal Mortality (a)	Nil.	0.47	0.43 (a)
Total Death Rate adjusted	13.5	13.99	11.7

(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	
	Notifica- tions	Deaths	Notifica- tions	Deaths	Notifica- tions	Deaths
Typhoid and Para- typhoid Fever	0·00		0·02		0·00	
Dysentery	0·17		1·22		0·84	
Food Poisoning	0·00		0·26		0·20	
Diphtheria	0·00		0·00		0·00	
Scarlet Fever	0·75		0·93		0·86	
Whooping Cough	0·17		0·70		0·74	
Measles	2·26		4·84		5·75	
Meningococcal Infection	0·08		0·01		0·08	
Acute Poliomyelitis Paralytic	0·00		0·03		0·03	
Acute Encephalitis Infective	0·00		0·00		0·00	
Pneumonia (Primary)	0·08		0·41		0·49	
Tuberculosis (Respiratory)	0·17		0·49	0·09	0·59	0·09
(Non-respiratory)	0·00		0·07	0·01	0·08	0·01
Total	0·17		0·56	0·10	0·67	0·10
Diseases of Heart and Circulation:						
Coronary Disease						
Angina		1·83		2·10		
Strokes		2·75		1·99		
Hypertension		0·17		0·29		
Other		1·17		2·13		
Total—All Forms		5·92		4·53		
Cancer:						
Stomach		0·08		0·35		
Lungs and Bronchus		0·17		0·42		0·44
Other		0·33		1·29		1·68
Total—All Forms		0·58		2·11		2·12
Violence:						
Accidents (motor vehicle)		0·17		0·12		
(Other)		0·08		0·31		
Total		0·25		0·43		
Suicide and Homicide		0·00		0·15		
Total due to Violence		0·25		0·59		

CAUSES OF DEATH—HAYDOCK U.D. 1958

Causes of Death	Males	Females	Total
All Causes	66	66	132
Tuberculosis, respiratory	—	—	—
Tuberculosis, other forms	—	—	—
Syphilitic disease	—	—	—
Diphtheria	—	—	—
Whooping Cough	—	—	—
Meningococcal Infections	—	—	—
Acute Poliomyelitis	—	—	—
Measles	—	—	—
Other infective and parasitic diseases	—	—	—
Malignant Neoplasms—			
Stomach	—	1	1
Lung, Bronchus....	1	1	2
Breast	—	2	2
Uterus	—	2	2
Other malignant and lymphatic neoplasms	4	2	6
Leukaemia, alukaemia	—	—	—
Diabetes	—	2	2
Vascular lesions of nervous system	15	18	33
Coronary disease, angina	17	5	22
Hypertension with heart disease	1	1	2
Other heart disease	3	11	14
Other circulatory disease	3	7	10
Influenza....	1	1	2
Pneumonia	1	2	3
Bronchitis	9	3	12
Other diseases of respiratory system	1	1	2
Ulcers of stomach and duodenum	1	—	1
Gastritis, enteritis and diarrhoea....	—	—	—
Nephritis and nephrosis	—	—	—
Hyperplasia of prostate	1	—	1
Pregnancy, childbirth, abortion	—	—	—
Congenital malformations	—	—	—
Other defined and ill-defined diseases	7	5	12
Motor vehicle accidents	1	1	2
All other accidents	—	1	1
Suicide	—	—	—
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.

7 cases from Haydock were admitted during 1958.

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

NOTIFIABLE DISEASES DURING 1958

[illegible]

HAYDOCK URBAN DISTRICT
NOTIFIABLE DISEASES—COMPARATIVE TABLES

18

Disease	1958		1957		1956		1955		1954		1953		Quinquennial Mean 1953-1957	
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
Scarlet Fever	9	—	11	—	21	—	37	—	20	—	33	—	24	—
Diphtheria	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles	27	—	256	—	167	—	171	—	63	—	192	—	170	—
Whooping Cough	2	—	18	—	23	—	43	—	9	—	40	—	27	—
Enteric Group Fevers	—	—	—	—	—	—	—	—	2	—	—	—	0.4	—
Dysentery	2	—	—	—	1	—	35	—	198	—	—	—	47	—
Food Poisoning	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Ophthalmia Neonatorum	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal Pyrexia	—	—	2	—	—	—	—	—	1	—	1	—	0.8	—
Acute poliomyelitis and polio- encephalitis	—	—	3	1	—	—	2	—	—	—	—	—	1	0.2
Acute Encephalitis—infective	—	—	—	—	—	—	1	—	—	—	—	—	0.2	—
Meningococcal Infection	1	—	1	—	—	—	2	—	—	—	1	—	0.8	—
Primary and Influenzal Pneumonia	1	—	7	—	5	—	10	—	4	—	2	—	6	—
Erysipelas	—	—	5	—	1	—	—	—	—	—	2	—	2	—
Tuberculosis, Respiratory	2	—	8	2	12	—	6	—	11	4	14	2	10	1.6
Tuberculosis, Non- Respiratory	—	—	1	—	1	—	—	1	1	—	2	—	1	0.2
Total	44	—	312	3	231	—	307	1	309	4	287	2	290	2.0

SECTION 4

SANITARY CIRCUMSTANCES OF THE AREA

Water Supply

The supply of water to the district is now the responsibility of the St. Helens Corporation who, by agreement with the Council, assumed control of the undertaking in April, 1958.

The bulk of the water consumed in the district comes from the Rivington reservoirs belonging to the Liverpool Corporation.

- During the year 4 samples of the public supply were examined at the Public Health Laboratory, Liverpool; all were satisfactory.

INSPECTION AND SUPERVISION OF FOOD SUPPLIES

Milk

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

Distributors operating from:—

Dairies in the district	1
Shops in the district other than dairies	37
Premises outside the district	4

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

Tuberculin Tested	11
Pasteurised	13
Sterilised	48
Total	72

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	12
No. satisfactory	12.
No. unsatisfactory	Nil.
Phosphatase test. No. of samples	12
Turbidity test. " " "	6
No. satisfactory	18.
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 1958.

The number and types of food premises in the area at the end of 1958 were as hereunder:—

Grocers and Provision Dealers	46
Greengrocers and Fruiterers	4
Meat Shops	7
Bakers and/or Confectioners	4
Fried Fish Shops	8
Shops, selling mainly Sweets, Minerals, Ice-Cream etc.	16
Licensed Premises, Clubs, Canteens, Restaurants, Snack-bars and similar Catering Establishments....	22
Others	2

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
Jersey Potatoes	483 lbs.
Tinned Meat	294 lbs.
Miscellaneous Tinned Goods	71 lbs.

No cases of food poisoning have occurred.

30 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, 1955), for adulteration etc., is carried out by County Council inspectors.

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

Milk	....	....	....	....	....	....	....	....	....	59
Table Jelly	....	....	....	....	....	....	....	....	....	5
Blancmange	....	....	....	....	....	....	....	....	....	3
Barley	....	....	....	....	....	....	....	....	....	2
Mincemeat	....	....	....	....	....	....	....	....	....	2
Suet	....	....	....	....	....	....	....	....	....	1
Cheese	....	....	....	....	....	....	....	....	....	1
Cornflour	....	....	....	....	....	....	....	....	....	1

With the exception of the samples detailed below, all were reported by the County Analyst to be genuine:—

<i>Type</i>	<i>Result of Analysis</i>	<i>Action Taken</i>
Milk	Freezing point indicated the presence of 2.1% extraneous water.	Vendor cautioned. Further samples obtained.
Table Jelly	Fruit juice absent but printed illustrations of raspberries prominent on carton.	Packers communicated with.
Mincemeat	Deficient 3.2% of soluble solids.	Manufacturer communicated with.

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 connected to the public sewers.

The western half of the district is served by the Parr Sewage Works, St. Helens, which is situated partly in the Haydock district and which came into operation early in 1958.

It is expected that the proposed sewerage scheme, for the Eastern end of the district, which will discharge into the Sankey Valley Sewerage scheme, will be commenced in 1959 and completed some time in 1960. This will bring about the abandonment of the two sewage disposal works at present in operation in the Haydock Park area.

Sanitary Accommodation (Houses and Schools)

The numbers of the various types of conservancy measures in the district at the end of 1958 are as follows:—

Privy Middins	....	....	....	....	....	....	....	3
Pail Closets	....	....	....	....	....	....	....	1
Trough Closets	....	....	....	....	....	....	....	Nil
Waste-water Closets	....	....	....	....	....	....	....	Nil
Fresh-water Closets	....	....	....	....	....	....	....	3884
Dry Ashpits	....	....	....	....	....	....	....	Nil
Ashbins	....	....	....	....	....	....	....	3684

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 disinfection 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	244	68
Other Premises	138	23
Agricultural Property	44	4

Total treatments, including re-treatments, numbered 120.

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	26 houses
Ants	69
Flies	9
Bugs.....	10
Woodbeetles	2
Silverfish	1 house

In addition, an infestation of steam-flies at a Colliery Canteen was 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

Three 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 4 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 133 shops in the district and inspections during the year numbered 264.

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

13 premises were licenced to keep petroleum spirit and one to keep petroleum mixtures. Visits of inspection to new and existing installations numbered 19.

One licence to keep carbide of calcium was renewed.

Income from licence fees amounted to £12 10s. 0d.

SECTION 5

HOUSING

At the end of 1958, according to the Rate books, the total number of houses in the area was 3504.

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

During 1958, 2 traditional permanent houses were erected by the local authority and 59 by private enterprise.

Two houses were demolished as a result of action under Section 17 (1) of the Housing Act, 1957.

Applications for improvement grants were made in accordance with the provisions of the Housing Act, 1949, by the owners of 2 houses; both were approved by the Local Authority.

During the year, work of improvement was completed at 4 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)	404
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(b)	Number of inspections made for the purpose	901
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(2)	Number of dwelling-houses in the area considered to be so dangerous or injurious to health as to be unfit for human habitation	73
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(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	360
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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
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3. Action under Statutory powers during the year:—

(a)	Proceedings under Sections 9, and 16 of the Housing Act, 1957	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	1
(2) Number of dwelling-houses in which defects were remedied after service of formal notices:—	
(a) by owners	6
(b) by local authority in default of owners	Nil
(c) Proceedings under Section 17 (1) of the Housing Act, 1957	Nil
Number of dwelling-houses in respect of which undertakings "not to occupy" were accepted by the local authority	
	1

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.

During the year 17 applications for certificates of disrepair were 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.

10 undertakings were accepted from landlords and 16 certificates of disrepair were issued to tenants.

9 successful applications for cancellation of certificates of disrepair were received from landlords.

Since the commencement of the Act, 65 applications for Certificates of disrepair have been received from tenants, 30 Undertakings to repair accepted from landlords and 34 Certificates of disrepair issued to tenants.

SECTION 6

Industrial and Commercial Hygiene

There are 22 registered factories in the district comprising 15 factories in which mechanical power is used, and 7 without mechanical power.

The types of factory are:—

Engineering	....	....	....	....	....	....	7
Bakehouses	....	....	....	....	....	....	5
Brick-making	....	....	....	....	....	....	1
Boot and Shoe Repairs	....	....	....	....	....	....	1
Joinery	....	....	....	....	....	....	3
Pre-cast concrete goods	....	....	....	....	....	....	1
Laundry	....	....	....	....	....	....	1
Hinge-making and Electro-plating	....	....	....	....	....	....	1
Scrap-yard	....	....	....	....	....	....	1
Cycle and Radio Repairs	....	....	....	....	....	....	1

36 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)	404
Re-inspections and re-visits to above	497
Housing conditions and overcrowding....	50
Application for Certificate of disrepair (Inspections and visits)	54
Application for Improvement Grants („ „ „)	13
Water supply (inspections and re-inspections)	61
Drainage (inspections and re-inspections)	96
Ditches and Water Courses (inspections and re-inspections)	46
Accumulations of refuse	9
Piggeries and keeping of animals	12
Movable Dwellings....	16
Schools	5
Cinemas	1
Offensive Trades	2
Rodent Control	331
Disinfestation of Premises	146
Infectious disease enquiries and disinfections	10
Dairies	2
Food shops and premises	204
Other shops	123
Factories	34
Interviews with Owners, Contractors etc	33
Milk samples	18
Water samples	6
Petroleum	19
Miscellaneous	85
Total	2277

Number of Nuisances or Defects discovered	502
Number of Informal Notices served	101
Verbal Notices and/or letters	198
Number of Statutory Notices served	1
Number of Notices complied with, (including Verbal notices)	283
Number of Nuisances or defects abated	396

ANALYSIS OF DEFECTS

Type of Defect	No. discovered	No. remedied
Water Closets	73	72
Drains	41	43
Water Supply	20	3
Sinks	5	3
Waste Pipes	6	7
Dustbins	161	145
Washboilers	—	—
Roofs	20	16
Chimneys and Flues	4	2
Eavesgutters	35	19
Downspouts	14	5
Brickwork and/or Pointing	11	11
Plastering	18	10
Floors	9	5
Windows	29	16
Doors	7	3
Firegrates	4	4
Dampness	16	7
Yard Paving	3	4
Miscellaneous	26	21
Total	502	396

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 paediatric, 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 1958 the following numbers of calls were dealt with from this district:—

Emergency 350. Non-urgent 2,071. Total 2,421.

(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

Ophthalmic 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 60 expectant mothers made 292 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 1958	137	3111
" " 1957	115	1096
" " 1956/1953	187	1258
Total	439	5465

(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 84 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 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, 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 78 cases in the district have been helped by a staff of 22 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 78 cases, 60 were persons of the age of 65 years or over, and 18 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" (including 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, 1958, the proportion was 85%, 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 203 births notified in 1957 the 8 infant deaths recorded in 1958, out of the 195 survivors, 161 were vaccinated, a proportion of 82% of the newly born babies. (The rate of the County as a whole—in 1958—was 46.5

During the year 683 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 representatives, 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 Visitor 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 infirmities 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.







