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URBAN DISTRICT
OF HOLMFIRTH

ANNUAL REPORT
OF THE
Medical Officer of Health
For the Year 1950

BY
ERIC WARD
M.R.C.S., L.R.C.P., D.P.H.

SLAITHWAITE :
A. T. GREEN & CO., CARR LANE
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Holmfirth Urban District

LIST OF COUNCILLORS

for the year 1950.

Chairman:

H. BEAUMONT, Esq., J.P.

Vice-Chairman:

H. BEEVER, Esq.

E. BEEVER, Esq.	A. HOLMES, Esq.
R. A. BERRY, Esq.	G. HOLROYD, Esq.
Mrs. E. E. BOOTH.	Mrs. B. A. LOCKWOOD.
J. BRAY, Esq.	W. H. MAUDE, Esq.
W. BOOTH, Esq.	N. MARSH, Esq.
H. BOOTHROYD, Esq.	A. MOORE, Esq.
H. COLDWELL, Esq.	S. P. OWENS, Esq.
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F. HIGGINSON, Esq.	F. H. SOWERBY, Esq.
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E. HINCHLIFFE, Esq.	A. TOLSON, Esq.
J. HINCHLIFFE, Esq., D.C.M.	J. B. TURNER, Esq.
E. N. HIRST, Esq.	

PUBLIC HEALTH OFFICERS OF THE COUNCIL

Medical Officer of Health:

ERIC WARD, M.R.C.S., L.R.C.P., D.P.H.

Deputy Medical Officer of Health:

W. G. SMEATON, M.B., Ch.B., D.P.H.
(resigned 24th June, 1950)

H. C. MILLIGAN, M.B., Ch.B., D.P.H.
(appointed 22nd August, 1950)

Chief Sanitary Inspector and Cleansing Superintendent:

I. HAIGH

Additional Sanitary Inspector:

W. HARGREAVES
(appointed 1-1-50)

Divisional Health Office,
Woodville,
Scar Lane,
Golcar,
Near Huddersfield.

November, 1951.

To the Chairman and Members of
the Holmfirth Urban District Council.

Mr. Chairman, Ladies, and Gentlemen,

I have the honour to present to you my 4th Annual Report on the health of the Holmfirth Urban District and the work of the Public Health Department in 1950. The Report is the 13th in the series since the formation of the enlarged Urban District in 1938 and has been prepared according to the instructions of the Ministry of Health.

Although there is no statutory duty imposed on me to report on the services provided under Part 3 of the National Health Service Act, 1946, these being administered by the West Riding County Council as the Local Health Authority, I feel that some reference to them in this Report will be of interest. Particulars are included, therefore, in Part VII of the Report.

The re-organisation of the Health Department under a Chief Sanitary Inspector in the Council Offices at Holmfirth has been consolidated during the year and, as will be seen from the statistics given in the Report, this has resulted in much greater activity in all sections of the work.

The Registrar-General's estimate of the population of the District at mid-1950 is 19,240, an increase of 150 on the 1949 figure. There has been a fall of 1.99 per 1,000 in the Crude Birth Rate, and an increase of 0.94 in the Crude Death Rate.

Apart from some increase in the prevalence of mild cases of Scarlet Fever and of Whooping Cough there has been no unusual prevalence of infectious or other diseases in the District.

Housing still remains one of the biggest problems and until more new houses are available little can be done by way of closure or demolition.

I wish to express my thanks to the Chairman and Members of the Council for their help and consideration, and record my appreciation of the assistance received from the Clerk and other Officials of the Council, and in particular from the Chief Sanitary Inspector, Mr. I. Haigh, and his staff.

I am,

Your obedient servant,

ERIC WARD.

Medical Officer of Health.

SUMMARY OF STATISTICS

1. General Statistics.

Area in Acres	...	...	...	...	...	17,565
Enumerated Population (Census, 1951)	...	...	...	...	...	19,073
Registrar-General's Estimate of Population (middle of 1949)	...	...	...	...	...	19,090
Registrar-General's Estimate of Population (middle of 1950)	...	...	...	...	...	19,240
Number of Inhabited Houses at end of 1950	...	...	...	...	...	6,378
Rateable Value (31st March, 1951)	...	...	...	...	...	£94,615
Sum represented by a Penny Rate (March, 1951)	...	...	...	...	...	£361

2. Extracts from Vital Statistics.

Live Births:				Male	Female	Total
Legitimate	...	...	...	140	119	259
Illegitimate	...	...	...	8	4	12
Total	...	...	...	148	123	271

Crude Birth Rate per 1,000 of estimated resident population	...	...	...	14.09
Adjusted Birth Rate per 1,000 of estimated resident population	...	...	...	14.65

Still Births:				Male	Female	Total
Legitimate	...	...	...	2	3	5
Illegitimate	...	...	...	—	—	—
Total	...	...	...	2	3	5

Rate per 1,000 of total (live and still) births: 18.12.

Deaths (Males 126, Females 152)	...	...	...	...	278
Crude Death Rate per 1,000 of estimated resident population	...	...	...	...	14.45
Adjusted Death Rate per 1,000 of estimated resident population	...	...	...	...	12.43
Deaths from Puerperal Causes	...	...	...	...	Nil

Number of Deaths of Infants under 1 year of age:

				Male	Female	Total
Legitimate	...	...	...	5	5	10
Illegitimate	...	...	...	1	—	1
Total	...	...	...	6	5	11

Death Rate of Infants under 1 year of age:

All Infants per 1,000 live births	...	...	...	...	40.59
Legitimate Infants per 1,000 legitimate live births	...	...	...	...	38.61
Illegitimate Infants per 1,000 illegitimate live births	...	...	...	...	83.33

Death Rate per 1,000 population from:

Pulmonary Tuberculosis	...	...	...	...	0.21
All forms of Tuberculosis	...	...	...	...	0.31
Respiratory Diseases (excluding Pulmonary Tuberculosis)	...	...	...	...	1.66
Cancer	...	...	...	...	2.08
Infective and Parasitic Diseases (excluding Tuberculosis but including Syphilis and other V.D.)	...	...	...	...	0.16
Deaths from Measles (all ages)	...	...	...	...	1
Deaths from Diarrhoea (children under 2 years of age)	...	...	...	...	Nil
Death Rate from Diarrhoea and Enteritis of children under 2 years of age per 1,000 births)	...	...	...	...	Nil

Section I.

STATISTICS AND SOCIAL CONDITIONS OF THE AREA NATURAL AND SOCIAL CONDITIONS OF THE DISTRICT

The Urban District of Holmfirth is situated on the Northern slopes of the Pennines and lies to the south of the County Borough of Huddersfield. The general conformation of the country is very hilly, being comprised of several ridges with their corresponding valleys. The altitude varies from 300 feet at Honley to over 1,700 feet on Holme Moss.

Down the main valley flows the River Holme which is fed by several streams. The southern part of the District is wild and rugged and a considerable part of the area consists of moorland. The principal townships in the District are Holmfirth in the centre of the area and Honley in the northern portion.

The chief industry is the manufacture of woollen cloth, but farming, stone quarrying, and engineering also provide occupation for a considerable number of the inhabitants.

VITAL STATISTICS

Population.

The Registrar-General's estimate of the population at mid-1950 was 19,240 as compared with 19,090 at mid-1949. This increase, together with the increase of 7 deaths over births, shows that there has been an influx of some 158 people from other areas.

Comparability Factors.

Area comparability factors in respect of Births and Deaths have been supplied by the Registrar-General, and for your district these are 1.04 and 0.86 respectively. These are the factors by which the crude birth and death rates should be multiplied in order to make them truly comparable with the rates for other areas.

The need for such adjustment is occasioned by the differences in the constitution of area populations as regards the proportions of their sex and age group components. The fact that your district has a comparability factor of 0.86 for deaths shows that the population contains a higher proportion of elderly people than the average area, which would in all probability result in a high crude death rate despite the general health conditions of the population being good. The comparability factor of 1.04 for Births shows that the proportion of women in the maternal age groups is less than in the average area.

Births.

After adjustment for inward and outward transferable births, a net total of 271 live births (148 male, 123 female) was registered in the District during the year, a decrease of 36 compared with the previous year.

The ADJUSTED BIRTH RATE is 14.65 per 1,000 of the population. The Crude Birth Rate is 14.09, as compared with 16.08 for the previous year, 15.8 for England and Wales, 16.3 for the West Riding Administrative County, and 15.9 for the Aggregate West Riding Urban Districts.

The illegitimate live births numbered 12, or 4.43% of the total live births, the same number as in 1949.

Stillbirths.

After adjustments for transfers, 5 stillbirths were registered during the year as compared with 3 for the previous year. This figure gives a rate of 18.12 per 1,000 live and stillbirths, and 0.26 per 1,000 of the population, as compared with 9.68 and 0.16 respectively for 1949.

Deaths.

After correction for inward and outward transferable deaths, the net total deaths registered in and assigned to the District was 278 (126 male, 152 female), an increase of 20 compared with the year 1949.

The ADJUSTED DEATH RATE is 12.43 per 1,000 of the population as compared with 11.75 for the previous year.

The following were the principal causes of death in order of frequency:—

(i)	Diseases of the Heart and Circulatory System	...	95
(ii)	Intra Cranial Vascular Lesions	... ..	48
(iii)	Malignant Neoplasms	... ..	40
(iv)	Respiratory Diseases (excluding Pulmonary Tuberculosis	... ..	32

These 4 causes accounted for 77.34% of the total deaths. Particulars of the various causes of death and of the age and sex distribution are given in the following table:—

Causes of Death	Sex	All Ages	0-	1-	2-	5-	15-	25-	35-	45-	55-	65-	75-
All Causes ...	M	126	6	...	1	...	2	1	4	9	21	42	40
	F	152	5	...	...	...	2	2	3	11	24	50	55
1 Tuberculosis, respira-	M	3	...	...	...	...	1	...	...	...	1	1	...
tory ...	F	1	...	...	...	...	...	...	...	...	1	...	...
2 Tuberculosis, other ...	M	1	...	...	...	...	...	...	...	...	1	...	...
	F	1	...	...	...	...	1	...	...	...	...	...	...
3 Syphilitic disease ...	M	...	...	...	...	...	...	...	...	...	...	...	...
	F	1	...	...	...	...	...	1	...	...	...	...	...
4 Diphtheria ...	M	...	...	...	...	...	...	...	...	...	...	...	...
	F	...	...	...	...	...	...	...	...	...	...	...	...
5 Whooping Cough ...	M	1	1	...	...	...	...	...	...	...	...	...	...
	F	...	...	...	...	...	...	...	...	...	...	...	...
6 Meningococcal infec-	M	...	...	...	...	...	...	...	...	...	...	...	...
tions ...	F	...	...	...	...	...	...	...	...	...	...	...	...
7 Acute poliomyelitis ...	M	...	...	...	...	...	...	...	...	...	...	...	...
	F	...	...	...	...	...	...	...	...	...	...	...	...
8 Measles ...	M	1	1	...	...	...	...	...	...	...	...	...	...
	F	...	...	...	...	...	...	...	...	...	...	...	...
9 Other infective and	M	...	...	...	...	...	...	...	...	...	...	...	...
parasitic diseases ...	F	...	...	...	...	...	...	...	...	...	...	...	...
10 Malignant neoplasm,	M	3	...	...	...	...	...	...	...	...	1	1	1
stomach ...	F	2	...	...	...	...	...	...	...	...	1	...	1
11 Malignant neoplasm,	M	4	...	...	...	...	...	...	...	2	1	1	...
lung, bronchus ...	F	3	...	...	...	...	...	...	1	...	...	1	1
12 Malignant neoplasm,	M	...	...	...	...	...	...	...	...	...	...	...	...
breast ...	F	2	...	...	...	...	...	...	...	1	...	1	...
13 Malignant neoplasm,	M	...	...	...	...	...	...	...	...	...	...	...	...
uterus ...	F	3	...	...	...	...	...	...	...	...	1	1	1
14 Other malignant and	M	9	...	...	...	...	...	...	...	...	4	3	2
lymphatic neoplasms ...	F	13	...	...	...	...	...	...	...	3	3	4	3
15 Leukaemia, aleukaemia	M	1	...	...	...	...	...	...	...	...	1	...	...
	F	...	...	...	...	...	...	...	...	...	...	...	...
16 Diabetes ...	M	5	...	...	...	...	...	...	...	...	1	2	2
	F	4	...	...	...	...	...	...	...	1	...	3	...
17 Vascular lesions of ner-	M	19	...	...	...	...	...	1	...	...	3	8	7
vous system ...	F	29	...	...	...	...	...	...	...	2	2	11	14
18 Coronary disease,	M	19	...	...	...	...	...	...	...	8	5	9	2
angina ...	F	17	...	...	...	...	...	...	...	2	3	7	5
19 Hypertension with	M	2	...	...	...	...	...	...	...	...	...	...	2
heart disease ...	F	3	...	...	...	...	...	...	...	...	...	2	1
20 Other heart disease ...	M	19	...	...	...	...	...	...	...	2	1	7	9
	F	26	...	...	...	...	...	...	...	...	5	6	15
21 Other circulatory dis-	M	4	...	...	...	...	...	...	1	1	...	...	2
ease ...	F	5	...	...	...	...	...	...	...	...	...	3	2
22 Influenza ...	M	2	...	...	...	...	...	...	...	...	1	...	1
	F	3	...	...	...	...	...	...	...	...	...	2	1
23 Pneumonia ...	M	5	...	...	...	...	...	...	...	...	...	3	2
	F	4	...	...	...	...	...	1	...	...	1	...	2
24 Bronchitis ...	M	9	1	...	...	...	...	...	...	...	...	3	5
	F	8	...	...	...	...	...	...	...	...	3	1	4
25 Other diseases of respir-	M	...	...	...	...	...	...	...	...	...	...	...	...
atory system ...	F	1	...	...	...	...	...	...	...	...	...	1	...
26 Ulcer of stomach and	M	2	...	...	...	...	...	...	...	...	...	1	1
duodenum ...	F	...	...	...	...	...	...	...	...	...	...	...	...
27 Gastritis, enteritis, and	M	...	...	...	...	...	...	...	...	...	...	...	...
diarrhoea ...	F	1	...	...	...	...	...	...	...	...	...	...	1
28 Nephritis and nephrosis	M	1	...	...	...	...	...	...	...	1	...	...	...
	F	1	...	...	...	...	...	...	...	...	...	1	...
29 Hyperplasia of prostate	M	3	...	...	...	...	...	...	...	...	...	1	2
	F	...	...	...	...	...	...	...	...	...	...	...	...
30 Pregnancy, childbirth,	M	...	...	...	...	...	...	...	...	...	...	...	...
abortion ...	F	...	...	...	...	...	...	...	...	...	...	...	...
31 Congenital malforma-	M	2	2	...	...	...	...	...	...	...	...	...	...
tions ...	F	1	1	...	...	...	...	...	...	...	...	...	...
32 Other defined and ill-	M	6	...	...	1	...	...	...	1	...	1	2	1
defined diseases ...	F	20	4	...	...	...	...	...	...	2	4	6	4
33 Motor vehicle accidents	M	1	...	...	...	...	...	...	1	...	...	...	...
	F	...	...	...	...	...	...	...	...	...	...	...	...
34 All other accidents ...	M	4	1	...	...	...	1	...	1	...	...	...	1
	F	1	...	...	...	...	1	...	...	...	...	...	...
35 Suicide	M	...	...	...	...	...	...	...	...	...	...	...	...
	F	2	...	...	...	...	...	...	2	...	...	...	...
36 Homicide and opera-	M	...	...	...	...	...	...	...	...	...	...	...	...
tions of war ...	F	...	...	...	...	...	...	...	...	...	...	...	...

Maternal Deaths and Mortality.

There were no deaths from Puerperal Sepsis or other maternal causes.

Infant Mortality.

After correction for transferable deaths there were 11 deaths (6 male, 5 female) of infants under 1 year of age, an increase of 2 compared with the previous year. Of these deaths 5 infants were under 4 weeks of age at the time of death.

The INFANT MORTALITY RATE is 40.59 per 1,000 live births as compared with 29.32 for the previous year.

The death rate amongst legitimate infants per 1,000 legitimate live births is 38.61 as compared with 30.51 for the previous year.

The death rate amongst illegitimate infants per 1,000 illegitimate live births is 83.33 as compared with none in 1949.

Comparative Statistics.

	Holmfirth Urban District	Aggregate West Riding Urban Districts	West Riding Admin. County	England and Wales (provisional figures)
BIRTH RATE Per 1,000 estimated population... (crude) do. (adjusted)	14.09 14.65	15.9 16.2	16.3 *	15.8 —
DEATH RATES All per 1,000 estimated ... population ...				
All Causes (Crude) ...	14.45	12.4	11.8	11.6
All Causes (Adjusted) ...	12.43	12.6	*	—
Infective and Parasitic Diseases (excl. T.B.) ...	0.16	0.10	0.10	*
Tuberculosis of Respiratory System ...	0.21	0.26	0.26	0.32
Other forms of Tuberculosis Respiratory Diseases (ex- cluding Tuberculosis of respiratory system) ...	0.10	0.04	0.04	0.04
Cancer ...	1.66	1.26	1.18	*
Heart and Circulatory Diseases ...	2.08	1.94	1.83	1.99
	4.94	4.66	4.39	*
INFANT MORTALITY ...	40.59	33	35	30
DIARRHOEA Deaths of infants under 2 years of age per 1,000 live births ...	Nil	*	*	*
MATERNAL MORTALITY Puerperal Sepsis ... Other Causes ... Total ...	Nil Nil Nil	* * 0.95	* * 0.98	* * 0.86

* Figures not available.

Section II.

GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA

Staff.

The Medical Officer of Health is a part-time officer of the Council but is engaged whole-time on public health work, being also Medical Officer of Health for the Urban Districts of Colne Valley, Denby Dale, Kirkburton, and Meltham, and Divisional Medical Officer of Division 20 of the West Riding which is composed of the 5 Urban Districts of which he is Medical Officer of Health.

In addition there is a Senior Sanitary Inspector, who is also Cleansing Superintendent and Salvage Officer, an Assistant Sanitary Inspector, and a Junior Clerk.

Laboratory Facilities.

All the bacteriological laboratory work required to be undertaken by the Health Department and by General Practitioners is carried out at the Wakefield Laboratory of the Public Health Laboratory Service, whilst samples of water for chemical examination are sent to the laboratories of Messrs. Richardson and Jaffe, Public Analysts, Bradford.

Ambulance Facilities.

(a) Cases of Infectious Diseases.

The ambulance of the Isolation Hospital to which the patient is admitted is used for the removal of the patient.

(b) Cases of Sickness and Accident.

An Ambulance Service is operated by the West Riding County Council, the Holmfirth Urban District being in Ambulance Area No. 17. The principal depot for the area is situated at Huddersfield.

An ambulance owned by the Urban District Council is also available for accident work.

Professional Nursing in the Home.

General: Home Nursing is undertaken by 3 Home Nurses employed by the West Riding County Council and resident at Holmfirth, Honley, and New Mill.

Midwifery: There are 2 full-time midwives employed by the West Riding County Council and resident at Holmfirth and New Mill. A relief nurse/midwife is also resident at Honley.

Further details of the nursing services provided in the area will be found in Section VII of this report.

Treatment Centres, Clinics, and Hospitals.

Infant Welfare Centres.

Held weekly on Wednesday afternoon at New Mill, on Thursday afternoon at Holmfirth, and on Friday afternoon at Honley.

Ante-Natal Clinics.

Held monthly on the 4th Friday morning in the month at Holmfirth. Expectant mothers may also be seen at Honley Infant Welfare Centre by prior arrangement.

School Clinics.

Held weekly on Thursday morning at Holmfirth. Schoolchildren may be seen, if necessary, at the Honley and New Mill Infant Welfare Centres.

All these clinics are held in the following premises:—

Holmfirth: Wesley Methodist Church, Huddersfield Road, Holmfirth.

Honley: Methodist Sunday School, Southgate, Honley.

New Mill: Council Offices, New Mill.

Chest Clinic.

Held daily at 1, Peel Street, Huddersfield, but a prior appointment is necessary.

Venereal Diseases Clinics.

Held at York Place, New North Road, Huddersfield; Clayton Hospital, Wakefield; and the General Infirmary, Dewsbury.

Hospitals.

(a) Infectious Diseases:

Under the National Health Services Act, Holmfirth is placed in the Leeds Regional Hospital Area, and cases of infectious diseases, other than smallpox, are admitted to the Mill Hill Isolation Hospital, Huddersfield.

Accommodation for cases of Smallpox is provided by the Regional Board at Cottingham Smallpox Hospital, Cottingham, East Yorkshire.

(b) General Hospitals:

Holme Valley Memorial Hospital.

Huddersfield Royal Infirmary.

St. Mary's Hospital, Deanhouse, Holmfirth.

(c) Maternity:

Arrangements are made for the admission of patients to the Holme Valley Memorial Hospital, the Princess Royal Maternity Home, Huddersfield, and various general hospitals.

Section III.

SANITARY CIRCUMSTANCES OF THE AREA

Water Supply.

Water is supplied in the District by 3 statutory water undertakings, Holmfirth Urban District Council, Huddersfield Corporation, and Batley Corporation.

No changes have been made in the sources of supply which were detailed in the report for 1948.

Of the 6,378 houses in the District, 5,584 are supplied from public mains. The water supplied is chlorinated before distribution, and except during the periods of drought in the summer months the quantity available is sufficient to meet the needs of the area.

No samples of water used for public supply were submitted for bacteriological examination during the year, but at the request of the County Council 12 samples were examined with regard to plumbosolvency, all of which were reported as satisfactory.

Eleven samples from private supplies were examined at the Public Health Laboratory, Wakefield. Of these, 3 were satisfactory, 2 were of doubtful quality, and 6 were unsatisfactory.

In general, the major part of the District is adequately supplied by these undertakings, but the supply is inadequate in the Piper Junction and Huddingley area. Negotiations with the Huddersfield Corporation and the Kirkburton and Denby Dale Urban District Councils regarding an improved supply for this area were still continuing at the end of the year.

Drainage and Sewerage.

The supervision of new drains and the installation of sanitary fittings in existing buildings is carried out by this department.

There has been no alteration in the arrangements for sewage disposal which were described in last year's report. The populous parts of the District are fairly adequately sewered, but improved means of disposal are required in some of the outlying parts, particularly at Hade Edge, Moorcock, Snowgate Head, and Syke Bottom.

In most parts of the District, in addition to the public sewer conveying sewage and surface water from premises, there is a system of rubble or sanitary pipes conveying spring water and land drainage to natural water courses. There are instances where cross connections have resulted in sewage being discharged into natural water courses. The avoidance of such cross connections is dependent largely upon supervision and tracing of proposed new communications to the public sewer and for this purpose it is essential that the Council are duly notified when an owner or occupier intends to have his drains or sewer made to communicate with the public sewer. Further, notification of intended works of new drainage, whether communicating with the public sewer or not, should be made to the Council for supervision of the work under Building Byelaws.

The present arrangement for the notification of the aforementioned works is of an informal nature and arrangements are in hand for formal notification to be submitted to the Council in accordance with the provisions of the Public Health Act and Building Byelaws.

Rivers and Streams.

Action as mentioned under " Drainage and Sewerage " is taken when new drainage works are carried out, and known cases of pollution of water courses with sewage from domestic and industrial premises are dealt with so far as local circumstances permit.

Closet Accommodation.

The survey mentioned in the previous report has now been analysed as follows:—

Type of Premises.	Water Closets	Privies	Pails or Tub Closets	Chemical	Total
Dwelling Houses	4602	951	186	1	5740
Factories	473	26	46	—	545
Shops	97	9	1	—	107
Hotels and Public Houses ...	49	3	3	—	55
Business Premises	62	1	5	—	68
Public Conveniences	16	—	—	—	16
Schools	96	—	25	—	121
Other Premises	155	36	10	—	201
Total	5550	1026	276	1	6853

No. of houses having one W.C. 3,702

No. of houses having 2 or more W.C.'s 219

Approximate No. of houses sharing W.C.'s 825

Particulars of new water closets installed and conversions carried out are as follows:—

(a) In new houses:

(i) Council Houses 64

(ii) Private enterprise, including existing buildings converted to houses 13

77

(b) In existing premises:

	Existing Houses	Other Premises
No. of privies reconstructed as water closets ...	4	—

No. of tubs or pail closets reconstructed as water closets	14	—
---	----	---

No. of water closets installed in replacement of dismantled privies, tubs, etc.	29	3
--	----	---

No. of water closets installed as additional accommodation to existing closets ...	39	19
--	----	----

	86	22
--	----	----

No. of closets, other than water closets, converted, dismantled, or demolished	36
--	----

During the year ending 31st December, 1950, applications from owners for a grant towards the expenses incurred in providing a water closet in substitution for a privy, tub, or pail closet were received in respect of 48 such closets, and a grant of £5 was made in each case.

A detailed analysis of water supply and closet accommodation is given in the tables on Page 17.

Refuse Collection and Disposal.

Scavenging is undertaken throughout the District by direct labour under the direction of the Cleansing Superintendent, Mr. I. Haigh, 5 motor vehicles being employed in the work. Domestic refuse and pail closet contents are emptied approximately every 2 weeks and privies every 5 weeks. Sanitary dustbins are now provided at 5,570 houses.

About 35% of the refuse collected is destroyed at the Honley Destructor and about 60% is dealt with by controlled tipping at 4 tips situated at Foster Place, Syke Bottom, Berry Banks, and Scotgate Road. The remaining 5% is disposed of by farmers.

Collection of waste food is arranged, 150 bins being distributed for the purpose throughout the District.

The following figures kindly supplied by Mr. Haigh relate to the year ended 31st March, 1951:—

Berry Banks Tip	3,593 tons
New Mill Tip	1,384 tons
Honley Destructor	1,863 tons
Total	6,840 tons

Salvage collected and sold during the same period:—

	Tons	Cwts.	Qrs.	£	s.	d.
Kitchen Waste	35	2	2	96	6	4
Waste Paper	167	8	1	1,253	3	9
Metals and Textiles	7	13	3	89	5	2
	210	4	2	£1,438	15	3

Shops Acts.

During the year 19 visits and inspections were made of shops.

Smoke Abatement.

A total of 14 smoke observations were carried out and in one instance black smoke was emitted for an excessive period.

Byelaws regulating the emission of smoke are not in force in the District.

Tents, Vans, and Sheds

There are no sites in the area licensed under the provisions of Section 269 of the Public Health Act, 1936, but 3 licences were granted to persons authorising them to station and use movable dwellings in the District. One caravan was in use at the end of the year.

Swimming Baths and Pools.

There are no indoor swimming baths in the District and the 2 privately owned outdoor pools to which the public normally have access have both remained closed throughout the year.

Regulated Buildings and Offensive Trades.

There are no Common Lodging Houses or Houses Let in Lodgings in the area. Two persons are registered to carry on offensive trades in the District, both being tallow melters.

Rag Flock Acts, 1911 and 1928.

There are no premises in the District where Rag Flock is manufactured, used, or sold.

Eradication of Bed Bugs.

No houses were found to be infested with bed bugs during the year.

Factories Act, 1937.

The following is an extract from a separate report submitted to the Director of Statistics of the Ministry of Labour on Form 572:—

1. Inspections for Purposes of Provisions as to Health.

Premises.	No. on Register	Insp't'ns	Written Notices	Owners Prosec'ted
(1) Factories in which Sections 1, 2, 3, 4, and 6 are to be enforced by Local Authorities.	7	2	—	—
(2) Factories not included in (1) in which Section 7 is enforced by the Local Authority.	182	26	2	—
(3) Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises).	1	—	—	—
Total	190	28	2	—

2. Cases in which defects were found.

Particulars	Found	Remed'd	Referred by H.M Inspector	Prosecutions
Want of cleanliness : Sanitary conveniences	—	—	—	—
(a) Insufficient	1	1	—	—
(b) Unsuitable or defective	5	4	4	—
Unsatisfactory means of escape in case of fire ...	1	—	—	—
Total	7	5	4	—

3. Outworkers.

There are 131 outworkers in the District, employed as menders for various textile firms.

PREVENTION OF DAMAGE BY PESTS ACT, 1949

Regular inspections under this Act were made by the full-time rodent operator who works under the control of the Surveyor.

No statutory action was taken under this Act during the year.

Schools.

There are in the District 18 schools, 12 being County Schools including one Secondary Modern School and one Grammar School, and 6 being Voluntary Schools. No schools were closed on account of infectious diseases during the year.

Sanitary Inspection of the Area.

1. Nuisance Inspections and Notices Served during 1950:—

(a) Total number of inspections for nuisances (including housing inspections under the Public Health Act) ...	836
(b) Housing nuisances in hand, end of 1949 ...	8
Housing nuisances found in 1950 ...	116
Nuisances, other than housing, found in 1950 ...	2
<hr/>	
Total nuisances needing abating ...	126
Nuisances abated during 1950 ...	91
<hr/>	
Nuisances outstanding, end of 1950 ...	35
(c) Notices served, Informal: 118; Complied with: 91	
Notices served, Statutory: Nil.	

2. Other Inspections and Visits during 1950:—

Housing inspection, under the Housing Acts ...	23
Offensive Trades ...	1
Tents, Vans, and Sheds ...	14
Factories Acts ...	28
Cleansing Section administration and refuse disposal ...	633
Rats and Mice ...	15
Shops Act ...	19
Building Byelaws (new drainage and new sanitary fittings) ...	294
Infectious Disease and Disinfection ...	78
Inspection of meat and other foods ...	270
Food Shops and food preparing premises ...	106
Bakehouses ...	31
Cowsheds and Dairies ...	24
Ice-cream premises and sampling ...	83
Milk sampling ...	78

Total number of inspections and visits (including nuisances) 2,533

3. Sanitary Improvements Effected following Action by the Sanitary Inspectors.

Nature of work, and number of premises repaired:—

Roofs repaired ...	8
Eaves spouting repaired or renewed ...	15
Rainwater pipes repaired or renewed ...	7
External walls re-faced or re-pointed ...	3
Drains repaired ...	21
Internal wall plasterwork repaired or renewed ...	6
Windows repaired or renewed ...	3
Doors repaired or renewed ...	2
Floors repaired or renewed ...	2
Chimney stacks repaired ...	2
Cooking facilities repaired or renewed ...	1
Number of:—	
Closets and compartments repaired or renewed ...	5
Ashpits demolished or dismantled ...	4
Dustbins provided by owners ...	29
Water closets provided by owners ...	23
Septic tanks repaired or renewed ...	1
Dangerous buildings demolished ...	1

Public Water Supplies and Closet Accommodation in Dwelling Houses at the 31st December, 1950

Ward	Austonley	Cartworth	Fulstone	Hepworth	Holme	Honley Central	Honley East (includes part Magdale)	Honley South	Honley West (includes part Magdale)	Netherthong	North Central	Scholes	South Central	Thurstonland	Uppertthong	Wooldale	Total
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Number of Dwelling Houses:—

In District	406	290	594	239	110	797	358	202	324	340	482	459	465	215	477	620	6,378
On Public Water Supply	344	98	505	163	106	797	335	200	273	296	451	398	405	199	432	582	5,584
Having One W.C.	166	64	322	114	84	439	272	166	228	172	328	201	252	144	338	412	(87.6%) 3,702
Having 2 or more W.C.'s	25	—	12	9	2	52	1	1	—	12	4	69	1	10	3	18	(58%) 219
Not having a W.C. or sharing Accdn.	215	226	260	116	24	306	85	35	96	156	150	189	212	61	136	190	(3%) 2,457
																	(39%)

Estimated Closet Accommodation in Dwelling Houses:—

No. of W.C.'s	257	65	385	141	99	656	298	181	233	228	375	364	299	171	354	496	4,602 (80%)
No. of Privies	101	163	137	78	7	—	10	—	29	74	29	105	77	14	83	44	951 (17%)
No. of Pails or Tubs	2	13	3	4	—	61	18	5	31	3	10	—	8	1	6	21	186 (3%)
No. of Chemical Closets	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1
% of Privies, Tubs, to Total Closets	29	73	27	37	7	8.5	8.5	3	21	25	10.4	22	22	8	20	11.5	19.8

Section IV.

HOUSING

Housing is the most pressing need of the District at the present time. During the year the work of the department in regard to housing has been chiefly in requiring owners to carry out repairs to abate nuisances.

Due to disrepair and sanitary defects many houses would, if subject to action under the Housing Acts, be declared unfit for human habitation and not capable at a reasonable expense of being made fit. The present housing shortage and the difficulty of re-housing displaced occupants makes such action difficult. As is generally realised, owners feel that rents should be increased to counter the high cost of repairs. In the case, however, of houses "ripe" for action under the Housing Acts, the reluctance of owners to carry out repairs to abate nuisances, which though of a minor character may be of a comparatively high cost, can be appreciated. In such houses, however, the living conditions of the occupiers, often of 20 to 30 years' standing, remains unsatisfactory, and minimum repairs to ensure that the houses are at least weatherproof must be required.

The housing records in the Department leave much to be desired, and a complete house-to-house survey of the whole District is urgently required. Without such a survey it is impossible to form a proper appreciation of the sanitary conditions prevailing in the District.

Overcrowding.

Full details of overcrowding prevailing in the District are not known, but alleged cases are investigated.

(a) Number of alleged conditions of overcrowding investigated	...	...	...	...	...	...	...	8
(b) Number of houses found to be overcrowded under the Housing Acts	...	...	...	...	...	...	...	3
(c) Number of houses under (b) where overcrowding was abated	...	...	...	...	...	...	...	Nil

In determining the number of persons permitted to sleep in a house under the Housing Acts, any room of a type normally used in the locality either as a living room or as a bedroom is included in the permitted number. That is such rooms as large landings, living kitchens, and living rooms are in effect looked upon as sleeping accommodation. This is a very low standard, particularly with respect to present day views on living conditions. It does, however, set a standard permitting comparison of the states of overcrowding of different dwelling houses. A more reasonable standard of overcrowding, though without statutory power, is where only bedrooms are taken into consideration in determining the number of persons permitted to sleep in the house. This can be referred to as the "bedroom standard," and under this standard of the 8 cases investigated during 1950, 4 were "overcrowded."

Provision of New Houses.

Continued progress was made with the Council's post-war housing programme, 36 houses being completed as follows:—

Holmclose, Holmbridge	...	...	...	16
Quarry Close, Brockholes	...	...	...	14
Oakes Lane, Brockholes	...	...	...	4
Moorlands, Scholes	...	...	...	2

By private enterprise 8 new houses were erected and 3 houses were made available by conversion of existing buildings.

Housing Statistics.

Number of dwelling-houses in the District	6,378
Number of back-to-back houses included in above	Not known
1. Inspection of Dwelling-houses during the year:—	
(1) (a) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	116
(b) Number of inspections made for the purpose ...	852
(2) (a) Number of dwelling-houses (included under sub-head (i) above) which were inspected and recorded under the Housing Consolidated Regulations ...	17
(b) Number of inspections made for the purpose ...	17
(3) Number of dwelling-houses needing further action:—	
(a) Number considered to be in a state so dangerous or injurious to health as to be unfit for human habitation	Nil
(b) Number (excluding those in sub-head (3) (a) above), found not to be in all respects reasonably fit for human habitation	116
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	89
3. Action under Statutory Powers during the year:—	
(a) Proceedings under Sections 9, 10, and 16 of the Housing Act, 1936:	
(1) Number of dwelling-houses in respect of which notices were served requiring repairs	Nil
(2) Number of dwelling-houses which were rendered fit after service of Formal Notices:—	
(a) By owners	Nil
(b) By Local Authority	Nil
(b) Proceedings under Public Health Acts:—	
(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied ...	Nil
(2) Number of dwelling-houses in which defects were remedied after service of Formal Notices:—	
(a) By owners	Nil
(b) By Local Authorities in default of owners ...	Nil
(c) Proceedings under Sections 11 and 13 of the Housing Act, 1936:—	
(1) Number of representations, etc., made in respect of dwelling-houses unfit for habitation	Nil
(2) Number of dwelling-houses in respect of which Demolition Orders were made	Nil
(3) Number of dwelling-houses demolished in pursuance of Demolition Orders	Nil
(d) Proceedings under Section 12 of the Housing Act, 1936:—	
(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made	Nil
(2) Number of separate tenements or underground rooms the Closing Orders in respect of which were determined, the tenement or room having been rendered fit	Nil

Section V.

INSPECTION AND SUPERVISION OF FOOD

Milk Supply.

The supervision of the production of milk and the registration of producers is now the responsibility of the Ministry of Agriculture and Fisheries. The Urban District Council is now only responsible for the registration and supervision of retailers and their premises, and for the issue of dealers' and supplementary licences to retail designated milk. Sampling is limited to milk in the course of delivery and when special enquiries are necessary.

There are no persons registered with this Authority as milk distributors, and no premises registered as dairies. The milk purveyed in the District is distributed direct from the dairy farms.

The only licence granted by the Council under the Milk (Special Designation) (Pasteurised and Sterilised Milk) and (Raw Milk) Regulations, 1949, was a supplementary licence authorising the use of the special designation "Pasteurised." The licence is in relation to milk distributed to schools.

An increased number of samples of milk were submitted for bacteriological examination during the year with the following results:—

(a) Examination by Methylene Blue Test for Cleanliness and Keeping Qualities.

Type of Milk.	Satisfactory	Unsatisfactory
Undesignated	29	7
Tuberculin Tested	7	2
Accredited	Nil	Nil

(b) Biological Examination for Tuberculosis.

Type of Milk.	Negative	Positive
Undesignated	12	1
Tuberculin Tested	7	Nil
Accredited	1	Nil

The positive sample was referred to the Divisional Inspector of the Ministry of Agriculture for investigation. On inspection of the herd an infected cow was located and this was slaughtered under the Tuberculosis Order, 1938.

Ice Cream.

At the end of 1950 there were 2 premises registered for the manufacture and sale of ice cream, and 32 registered for sale only. During the year 83 visits have been made to these premises and advice given with regard to personal hygiene, clean food production, and handling methods.

The number of samples taken for bacteriological examination during the year was 31 and of these 7 were classified as Grade 1, 11 as Grade 2, and 13 as Grade 3 or 4.

The provisional grades of ice cream are as follows:—

Provisional Grade.	Time Taken to Decolourise Methylene Blue.
1	4½ hours or more.
2	2½ to 4 hours.
3	½ to 2 hours.
4	0.

Numerous factors and experimental error of laboratory tests make it necessary for judgment to be based on a series of samples. Over a period 50% should fall into Grade 1, 80% into Grades 1 and 2, not more than 20% into Grade 3 and none into Grade 4.

Meat.

No regular slaughtering of animals has been carried out at any of the slaughterhouses in the District, all of which have remained virtually closed by reason of the Livestock (Restriction of Slaughtering) Order, 1940. All meat for sale in the District is derived from the Government controlled slaughterhouse and depot at Huddersfield, where inspection is carried out.

A considerable number of pigs were slaughtered for the producers' own consumption under the Ministry of Food licences.

The use of unsuitable premises for the slaughter of home-fed pigs has continued in spite of the fact that there are well appointed slaughterhouses available in the District.

During the year a total of 351 pig carcasses were inspected, 21 of which were found to be diseased. All the diseased carcasses were affected with tuberculosis and parts of all, totalling a weight of 5 cwts., 65 lbs., were condemned as unfit for human consumption.

There are 9 slaughterhouses in the District, all being licensed. During the year 117 inspections of these premises have been made.

The number of butchers' shops in the District is 26, whilst the number of premises registered under Section 14 of the Food and Drugs Act for the manufacture of sausages, potted meat, etc., is 23.

During the year 106 visits were made to food preparing premises.

Slaughter of Animals Act, 1933.

Particulars of licences in operation during the year are as follows:

(a) As at 31st December, 1949	...	...	...	...	46
(b) New licences issued during 1950	...	...	...	...	2
(c) Licences expired 31st December, 1949, and renewed	...	...	...	...	26
(d) Licences expired 31st December, 1949, and not renewed	...	...	...	...	3
(e) As at 31st December, 1950	...	...	...	...	45

Bread.

There are 17 bakehouses in the District, 1 of which is underground. During the year 31 inspections of these premises were made.

Food and Drugs Act, 1938.

The West Riding County Council is the Authority responsible for the Food Adulteration Section of the Act. The following particulars of

samples taken during the year have been supplied by the Chief Inspector of Weights and Measures:—

				Gen.	Adulterated
Milk samples examined	...	...	...	70	1
Drugs examined	...	...	...	—	—
Dry Goods examined	...	...	...	10	1
Proceedings instituted	...	...	...		1

Other Foods.

At retail shops the following other foods were found to be unfit for human consumption:—

Canned Milk	55½ lbs.	Cheese	20½ lbs.
„ Fish	8¼ „	Boiled Sweets	1¼ „
„ Fruit	41¼ „	Cooked Beef	63 „
„ Beans	1½ „	Poultry Fowls	244 „
„ Meat	11¾ „		
„ Ham	35¼ „	Total	503¼ „
Margarine	21 „		

Food Byelaws.

On the 23rd April, 1950, the Byelaws made under Section 15 of the Food and Drugs Act, 1938, concerning the handling, wrapping, and delivery of food, and sale of food in the open air, were brought into operation.

Section VI.

PREVALENCE AND CONTROL OF INFECTIOUS AND OTHER DISEASES

Apart from the occurrence of 2 confirmed cases of Acute Anterior Poliomyelitis and an increased incidence of Scarlet Fever and Whooping Cough, there was no unusual prevalence of infectious or other diseases in the district during 1950.

Smallpox.

No cases of Smallpox were notified in the District during the year.

Diphtheria.

During the year 3 cases of Diphtheria were notified, but in no case was the diagnosis confirmed.

Supplies of Anti-Toxin for the treatment of suspected cases and contacts are obtainable by medical practitioners through the hospital service, stocks being held at the Mill Hill Isolation Hospital, Huddersfield, and the Huddersfield Royal Infirmary. Diphtheria Prophylactic for immunisation can be obtained by medical practitioners on application to the Divisional Medical Officer.

The immunisation campaign continued during the year, the inoculations being carried out by medical practitioners and officers of the County Health Department. Some 3 children of school age and 199 children under 5 years of age received a complete course of injections, whilst 55 children who had been inoculated some years ago received "booster" doses.

Further particulars of immunisations carried out and the immunisation state of the area will be found in Section VII of this report.

Scarlet Fever.

During the year 49 cases of Scarlet Fever were notified as compared with 18 in 1949. The wards principally affected were those of Honley (16 cases) and Fulstone (8 cases). Although the disease was mild in character in most of the cases, 48 of the patients were admitted to the Mill Hill Isolation Hospital.

The distribution of the cases is shown in the following table:—

Ward	Jan.	Feb.	Mar.	Apr.	May	Jun.	July	Aug.	Sept	Oct.	Nov	Dec.	T't'l
Austonley	—	—	—	—	—	—	1	—	1	—	—	2	4
Cartworth	—	—	—	—	—	—	—	—	—	—	2	—	2
Fulstone	2	1	—	—	1	1	—	1	—	—	1	1	8
Hepworth	—	—	—	—	1	1	—	—	—	—	—	—	2
Holme	1	—	—	—	—	—	—	—	—	—	—	—	1
Honley	—	1	—	—	—	—	—	—	5	4	6	—	16
N'th Central	—	1	—	1	—	—	—	—	1	—	—	1	4
S'th Central	—	2	—	—	—	—	—	—	—	—	—	—	2
Scholes	—	—	—	—	1	—	—	—	—	—	1	—	2
Thurstonland	—	—	—	—	—	—	1	—	—	—	1	1	3
Upperthong	2	1	—	—	—	—	—	—	—	—	—	—	3
Wooldale	—	—	—	—	—	—	—	—	—	—	1	1	2
Totals :	5	6	—	1	3	2	2	1	7	4	12	6	49

Whooping Cough.

Cases of Whooping Cough notified during 1950 numbered 80 as compared with 10 in the previous year. One death was registered as due to this disease, the patient being a child aged 2 months. The distribution of the cases is shown in the following table:—

Ward	Jan.	Feb.	Mar.	Apl	May	Jun.	July	Aug.	Sept	Oct.	Nov	Dec.	T't'l
Austonley	—	—	—	—	1	—	—	—	—	—	—	—	1
Fulstone	1	—	—	—	1	—	—	—	—	—	—	—	5
Hepworth	—	—	—	—	1	—	—	—	—	—	—	—	2
Honley	6	9	—	1	—	3	2	1	2	—	—	—	24
Netherthong	—	—	—	—	—	—	—	—	—	4	3	—	7
N'th Central	—	2	—	—	2	1	—	—	—	—	—	—	5
S'th Central	—	—	—	2	—	—	—	2	—	—	—	—	4
Scholes	—	—	4	—	1	7	2	2	—	—	—	—	16
Th'stonland	2	—	—	2	1	—	—	1	—	—	—	—	6
Upperthong	—	—	—	—	—	—	—	—	—	2	3	—	5
Wooldale	—	—	1	—	—	1	—	1	—	2	—	—	5
Totals	9	11	5	9	7	12	4	7	2	8	6	—	80

Measles.

A total of 104 cases of Measles was notified during the year as compared with 248 in 1949. Of these cases 67 occurred in July. One death was registered as due to this disease, the patient being a child aged 11 months. As will be seen from the following table, the cases were scattered throughout the whole of the Urban District.

Ward	Jan.	Feb.	Mar.	Apl.	May	June	July	Aug.	Sep.	Oct.	Nov.	Dec.	Tot'l
Austonley	—	—	—	—	—	1	16	1	—	—	—	—	18
Cartworth	—	—	—	—	—	1	30	3	1	—	—	—	35
Fulstone	—	—	—	—	—	—	—	—	—	—	1	—	1
Hepworth	—	—	—	—	—	—	—	2	—	—	1	7	10
Holme	—	—	—	—	—	—	9	3	—	—	—	—	12
Honley	—	—	—	—	—	—	2	1	—	—	1	2	6
Netherthong	—	—	—	—	—	—	—	—	—	—	—	1	1
Scholes	—	—	—	—	—	—	—	—	—	—	1	3	4
N'th Central	—	—	—	—	—	—	1	—	—	—	1	1	3
S'th Central	—	—	—	—	—	—	2	—	—	—	—	3	5
Upperthong	—	—	—	—	—	1	7	1	—	—	—	—	9
Totals	—	—	—	—	—	3	67	11	1	—	5	17	104

Acute Primary and Acute Influenzal Pneumonia.

There were 9 cases of Acute Primary Pneumonia and 1 case of Acute Influenzal Pneumonia notified during the year as compared with 16 and 6 cases respectively in 1949. The distribution of the cases is shown in the following table. Deaths registered during 1950 as due to all forms of Pneumonia totalled 9, as compared with 6 in 1949.

Ward	Jan.	Feb.	Mar	Apl.	May	June	uly	Aug.	Sep.	Oct	Nov	Dec.	T'tal
Cartworth		—	—	—	—	—	1	→	—	—	1	—	2
Holme		1	—	—	—	—	—	—	—	—	—	—	1
Honley	—	—	1	—	—	—	1	—	—	—	—	—	2
Netherthong	1	—	—	—	1	—	—	—	—	—	—	—	2
Scholes	—	—	—	—	—	1	—	—	—	—	—	—	1
S'th Central	—	1	—	—	—	—	—	—	—	—	—	—	1
Upperthong	—	1	—	—	—	—	—	—	—	—	—	—	1
Totals	1	3	1	—	1	1		—	—	—	1	—	10

Enteric Fever and Dysentery.

During the year 1 case of Dysentery was notified, but after admission to hospital the diagnosis was not confirmed.

Erysipelas.

During the year 2 cases of Erysipelas were notified, both the patients being females over 65 years of age.

Acute Anterior Poliomyelitis and Acute Polioencephalitis.

During the year 3 cases of Acute Poliomyelitis were notified, 2 of which were confirmed, as compared with 4 in the previous year. The cases occurred in the Cartworth and Hepworth Wards, and both were admitted to the Mill Hill Isolation Hospital. One case, a male aged 2 years, was later transferred to the Pinderfields Hospital, Wakefield. Both cases were making satisfactory progress at the end of the year.

Ophthalmia Neonatorum.

No cases were notified during the year.

Cancer.

The number of deaths attributable to Cancer during the year totalled 40 (17 male, 23 female), as compared with 46 in 1949. The Cancer death rate for the year is 2.08 per 1,000 of the estimated population, compared with a rate of 2.41 for the previous year. The corresponding rates for the Administrative County and the Urban Districts are 1.83 and 1.94 respectively.

Tuberculosis.

A total of 14 new cases was added to the Notification Register during the year, as compared with 16 in the previous year.

There were 4 deaths from Pulmonary Tuberculosis (3 male, 1 female) and 2 deaths (1 male, 1 female) from Non-Pulmonary Tuberculosis, making a total of 6 deaths from all forms as compared with 2 in the previous year.

The following tables give details of the number of cases on the Notification Register, together with particulars of new cases and deaths for the year 1950.

	Pulmonary		Non-Pulmonary	
	Male	Female	Male	Female
(a) Number of cases on Register at commencement of year	20	18	7	16
(b) Number of cases notified first time during the year	5	2	5	2
(c) Number of cases restored to Register	1	—	—	—
(d) Number of cases added to Register otherwise than by notification	1	—	1	—
(e) Number of cases removed from the Register	6	5	3	4
(f) Number of cases remaining on the Register	21	15	10	14

Age (years)	New Cases				Deaths			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	Male	Female	Male	Female	Male	Female	Male	Female
0—1	1	—	—	—	—	—	—	—
1—5	—	—	—	—	—	—	—	—
5—10	—	—	1	—	—	—	—	—
10—15	1	—	1	—	—	—	—	—
15—20	—	1	—	1	—	—	—	1
20—25	—	1	1	1	1	—	—	—
25—35	2	—	1	—	—	—	—	—
35—45	—	—	—	—	—	—	—	—
45—55	1	—	—	—	—	—	—	—
55—65	—	—	—	—	1	1	1	—
65 and upwards	—	—	1	—	1	—	—	—
Totals	5	2	5	2	3	1	1	1

Holmfirth 1950

Table showing Cases of Infectious Diseases notified during the Year

Disease	Total Number of cases Notified	Number of cases in which Diagno- sis con- firmed	Number of cases Admitted Mill Hill Isolation Hospital	Deaths	Age distribution of confirmed cases.																						
					Under 1		1-2		2-3		3-4		4-5		5-10		10-15		15-20		20-35		35-45		45-65		Over 65
					M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
Measles ...	104	104	1	1	2	2	9	7	4	3	5	9	8	6	30	17	—	1	—	—	—	—	—	—	—	—	—
Whooping Cough ...	80	80	2	1	4	2	7	—	8	9	3	7	7	8	14	9	—	—	—	—	—	1	—	—	—	—	1
Acute Prim- ary Pneumonia	9	9	—	9a	1	—	—	—	1	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	1
Acute Influen- za Pneumonia	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Scarlet Fever	49	49	48	—	—	—	—	—	2	1	2	—	2	14	14	5	5	—	4	—	—	—	—	—	—	—	—
Erysipelas	2	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2
Diphtheria	3	—	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Dysentery...	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Acute Anterior Poliomyelitis	3	2	3	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

(a) Deaths from all forms of Pneumonia.

Section VII.

**SERVICES PROVIDED UNDER PART III OF THE NATIONAL
HEALTH SERVICE ACT**

PUBLIC HEALTH DIVISION 20

The County Districts forming Division No. 20 are as follows:—

Colne Valley U.D.	Kirkburton U.D.
Denby Dale U.D.	Meltham U.D.
Holmfirth U.D.	

Area of the Division (in acres)	64,265
Estimated Population (mid-1950)	74,225

Divisional Staff:

Divisional Medical Officer:

E. WARD, M.R.C.S., L.R.C.P., D.P.H.

Deputy Divisional Medical Officer:

W. G. SMEATON, M.B., Ch.B., D.P.H.
(Resigned 24th June, 1950)

H. C. MILLIGAN, M.B., Ch.B., D.P.H.
(Appointed 22nd August, 1950)

Assistant County Medical Officer:

(Part Time)

J. R. COCKROFT, M.B., Ch.B.
(Resigned 24th March, 1950)

Clinic Medical Officers:

(Part Time)

G. ASPINWALL, M.B., Ch.B.
C. DICKSON, M.B., Ch.B.
L. E. LUCAS, M.B., Ch.B.
H. MERCER, M.B., Ch.B.
H. C. PICKERING, M.R.C.S., L.R.C.P.
J. A. STEPHENS, M.R.C.S., L.R.C.P.
J. E. TAYLOR, M.B., Ch.B.
M. V. WILBY, M.R.C.S., L.R.C.P.

Superintendent Health Visitor:

Miss A. CORLESS
(Appointed 1st May, 1950)

Health Visitors and School Nurses:

Miss D. BOWDEN, Resigned 28-4-50.
Miss D. BROOKE.

Miss M. CAREY, Resigned 16-12-50.
Mrs. N. CRANSTON.

Miss E. EASTWOOD.

Miss M. FLINTOFF.

Miss R. M. GINDERS.

Miss M. E. PORRITT.

Mrs. A. ROYSTON.

Miss D. WOOD.

Mrs. E. M. WOODEND, Appointed 1-5-50.

Senior Clerk:

G. A. BEATSON.

COMPARATIVE STATISTICS.

	Colne Valley U.D.	Denby Dale U.D.	Holmfirth U.D.	Kirkburton U.D.	Meltham U.D.	Division No. 20	Aggregate West Riding U.D.'s.	West Riding Admin. County	Eng- land & Wales prov. figures
Population	22,180	9,745	19,240	17,930	5,130	74,225	1,169,570	1,591,930	*
Live Births	343	112	271	210	72	1,008	48,549	25,898	*
Still Births	9	1	5	5	3	23	460	629	*
Deaths	340	133	278	231	88	1,070	44,555	48,791	*
Deaths under 1 year of age	9	3	11	7	—	30	616	904	*
Birth Rate Per 1,000 estimated population (Crude)	15.46	11.49	14.09	11.71	14.04	13.58	15.9	16.3	15.8
„ (Adjusted)	15.92	12.29	14.65	15.11	14.18	*	16.2	*	*
Death Rates All per 1,000 est- imated population All Causes (Crude)	15.33	13.65	14.45	12.88	17.15	14.42	12.4	11.8	11.6
„ „ (Adjusted)	13.95	12.29	12.43	11.72	15.26	*	12.6	*	*
Infective and Para- sitic diseases ex- cluding T.B. but including Syphilis and other V.D. ...	0.14	—	0.16	0.11	—	0.11	0.10	0.10	*
Tuberculosis of Respiratory system	0.36	0.10	0.21	0.22	0.39	0.26	0.26	0.26	0.32
Other forms of Tuberculosis	—	—	0.10	0.06	—	0.04	0.04	0.04	0.04
Respiratory Diseases (excluding tuber- culosis of respir- atory system)	1.22	0.21	1.66	0.84	2.14	1.17	1.26	1.18	*
Cancer	2.52	2.36	2.08	2.18	1.95	2.26	1.94	1.83	1.99
Heart and Circul- atory Diseases	5.95	6.57	4.94	4.80	6.63	5.54	4.66	4.39	*
Vascular Lesions of the Nervous Sys- tem	2.43	2.36	2.49	1.84	3.31	2.36	1.70	1.59	*
Infant Mortality	26.24	26.79	40.59	33.33	—	29.76	33	35	30
Maternal Mortality	—	—	—	—	—	—	0.95	0.98	0.86

* Figures not available.

VITAL STATISTICS

Births.

The number of live births registered in the Divisional area during 1950 was 1,008 (539 males, 469 females), a decrease of 85 compared with the previous year.

The CRUDE BIRTH RATE was 13.58 per 1,000 of the estimated population as compared with 14.72 for 1949.

The illegitimate live births numbered 41 or 4.07% of the total live births, an increase of 1 compared with the previous year.

Deaths.

The deaths assigned to the Divisional area after correction for transfers were 1,070 (517 males, 553 females), an increase of 124 on the total for 1949.

The CRUDE DEATH RATE from all causes was 14.42 per 1,000 of the estimated population as compared with 12.74 for the previous year.

The following were the principal causes of death in order of frequency:—

(i)	Diseases of the Heart and Circulatory System	...	412
(ii)	Intra-Cranial Vascular Lesions	...	174
(iii)	Malignant Neoplasms	...	161
(iv)	Respiratory Diseases (excluding Pulmonary Tuberculosis)	...	87

These 4 causes accounted for 77.94% of the total deaths.

Infant Mortality.

In 1950 the deaths of infants under one year of age numbered 30, a decrease of 1 compared with the previous year. Of these deaths 18 infants were under 4 weeks of age at the time of death.

The INFANT MORTALITY RATE was 29.76 per 1,000 live births as compared with 28.36 for 1949.

The death rate amongst legitimate infants per 1,000 legitimate live births was 28.96 as compared with 29.44 for 1949.

The death rate amongst illegitimate infants per 1,000 illegitimate live births was 48.78 as compared with none in 1949.

The following table gives the causes of death of all infants at various ages under one year:—

DEATHS OF INFANTS UNDER ONE YEAR OF AGE.

Causes of Death	Under 1 day	1-2 days	2-5 days	5-7 days	Total under 1 week	1-2 weeks	2-4 weeks	Total under 1 month	1-3 months	3-6 months	6-9 months	9-12 months	Total under 1 year
1. Whooping Cough	—	—	—	—	—	—	—	—	1	1	—	—	2
2. Measles	—	—	—	—	—	—	—	—	—	—	—	1	1
3. Bronchitis	—	—	—	—	—	—	—	—	—	1	—	—	1
4. Pneumonia	—	1	—	—	1	—	—	1	1	1	—	—	3
5. Congenital Malformations	—	—	1	—	1	—	3	4	1	—	—	—	5
6. Premature Birth	2	1	2	—	5	—	—	5	1	—	—	—	6
7. Injury at Birth	1	—	—	—	1	—	—	1	—	—	—	—	1
8. Asphyxia during or after birth	4	1	1	—	6	—	—	6	—	—	—	—	6
9. Accidental Suffocation	—	—	—	1	1	—	—	1	1	1	—	1	4
10. Intussusception	—	—	—	—	—	—	—	—	1	—	—	—	1
TOTAL	7	3	4	1	15	—	3	18	6	4	—	2	30

EPIDEMIOLOGY

Food Poisoning.

No cases of food poisoning were notified during the year.

At a County School some 15 children, 2 teachers, and a daily help were reported ill after consuming a school meal. The onset of illness varied from 1 to 8 hours after consumption of the meal and illness, which was mild, lasted from 12 to 24 hours. Principal symptoms were headache — mainly occipital, nausea, vomiting, and, in some cases, abdominal pain and diarrhoea. In no case did the illness appear serious enough to warrant the calling in of a doctor.

Bacteriological examination failed to reveal the presence of any pathogens or toxin producing organisms in the sausages, peas, potatoes, or sago. The milk was also reported satisfactory. No definite cause was established but it would seem probable that the outbreak was due to contamination of the meal (sausages in particular) with toxin producing organisms.

Diphtheria.

Arrangements for immunisation have continued as in previous years, the inoculations being given at Infant Welfare Centres or by private medical practitioners. The response has been reasonably satisfactory and no special mobile campaigns have been held.

Number of Children Immunised in 1950.

Urban District	Under 5 years	5—14 years	Total	" Booster " Doses
Colne Valley	233	11	244	83
Denby Dale	137	3	140	8
Holmfirth	199	3	202	55
Kirkburton	110	2	112	17
Meltham	63	5	68	53
Total ...	742	24	766	216

Records of the immunisation state of children in the Divisional area as at the 31st December, 1950, are shown below.

Age at 31-12-50 i.e., Born in Year	Under 1 1950	1 1949	2 1948	3 1947	4 1946	5 to 9 1941-45	10 to 14 1936-40	Total Under 15
Number immunised	24	540	751	969	687	2,377	1,976	7,324
Estimated mid-year child population 1950, as supplied by Registrar-General	Children under 5 5,687					Children 5-14 8,757		14,444
Percentage of child population immunised	52.24					49.71		50.71

Smallpox.

The number of records of vaccinations and re-vaccinations received during the year was 248 and 82 as compared with 98 and 26 respectively in the previous year. These increases probably were due to the occurrence of 2 suspected, but later unconfirmed, cases of Smallpox in neigh-

bouring areas, and also to the fact that a number of records relating to the previous year were received late and are included in this year's figures.

Details of the various age groups vaccinated and re-vaccinated are given below.

Number Vaccinated	Age at Date of Vaccinations:				Total
	Under 1	1 to 4	5 to 14	15 or over	
Colne Valley ...	30	12	19	19	80
Denby Dale ...	13	4	3	8	28
Holmfirth ...	48	3	6	4	61
Kirkburton ...	39	7	7	2	55
Meltham ...	15	2	3	4	24
Number Re-Vaccinated					
Colne Valley ...	—	2	4	30	36
Denby Dale ...	—	—	1	7	8
Holmfirth ...	1	—	3	11	15
Kirkburton ...	—	1	3	17	21
Meltham ...	—	—	—	2	2

No cases of Generalised Vaccinia or Post-Vaccinal Encephalomyelitis were reported, and no deaths from any complications of vaccination occurred during the year.

Whooping Cough.

No scheme for immunisation against Whooping Cough is in operation in the Division but the procedure is apparently carried out fairly widely by general practitioners who, on the whole, seem to consider that it is worth while. Very few requests are received from parents but general practitioners have from time to time asked for supplies of combined vaccine.

MIDWIFERY AND MATERNITY SERVICES

Domiciliary Midwifery.

Further steps were taken during the year to separate the Midwifery and Home Nursing Services, 5 nurse/midwives ceasing to undertake midwifery and becoming full-time home nurses, whilst another is now a relief nurse/midwife. A third relief nurse/midwife was also appointed during the year. The 3 relief nurses now available have been of great value owing to the high rate of sickness amongst nursing staff. Without their help it is difficult to see how the Midwifery and Home Nursing Services could have been carried on at times of stress.

The position at the end of the year regarding Midwifery Services was as follows:—

Urban District	Authorised Establishment	Staff at 31st December, 1950	
		Whole-time Midwives	Nurse/Midwives
Colne Valley	3	2	—
Denby Dale	2	2	—
Holmfirth	2	2	—
Kirkburton	2	1	2
Meltham	1	1	—
Relief	2	—	3
Division 20	12	8	5

Two independent midwives signified their intention to practice in the area, and attended a total of 3 cases.

Of the 1,045 births notified and attributed to the Division, 342 occurred at home. The following table shows the number of cases attended:—

Cases attended by	As Midwives	As Maternity Nurses
(a) Whole-time County Midwives (8)	228	20
(b) Nurse/Midwives (5)	71	13
(c) Independent Midwives (2)	1	2
Total ...	300	44

Of the cases attended 6 were patients who normally resided outside the Division (outward transfers). There were 4 cases of women normally resident in the Division having domiciliary confinements at addresses outside the Division (inward transfers).

In addition, 12 miscarriages were also attended by domiciliary midwives.

The services of the domiciliary midwives are offered to all patients who are confined in hospitals or maternity homes but are discharged home before the 14th day of the puerperium. During the year 185 such patients received nursing care, 439 individual visits being paid to them.

Notifications:

The following notifications were received from midwives practising in the Division:

Death of Child	3
Stillbirths	5
Artificial Feeding	47
Laying Out the Dead	4

Medical Assistance:

Medical aid forms sent in by midwives during 1950 numbered 216 and were comprised as follows:—

PREGNANCY				LYING-IN			
Ante-Partum Hæmorrhage ...	3			Abdominal Pain			3
Threatened Abortion	1			Varicose Veins			1
Albuminuria	1			Cracked Nipples			2
	5			Pyrexia			1
							7
LABOUR				THE CHILD			
Prolonged Labour	27			Death of Infant			1
Ruptured Perineum	104			Harelip and Cleft Palate ...			3
Retained Placenta	8			Cyanosis			1
Post-Partum Hæmorrhage ...	5			Talipes			1
Malpresentation	4			Malformation			2
Multiple Pregnancy	2			Dangerous Feebleness			2
Uterine Inertia	1			Prolapse of Cord			1
Premature Labour	8			Convulsions			1
Breech Presentation	2			Tongue Tie			1
Rigid Cervix	1			Discharging Eyes			4
Fœtal Distress	2			Asphyxia			4
Raised Blood Pressure	1			Icterus			2
Episiotomy	4			Baby Unwell			1
Vaginal Tears	8						
Foot Presentation	1						
Forceps Delivery	1						
Precipitate Labour	1						
	180						24

Gas and Air Analgesia.

At the end of 1950, of the 13 midwives in domiciliary practice 12 held the certificate in Gas and Air Analgesia administration and were equipped with the necessary apparatus. The other midwife is a whole-time relief nurse/midwife undertaking few midwifery duties and who is eventually to undertake relief home nursing duties only.

Analgesics were administered by domiciliary midwives to 225 cases as compared with 156 cases in 1949.

Ante-Natal Clinics.

There are 7 Ante-Natal Clinics in the Division, all of which are held monthly except the Golcar Clinic, which is held fortnightly. The clinic at Marsden was discontinued on the 12th June, 1950.

During the year, 176 patients made 588 attendances at the various clinics, details of which are given in the following table. Compared with the previous year, when 278 patients made 971 attendances, it will be seen that there has been a further falling-off in attendances.

Clinic	No. of sessions	No. of patients	No. of attendances	Average attendance per session
Denby Dale	12	10	30	2.50
Holmfirth	12	21	50	4.17
Lepton	12	36	116	9.67
Meltham	12	36	133	11.08
Skelmanthorpe	12	27	89	7.42
Marsden	6	5	14	2.33
Golcar	23	24	115	5.00
Slaithwaite	12	17	41	3.42
Total	101	176	588	5.82

In addition to the regular Ante-Natal Clinics occasional patients are seen at the Child Welfare Clinics.

The considerable decrease in individual patients and attendances made is to be regretted because although more patients are receiving ante-natal care from their own doctors or hospital ante-natal clinics, the local authority clinics can still give much useful service, particularly from the educational point of view.

Attempts have been made to increase the number of patients attending Ante-Natal Clinics by suggesting to midwives the desirability of their patients attending the Ante-Natal Clinics in addition to receiving ante-natal supervision from the booked midwife. In 4 cases the midwives have been placed in charge of Ante-Natal Clinics, and this has worked well.

No special Post-Natal Clinics were held but patients are seen for post-natal examination at the Ante-Natal Clinics. The attendances, however, leave much to be desired. More could be done by way of special visits by health visitors but staffing difficulties prevent this.

" Flying Squad " Arrangements.

A " Flying Squad," based at the Huddersfield Royal Infirmary, is available in the area, details of which have been circulated to general practitioners by the Secretary of the Hospital Management Committee. The " Squad " was called out on 2 occasions during the year, in each case by midwives on behalf of general practitioners attending cases of severe post-partum hæmorrhage. Both patients made an excellent recovery.

Ante-Natal Hostel.

During the year only 2 cases were admitted from this Division to the Brighouse Ante-Natal Hostel for expectant mothers.

The difficulties in arranging for the care of their families is a deterrent to vacancies being accepted by patients who would undoubtedly benefit from a stay in the hostel.

Institutional Midwifery.

No serious difficulty has been experienced regarding maternity accommodation, the majority of expectant mothers being able to secure admission to the institution of their own choice.

Of the 1,045 births attributed to the Division only 342, or 32.7% took place at home, as compared with 367, or 32.9%, for the previous year.

Owing to shortage of staff, however, patients are from time to time discharged before the 10th day, as will be seen from the following table:

Day of Discharge	No. of Patients
4	4
5	6
6	12
7	35
8	79
9	33
	<hr/>
	169

The Divisional Medical Officer is informed by the hospital authorities when these early discharges are to take place, and arrangements are made for the appropriate domiciliary midwife to attend the patient at home until the 14th day of the puerperium.

Details of the places of confinement of patients from the various districts are shown in the following table.

ADMISSIONS TO MATERNITY HOSPITALS

Place of Confinement	Colne Valley	Denby Dale	Holmfirth	Kirkburton	Meltham	Total
Princess Royal Maternity Home	150	36	3	84	24	297
Holme Valley Memorial Hospital	—	—	175	—	—	175
St. Luke's Hospital, Huddersfield	70	4	5	32	18	129
Huddersfield Royal Infirmary	21	4	9	18	1	53
Other Maternity Hospitals	1	6	1	2	—	10
Other General Hospitals	3	1	1	2	—	7
Private Nursing Homes	16	3	3	5	5	32
Total Institutional	261	54	197	143	48	703
Domiciliary	91	63	84	74	30	342
Total Confinements	352	117	281	217	78	1,045

CHILD WELFARE

Infant Welfare Clinics.

Weekly clinic sessions are held at Golcar, Holmfirth, Honley, Kirkburton, Lepton, Linthwaite, Marsden, Meltham, New Mill, and Slaithwaite, whilst clinics are conducted twice monthly at Denby Dale and Skelmanthorpe.

During the year 2,060 children were seen and a total of 16,712 attendances were made, details of which are shown in the following table, as compared with 2,532 children and a total of 18,292 visits in the previous year.

Clinic	No. of sessions	Children seen			Attendances			Average attendance per session	
		Under 1	1-5	Total	Under 1	1-5	Total	Under 1	1-5
Golcar	51	39	115	154	662	538	1,200	12.98	10.55
Holmfirth	52	59	229	288	942	844	1,786	18.12	16.23
Honley	50	46	132	178	565	622	1,187	11.30	12.44
Kirkburton	49	33	88	121	529	260	789	10.79	5.31
Lepton	49	47	67	114	599	454	1,053	12.22	9.27
Linthwaite	52	49	92	141	922	566	1,488	17.73	10.88
Marsden	51	57	230	287	897	1,479	2,376	17.59	29.00
Meltham	47	50	172	222	857	943	1,800	18.23	20.06
New Mill	52	32	105	137	760	658	1,418	14.62	12.65
Slaithwaite	52	50	154	204	936	1,185	2,121	18.00	22.79
Denby Dale	26	42	90	132	493	362	855	18.96	13.92
Skelmanthorpe	25	28	54	82	428	211	639	17.12	8.44
Total	556	532	1,528	2,060	8,590	8,122	16,712	15.45	14.61

The monthly sessions of the Weighing Centre at Emley have continued, 28 individual children having made 149 attendances.

Premature Babies.

During the year 50 babies weighing $5\frac{1}{2}$ lb. or less were born in hospitals or nursing homes to mothers normally resident in the Division, and 17 were born at home, as compared with 47 and 11 respectively for the previous year. Of those born at home 2 were transferred to hospital, one of which died during the first 24 hours, and 2 died at home, one during the first 24 hours and one on the second day. The remaining 13 survived at the end of one month. Particulars of survival are shown in the following table:

THE FATE OF PREMATURE BABIES BORN IN THE DIVISIONAL AREA

Weight Group lbs.	Number of Premature Births						Number Dying (days of survival).														Over 14 up to 28 days	Number Surviving Over 28 Days					Percent- age Survival in 1949	Percent- age Survival in 1950
	Born Alive					Born Dead	First Week							Second Week								A	B1	B2	C	T		
	A	B1	B2	C	T		1	2	3	4	5	6	7	8	9	10	11	12	13	14								
5-5½	7	2	11	14	34	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	7	2	10	14	33	96.2	97.1
4½-5	1	-	5	4	10	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	5	4	10	100.0	100.0
4-4½	4	-	1	5	10	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4	-	1	5	10	100.0	100.0
3½-4	1	-	1	-	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	2	100.0	71.4
3-3½	3	-	-	2	5	-	1	1	1	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1	2	40.0	50.0
2½-3	-	-	1	2	3	1	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	33.3	33.3
2-2½	1	-	-	-	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	00.0	100.0
1½-2	-	-	-	2	2	-	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	00.0	00.0
	17	2	19	29	67	3	6	1	2	-	-	-	-	-	-	-	-	-	-	-	-	14	2	18	24	58	86.6	87.9

Total unadjusted live births 1,045
 Number of live premature births 67
 Percentage of total live births 6.4
 Number born dead 3

A: Born at home and attended by a midwife.
 B1: Born in a Private Nursing Home.
 B2: Born in a Maternity Home.
 C: Born in a General Hospital.
 T: Total.

At the end of the year there were 2 midwives who had special training in the care of premature babies, having attended a course at the Sorrento Hospital, Birmingham.

One premature baby outfit is available in the Division and is kept at the Divisional Health Office. Arrangements are made for the outfit to be conveyed by ambulance to any household where its use is thought to be advisable by the midwife. During the year the outfit was called into use on 4 occasions.

Day Nurseries.

There are no day nurseries in the Division.

Nurseries and Child Minders' Regulations Act, 1948.

During the year a private nursery controlled by a textile firm was registered under the Act. The nursery provides for 30 children.

SCHOOL HEALTH SERVICE

Introduction.

Although it has not been possible to reach the target of 2 visits to each school for the purpose of routine medical inspections, during the year 132 inspections have been carried out at the 69 schools or separate departments in the Division. At these inspections 2,434 routine periodic, 3,108 special, and 1,042 follow-up examinations were carried out. The number of routine periodic is 2,050 less than in the previous year, whilst there is an increase of 1,614 in the special and follow-up examinations. These large differences in number are due to the fact that all the overdue periodic examinations have now been dealt with, thus reducing the numbers for routine examinations to the children of the specific age groups, namely, the entrants at 5 years old, the intermediates at 10 years +, and the leavers at 14 years +. The increase in the special and follow-up examinations is the natural consequence of the more frequent visits to schools and improved follow-up arrangements.

The general standard of health of the children has been well maintained and the defects found have been mainly respecting vision, enlarged tonsils, and minor degrees of flat foot.

The ascertainment of handicapped pupils in need of special educational treatment has continued, 31 pupils being added to the register during the year. In spite of these additions there are undoubtedly many more pupils who should be classified as handicapped and receive special educational treatment, but owing to the lack of facilities for such treatment there is a tendency on the part of teachers, school medical officers, and parents, to think that formal ascertainment serves no useful purpose as nothing can be done for the children at the present time. Such a view is a mistaken one, as it is only when the actual need for special treatment is known that steps can be taken by the Education Authority to provide the facilities required at a future date. There is still great difficulty in placing handicapped pupils in suitable schools, and it is to be regretted that unavoidable delays prevented the opening of the County Council's 3 Special Schools for Educationally Sub-Normal Pupils in the spring as was anticipated. A second Open-Air School is shortly to be opened at Netherside Hall, Grassington, and this, with the Ingleborough Hall School, should considerably ease the position so far as delicate children are concerned.

It is pleasing to report that the delay in obtaining spectacles no longer exists, and most prescriptions can now be dispensed within a week.

The position of the School Dental Service, however, shows no improvement and is now virtually non-existent in this Division. No routine dental inspections are carried out in schools and no treatment is provided in the Division. A mere handful of children have received treatment at the Dental Clinics in Brighouse and Wakefield.

Medical Inspections.

During the year, medical inspections of schoolchildren were carried out at 132 separate inspections at 69 schools and departments in this Division. The age groups of children examined were the same as in the

previous year, being those prescribed by Regulation 49(2) of the Handicapped Pupils and School Health Service Regulations, 1945. All children are examined as soon as possible after their entry into school, usually at 5 years of age; in the year prior to their transfer to a secondary school, i.e. at 10 years +; and during their last year at school, i.e. at 14 years +.

Pupils continuing attendance at school beyond the age of 15 years are given additional routine medical examinations at 16 and 18 years. Children at routine inspections or special examinations who were found to have defects which required observation or treatment were re-examined each time a school medical inspection took place. At these inspections a total of 2,434 periodic, 3,108 special, and 1,042 re-examinations were carried out. This compares with 4,484, 1,433, and 1,103 respectively for the year 1949. The reduction in the number of routine periodic inspections is due to the fact that the arrears of work which had accumulated in previous years have now been liquidated and only the regular age groups require examination.

The details are given in the following table:—

Periodic Medical Inspections.

Number of inspections in the prescribed groups:

Entrants	...	...	...	...	1,045
Second age group	...	...	...	...	792
Third age group	...	...	...	...	363
Total	...	...	...	...	2,200
Number of other periodic inspections	...	...	...	...	234
Grand Total	...	...	...	...	2,434

Defects Found.

Of the pupils examined as "routines," some 279 individual pupils were found to require treatment for one or more defects. The following table gives details of such defects.

Group	Defective Vision (excluding Squint).	For any of the other conditions recorded in table of defects	Total Individual Pupils
Entrants	6	132	124
Second Age Group	68	39	97
Third Age Group	31	7	37
Total (prescribed groups)	105	178	258
Other periodic inspections	17	5	21
GRAND TOTAL	122	183	279

General Condition.

All pupils at routine medical inspections are classified according to their general condition. In 31.7% classification was Good, in 65.1% Fair, and in 3.2 % Poor, as compared with 30%, 67.5%, and 2.5% respectively in 1949. Details are as follows:—

Age Group	Number of Pupils Inspected	(A) Good		(B) Fair		(C) Poor	
		No.	% of Col. 2	No.	% of Col. 2	No.	% of Col. 2
Entrants	1045	389	37.2	634	60.7	22	2.1
Second Age Group	792	204	25.8	550	69.4	38	4.8
Third Age Group	363	127	35.0	226	62.3	10	2.7
Other Periodic Inspections	234	51	21.8	174	74.4	9	3.8
TOTAL	2434	771	31.7	1584	65.1	79	3.2

Special Examinations.

The first time in each year that a child is examined, other than at a routine periodic inspection, is regarded as a "Special Examination." Thus all children with defects which were noted in a previous year and who are seen again are classified as "Specials" at the first examination in each year, and as "Follow-ups" at each subsequent examination in the same year. So far as is practicable all children with known defects are examined at least twice in each year.

Also included as "Specials" are children aged 8 years + who are specially examined for visual acuity as this would normally not be done until the routine periodic examination at 10 years +. During the year, 1,199 of these children were tested for visual acuity, of which 79 were found to require treatment and 197 to be kept under observation.

The following table gives details of all defects noted at both periodic and special examinations. All defects noted at medical inspections as requiring treatment are included in this table, whether or not this treatment was begun before the date of the inspection.

Return of Defects Found by Medical Inspection in the Year Ended 31st December, 1950.

Defect or Disease.	Number of Defects.			
	Periodic Inspections		Special Inspections.	
	Requiring Treatment	Requiring Observation but not treatment	Requiring Treatment	Requiring Observation but not treatment
Skin	15	11	2	6
Eyes: (a) Vision	122	160	311	641
(b) Squint	9	13	3	10
(c) Other	5	14	3	13
Ears: (a) Hearing	1	3	2	12
(b) Otitis Media	—	15	3	4
(c) Other	3	11	9	15
Nose or Throat	75	196	145	146
Speech	4	9	17	17
Cervical Glands	1	1	—	—
Heart and Circulation	3	20	2	16
Lungs	—	61	6	83
Developmental (a) Hernia	9	5	1	4
(b) Other	11	14	6	4
Orthopaedic (a) Posture	3	26	2	13
(b) Flat Foot	7	46	7	127
(c) Other	25	31	18	23
Nervous System (a) Epilepsy	—	3	3	6
(b) Other	2	65	1	23
Psychological (a) Development	13	3	57	11
(b) Stability	1	2	6	—
Other	5	14	17	35
TOTAL	314	723	621	1209

Other Examinations.

In addition to routine, special, and follow-up examinations of children at school medical inspections, a total of 183 children were examined at home or at school for various reasons. These include non-attendance at school, fitness to attend school camps, participation in part-time employment or entertainment under the Children and Young Persons Act, 1937, and also those examined with a view to providing special educational treatment.

Arrangements for Medical Treatment.

School Clinics.

There are no special school clinics set up in this Division, but minor ailments receive attention and "booster" doses of diphtheria prophylactic are given at 12 Infant Welfare Clinics in the area. During the year a total of 624 attendances were made by schoolchildren at such clinics.

Special Clinics.

During the year there have been several changes in the arrangements for consultant clinics and in the staffing of them.

Ophthalmic Clinics.

During the year the responsibility for examination and treatment of schoolchildren was taken over by the Regional Hospital Eye Service and Dr. J. V. Kirkwood, for many years School Oculist to the West Riding County Council, was transferred to the staff of the Leeds Regional Hospital Board. By agreement with the Regional Hospital Board, Ophthalmic Clinics conducted by Dr. Kirkwood are arranged by the Divisional Medical Officer as agent of the Local Hospital Management Committee, in hired premises throughout the Division, so that as far as the children are concerned there has been virtually no alteration in the services provided. Thus, children with defective vision may obtain treatment through the National Health Service, either by consulting a medical oculist, an ophthalmic optician, or by attending one of the special clinics mentioned above.

During the year 54 special clinic sessions were arranged and these were attended by 410 children. Spectacles were prescribed for 237 children, 60 were found not to require any change, and 99 did not require spectacles. The number of children who attended for re-checking of glasses newly obtained was 118.

At the beginning of the year there was considerable time lag between the prescription and the receipt of spectacles. Accordingly a system of re-checking the glasses when obtained was instituted. During the year, however, a substantial improvement in the time interval became apparent, and whereas at the beginning of the year this was often 6 months or more, by the end of 1950 the period of waiting had been reduced to something like 2 months on the average.

In September, 1950, a special clinic for schoolchildren was established at the Huddersfield Royal Infirmary under Mr. F. Gamm, M.C., M.B., Ch.B., the Consultant Ophthalmologist for pathological conditions of the eyes. No cases were referred from this area to this clinic in 1950.

Ear, Nose, and Throat Clinics.

In January, 1950, Mr. W. O. Lodge, M.D., F.R.C.S., of Halifax, took up duty as Consultant Aural Surgeon to the Huddersfield Hospitals, and in consequence became responsible for the special Ear, Nose, and Throat Clinics held periodically at the Huddersfield Royal Infirmary for West Riding schoolchildren. During the year 7 sessions were held and 137 individual children were seen, 113 being referred for operative treatment.

Orthopædic Clinics.

In consequence of staffing alterations at the Huddersfield Royal Infirmary arrangements were made with the Leeds Regional Hospital Board for Mr. W. Barclay, M.C., F.R.C.S., Consultant Orthopædic Surgeon, to hold a special monthly session in the Out-Patients' Department at the Huddersfield Royal Infirmary for West Riding children. At the 12 sessions held during the year 109 individual patients were seen who made a total of 182 attendances.

In addition to those cases seen at the Consultant's Clinic treatment and supervision of minor orthopædic defects is carried out by the Orthopædic Nurse working under the guidance of the Consultant at 2 treatment centres in the Division, one at Golcar and the other at Holmfirth. The total number of patients treated was 47; the total number of attendances 214.

Treatment in their own homes was also given to 6 children by the Orthopædic Nurse, who made a total of 160 domiciliary visits.

Speech Therapy Clinic.

In September a Speech Therapist, Miss V. Shiels, commenced duty in Divisions 18, 19, 20, and 21. It was intended that 2 weekly sessions should be held at the Golcar Clinic, but after 2 months' work when 14 sessions were held it was decided, on account of travelling difficulties, to discontinue sessions at Golcar, and cases under treatment were transferred to the Brighouse Clinic. At the sessions held at Golcar 22 new cases were seen, 5 being considered unsuitable for treatment. Treatment was arranged for the remainder which was made up of 6 stammerers and 11 children with articulation defects.

It is unfortunate that the number of cases seen and treated represent only a very small proportion of those requiring such treatment in the Division. With improvements in the staffing position, however, it should be possible to make a more comprehensive survey of cases requiring treatment and this work should continue to expand.

Child Guidance Clinics.

Appointments are made through Central Office, Wakefield, for cases requiring child guidance treatment at Barnsley Education Committee Child Guidance Clinic under the Psychologist, Dr. M. M. MacTaggart. During the year 18 children were referred to Dr. MacTaggart from this Division. An expansion of this service is contemplated by the County Council and it is hoped that the waiting lists for appointments will be cut down considerably. The service is handicapped by the lack of a Psychiatric Social Worker who could provide background history for the cases and maintain liaison between the clinic, the child's home, and the school. Expansion of this work is very desirable, but staffing difficulties will prove a major obstacle for some time to come.

Ultra Violet Light Clinics. •

An Ultra Violet Ray Clinic was held twice weekly at Holmfirth. Cases are referred by the School and Infant Welfare Medical Officers, and during the year some 29 children received a course of treatment.

Pædiatric Clinics.

During the year, Dr. C. C. Harvey, M.D., M.R.C.P., the County Pædiatrician, held 2 special pædiatric sessions at the Golcar Clinic, where 10 individual children suffering from cardiac diseases were seen.

Treatment Tables.

The following tables give details of treatment given to school children under the Authority's schemes and otherwise. The treatment provided otherwise than by the Authority includes all treatment known by the Authority to have been so provided, including treatment undertaken in school clinics by the Regional Hospital Board.

1. Diseases of the Skin.

	Number of cases treated or under treatment during the year.	
	By the Authority	Otherwise
Ringworm: (i) Scalp	—	1
(ii) Body	—	2
Scabies	2	5
Impetigo	4	6
Other Skin Diseases	2	2
Total	6	16

2. Eye Diseases, Defective Vision, and Squint.

	Number of cases dealt with.	
	By the Authority	Otherwise
External and Other, excluding Errors of Refraction and Squint	4	1
Errors of Refraction, including Squint	—	398
Total	4	399
Number of Pupils for whom Spectacles were: (a) Prescribed	—	278
(b) Obtained	—	285

3. Diseases and Defects of Ear, Nose, and Throat.

	Number of cases treated.	
	By the Authority	Otherwise
Received Operative Treatment:—		
(a) For diseases of the Ear	—	—
(b) For Adenoids and chronic Tonsillitis	—	263
(c) For other Nose and Throat conditions	—	3
Received other forms of treatment	—	10
Total	—	276

4. Orthopædic and Postural Defects.

(a) Number treated as in-patients in Hospitals	1	
	By the Authority	Otherwise
(b) Number treated otherwise, e.g. in Clinics or Out-Patient Departments	53	3

5. Child Guidance Treatment.

	Number of cases treated.	
	In the Authority's Child Guidance Clinics	Elsewhere
Number of Pupils treated at Child Guidance Clinics	—	18

6. Speech Therapy.

	Number of cases treated.	
	By the Authority	Otherwise
Number of Pupils treated by Speech Therapist	17	2

7. Other Treatment Given.

	Number of cases treated.	
	By the Authority	Otherwise
(a) Miscellaneous Minor Ailments ...	306	2
(b) Ultra Violet Light	29	—
Total	335	2

Cleanliness.

Routine inspections are carried out at all schools as far as possible at least once every term by the health visitors, to supervise the bodily cleanliness of pupils in attendance at school. Parents of children found to be infested with vermin (including nits) are sent a communication from the Divisional Office and visited by the health visitor where practicable. The more heavily infested cases are excluded from school for a few days in order to give the parents an opportunity to rid the child of vermin. Excluded children are re-examined before or immediately after their return to school. During the year the total number of examinations carried out was 16,020, and 738 instances of infestation were found.

Total number of warning letters sent	394
Total number of exclusion notices served	28
Total number of home visits paid	226
Total number of individual children found to be verminous	588

This last figure of 588 compares with 541 in 1949. Although in many cases the infestation was slight and frequently the same children were found to be infested on each visit, the fact that 588 individual pupils, or 6.71% of the school population, were found to be infested during the year, is a grave reflection on parental care.

Handicapped Pupils.

A register is maintained of all pupils who, owing to some mental or physical disability, require special educational treatment. During the year, 49 pupils have been examined with reference to their need of special educational treatment, and recommendations for the provision of same were made in 31 cases.

At the end of the year 153 pupils were included in the register, the sub-division into the various classes being as follows:—

Maladjusted	...	...	...	...	...	...	6
Deaf	...	...	...	...	...	...	2
Delicate	...	...	...	...	...	...	12
Speech	...	...	...	...	...	...	4
Partially Sighted	...	...	...	...	...	...	6
Blind	...	...	...	...	...	...	1
Physically Handicapped	...	...	...	...	...	...	20
Educationally Sub-Normal	...	...	...	...	...	...	102

153

At the beginning of the year 13 children were in attendance at Special Schools and 9 children (3 physically handicapped, 5 delicate, and 1 blind) were admitted during the year. There were 9 discharges (2 physically handicapped, 5 delicate, and 2 deaf), leaving a total of 13 children in attendance at Special Schools at the end of the year, the details being as follows:—

Category	No. Away	Location of Special School
Partially Sighted	3	School for Partially Sighted Children, Fulwood, Preston.
Blind	1	Sheffield School for Blind Children.
Delicate	6	2 at Ingleborough Hall, Clapham. 3 at Oak Bank Open Air School, Sevenoaks. 1 at Castleham School of Recovery.
Physically Handicapped ...	3	1 at Marguerite Hepton Orthopaedic Hospital, Thorp Arch. 1 at Heritage Craft School, Chailey. 1 at Leasowe Children's Hospital School.

Owing to the shortage of places in Residential Special Schools and Hostels, considerable difficulty is experienced in placing pupils in suitable schools, and at the end of the year 68 pupils in the following groups were awaiting placement:—

Deaf	...	...	...	...	...	...	2
Maladjusted	...	...	...	...	...	...	4
Delicate	...	...	...	...	...	...	4
Educationally Sub-Normal	...	...	...	...	...	...	52
Physically Handicapped	...	...	...	...	...	...	3
Partially Sighted	...	...	...	...	...	...	3

68

The position regarding admission of handicapped children to Special Schools still remains difficult. The opening of schools for delicate children by the West Riding County Council should perhaps ease the problem so far as this category is concerned, but the position of the deaf and partially sighted is disquieting. The provision of Special Schools for the educationally sub-normal will be a major difficulty for some years to come.

Liaison with General Practitioners.

Under an agreement reached between the British Medical Association and the Society of Medical Officers of Health, children found at school suffering from defects requiring specialist advice or treatment are notified in the first instance to the family practitioner before an appointment at the Consultant's Clinic is arranged. By this arrangement the family practitioner is kept informed of defects found amongst his patients and copies of the Consultant's report are sent to him.

Defects Amongst School Leavers.

Children leaving school who are suffering from defects of such a nature that employment in certain occupations would be detrimental to their health are notified to the Youth Employment Officer, so that special vocational guidance may be given to them. Those more seriously handicapped are recommended to the Youth Employment Officer for inclusion on the Disabled Persons Register.

During the year some 46 children were notified to the Youth Employment Officer and 6 of these were recommended for placement on the Disabled Persons Register.

Sanitary Conditions of School Premises.

On the whole the schools in the Division are kept in a reasonable state of repair. In quite a number, however, the interior decorations and the position of lighting points require attention. There has been some improvement in the sanitary conditions in schools during the year but a number are far from satisfactory.

At each routine medical inspection a tour of the school premises is made by the visiting medical officer, and a report submitted. Particulars of any sanitary defects found are sent to the Divisional Education Officer, or the School Correspondent in the case of voluntary schools, and a request made that the defects be remedied as soon as possible. A copy of the letter sent is passed to the local sanitary inspector and he is asked to follow up the complaint until it is remedied.

HEALTH VISITING

At the commencement of the year 9 health visitors and 2 tuberculosis visitors were engaged in the Division. During the year a new appointment, that of Superintendent Health Visitor, was created, and in May, Miss A. Corless took up the duties of this post. In addition 2 appointments of health visitor were made and there were 2 resignations. One of the tuberculosis visitors also left the service of the County Council and was not replaced, her duties being shared amongst the general health visitors.

Urban District	Authorised Establishment	Staff at 31-12-50
Superintendent Health Visitor	1	1
Colne Valley	4	4
Denby Dale	2	—
Holmfirth	4	2
Kirkburton	3	2
Meltham	1	1
Tuberculosis Visitors	2*	1
	17*	11

* 1 Shared with Division 21.

The last few years and particularly since the National Health Service Act, 1948, have brought a much wider range of duties within the scope of the health visitor. A survey of her work shows that not only is she continuing to advise the expectant and nursing mother and the child under 5, but includes amongst other duties the intensive "Follow-up" of handicapped schoolchildren and special cases up to the age of 18 years, the home visiting of tubercular patients and their families, the care of the aged, liaison with the hospital services in connection with after care, and, of course, her never-ending struggle with the social problem families. The health visitor has indeed become an invaluable friend of the family as a whole.

The recent introduction of a pre-school clinic at Slaithwaite has proved most successful and popular with the mothers, and it is proposed to extend this experiment to other districts.

The educational programme has progressed slowly because of lack of staff but it is hoped that this will be remedied during the coming year. The teachers are most co-operative in the educational work in the schools and welcome the teaching given by health visitors to the pupils.

The following is a summary of the visits made by health visitors during the year:—

District	Expectant Mothers		Children under 1 year of age		Children Between Ages of 1 and 5 Years		Other Cases
	First Visits	Total Visits	First Visits	Total Visits	First Visits	Total Visits	Total Visits
Colne Valley	39	112	363	2,271	3	2,306	577
Denby Dale	7	14	138	1,043	2	500	649
Holmfirth	4	10	274	2,077	15	1,345	258
Kirkburton	16	38	194	982	5	1,331	287
Meltham	39	64	74	566	3	420	260
Division 20	105	238	1,043	6,939	28	5,902	2,031

HOME NURSING

During the year the reorganisation of the Home Nursing Service with the view of entirely separating it from the Midwifery Service has continued. The establishment of home nurses approved by the Ministry of Health under the National Health Service Act and the staff position at the end of the year are set out as follows:—

Urban District	Authorised Establishment	Staff at 31st Dec., 1950	
		Home Nurses	Nurse-Midwives
Colne Valley	3	3	—
Denby Dale	2	3	—
Holmfirth	2	3	—
Kirkburton	3	2	2
Meltham	1	1	—
Relief	1	—	3
Division 20	12	12	5

Particulars of the work done in the various districts by the home nurses and nurse/midwives are shown in the following table. The amount of work done by the home nurses still varies considerably and further readjustment of districts is required as soon as this can be arranged.

	Home Nursing			Midwifery	
	Trans- fers	New Patients	Visits Paid	Confine- ments	Visits Paid
COLNE VALLEY URBAN DISTRICT					
Golcar	24	141	3,353	3	79
Marsden and Slaithwaite	8	158	2,289	6	164
Linthwaite	23	228	3,847	—	57
	55	527	9,489	9	300
DENBY DALE URBAN DISTRICT					
Denby & Cumberworth	15	65	1,859	1	23
Clayton West and Scissett	12	46	864	4	112
Emley and Skelmanthorpe	19	127	2,702	2	75
	46	238	5,425	7	210
HOLMFIRTH URBAN DISTRICT					
Holmfirth	31	110	1,886	2	56
New Mill	22	66	2,429	—	8
Honley	20	117	1,850	—	25
	73	293	6,165	2	89
KIRKBURTON URBAN DISTRICT					
Kirkheaton and Lepton	13	163	2,186	10	211
Kirkburton	9	79	2,335	24	700
Shelley	6	28	800	13	426
Shepley	15	68	1,882	1	30
Flockton	22	61	1,605	10	234
	65	399	8,808	58	1,601
MELTHAM URBAN DISTRICT					
Meltham	16	119	2,420	8	60
Total for Division	255	1,576	32,307	84	2,260

Cases Treated.

An attempt has been made to analyse the types and duration of cases treated during the year. It has been found that there is considerable variation between the different districts. In some, the nurse's time is largely devoted to attendance on the chronic sick, whilst in other districts many acute medical and post-operative surgical cases receive attention. Increased use is also being made of home nurses by general practitioners for the administration of drugs by injection, and particularly of penicillin.

At Emley it has been customary for some time past for the nurse to hold morning and evening dressing sessions at her home. This has continued and during the year 53 patients suffering mainly from minor injuries have made 366 attendances.

Cases Discharged.

Of the 1,482 cases the nurses ceased to attend during the year, 1,024 were discharged as recovered, 190 were transferred to hospital, and 268 died.

The tables given below show the duration of treatment and the number of visits paid to patients in each group.

Patients under Treatment	Patients.		
	Recovered	Transferred	Died
Less than 1 week	299	65	87
1- 2 weeks	413	39	79
2- 4 weeks	159	24	26
4-13 weeks	109	29	34
3- 6 months	25	11	18
Over 6 months	19	22	24
TOTAL	1 024	190	268

Number of Visits Paid	To Patients Who		
	Recovered	Transferred	Died
3 or less	272	51	53
4- 7	291	39	68
8-15	258	37	57
16-30	141	23	37
31-50	45	17	20
51-75	9	7	15
76-100	2	3	8
Over 100	6	13	10
TOTAL	1,024	190	268

Types of Cases Attended.

The new cases attended and the total visits paid have, as last year, been analysed. From the table given below it will be seen that Septic Conditions provided the largest number of new cases (163). Diseases of the Heart and Circulatory System (156) were the next most frequent. Post-Operative Dressings (134) were followed by Constipation (99), Senility (97), and Injuries and Cerebral Hæmorrhage (96 each).

New cases of Cancer, all sites, numbered 65 as compared with 47 in the previous year, and those of Bronchitis and Pneumonia were 50 and 45 respectively, as compared with 43 and 63 respectively for 1949.

Patients suffering from the following conditions received the largest number of visits:—

Diseases of Heart and Circulation	...	...	3,367	visits
Senility	...	...	3,314	"
Cerebral Hæmorrhage	...	...	2,922	"
Post-Operative Dressings	...	...	2,647	"
Septic Conditions	...	...	2,338	"
Cancer (all sites)	...	...	1,935	"
Rheumatism and Arthritis	...	...	1,517	"
Injuries	...	...	1,514	"
Male Genito-Urinary Conditions	...	...	1,433	"

The number of acute cases dealt with varies very much in the different nurses' districts, but on the average it would appear that more time is spent on the nursing of cases of chronic illness than on acute work, although the increase in the number of post-operative cases attended noted last year, has been maintained.

Type of Case	Transferred	New Cases	Visits Paid
Infectious	—	1	10
Pulmonary Tuberculosis	2	6	166
Non-Pulmonary Tuberculosis	2	1	152
Influenza	—	9	65
Pneumonia	4	45	792
Bronchitis	3	50	832
Other Respiratory Diseases	1	27	409
Cancer of Uterus	1	3	15
Cancer of Stomach and Intestines	—	18	482
Cancer of Breast	—	12	343
Cancer of Other Sites	2	32	1,095
Diabetes	4	13	913
Cerebral Haemorrhage	27	96	2,922
Diseases of Heart and Circulation	14	156	3,367
Post-Operative Dressings	11	134	2,647
Injuries	6	96	1,514
Burns and Scalds	4	60	718
Septic Conditions (Boils, Abscesses Carbuncles)	10	163	2,338
Uterine Prolapse	64	36	648
Other Gynaecological Cases	2	24	232
Male Genito-urinary Conditions	7	14	1,433
Rheumatic and Arthritic Conditions	19	18	1,517
Ear and Eye Conditions	3	29	512
Varicose Ulcers	12	11	965
Impetigo	—	2	21
Other Skin Diseases	2	11	286
Chronic Diseases of Nervous System	4	9	379
Mastitis	—	10	165
Acute Abdominal Conditions	1	37	313
Constipation	5	99	424
Thrombosis	4	14	401
Infantile Disorders	—	47	181
Circumcision	—	50	353
Senility	20	97	3,314
Other Conditions	21	146	2,383
TOTAL	255	1,576	32,307

Travelling Facilities for Home Nurses and Midwives.

The difficulties previously encountered with regard to transport have been largely overcome during the year. No additional County Cars have been allotted for use in the Division, but 3 of the older cars have been replaced, and in addition 2 midwives and 3 nurse/midwives have purchased cars privately. At the end of the year 6 home nurses, 1 nurse/midwife, and 1 midwife were using County Council Cars; 4 home nurses, 4 nurse/midwives, and 6 midwives were receiving a travelling allowance for the use of their own cars; and 2 home nurses and 1 midwife had to depend on public transport as a means of conveyance.

HOME HELP SERVICE

Slow progress has been made with the building up of this service during the year. In spite of the repeated advertisements in the local Press and personal canvassing by health visitors, home nurses, and midwives, the number of home helps employed over the period has only averaged 7.24 out of an establishment of 17.

In view of the shortage of home helps, no attempt has been made to bring the scheme more fully before the public, it being felt that there is no point in soliciting applications for help which cannot be met. It should, however, be pointed out that practically all applications received have had the services of a home help, although the amount of time which could be devoted to any particular case has sometimes been less than was actually required.

With regard to the difficulty in obtaining home helps, one feels that this is mainly due to the abundance of employment both full-time and part-time which is at present available to women in this district. There are, however, some other factors which tend to operate against the development of the service. In this Division there is no large centre of population but upwards of a score of small urban communities. It is not possible to guarantee full-time employment to a home help in any of these small townships and therefore if a woman wishes to be fully employed it is necessary for her to travel to other areas. As travelling time is now no longer paid where this does not exceed one hour per day, several home helps refuse to take cases away from their own immediate district.

The intermittency of employment which is inevitable in a scattered area such as this is another factor which operates against the expansion of the service. It is felt that if some small weekly retention fee could be paid during periods when home helps are not engaged, more women would be willing to join the service.

Although one can show but little expansion during the year, the Home Help Service is undoubtedly serving a useful purpose in this Division, and its further expansion depends mainly on the availability of more home helps.

During the year, 155 cases were provided with home helps, the reasons for the provision being as follows:—

(i)	Illness (excluding aged)	(a) Tuberculosis	...	4
		(b) Other	...	37
(ii)	Lying-in	...	...	64
(iii)	Expectant Mothers	...	...	3
(iv)	Mentally Defective	...	...	1
(v)	Aged	(a) Illness	...	35
		(b) Infirmary	...	10
(vi)	Children of School Age	...	...	1

155

At the end of the year 18 part-time home helps were on the register.

National Assistance Act, 1948, Section 47.

Under the above section a local authority may take action to secure removal to suitable premises of persons in need of care and attention. Action was taken by the Colne Valley Urban District Council in 1949 under this section in respect of an elderly infirm woman living alone in insanitary conditions and unable to look after herself. An order for her removal to a suitable institution was obtained in March, 1949, and was extended on application to the court at 3 monthly intervals until February, 1950, when the order was allowed to lapse, the patient agreeing voluntarily to remain in the institution.

During 1950, action was considered under this section in 2 other cases, but was not taken as one of the patients was certified under the Lunacy Acts and removed to Storthes Hall Mental Hospital, and the other agreed voluntarily to admission to a Social Welfare Institution.

AMBULANCE SERVICE

During the year close co-operation has been maintained with the Superintendent of the Huddersfield Depot and any difficulties of a medical nature arising have been discussed. Complaints have been much fewer than in the previous 2 years, in fact not more than 2 or 3 cases have come to my notice during the year as compared with 1 or 2 each week in 1948.

The general practitioners and hospital authorities have co-operated more readily than hitherto, and there is now much less chance of improper use of the service than formerly. So far as hospital out-patients are concerned the first journey to hospital is made on the authority of the general practitioner, but transport is only provided for subsequent visits when this is requested by the almoner on the instruction of a hospital medical officer, the authorisation being limited in each case to a period not exceeding one month, subject to renewal.

The collection and return of groups of patients by means of the small 12-seater 'buses now available naturally involves delays and detours, but it is obviously impossible and undesirable to provide a private taxi service for each patient.

The public generally, the doctors, and the hospital authorities now seem to appreciate the practical limitations of the service and complaints regarding delays are now seldom received.

So far as cases for urgent removal are concerned, these are adequately covered. Two of the ambulances were equipped with wireless control by the end of the year, whilst the drivers of the other vehicles get in touch with the depot whenever they are collecting or delivering patients at the various hospitals.

All drivers are required to pass a qualifying examination in first aid within 9 months of joining the service, and must pass a further proficiency examination every 18/24 months. Records of the attendances of drivers at first aid classes are kept by the Depot Superintendent.

In addition to the Ambulance Service vehicles there are available a number of private cars in the Voluntary Car Pool. These have proved very useful for the conveyance of sitting patients for long distances and for the removal and transfer of patients to mental hospitals.

During the year the ambulances from the Huddersfield Depot made 4,564 journeys involving 122,769 miles, and carried 13,323 patients, 2,892 of these being stretcher patients. Included in the 13,323 patients carried were 10,244 hospital out-patients. Particulars of the cases carried are given below:—

Accident	...	...	...	...	...	...	201
Urgent	...	...	...	...	...	...	330
Mental	...	...	...	...	...	...	25
Maternity	...	...	...	...	...	...	176
Infectious	...	...	...	...	...	...	—
General	...	...	...	...	...	...	2,347
Out-Patients	...	...	...	...	...	...	10,244
							<hr/>
							13,323

In addition to the ambulances stationed at the Huddersfield Depot an ambulance, the property of the Holmfirth Urban District Council, is operated as part of the County Service. This ambulance is available for accident work in the Holmfirth area, the staff coming on duty when called. During the year the Holmfirth ambulance carried 58 cases and travelled 421 miles.

Cars in the Voluntary Car Pool made 141 journeys, these being principally to Leeds, Bradford, York, and Doncaster.

CHILDREN'S HOMES

Medical Arrangements.

The care and treatment of children accommodated in The Leas Children's Homes, Scholes, Holmfirth, during times of illness is delegated to a private practitioner with whom the children are registered under the National Health Service Act, 1946.

The Divisional Medical Officer has been made responsible for the preventive medical services of the local authority so far as the children are concerned. Each child is examined by a medical officer of the local authority on admission and at 6 monthly intervals. Advice is given regarding precautions to be taken against the spread of infectious diseases, hours of rest and sleep, and the general supervision of health, hygiene, and dietary of the children.

Cases of difficulty in behaviour, boarding out, etc., are discussed with the Superintendent of the Homes and with the officers of the Children's Department.

MENTAL HEALTH

The mental health work in the Division consists mainly of the supervision of defectives under voluntary and statutory supervision and under guardianship orders.

The work is done mainly by the Mental Health Social Worker, who also provides reports about the home conditions of defectives for the information of Hospital Management Committees, when applications for leave of absence or renewal of licence are under consideration. The Social Worker also gives training in handicrafts of various sorts to suitable patients.

Very little has been done regarding the provision of personal histories and background information relating to patients admitted to and discharged from Mental Hospitals, as this work in the Division is largely done by the Social Worker attached to the local Mental Hospital.

At the end of the year the number of patients under supervision was as follows:—

	Male	Female	Total
Under Guardianship	1	2	3
Under Statutory Supervision	33	32	65
On Licence from Institutions	3	2	5
Under Voluntary Supervision and Observation	5	3	8

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