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Contributors

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URBAN DISTRICT OF HOLMFIRTH

ANNUAL REPORT

OF THE

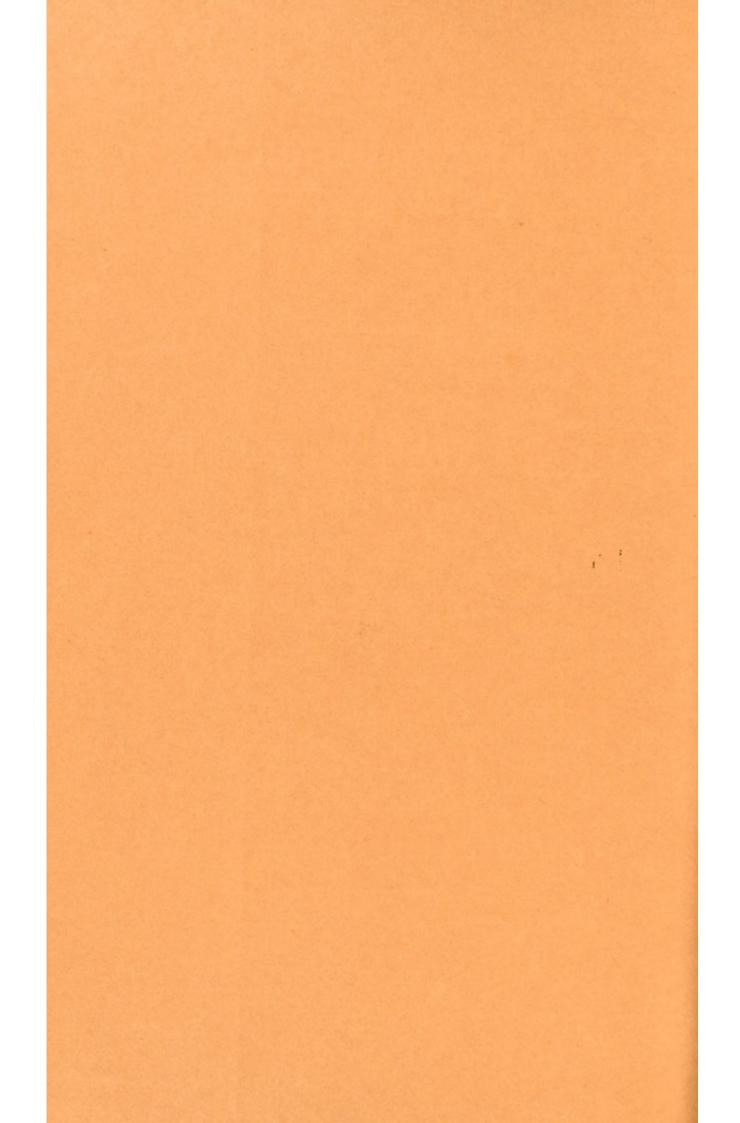
Medical Officer of Health For the Year 1953

BY

ERIC WARD

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

SLAITHWAITE: A. T. GREEN & CO., CARR LANE, 1954



URBAN DISTRICT OF HOLMFIRTH

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

For the Year 1953

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ERIC WARD
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Holmfirth Urban District

LIST OF COUNCILLORS for the year 1953/54.

Chairman:

E. HINCHLIFFE, Esq., J.P.

Vice-Chairman:

S. P. OWENS, Esq.

H. BEAUMONT, Esq.

E. BEEVER, Esq.

H. BEEVER, Esq.

A. BENNISON, Esq.

R. A. BERRY, Esq.

Mrs. E. E. BOOTH

J. BRAY, Esq.

W. BRAMHALL, Esq.

W. BOOTH, Esq.

H. BOOTHROYD, Esq.

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G. TAYLOR, Esq.

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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:

H. C. MILLIGAN, M.B., Ch.B., D.P.H.

Chief Sanitary Inspector and Cleansing Superintendent:

I. HAIGH

Additional Sanitary Inspector: W. HARGREAVES

Divisional Health Office,
Woodville,
Scar Lane,
Golcar,
Near Huddersfield
November, 1954.

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

Mr. Chairman, Lady and Gentlemen,

I have the honour to present to you my 7th Annual Report on the Health of the Holmfirth Urban District and the work of the Public Health Department during 1953. The Report is the 16th in the series since the formation of the enlarged Urban District in 1938.

I am indebted to your Chief Sanitary Inspector for the compilation of Sections 3, 4 and 5 which deal with the Sanitary Circumstances of the Area, Housing and the Inspection and Supervision of Food. These sections form the Chief Sanitary Inspectors Annual Report for the year.

As in previous years, particulars are given in Section 7 of the Report on the services provided under Part 3 of the National Health Service Act 1946, by the West Riding County Council as the Local Health Authority.

According to the Registrar-General, the estimated population of the district has remained almost stationary. There was a decrease of 1.27 per thousand population in the adjusted birth rate and an increase of 4.73 in the adjusted death rate. The later increase in mainly due to the fact that deaths of patients in Deanhouse Hospital are all included in the Holmfirth statistics and are not transferred to the area of previous residence as was formerly the case.

I again wish to express my thanks to the Chairman and Members of the Council for their help and interest during the year and to record my thanks to the Clerk and other Officers of the Council for their assistance and co-operation. My thanks are due in particular to Mr. I. Haigh, your Chief Sanitary Inspector and his Assistant, Mr. W. Hargreaves, for their invaluable help and loyal services at all times.

I am,

Your obedient servant,

ERIC WARD,

Medical Officer of Health

SUMMARY OF STATISTICS

1. General Statistics

Area in Acres			ii Statistic		
Enumerated Population Registrar-General's Es Registrar-General's Es	on (Ce timate timate	nsus, of Pop of Pop	oulation ()	middle of 1952 middle of 1953) 18,760
Number of Inhabited Rateable Value (31st Sum represented by a	March,	1954)		£103,018
2.	Extrac	ets from	n Vital St	atistics.	
Live Births: Legitimate			Male 113	Female 115	Total 228
Illegitimate			4	4	8
Total			117	119	236
Crude Birth Rate per Adjusted Birth Rate p	1,000 o er 1,000	f estim	ated resid	lent population sident populati	12.58 on 13.08
Still Births:				ъ.	T . 1
Lagitimata			Male 2	Female 3	Total 5
Legitimate Illegitimate			_	_	_
Total			2	3	5
Rate per 1,000	of total	(live	and still)	births: 20.75	
Deaths (Males 162, F	emales	203)	occomo de la como de l		365
Crude Death Rate per Adjusted Death Rate p Deaths from Puerpera	er 1,000	0 of est	timated re	sident population	on 16.73
Adjusted Death Rate p	er 1,000 l Cause	0 of est s	imated re	sident populati	on 16.73
Adjusted Death Rate p Deaths from Puerpera	er 1,000 l Cause	0 of est s	imated re	sident populati	on 16.73
Adjusted Death Rate p Deaths from Puerpera Number of Deaths of Legitimate	er 1,000 l Cause	0 of est s under	imated res	sident population f age:	on 16.73 Nil
Adjusted Death Rate p Deaths from Puerpera Number of Deaths of	er 1,000 l Cause Infants	0 of est s under	1 year of	sident population f age: Female	on 16.73 Nil
Adjusted Death Rate p Deaths from Puerpera Number of Deaths of Legitimate	er 1,000 l Cause Infants	0 of est s under	1 year of	sident population f age: Female 2	on 16.73 Nil Total 6
Adjusted Death Rate p Deaths from Puerpera Number of Deaths of Legitimate Illegitimate Total	er 1,000 l Cause Infants	of est s under 	1 year of Male 4 4	f age: Female 2 1	Total 6 1
Adjusted Death Rate p Deaths from Puerpera Number of Deaths of Legitimate Illegitimate Total Death Rate of Infants	er 1,000 l Cause Infants	of est s under 	1 year of Male 4 4 of age:	sident population f age: Female 2 1 3	Total 6 1 7
Adjusted Death Rate p Deaths from Puerpera Number of Deaths of Legitimate Illegitimate Total Death Rate of Infants All Infants per 1,000	er 1,000 l Cause Infants under	of est s under 1 year ths	1 year of Male 4 4 of age:	f age: Female 2 1 3	Total 6 1 7 29.66
Adjusted Death Rate p Deaths from Puerpera Number of Deaths of Legitimate Illegitimate Total Death Rate of Infants	er 1,000 l Cause Infants under 1 live bir	of est s under 1 year ths legitin	1 year of Male 4 4 of age:	f age: Female 2 1 3 oirths	Total 6 1 7
Adjusted Death Rate p Deaths from Puerpera Number of Deaths of Legitimate Illegitimate Total Death Rate of Infants All Infants per 1,000 Legitimate Infants per Illegitimate Illegitimate Infants per Illegitimate Illegitima	under	of est s under 1 year ths legitim illegit	1 year of Male 4 4 of age:	f age: Female 2 1 3 oirths	Total 6 1 7 29.66 29.66
Adjusted Death Rate p Deaths from Puerpera Number of Deaths of Legitimate Illegitimate Total Death Rate of Infants All Infants per 1,000 Legitimate Infants per Illegitimate Infants per Illegitimate Infants per Death Rate per 1,000	under 1,000 under 1,000 r 1,000 populat	of est s under 1 year ths legitin illegit	1 year of Male 4 4 of age: nate live bimate live	f age: Female 2 1 3 oirths births	Total 6 1 7 29.66 26.32 125.00
Adjusted Death Rate p Deaths from Puerpera Number of Deaths of Legitimate Illegitimate Total Death Rate of Infants All Infants per 1,000 Legitimate Infants per Illegitimate Infants per Illegitimate Infants per Death Rate per 1,000 Pulmonary Tuberculo	under I	of est s under 1 year ths legitim illegit	1 year of Male 4 4 of age: nate live bimate live	f age: Female 2 1 3 oirths	Total 6 1 7 29.66 26.32 125.00
Adjusted Death Rate p Deaths from Puerpera Number of Deaths of Legitimate Illegitimate Total Death Rate of Infants All Infants per 1,000 Legitimate Infants per Illegitimate Infants per Illegitimate Infants per Illegitimate Infants per Infants per Illegitimate Infants per Illegitimate Infants per Infants per Infants per Infants per Illegitimate Infants per Infa	under I live bir 1,000 r 1,000 r 1,000 populat sis	of est s under 1 year ths legitim illegit ion fro	of age:	f age: Female 2 1 3 Dirths	Total 6 1 7 29.66 26.32 125.00 0.11 0.11
Adjusted Death Rate p Deaths from Puerpera Number of Deaths of Legitimate Illegitimate Total Death Rate of Infants All Infants per 1,000 Legitimate Infants per Illegitimate	under : live bir 1,000 r 1,000 r 1,000 populat sis (exclud	of est s under 1 year ths legitim illegit ion fro	of age: nate live bimate live	f age: Female 2 1 3 oirths births Tuberculosis)	Total 6 1 7 29.66 26.32 125.00 0.11 0.11 1.60 2.67
Adjusted Death Rate p Deaths from Puerpera Number of Deaths of Legitimate Illegitimate Total Death Rate of Infants All Infants per 1,000 Legitimate Infants per Illegitimate Infants per Illegitimate Infants per Illegitimate Infants per Under Company Tuberculo All forms of Tuberculo All forms of Tuberculo Respiratory Diseases Cancer Infective and Parasiti	under I live bir 1,000 r 1,000 r 1,000 populat sis (exclud	of est s under l year ths legitim illegit ion fro	of age: ate live bimate live almonary excluding	f age: Female 2 1 3 Dirths Dirths Tuberculosis) Tuberculosis	Total 6 1 7 29.66 26.32 125.00 0.11 0.11 1.60 2.67 but
Adjusted Death Rate p Deaths from Puerpera Number of Deaths of Legitimate Illegitimate Total Death Rate of Infants All Infants per 1,000 Legitimate Infants per Illegitimate Infants per Illegitimate Infants per Illegitimate Infants per Infants of Tuberculo All forms of Tuberculo All forms of Tuberculo Respiratory Diseases Cancer Infective and Parasiti including Syph	under I live bir 1,000 r 1,000 r 1,000 populat sis (exclud	of est s under l year ths legitim illegit ion fro	of age: ate live bimate live bimate live bim: culmonary culmonary culmonary culmonary	f age: Female 2 1 3 Dirths Dirths Tuberculosis Tuberculosis	Total 6 1 7 29.66 26.32 125.00 0.11 0.11 1.60 2.67 but 0.11
Adjusted Death Rate p Deaths from Puerpera Number of Deaths of Legitimate Illegitimate Total Death Rate of Infants All Infants per 1,000 Legitimate Infants per Illegitimate Infants per Illegitimate Infants per Illegitimate Infants per Legitimate Infants per Illegitimate Infants per Illegitimate Infants per Infants per Legitimate Infants per Illegitimate Infants per Infants per Legitimate Infants per Illegitimate I	under in the control of the control	of est s under legitim illegit ion fro ing Pu ases (of l other es)	of age: nate live to imate live om: ulmonary excluding V.D.)	f age: Female 2 1 3 births Tuberculosis) Tuberculosis Tuberculosis	Total 6 1 7 29.66 26.32 125.00 0.11 0.11 1.60 2.67 but 0.11
Adjusted Death Rate p Deaths from Puerpera Number of Deaths of Legitimate Illegitimate Total Death Rate of Infants All Infants per 1,000 Legitimate Infants per Illegitimate Infants per Illegitimate Infants per Illegitimate Infants per Infants of Tuberculo All forms of Tuberculo All forms of Tuberculo Respiratory Diseases Cancer Infective and Parasiti including Syph Deaths from Measles Deaths from Diarrhoe	under I live bir 1,000 r 1,000 r 1,000 r 1,000 populat sis (exclud ic Dises ilis and (all ag a (child	of est s under 1 year ths legitim illegit ion fro ing Pu ases (of l other es) dren un	of age: ate live timate live mate live timate live com: culmonary	f age: Female 2 1 3 oirths Tuberculosis Tuberculosis ars of age)	Total 6 1 7 29.66 26.32 125.00 0.11 1.60 2.67 but 1
Adjusted Death Rate p Deaths from Puerpera Number of Deaths of Legitimate Illegitimate Total Death Rate of Infants All Infants per 1,000 Legitimate Infants per Illegitimate Infants per Illegitimate Infants per Illegitimate Infants per Legitimate Infants per Illegitimate Infants per Illegitimate Infants per Infants per Legitimate Infants per Illegitimate Infants per Infants per Legitimate Infants per Illegitimate I	under in the control of the control	of est s under under l year ths legitim illegit ion fro ases (of other es) dren under	of age: ate live bimate live almonary excluding V.D.) nder 2 yenteritis of	f age: Female 2 1 3 oirths Tuberculosis Tuberculosis ars of age)	Total 6 1 7 29.66 26.32 125.00 0.11 1.60 2.67 but 1

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 oven 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 engineeriing also provide occupation for a considerable number of the inhabitants.

VITAL STATISTICS

Population.

The Registrar-General's estimate of the population at mid-1953 was 18,760 as compared with 18,770 at mid-1952.

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 236 live births (117 male, 119 female) was registered in the District during the year, a decrease of 23 compared with the previous year.

The ADJUSTED BIRTH RATE is 13.08 per 1,000 of the population, as compared with 14.35 for the previous year, 15.5 for England and Wales, 16.0 for the West Riding Administrative County, and 15.5 for the Aggregate West Riding Urban Districts.

The illegitimate live births numbered 8, or 3.39% of the total live births, as compared with 6 for the previous year.

Stillbirths

After adjustments for transfers, 5 stillbirths were registered during the year, as compared with 6 in the previous year. This figure gives a rate of 20.75 per 1,000 live and stillbirths, and 0.27 per 1,000 of the population, as compared with 22.64 and 0.32 respectively for 1952.

Deaths

After correction for inward and outward transferable deaths, the net total deaths registered in and assigned to the District was 365 (162 male, 203 female), an increase of 103 compared with the year 1952.

The ADJUSTED DEATH RATE is 16.73 per 1,000 of the population as compared with 12.00 for the previous year.

The procedure to be adopted in connection with the transfer of records of vital events occurring in "long-stay" hospitals was changed as from the 1st January, 1953, with the result that all deaths occurring in Deanhouse Hospital are now assignable to your district. In consequence, the death rate is much higher and is not truly comparable with those of other areas or with that of your District for previous years.

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

(i)	Diseases of the Heart and Circu	latory Sy	stem	150
(ii)	Intra Cranial Vascular Lesions			73
(iii)	Malignant Neoplasms	40		50
(iv)	Respiratory Diseases (excluding I	Pulmonar	y Tuber-	30

These four causes accounted for 83.01% 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	Ages	0-	1-	2-	- 5-	15-	25-	35-	45-	55-	65-	- 75-
All Causes		162 203	4 3		1	1	1	2	4 2	12	31 20	40 46	66
1 Tuberculosis, respira-	M	1						1				1	128
tory 2 Tuberculosis, other	F	1									1		
	F							-		1111		***	***
3 Syphilitic disease	M												
4 Diphtheria	M	****						***	***	****	****		
5 Whooping Cough	F	****							***	1111		****	
	F					144				****	****	****	911
6 Meningococcal infec- tions	M F										1.00		
7 Acute poliomyelitis	M										****		
8 Measles	F			177	,				49.0	1111			
8 Measles	F	1	100		1						****		
9 Other infective and	M	1			***							**	1
parasitic diseases 10 Malignant neoplasm,	F	3								777	2	(4)	1
stomach	F	5									ī	1	3
11 Malignant neoplasm,	M F	7							1	1	2	3	
lung, bronchus 12 Malignant neoplasm,	M	1									****	1	8140
breast	F	7						1	1		2	1	2
13 Malignant neoplasm, uterus	M F								1		***		1
14 Other malignant and	M	7								1	2	2	2
lymphatic neoplasms 15 Leukaemia, aleukaemia	F	18								2	4	3	9
15 Leukaemia, aleukaemia	F												
16 Diabetes	M									***			
17 Vascular lesions of ner-	F	29								2	5	9	13
vous system	F	4.4											28
18 Coronary disease, angina	M	24 19							1	3	6	9	5 9
19 Hypertension with heart	M	10										*	9
disease	F	2										1	1
20 Other heart disease	M F	37						1		1	3 2	8 9	25 32
21 Other circulatory dis-	M	8								1		1	6
ease 22 Influenza	F	16						1 = 4				1	15
and an action of the second	F	3									344		3
23 Pneumonia	M F	2 2	1								1	****	1
24 Bronchitis	M	14	1						1		7	3	1 3
	F	6						+1.				2	4
25 Other diseases of respir- atory system	M F	2									1		1
26 Ulcer of stomach and	M	1									1		
duodenum 27 Gastritis, enteritis, and	F	1	1									****	1
diarrhoea	F	1							****			****	1
28 Nephritis and nephrosis	M	2							1041			1	1
29 Hyperplasia of grostate	M	1 3										1	3
	F												
30 Pregnancy, childbirth, abortion	M					14-	****						***
31 Congenital malforma-	M	140000								***	+++		
tions	F	19	3						4		-		
32 Other defined and ill- defined diseases	F	12	0			1	****	****	1	2 2	1	7	6
33 Motor vehicle accidents	M	2						1		1			
34 All other accidents	F M	3				1	1			1			
	F	7											7
	M	1										1	
35 Suicide	4												
35 Suicide	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 7 deaths (4 male, 3 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 29.66 per 1,000 live births as compared with 19.31 for the previous year.

The death rate amongst legitimate infants per 1,000 legitimate live births is 26.3, as compared with 15.81 for the previous year.

One illegitimate child died under 1 year of age, giving a death rate amongst illegitimate infants per 1,000 illegitimate live births of 125.00.

Comparative Statistics

BIRTH RATE Per 1,000 estimated population (crude) do. (adjusted)	Holmfirth Urban District 12.58 13.08	Aggregate West Riding Urban Districts 15.4 15.5	West Riding Admin. County 15.7 16.0	England and Wales (provisional figures) 15.5
DEATH RATES All per 1,000 estimated population All Causes (Crude)	19.45 16.73	12.5 12.6	11.6	11.4
All Causes (Adjusted) Infective and Parasitic Diseases (excl. T.B.)	0.11	0.09	0.08	*
Tuberculosis of Respiratory System Other forms of Tuberculosis Respiratory Diseases (ex-	0.11	0.17 0.02	0.16 0.02	0.18 0.02
cluding Tuberculosis of respiratory system) Cancer Heart and Circulatory	1.60 2.67	1.39 1.99	1.30 1.88	* 1.99
Diseases	8.00	4.63	4.26	*
INFANT MORTALITY	29.66	27.6	29.3	26.8
DIARRHOEA Deaths of infants under 2 years of age per 1,000 live births	4.24	*	*	*
MATERNAL MORTALITY Puerperal Sepsis Other Causes Total	Nil Nil Nil	* * 0.38	* * 0.51	* * 0.76

^{*} Figures not available.

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, Meltham and Saddleworth and Divisional Medical Officer of Division 20 of the West Riding which is composed of 6 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 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 depot for the area is situated at Banney Royd, Halifax Road, Huddersfield.

In adition an ambulance the property of the Urban District Council, operated as part of the County Service until November when, owing to the difficulty of recruiting sufficient men to continue the service, the ambulance was handed over to the County Authorities. Since then all ambulance services in the District have been provided from the Huddersfield Depot.

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

There are no separate Ante-Natal clinics in the district but expectant mothers may be seen at Holmfirth prior to the Infant Welfare session on the 4th Thursday afternoon in the month. They may also be seen at the Honley and New Mill Infant Welfare Centres 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 Service 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 Leeds Regional Hospital Board at the Oakwell Smallpox Hospital, Birstall.

(b) General Hospitals:

Holme Valley Memorial Hospital.

Huddersfield Royal Infirmary.

Deanhouse Hospital, Thongsbridge, 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.

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 6,517 houses in the District, 5,792 are supplied from public mains. Most of the water supplied is chlorinated before distribution, and except during periods of drought the quantity available is sufficient to meet the needs of the area.

Regular sampling of public water supplies has continued and during the year 116 samples have been submitted to the Public Health Laboratory, Wakefield, for bacteriological examination. The results classified in accordance with the standards set by the Ministry of Health for non-chlorinated piped supplies are given below:—

Presumptive Coliform Count per 100 ml.

Class I: Highly Satisfactory: less than 1

Class II: Satisfactory. 1 to 2

Class III: Suspicious, 3 to 10

Class IV: Unsatisfactory. greater than 10

Throughout the year 50% should fall into Class 1, 80% should not fall below Class II, and the remainder should not fall below Class III. Efficient chlorination should yield a water having Class I grading.

Date of Sampling	Greave	Holme Styes (Chlorinated)	Bradshaw	Holme (Chlorinated)	Snape	Netherthong	Eatley (Chlorinate-1)	Huddersheld (Chlorinated)	Bankhouse
	Class	Class	Class	Class	Class	Class	Class	Class	Class
27-1-53	I	I	I	I	I	I	I	I	_
25-2 53	1	I	I	1	I	I	I	_1_	_
26-3 53	П*	1	I	1	1	I	I	I	_
21-4 53	1	I	I	I	I	I	I	I	IV*
21-5-53	I	II *	I	11	I	I	I	11	II* IV*
18-6-53	111 *	III*		I			I	I	IV*
21-7-53	III	I	III *	I	II	II	I	I	111
25-8-53	III *	11*	IV *	I	I	III	I	I	IV
21-9-53	III *	III	IV *	I	III *	II*	I	I	IV
8-10-53	_	_	_	-	III	III		_	_
13-10-53	-	I I II* II II	_	_	_	_	_	-	-
22-10-53	II*	I	I	I	I	I	I	1	I
19-11-53	I	III	III *	II	I	1	I	I	IV
30-12-53	I	I	_	II	II	I	. I	I	1_

* Faecal contamination present.

Nine samples of domestic water from private supplies were taken from four premises and examined bacteriologically at the Public Health Laboratory, Wakefield. Of these samples, one was reported as highly satisfactory and 8 as unsatisfactory.

A total of 24 samples of water from service pipes supplied from the Council's reservoirs were submitted for analysis to determine the plumbosolvency of supplies. Of these samples 22 were reported as satisfactory and 2 as 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 Haddingley area. Further progress was made regarding the extension of the Huddersfield Corporation service in this area but constructional work had not commenced at the end of the year.

Drainage and Sewerage

The supervision of the installation of new drains and sanitary fittings in existing buildings is carried out by this department. No alterations have been made in the arrangements for sewage disposal during the year but a scheme in under consideration for closing the New Mill Sewage Works and extending the Neiley Sewage Works.

The populous parts of the District are fairly adequately sewered but improved means of disposal are required in some of the outlying parts, particularly Hade Edge, Moorcock, Snowgate Head, and Syke Bottom.

Rivers and Streams

Precautions are taken when new drainage works are carried out to prevent any further contamination of rivers and streams with sewage. Existing known cases of pollution of water courses are dealt with as local circumstances permit.

Closet Accommodation.

The number of closets estimated to be in the district in connection with all types of premises at the end of 1953 was as follows:—

947
251
5,970
2
7,170

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

(a) In new houses:

(i)	Council	Houses	 	 	 	48

(ii)	Private	enterprise,	including	existing	buildings	con-	
	verted	to houses					22

70

(b) In Existing premises:		Other Premises
No. of privies reconstructed as water closets	3	_
No. of tubs or pail closets reconstructed as water closets	. 4	_
No. of water closets installed in replacement of dismantled privies, tubs, etc	17	5
No. of water closets installed as additional ac- commodation to existing closets	47	26
	71	31

No. of water closets dismantled				18
No. of closets, other than water	closets,	converted,	dis-	
mantled, or demolished				29

The Council continued to make a grant of £7 10s. 0d. (or one-half the cost, if less) to owners towards the expense incurred in providing a water closet in substitution for a privy, tub, or pail closet. During the year, applications were received from owners in respect of 18 privies and 5 pail or tub closets, and a grant was made in each case.

A detailed analysis of water supply and closet accomodation is

given in the tables on page 19.

Refuse Collection and Disposal

Scavenging is undertaken throughout the District by direct labour ander the direction of the Cleansing Superintendent, Mr. I. Haigh, 5 motor vehicles being employed in the work. Domestic refuse and pail closet coptents are emptied approximately every 2 weeks and privies every 5 .veeks. Sanitary dustbins are now provided at approximately 5,600 nouses.

About 25% of the refuse collected is destroyed at the Honley Destructor and about 75% is dealt with by controlled tipping at 4 tips situated at Foster Place and Syke Bottom (New Mill), Berry Banks

(Holmfirth), and Scotgate Road, Honley.

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, 1954:-

		Total	 	6,920	tons
Honley Destructor	and Ti	р	 • • •	1,665	tons
New Mill Tips			 	1,270	tons
Berry Banks Tip		***	 	3,985	tons

Salvage collected and sold during the same period:—

		T. C	wts.	Qrs.	£.	s.	d.
Kitchen Waste	 	 36	18	2	124	6	3
Waste Paper	 	 178	11	0	1,247	14	9
Metals and Textiles	 	 13	15	3	82	15	8
		229	5	1	£1454	16	8

Shops Act.

No visits were made under the Shops Act during 1953.

Smoke Abatement.

A soot deposit guage is installed at the Neiley Sewage Works. Analysis of the deposits shows that the average monthly deposit of total solids is 11.59 tons per square mile. Whilst this figure is somewhat less than that recorded at deposit guages situated in neighbouring districts it is an indication of the need in the District for an active policy of smoke abatement. Although industry is usually blamed for the smoke nuisance it is now generally agreed by competant authorities that at least half of the pollution is due to domestic chimneys.

During the year 18 smoke observations were carried out and in 3 instances black smoke was emitted for excessive periods. Cautions

were issued in each case.

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 moveable dwellings in the District and one licence previously issued was renewed during the year. In addition one unlicensed moveable dwelling was in use making a total of 5 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 formerly had accesss have now been closed down.

Regulated Buildings and Offensive Trades

There are no Common Lodging Houses or Houses Let in Lodgings in the area. No persons are registered to carry on offensive trades in the District.

Rag, Flock, and Other Filling Materials Act, 1951

There are no premises in the District licensed to manufacture or store rag flock, but one is registered for upholstery. No samples of filling materials were submitted for analysis during the year.

Eradication of Bed Bugs.

No houses were found to be infested with bed bugs or fleas.

Factories Acts, 1937 and 1948.

The following is an extract from a separate report submitted to the Director of Statistics of the Ministry of Labour on Form 572 (Revised).

1. Inspections for Purposes of Provisions as to Health.

Premises	No. on Register	Insp'tions	Written Notices	Owners Prose'ted
(1) Factories in which Sections 1, 2, 3, 4, and 6 are to be enforced by Local Authorities.	4	1	_	_
(2) Factories not included in (1) in which Section 7 is enforced by the Local Authority	171	35	4	
(3) Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises).	_	_	-	
Total	175	36	4	-

2. Cases in which Defects were Found.

Particulars	Found	Remedied	Referred by H.M. Inspector	Prose- cutions
Want of cleanliness:	_	_	-	_
Sanitary conveniences (a) Insufficient (b) Unsuitable or de-	_	2	_	_
fective	2	3	2	****
(c) Not separate for sexes			_	_
Unsatisfactory means of escape in case of fire	_	_	_	
Total	2	5	2	_

3. Outworkers.

There are 113 outworkers in the District, employed as menders and burlers for various textile firms.

The Prevention of Damage by Pests Act, 1949.

Regular inspections under this Act were made by the rodent operative who worked under the control of the Surveyor until the 1st June, 1953 when responsibility for this work was transferred to the Health Department. As from October, 1953 the rodent operative has been employed only part-time on this work.

In accordance with the Ministry of Agriculture and Fisheries Infestation Control Division requirements, the report on rodent work is for the 15 months ended 31st March, 1954 and is as follows:

		Dwelling Houses	Agri- cultural	Others (incl. Business)	Total
Number of properties in- spected by L.A. as a result of :— (a) notification	3	50	2	12	67
(b) survey	10	43	50	85	188
Number of properties found to be infested by rats	11	61	13	42	127
Number of properties found to be seriously infested by mice		23	_	13	37
Number of infested pro- perties treated by L.A.	12	84	13	56	165

NOTE: Each property is recorded once only in respect of inspections. infestations or treatments during the 15 month period.

The number of visits made were as follows:-In consequence of (a) notification — 370 (b) Survey — 652

The following treatment of the Council sewers have been carried out during the 15 month period:-

	Test	Maintenance	Treatments	Total
	Baiting	No. 1	No. 2	
Number of manholes	65	79	71	215
Number of visits	65	158	71	294
Number of manholes showing bait take	18	44	23	85

Schools

There are in the District 17 schools. 12 being County Schools including one Secondary Modern School and One Grammar School, and 5 being Voluntary Schools. No schools were closed on account of infectious diseases during the year.

Sanitary Inspection of the Area

Notices served for abatement of Nuisances (excluding Housing and Smoke).

		nding -12-52	Issued in 1953	Abated in 1953	Outstanding at 31-12-53
Informal		1	5	5	1
Statutory	***		-	_	_

2. Inspections and Visits during 1953:-

Housing Inspections (including	hous	ing nui	sances	s)		709
Nuisances (excluding housing a						17
Tents, Vans, and Sheds					***	16
Factories - Health Provisions					***	32
Factories — Fire escapes					***	21
Cleansing Section administratio						982
Rats and Mice ·						62
Hairdressers and Barbers	3					4
Building Byelaws (new drainag						342
Infectious Disease and Disinfection						91
Inspections of meat and other	loods					183
Food Shops						28
Food preparing premises						15
Food Sampling						97
Schools						16
Public water supply - samp	oling			200		151
Smoke Abatement						29
Total number of inspections an	d visit	s				2,795

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

Nature of work, and number of premi	ses rep	paired:			
					9
Eaves spouting repaired or renewed					3
Rainwater pipes repaired or renewed					3
					10
- · · · · · · · ·					8
Internal wall plasterwork repaired or r	enewe	d			1
Sink waste pipes repaired or renewed					11
					1
Windows repaired or renewed					2
Chimney Stacks repaired					1
Number of:	r rono	wood			13
Closets and compartments repaired o	r rene	wed		***	
Water closets provided by owners			* * *		3
Water service pipes repaired or renev	wed		***		4
					1
					1
Dustbins provided by owners or occ	upiers				16
Miscellaneous nuisances abated					1

Fublic Water Supplies and Closet Accommodation	arer	200		3	,								100			-	-		
breW		Austonley	Cartworth	Daleton	Fulstone	Hepworth	Holme	Honley Central	Honley East (includes part Magdale)	Honley South	Honley West (includes part Magdale)	Netherthong	Мотth Central	Scholes	South Central	Thurstonland	Upperthong	Wooldale	Total
Number of Dwelling Houses:	ing Hou	ises:-															44.		
	:	. 423		598		219		831	360	206	321	385	502	462	466	234	483 6	610	6517 5792
On Public Water Supply			97				85	480	276	172	227	234	355	218	270	165			3991
Having One w	. C.	36		-		=		71.	, «	00	7	=	ıo	70	61	27	7	24	301
W.C.'s Not having a W.C.	W.C. or		219	- 2	61	91	24	280	92	31	87	140	142	174	194	42	128	177	9.7% 2225 34.1%
Estimated Closet Accommodation in Dwelling Houses:—	Accomm	odation	ı in Dwe	elling l	Houses	1													
No. of W.C.'s		320	73		404	146	100	729	316	190	246	287	406	384	314	226	373	529,	5043
No. of Privies		68	157	-	135	99	7	-	10	1	58	65	22	95	89	16	71	33	866
No. of Pails or Tues	or Tues	-			3	4	1	41	14	20	29	8	6	I	7	1	ıo	18	153
No. of Cl.emical Closets	Closets	-				1	1	1	1	1	I	ı	I	I	1	1	1	1	0.03%
% of Privies, Tubs, to Total Closets	Fubs, to	22.0	70.0		25.5	32.4	6.5	5.4	7.1	2.6	18.8	19.2	7.7	19.8	19.5	7.0	17.1	s.s	

HOUSING

Housing continues to be the most pressing need of the District and a never-ending stream of medical certificates is received in support of applications for Council houses. In those cases where a member of the household is suffering from some complaint which may be caused or aggravated by present housing conditions the award of health points up to a maximum of 10 is recommended to the Housing Committee.

It will be seen from the Housing Statistics Table that no routine housing inspections were carried out. This is to be regretted as the housing records in the Department are much out-dated and a complete house to house survey is required in order to form a proper appreciation of the

housing and sanitary conditions prevailing in the District,

Provision of New Houses.

Additional dwelling houses provided of follows:—	luring the year were as
(a) By the Local Authority — New p	ermanent type 48
(b) By private enterprise - New hous	es 19
(c) By private enterprise - Conv	version of existing
buildings	13
	Total 80
*	
Housing Statistics	
Number of dwelling-houses in the District Number of back-to-back houses included in a	
1. Inspection of Dwelling-houses during the	year:—
(1) (a) Total number of dwelling-hou housing defects (under Public Facts)	Health or Housing
(b) Number of inspections made for	the purpose 709
(2) (a) Number of dwelling-houses (inchead (1) above) which were inspendent the Housing Consolidate.	ected and recorded
(b) Number of inspections made for	the purpose Nil
(3) Number of dwelling-houses needing for (a) Number considered to be in a sort or injurious to health as to be habitation	state so dangerous
(b) Number (excluding those in a above), found not to be in al ably fit for human habitation	ll respects reason-

2.	Remed	dy of defects during the year without Service of Formal
	(a) Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their officers No. Number of defective dwelling houses (excluding
	,	those in (a) above) in which defects were remedied in consequence of informal action
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 N
	(Number of dwelling-houses which were rendered fit after service of Formal Notices: (a) By Owners
	(b)	(b) By Local Authority N Proceedings under Public Health Acts:
	(Number of dwelling-houses in respect of which notices were served requiring defects to be remedied
	(Number of dwelling-houses in which defects were remedied after service of Formal Notices:
	(c)	(a) By Owners (b) By Local Authority in default of owners 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 N (2) Number of dwelling-houses in respect of which
	(Demolition Orders were made
	(d)	of Demolition Orders N 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
		(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit
4.	Housi	ing Act, 1936 — Part IV. Overcrowding.
	(a)	(1) Number of dwellings overcrowded at the end of
		the year (known cases)
	(b)	Number of new cases of overcrowding reported during the year
		(1) Number of cases of overcrowding relieved during the year
5.		sing Act, 1949.
,.	- 1227 - 15	ng the year 6 applications were received for a grant

During the year 6 applications were received for a grant under Section 20 of this act, 4 of which were approved.

INSPECTION AND SUPERVISION OF FOOD

Milk Supply

The Urban District Council is 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 two persons registered with this authority as milk distributors, but no premises registered as dairies. The milk is purchased from dairy farms direct and sold in the District. The remainder of the milk purveyed in the District is distributed direct from the dairy farms.

The licences in force during the year under the Milk (Special Designation) (Pasteurised and Sterilised Milk) and (Raw Milk) Regulations, 1949 to 1953 were:—

- (a) two supplementary licences authorising the use of the special designation "Pasteurised."
- (b) Three dealers' licences authorising the use of the special designation "Sterilised."
- (c) Two Supplementary licences in relation to "Tuberculin Tested" milk.

During the year 14 samples of undesignated milk and 10 samples of tuberculin tested milk were taken for bacteriological examination for cleanliness or keeping quality. Results showed that 3 of the samples of undesignated milk and one of the samples of tuberculin tested milk were unsatisfactory. A further 20 samples of undesignated milk and 2 samples of tuberculin tested milk were taken for biological examination for tuberculosis, all with negative results.

Ice Cream

At the end of 1953 there were 2 premises registered for the manufacture and sale of ice cream, and 45 registered for sale only. During the year, 45 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 30, all of which were classified into grades 1 and 2. In addition 3 ice-lollies were submitted for examination, the results being satisfactory.

The provisional grades of ice-cream are as follows:

Provisional Grade	Time taken to Decolourise Methylene Blue
1	$4\frac{1}{2}$ hours or more.
2	$2\frac{1}{2}$ to 4 hours.
3	$\frac{1}{2}$ 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.

No regular slaughtering of cattle or sheep has been caried out at any of the slaughterhouses in the District, 8 of which have remained virtually closed by reason of the Livestock (Restriction of Slaughtering) Order, 1940. All meat in the District is distributed from the Government controlled slaughterhouse and depot at Huddersfield, where inspection is carried out.

As in previous years a number of home fed pigs were slaughtered under Ministry of Food licences for the producers' own consumption. In addition a considerable number of pigs were slaughtered in one of the licensed slaughterhouses under Ministry of Food licence for public consumption. Particulars of inspections are as follows:—

Licen	sed Slaughterl	nouses	Other Pr	emises (farms,	etc.)
On Weekdays	At Week-ends	Total	On Weekdays	At Week-ends	Total
494	18	512	35	29	64
85.8%	3.1%	88.9%	6.1%	5.0%	11.1%

It will be seen that during the year a total of 8.1% of these inspections were carried out at week ends.

Particulars of carcases inspected by the Sanitary Inspector and condemned are shown below:—

	Cattle ex'd'g Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed (if known),	_	_	_	-	
Number inspected	1	-		-	576
All diseases except Tuberculosis Whole carcases condemned Carcases of which some part	-	-	_	_	_
or organ was condemned Percentage of number inspect- ed affected with disease other	-	-			8
than Tuberculosis	_	_	-		1 39
Tuberculosis only Whole carcases condemned Carcases of which some part	_	_		_	4
or organ was condemned Percentage of number inspect-	-	_	_	-	19
ed affected with Tuberculosis			_	_	3.97

There are 9 slaughterhouses in the District all being licensed.

The number of butchers' shops in the District is 29, whilst the number of premises registered under Section 14 of the Food and Drugs Act for the manufacture of sausages, potted meat, etc., is 24.

During the year 15 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, 1952			 47
(b)	New licences issued during 1953			 1
(c)	Licences expired during 1953	194	13.50	 -
(d)	As at 31st December, 1953			48

Bread

There are 17 bakehouses in the District, 1 of which is underground. During the year 8 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:—

		-	Genuine	Adulterated
Milk samples examined	 	***	57	1
Drugs examined	 		2	-
Other Foods examined			15	1
Proceedings instituted	 		-	
Cautions issued	 		_	2

In the case of the adulterated milk, the sample taken was certified by the Public Analyst to be slightly deficient in the fat content. The other food classified by the Public Analyst as unsatisfactory was a sample of Pork Sausage found to contain a preservative and was being sold without a statement to that effect.

The vendor in each case was cautioned by the Clerk of the County Council.

Other Foods

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

Canned	Milk	26 lbs.	Canned Soup	2	lbs
.,	Fish	$76\frac{3}{4}$,,	Dried Milk Powder	$96\frac{1}{2}$,,
,,	Fruit	3861 ,,	Liquid Egg	48	,,
,,	Vegetables	353 ,,	77. (.)	10111	
,,	Meat	$227\frac{1}{4}$,,	Total	$1014\frac{1}{2}$	2)
,,	Ham	116 ,,			

Food Byelaws

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 in operation throughout the year.

PREVALENCE AND CONTROL OF INFECTIOUS AND OTHER DISEASES

Apart from the increased incidence of Measles, there was no unusual prevalence of infectious or other diseases in the District during 1953.

Smallpox

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

Diphtheria

No cases of this disease were notified during the year.

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 110 children of school age and 156 children under 5 years of age received a complete course of injections whilst 711 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 10 cases of Scarlet Fever were notified, all of which were confirmed, as compared with 22 in 1952. Although the disease was mild in character in most of the cases, 9 of the patients were admitted to Mill Hill Isolation Hospital.

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

Ward	Jan.	Feb.	Mar.	Apl.	May	June	July	Aug	Sep.	O ct	Nov	Dec.	T'ta
			-										
Austonley	-	-	-	-	-	-	-	_		-	-		-
Cartworth	-	-	-	-	-	-	-	-	-	-	-	_	
Fulstone	1	-		-	-	-	-		-	-	-	-	1
Hepworth	-	-	-	-	-	-	-	-	_	_	-	-	-
Holme	-	-	-	-	-	-	-	_	-	-	-	-	_
Honley	2	1	1	_	-	_	_	-	-	_	-	-	4
Netherthong	-	-	-	-	-	-	-	_	-	_	-	-	_
N'th Central	-	_	-		_	-	-	_	_		-	_	_
S'th Central	-	_		-	_	-	-	-		-	_	_	_
Scholes	-	-		_	-	_	_	2	-	-	_	_	2
Thurstonland	-	1	-	-	_	-		-	1		-		2
Upperthong	-	-	1	-	-		-		_	-	-	_	1
Wooldale	-	-		-	-	-	-		_	-	_	_	_
Totals	3	2	2		_			2	1				10

Whooping Cough

Cases of Whooping Cough notified during 1953 numbered 3 as compared with 42 in the previous year.

Measles

A total of 257 cases of Measles was notified during the year as compared with 196 in 1952. Of these cases 219 occurred in the first four months of the year. As will be seen from the following table, the cases were scattered throughout the whole of the Urban District. One death was registered as due to measles, the patient being a male child aged 2 years.

Ward	Jan.	Feb.	Mar.	Apl.	May	Jun.	July	Aug.	Sept	Oct.	Nov	Dec.	T't'
Austonley	2		1										3
Cartworth	1	7	4	-	_				_		-	-	12
Fulstone	1	2		-		-	2						5
Hepworth	1	7	-	-	_	-	1	1	-		_		10
Holme	5	_	2	-	-	-	1	1	-		-		9
Honley	1	3	-	69	- 6	.5	-	1	-				82
Netherthong	-	_	-	-	1		2	_		_	_	-	3
Scholes	15	16	11	-		-	_		-	-	-		42
N'th Central	4	5	4	2		-	1	3	-		_		19
S'th Central	9	- 6		1	-	-	1	3	-		-	-	20
Thurstonland	-	_		_	2	-	1	1	-		_	_	4
Upperthong	17	2		4			3	-4	-		-		30
Vicoldale	5	7	5		-	-	-	1	-	-	-		18
Totals	61	55	27	76	9	2	12	15				_	257

Acute Primary and Acute Influenzal Pneumonia

There were 11 cases of Acute Primary Pneumonia and 2 cases of Acute Influenzal Pneumonia notified during the year as compared with 4 cases of Acute Primary Pneumonia in 1952. Deaths registered during 1953 as due to all forms of Pneumonia total 4, the same number as in the previous year.

The distribution of cases is given in the following table:-

Ward	Jan.	Feb.	Mar.	Apr.	May	Jun.	July	Aug.	Sept	Oct.	Nov	Dec.	T't
Austonley	-	2	-		-						_	-	2
Cartworth	-		-	1	_				-	_	_	-	1
Fulstone	-	-	-	-	-	_		-		-		-	- 20
Hepworth	_		1			-				-		_	1
Holme	-		-		_	-		-		-	-	-	
Honley	-		_	2	-	2	1					-	3
Netherthong	-	-		-	-	-	-	-		_	-	-	_
Scholes	-	-	_	-	_	-		-	-		_	-	-
N'th Central	2	1	-		-		-	-	-	_	-	-	3
S'th Central	_	1	-	-	-		_			-		-	1
Thurstonland	-	_	-		-					- 1			_
Upperthong	-	1	-		_		_		-	-	-		1
Wooldale	-	1	-		-	-	-		-	-	-	-	1
Totals :	2	6	1	3			1				_		13

Enteric Fever and Dysentery

No cases of Enteric Fever or Dysentery were notified during the year.

Meningococcal Infections

Three cases of Meningococcal Infection were notified, but after admission to hospital the diagnosis was not confirmed in 2 of the cases. The confirmed case was a male child aged 10 months resident in the North Central Ward. He was admitted to the Huddersfield Royal Infirmary where he made a satisfactory recovery.

Puerperal Pyrexia

One case of this condition was notified during the year.

Erysipelas

During the year 2 cases of Erysipelas were notified.

Acute Anterior Poliomyelitis and Acute Polioencephalitis

No cases were notified during the year.

Ophthalmia Neonatorum

No cases were notified during the year.

Cancer

The number of death attributable to Cancer during the year totalled 50 (17 male, 33 female), as compared with 35 in 1952. The Cancer death rate for the year is 2.67 per 1,000 of the estimated population, compared with a rate of 1.86 for the previous year. The corresponding rates for the Administrative County and the Urban Districts are 1.88 and 1.99 respectively.

Tuberculosis

A total of 12 new cases was added to the Notification Register during the year, as compared with 8 in the previous year.

There were two deaths from Pulmonary Tuberculosis (1 male, 1 female) as compared with 2 deaths from Pulmonary Tuberculosis and one death from Non-Pulmonary Tuberculosis in the previous year.

The following tables give details of the number of cases on the Notification Register together with particulars of new cases of Tuberculosis and deaths from Tuberculosis during the year:—

	Pul	monary	Non-Pu	lmonary
	Male	Female	Male	Female
(a) Number of cases on Register at commencement of year	33	22	10	11
(b) Number of cases notified first time during the year	6	3	-	3
(c) Number of cases restored to Register	_		_	1
(d) Number of cases added to Register otherwise than by notification	1	_	_	
(e) Number of cases removed from the Register	4	5	4	2
(f) Number of cases remaining on the Register	36	20	6	13

		New Ca	ses			Dea	iths	
Age (years)	Pulr	nonary		Non- nonary	Puln	nonary		Non- nonary
	Male	Female	Male	Female	Male	Female	Male	Female
0 1		_			_	_		
1- 5	200	-	-			_	_	_
5-10				1				
10-15			_	_	_		_	-
15-20	_	1		1	-	-	_	max
20 - 25	3		-	-	_			_
25 - 35	-	1	_	1	_	_	-	
35 45	1	_	_			-	_	
4555	_	-	_	***	-		_	_
55—65 65 and	1	1	-	-	-	1	-	_
upwards	1		-	_	1	-	_	-
Totals	6	3		3	1	1		

				0)													0))	
	Total	Number of cases	Number of cases						Age	distril	butio	n of	Age distribution of confirmed cases.	med o	ases.			-			1
Disease	Number of cases	in which Diagno-	Admitted Mill Hill	Deaths	Under 1	1-2	2-3	_	3-4	4-5		5-10	10-1	10-15 15-20		20-35		35-45	45-65	The same	Over
	Parmout	firmed	Hospital		M F	M F	M	14	M F	M	F M	压	M F	M	F M		F M	H	M F	M	H
Measles	257	257	1	1	4	- 12	9 10	10 14	18 14	20	00	78 66	64	3	1	1	-		1		
Whooping Cough	m	82	1	1	İ	i		1	1	i	- 1	1 1		- !	- 1		- 1	i	1		
Acute Primary Pneumonia	=	11	Ī	4a	i	İ	-	-	ī	i	-1	1	1	- 1	1	- 1	_	-	24	00	- 7
Acute Influen- zal Pneumonia	61	63	ı	1	1	i		1	1	i	1	-	i	i	-	-	1	-	i	!	
Scarlet Fever	10	10	6	1	i	1	-	-	1	1	-	0.1	1	1 67	-	T	-	i		- 1	
Erysipelas	01	61	1	I	ì	i	-	Ţ	1	İ	+	-	1	1	1	1	1	i	1	-	
Diphtheria	1	1	1	1	i	i	-	1	1	i	1	-	1	-1	1	-	1	1	i	- 1	
Dysentery	1	1	1	1	İ	i	1	1	1	İ	1	-	i	1	-	1	1	-		-	-
Meningococcal Infections	က	-	35	- 1	- 1	i		1	1	İ	-	- 1	i	-	-	1	- 1	1	1		
Puerperal Pyrexia	-	-	1	1	1	1	- 1			Ì	-	- 1		- 1		-	-				- 1

(a) Deaths from all forms of pneumonia(b) Two cases admitted to Huddersfield Royal Infirmary.

COUNTY COUNCIL

OF THE

WEST RIDING OF YORKSHIRE

DIVISION 20

URBAN DISTRICTS OF:-

COLNE VALLEY KIRKBURTON DENBY DALE MELTHAM HOLMFIRTH

SADDLEWORTH

ANNUAL REPORT

· OF THE

Divisional Medical Officer 1953

BY

ERIC WARD

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

Divisional Staff:

Divisional Medical Officer:

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

Senior Assistant County Medical Officers and School Medical Officers: H. C. MILLIGAN, M.B., Ch.B., D.P.H. W. P. B. STONEHOUSE, M.R.C.S., L.R.C.P., D.P.H. (Appointed 11.1.54)

Assistant County Medical Officer and School Medical Officer: D. SHAW, M.B., Ch.B.

Clinic Medical Officers:

(Part Time)

C. DICKSON, M.B., Ch.B. A. EDWARDS, L.R.C.P., L.R.C.S., L.R.F.P.S. A. HAND, M.B., Ch.B.

J. LOFTUS, M.B., Ch.B. L. E. LUCAS, M.B., Ch.B. H. MERCER, M.B., Ch.B. H. C. PICKERING, M.R.S.C., L.R.C.P.

J. A. STEPHENS, M.R.C.S., L.R.C.P. J. E. TAYLOR, M.B., Ch.B. J. G. WALLER, M.B., Ch.B. M. V. WILBY, M.B., Ch.B. P. B. WOOD, M.B., Ch.B.

Superintendent Health Visitor: Mrs. A. CORLESS.

Health Visitors and School Nurses:

Mrs. E. BLEZZARD. Miss D. BROOKE. *Mrs. E. FISCHER. Miss M. FLINTOFF. Mrs. D. GAINES. Miss C. A. HOLROYD, Mrs. E. M. HURLEY, Miss C. INCHBOARD, (Appointed 1.7.53)

Miss S. KNOX. Miss D. MELLOR. *Mrs. I. MELLOR Miss M. I. MORRIS. Miss M. NUTTALL. (Appointed 1.7.53) Mrs. A. ROYSTON. Mrs. D. SMITH. (Appointed 1.7.53, Transferred to Division 3 on 5.8,53)

*Mrs. M. WARD. Mrs. E. WILLIAMS. Miss D. WOOD,

* Part-time

Midwives:

Miss E. L. B. BRADLEY. Mrs. J. CAPES. Miss A. CHARLESWORTH, Mrs. J. COOK. Mrs. D. I. CRAIG. (Resigned 19.9.53) Mrs. E. GRAHAM. Miss M. A. STAFFORD.

Nurse/Midwives:

Miss A. ASPINALL, Miss A. BEAUMONT. Miss M. BROOK.

Miss A. E. HITCHEN. Miss S. JONES. Miss L. KAYE. Miss K. M. PURDON.

Home Nurses:

Miss M. BOOTHROYD. Miss F. M. BURDETT. (Resigned 31.7.53) Mrs. N. EARL. Miss E. HIRST. (Resigned 12.11,53) Mrs. K. M. KAYE. Miss C. LATIMER.

Mrs. J. S. LAUDER. Miss A. LODGE. Miss A. McWILLIAMS. Miss H. G. PEACOCK. Mrs. N. PLATT. Miss E. M. PRENTIS. Miss F. RICHARDSON. Mrs. H. STURGEON.

Mental Health Social Worker: Mrs. M. MOORE.

Speech Therapist: Miss M. J. WATKINSON. Mental Health Home Teacher: Miss E. BALL.

Duly Authorised Officer: Mr. J. THRELFALL. (Deceased)

Senior Clerk: Mr. G. A. BEATSON.

2a

INTRODUCTION

In this Section is given a brief account of the services provided by the West Riding County Council in the Division as a whole, under Part III of the National Health Service Act.

During the year the original Division 20 was enlarged by the incorporation of the former Division 21 which was composed of the Saddleworth Urban District. The formal amalgamation dated from the 1st October but in fact Division 21 was administered by the Divisional Medical Officer of Division 20 from December, 1952, and the clerical work was gradually transferred to the Divisional Health Office from March onwards.

The enlarged Division 20 consists of the following County Districts:—

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

The Medical Staff of the enlarged Division consists of a Divisional Medical Officer who is also Medical Officer of Health for the 6 Districts in the Division and 2 Senior Assistant County Medical Officers (one of whom is also Deputy Medical Officer of Health for all the County Districts apart from Saddleworth, whilst the other is Deputy Medical Officer of Health for Saddleworth only). In addition there is one full-time Assistant County Medical Officer and 11 part-time Medical Officers who undertake sessional duties at Infant Welfare and Ante-Natal Clinics.

Medical auxiliary staff employed wholly in the Division are one Mental Health Social Worker and one Mental Health Home Teacher whilst the Speech Therapist is shared with Division 19.

Details of the Health-Visiting, Home Nursing and Midwifery Staffs will be found later in this report.

In compiling this Report it is assumed that the amalgamation has been in operation for the whole of the year, no separate reports being given for the former Divisions 20 and 21 prior to October. In all instances the statistics refer to the whole area for the whole year. As, however, identical records were not kept in the two Divisions prior to the amalgamation it is not possible in some instances, to give comparable figures for 1952, but where 1952 statistics are quoted they are the combined figures for the two then existing Divisions.

COMPARATIVE STATISTICS

	Valley	Dale	Holm- firth U.D.	burton	tham		Division No. 20	Aggregate West Riding U.D's.	West Riding Admin. County	Eng land Wale prov figur
Area (Acres)	16,052	10,165	17,565	14,577	59,06	18' 485	82,750	380,334	1,609,759	
Population	21,670	9,651	18,760	17,610	5,097	16,610	89,398	1,158,200	1,592,600	#
Live Births	298	134	236	208	77	183	1136	17,795	25,026	*
Still Births	7	6	5	6		5	29	457	633	*
Deaths	277	125	365	359	62	222	1410	14,462	18,504	*
Deaths under 1 year of age	7	1	7	4	3	8	30	492	733	*
Birth Rate Per 1,000 estimated population (Crude)	13-75	13-88	12-18	11-81	15-11	11.02	12.71	15-4	15.7	15-
,, (Adjusted)	14-16	14-85	13-08	15-24	15.26	11:35		15.5	16.0	15
Death Rates All per 1,000 est- imated population All Causes (Crude)	12.78	12-95	19-45	20.39	12-16	13:37	15-77	12,5	11-6	11
,, ,, (Adjusted)	11-63	14-66	16-73	18-55	10-82	12:03	*	12-6	12.1	11
Infective and Parasitic diseases excluding T.B. but including Syphilis and other V.D Tuberculosis of	0.18		0-11	0-45	0.20	0.06	0-18	0-69	0.08	
Respiratory system Other forms of		0.31	0-11	0.62	0.20	0.12	0.23	0.17		
Tuberculosis	0.05	0.31	1.60	1.99	1.77	0.96	0.02	0.02	0.02	
Cancer	1.98	1.87	2.67	2.90	1.77	1.44		1.99	1.88	
Heart and Circul- atory Diseases	5-35	5.70	8-00	7-16	4.32	6.20	6-40	4-63	4-26	
Vascular Lesions of the Nervous Sys- tem		2-1.8	3.89	3-29	1.96	1.99	2.64	1-96	1.76	
Infant Mortality	23-49	7-46	29-66	19-23	38-96	43.72	26:41	27-6	29-3	26
	-									

VITAL STATISTICS

Births.

The number of live births registered in the Divisional area during 1953 was 1.136 (595 males, 541 females), an increase of 11 compared with the previous year.

The CRUDE BIRTH RATE was 12.71 per 1,000 of the estimated population as compared with 12.57 for 1952.

The illegitimate live births numbered 34 or 2.99% of the total live births, a decrease of 2 compared with the previous year.

Deaths.

The deaths assigned to the Divisional area after correction for transfers were 1,410 (703 males, 707 females), an increase of 214 on the total for 1952.

The CRUDE DEATH RATE from all causes was 15.77 per 1,000 of the estimated population as compared with 13.36 for the previous year.

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

(i)	Diseases of the Heart and Circulatory System		572
(ii)	Intra-Cranial Vascular Lesions		236
(iii)	Malignant Neoplasms		195
(iv)	Respiratory Diseases (excluding Pulmonary Tube culosis)	:r-	118

These 4 causes accounted for 79.22% of the total deaths.

Infant Mortality.

In 1953 the deaths of infants under one year of age numbered 30, the same number as in the previous year. Of these deaths 17 infants were under 4 weeks of age at the time of death.

The INFANT MORTALITY RATE was 26.41 per 1,000 live births as compared with 26.67 for 1952.

The death rate amongst legitimate infants per 1,000 legitimate live births was 25.41 as compared with 25.71 for 1952.

The death rate amongst illegitimate infants per 1,000 illegitimate live births was 58.82 as compared with 55.55 for 1952.

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.

Total under I year												30
9-12 months	1	-	C1	1	-	1	1	1	1	1	1	**
6-9 months	1	1	1	1	1	1	1	I	1	1	1	01
3-6 months	1	1	©1	1	Ģ1	1	1	1	1	. 1	1	4
1-3 months	1	1	63	1	1	1	1	ı	1	1	1	8
Total under 1 month		1	61	1	-	.0	1	G1	1	03	G1	17
2-4 weeks	1	1	-	1	1	-	1	1	-	-	1	4
1-2 weeks	1	ı	+	1	1	1	1	-	1	ı	1	G1
Total under 1 week	1	1	I	J	1	4	1	1	1	61	64	=======================================
5-7 days	1	1	1	ı	1	1	1	1	1	1	1	1
2-5 days	1	1	1	1	1	1	1	-	I	ı	1	co
1-2 days	1	1	1	1	1	-	1	1	I	I	1	61
Under 1 day	1	1	I	1	ı	63	-	1	1	63	1	9
Causes of Death	Meningococcal Infections	2. Acute Bronchitis	3. Pneumonia	Gastroenteritis	Congenital Malforma- tions	5. Premature Birth	6. Injury at Birth	7. Intra-Cranial Haemorrh- age	tibia with Toxemia		Other Diseases Peculiar to the First Year of Life	TOTAL
	-ï	çi	3		4	3.	6.	r. 00			10.	

EPIDEMIOLOGY

Food Poisoning.

During the year one case of food poisoning was notified, the diagnosis being confirmed. The patient, a male aged 15 years resident in the Kirkburton Urban District, was nursed at home and made a satisfactory recovery.

The main symptoms were head ache, abdominal pain and diarrhoea. A specimen of stool revealed organism S. Typhimurium.

The origin of infection was found to be a pork pie bought in Wakefield where many cases of food poisoning were reported at the same time.

Diphtheria.

One case of diphtheria was notified during the year but this was not confirmed.

According to records available, less than 50% of children under 5 are at present protected. Whilst this figure is probably lower owing to lack of records, than it should be in reality, it is a very disappointing figure and energetic steps should be taken to secure a much higher acceptance rate for young children.

If the fall in the incidence and mortality of diphtheria is to continue it is vital to secure that not less than 75% of babies are immunised before their first birthday, otherwise a return of diphtherial outbreaks is a definite possibility. The virtual disappearance of diphtheria is conditional upon the maintenance of an adequate level of immunisation.

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

Number of Children Immunised in 1953.

Urban Distri	ict		Age	and		of Fi	ses nal inject	tion	
		Under 1	1	2	3	4	5 to 9	10 to 14	Total
Colne Valley		80	88	9	4	5	40	15	241
Denby Dale	4.81	14	35	1	2			_	52
Holmfirth		66	76	7	1	6	94	16	266
Kirkburton		33	51	6	7	1	114	12	224
Meltham		28	22	5	_	1		_	56
Saddleworth		49	48	6	4	3	13	-	123
Total		270	320	34	18	16	261	43	962
			S				r Injectio		
				Age :	at da	te of	injection		
		Under 1	1	2	3	4	5 to 9	10 to 14	Total
Colne Valley			1-1	-	1	50	446	286	783
Denby Dale			1-1	1		1	19	2	22
Holmfirth			1-1	-1		28	483	200	711
Kirkburton			1 -1	-	-	8	252	70	330
Meltham			1 -1	[22	67	25	114
			-	-1	-	1	30	26	57
Saddleworth									

Records of the immunisation state of children in the Divisional area as at the 31st December, 1953, are shown below.

Age at 31-12-53 i.e., Born in Year	Under 1 1953	1 to 4 1949-52	5 to 9 1944–48	10 to 14 1939–43	Total Under 15
Number immunised	51	2922	6,549	4,220	13,742
Estimated mid- year child popula- tion 1953.	,	Children under 5	11,780 17,		
Percentage of child population immunised		48.18	91	.42	76.56

Smalipox.

On the 15th April, 1953, a Linthwaite boy aged 16 employed as a lorry driver's mate with a firm of haulage contractors in the Colne Valley was removed to hospital as a suspected and subsequently confirmed case of Smallpox.

The boy was at work on the 10th April delivering pieces of cloth in Leeds and collecting other pieces in Huddersfield and Colne Valley. On that day he complained of not being well to the driver. On the 11th April he was feverish but remained ambulant, staying indoors. The following evening he felt considerably worse and a rash began to appear on his face.

His probable date of infection was considered to be the 30th March and on that particular day he had visited Leeds and Gildersome. At that time there had been cases of Smallpox occurring in Todmorden, Oldham and Halifax, and shortly before the development of this boy's illness an isolated case occurred in Leeds, and shortly afterwards another one in Gildersome. Despite the most thorough investigation no link could be found between these cases though there is strong presumption that they were infected from a common source.

The case came to the notice of the Health Department on Wednesday the 15th April, when the opinion of a Smallpox consultant was obtained regarding the boy's illness, and immediate removal to Oakwell Isolation Hospital was advised. Subsequent laboratory tests confifmed the case to be Variola Major which became confluent in type and the boy died on the 4th May, on the 25th day of disease.

A detailed history of the boy's movements prior to his sickening on the 10th April was obtained, and a list of names and persons who had visited the house between the 10th and 15th April was prepared. Contacts were divided into 3 classes:—

(a) Direct households contacts of the case. These were the father, mother and 2 sisters aged 16½ and 15 years. The mother had been vaccinated in infancy: the others had no previous history of vaccination.

- (b) Neighbours. Very few of the neighbours had direct contact with the boy between the 10th and 15th April. A list of 10 persons contained the name of one Trade Union Subscription Collector who had visited the house on the 11th April and 2 children of neighbours, who had played about the doors and had on occasions actually been inside the house. Two girls, friends of the boy's sister, had visited the house on the 10th April and spoken to the boy. They were also included.
- (c) A list of mills which the boy had visited on the 10th April was obtained, the contacts being mainly warehousemen. The garage depot was visited also and the staff were questioned as to the degree of contact with the boy, and a list of contacts completed.

Supervision of contacts was carried out by the staff of the Health Department. This included 3 medical staff and 11 health visitors. Contacts were offered vaccination and placed under surveillance. Naturally the closest surveillance was kept on the direct household contacts and those who visited the house between the 10th and 15th April. The family contacts were visited twice daily, vaccinated and re-vaccinated. On the 18th April the 2 sisters were given 25 c.c. of convalescent intraserum muscularly since it was considered that they were in the greatest danger. The serum was obtained from a case which had developed Smallpox in Todmorden and subsequently recovered.

All 4 developed satisfactory re-action to vaccination but on the 21st April they were removed to hospital as a precautionary measure. Apart from being slightly pyrexial whilst the vaccinations were taking they remained well and developed no other signs or symptoms.

Amongst the neighbours surveillance was carried out daily until the 19th April and thereafter twice daily until the "all clear" was given on the 2nd May. In addition to the 3 members of the family who were working 6 others were advised to stay off work, between the 20th and 28th April as a precautionary measure. All these contacts were carefully examined and temperatures taken twice daily. contact who had visited the house on Saturday, 11th April, developed a temperature of 99.4 on the 21st April. This man's temperature remained up and on the morning of the 22nd it was 99.8. As this was the 12th day following exposure he was removed to Oakwell Hospital No further signs or symptoms developed. Another for observation. contact, a child of 7, had a temperature of 101.4 on the 22nd April and on the morning of the 23rd 99.8. He had no other symptoms but it was decided to remove him to hospital for further observation, third contact, a youth aged 17, who had visited the boy on the evening of Sunday, 12th April, had a temperature of 99.6 on the 22nd which remained up until the following morning when it was 99.8. He also developed no signs or symptoms.

Supervision of contacts at work was less rigorouslessly carried out since it was considered that the risks of contracting infection were very slight. Nevertheless mills were visited daily and the garage depot twice daily and all contacts were kept under close medical supervision.

No further cases developed and the family were released from quarantine on the 1st May, a cautious "all clear" being given on the following day. Throughout this period there was considerable demand for vaccination by members of the general public. Through the medium of the press, to which thanks are extended for their co-operation, the general public was advised that mass vaccination was quite unnecessary, vaccination being freely available to those contacts at risk. Despite this, however, the demand for vaccination became so great that it was necessary to open clinics at Golcar and Linthwaite to cope with the large numbers of persons seeking protection. The total number of vaccinations performed in the Colne Valley during the year was 8,652 which compares with 100 in the previous year and a total of 542 during the preceding 5 years.

During this period it was the policy of the Health Department to interfere as little as possible with the ordinary working of industry and only 9 persons were actually advised to stay off work, but some dislocation was caused to industry through sickness arising from vaccination than that due to a single case of Smallpox in the area. There is no doubt that infant vaccination is much less likely to be followed by severe reactions than primary vaccination in adult life, and it is undoubtably true that much morbidity could have been prevented if the policy of infant vaccination had been more freely accepted by the public.

The number of records of vaccinations and re-vaccinations received from General Practitioners during the year was 8.458 and 5,824 respectively, as compared with 377 and 94 in the previous year. In addition, 1,198 vaccinations and 992 re-vaccinations were carried out by the staff of the Health Department.

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

		VAC	CINATION	IS		Total	
District	Under 1	1	2-4	5—14	15+	Vaccina- tions	
Colne Valley	182	158	515	1592	2522	4969	
Denby Dale	26	21	86	338	347	818	
Holmfirth	135	68	224	810	828	2065	
Kirkburton	69	31	95	317	364	876	
Meltham	24	24	47	216	215	526	
Saddleworth	48	22	53	121	158	402	
Grand Totals	484	324	1020	3394	4434	9656	

		RE-V	ACCINAT	IONS		Total Re-
District	Under 1	1	2—4	5—14	15+	Vaccina- tions
Colne Valley	3	7	58	441	3174	3683
Denby Dale	1	1	6	34	210	252
Holmfirth	2	2	24	331	1350	1709
Kirkburton	_	-	12	108	475	595
Meltham	_	_	4	75	280	359
Saddleworth	_		4	44	170	218
Grand Totals	6	10	108	1033	5659	6816

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.

The restricted scheme for the immunisation of children against Whooping Cough has continued throughout the year. Supplies of vaccine can be obtained by medical practitioners on application to the Divisional Medical Officer and children up to the age of 4 years may be immunised.

The inoculations have been carried out by private medical practitioners and at Infant Welfare Centres and during the year 200 children received protective treatment.

MIDWIFERY AND MATERNITY SERVICES

Domiciliary Midwifery.

The number of cases attended by the domiciliary midwives continues to fall. In 1949 the number of cases attended was 477. In 1951 it was 380 and by 1953 it had fallen to 336.

This falling off has necessitated a review of the policy of having separate staffs for midwifery and home nursing. Whilst it is generally agreed that a separate midwifery service is desirable, it is not in the best interests of the patients if this can only be obtained by giving the fairly large districts to each full-time midwife in order to provide a reasonable number of patients. In order to overcome the difficulty, certain of the whole-time midwives have agreed to undertake home-nursing duties and become nurse-midwives. This policy will be followed where desirable when vacancies occur in the future.

At the commencement of the year 8 whole-time midwives, 2 nurse/midwives, and 2 relief nurse/midwives were engaged in the Division. During the year a whole-time midwife resigned her appointment and 3 midwives were re-appointed nurse-midwives. With the amalgamation of the Saddleworth Urban District on the 1st October, 1953, 2 whole-time midwives were taken on to the Divisional staff.

The position regarding midwifery services at the end of the year was as follows:—

		Staff at 31st December, 1953				
Urban District	Authorised Establishment	Whole-time Midwives	Nurse/Midwive			
Colne Valley	3	1	_			
Denby Dale	2	_	2			
Holmfirth	2	2	_			
Kirkburton	2	1	2			
Meltham	1		1			
Saddleworth	2	2	_			
Relief	2	-	2			
Division 20	14	6	7			

No independent midwives signified their intention to practice in the area. Of the 1,179 births notified and attributed to the Division, 340 occurred at home. The following table shows the number of cases attended:—

Minuser	CONFIN	NEMENTS	HOME	VISITS
MIDWIFE	As Midwife	As Mat. Nurse	Ante- Natal	Post- Natal
Whole-time County Mid-				
wives.				
Bradley	31	1	302	797
Capes	31	10	372	1013
Charlesworth	32	_	313	665
Cook	32	2	277	859
Craig (Resigned	7	_	47	195
19/9/53)				
Graham	25	1	453	592
Stafford	29	3	304	572
	187	17	2068	4693
Nurse/Midwives.		2000		
Aspinall	28	4	209	649
Beaumont	14	2	149	385
Brook	11	_	141	245
Hitchen	9	_	20	190
Jones	30	2	283	712
Kaye	9	_	87	213
Purdon	23	_	228	611
	-			
	124	8	1117	3005
ndependent Midwives.	_	_	_	
Total ,	311	25	3185	7698

Of the cases attended 2 were twin births, 2 were patients who normally resided outside the Division (outward transfers) and 6 were patients attended on behalf of a neighbouring Division. Thus 330 of the births attended were attributed to the Division. Of the remaining 10 births attributed to the Division 6 were attended by medical practitioners and transferred immediately to hospital and 4 by midwives from a neighbouring Division.

In addition, 23 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 303 such patients received nursing care, 1,155 individual visits being paid to them. Further details are given in the table on page 15a.

Notifications:

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

Liability to be	a sourc	e of	infection				6
Laying out the	Dead						1
Artificial Feedin	g					+++	32
Stillbirths	***	***			1377		9
Death of Child				1 1 1			9

Medical Assistance:

Medical aid forms sent in by midwives during 1953 numbered 176 (134 domiciliary, 42 institutional). The following table summarises the cases for which medical aid was sought:

PREGNANCY			LYING-IN
Albuminuria Ante-Partum Haemorrhage Glycosuria Pre-aclampsia Threatened Abortion	1 4 2 2 1	Inst.	Anaemia 1 — Condition of Breast 7 — Leg Pains 2 — Phlebitis 1 — Pyrexia 3 — Skin Condition 1 —
	10	-	15 —
LABOUR Ante-Partum Haemorrhage Episiotomy Malpresentation Notification of labour Post-Partum Haemorrhage Premature labour Prolonged Labour Pyrexia	6 4 1 1 1 5		THE CHILD Asphyxia 3 — Cyanosis 2 — Deformities 2 — Discharging Eyes 5 — Feeding difficulties 1 — General Condition 2 — Haemorrhage 2 — Jaundice 1 — Paromychia 1 —
Retained Placenta Ruptured Perineum	3	1 27	Skin Condition 2 — Stillbirth 1 — Vomiting 1 —
	86	42	23 —

Gas and Air Analgesia:

At the end of 1953, all the 13 midwives in domiciliary practice held the certificate in Gas and Air Analgesia administration and were equipped with the necessary apparatus.

Analgesics were administered by domiciliary midwives to 232 cases, or 69.05% of the cases attended, as compared with 223 cases in 1952.

Pethedine was administered by domiciliary midwives to 187 cases, or 55.65% of the cases attended.

Ante-Natal Clinics.

There are 4 separate Ante-Natal Clinics in the Division whilst occasional patients are seen at the Infant Welfare Clinics.

During the year 135 patients made 405 attendances at the various clinics, details of which are given in the following table:—

Clinic		No. of sessions	No. of patients	No. of attendances	Average at- tendance per session
Lepton		12	25	53	4.42
Meltham		12	20	61	5.08
Springhead		12	29	122	10.17
Uppermill		12	26	66	5.50
*Denby Dale		9	9	20	2.22
Golcar		8	6:	15	1.88
*New Mill		3	4	5	1.67
*Skelmanthorpe		12	14	59	4.92
*Slaithwaite		4	2	4	1.00
Tot	al	84	135	405	4.82

^{*} Patients seen at Infant Welfare Clinics,

It will be seen that the attendance figures compare unfavourably with the previous year when 123 patients made 527 attendances.

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.

Relaxation Classes.

Relaxation classes for expectant mothers have continued to be held at Slaithwaite and Springhead and were introduced at Denby Dale in July, 1953. Where possible these classes are attended by a Health Visitor who gives instruction in mothercraft.

During the year 82 patients made 440 attendances as follows:-

Clinic	No. of Sessions	No. of Patients	No. of attendances	Average attendance per session
Denby Dale	. 20	12	75	3.75
Slaithwaite	. 50	40	270	5.40
Springhead	. 24	30	95	3.96
Total .	. 94	82	440	4.68

It is hoped that additional classes will shortly be commenced at Holmfirth, Lepton, Meltham, and New Mill.

" Flying Squad " Arrangements.

"Flying Squads," based on the Huddersfield Royal Infirmary and the Maternity Block, Boundary Park Hospital, Oldham, are available for dealing with emergencies arising in the domiciliary midwifery service. The "squads" consist of an obstetrical consultant together with nursing staff, and provides facilities for blood transfusion and other emergency treatment.

Normally the call for the services of the "squads" is made to the hospital by the general practitioner attending the case, but a call for assistance can be made direct by the midwife if the urgency and time available precludes her from getting in touch with the patient's own doctor first.

The "squad" was not called upon to attend any patient in this Division during the year.

Ante-Natal Hostel.

There were no admissions to the Brighouse Ante-Natal Hostel from this division during the year.

Institutional Midwifery.

No 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 1,179 births attributed to the Division, only 340, or 28.84% took place at home, as compared with 335 or 28.95% for the previous year.

A summary of the cases for which medical aid was sought by midwives in institutions is given on Page 13a.

Owing to shortage of staff, however, patients are from time to time discharged before the 14th day, as will be seen from the following table.

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.

			1	ay (of D	ischa	rge				!	
	3	4	5	6	7	8	9	10	11	12	13	Tota
Coine Valley U.D.	i											
No. of Patients	1	-	-	-	1	15	9	34	21	3	1	85
No. of Visits	15	-	-	-	3	57	37	104	56	9	2	283
Denby Dale U.D.								1 9				
No. of Patients	-	_	_	_	-	2	4	27	11	4	1	45
No of Visits	-	-	-	-	-	11	15	114	30	10	2	182
Holmfirth U.D.												
No. of Patients	i	_	_	_	_	1	2	13	1	1	1	15
No of Visits	-	-	-	-	-	10		131	5	2	2	16
Kirkburton U.D.												
No. of Patients	-	_	_	_	-	4	9	24	22	3	1	6
No of Visits	-	-	-	-	-	24	46	97	59	7	1	23
Meltham U.D.												
No. of Patients	1-	_	_	_	-	1	4	10	7	-	1	2:
No of Visits	-	-	-	-	-	4	23	39	21	-	2	8
Saddleworth U.D.												
No. of Patients	1-	_		_	-	1	7	24	21	8	3	6
No of Visits	-	-	-	-	-	7	21	90	70	12	5	20
Total No. of Patients	1	-	-	-	1	24	35	132	83	19	8	30
	-	-	-	_								
Total No. of Visits	15	-	-	-	3	113	154	575	241	40	14	1155

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

ADMISSIONS TO MATERNITY HOSPITALS

CHILD WELFARE

Infant Welfare Clinics.

There are in the Division 16 Infant Welfare Centres and 1 Weighing Centre. Apart from the centre at Golcar all are held in hired premises. As the hired premises are only available for sessional use, difficulties are experiened at some regarding access to records and stores at times other than during actual clinic sessions. At others storage facilities are inadequate. All suffer from the disadvantage of being built for some other purpose and improvisation is needed in order to use them for clinic purposes. Equipment has to be brought out before each session and packed away again at the conclusion. This entails much labour on the part of the health visitors. In spite of these disadvantages it is not reasonable to suggest that all centres should be accommodated in premises designed and solely used for clinics. A compromise would be to erect specially designed premises at a central point in each Urban District and to retain some of the outlying premises as monthly and fortnightly weighing centres.

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

During the year 2805 children were seen and a total of 23,306 attendances were made, details of which are shown in the following table, as compared with 2,601 children and a total of 24,213 visits in the previous year.

	 No. of	No. of children who attended and who were born in:—				No. of attendances by children who at date of attendance were:—				Average at- tendance per Session			
Clinic	sess-	1953		1948	Total	—1 yrs.		2—5 yrs.	 Total	—1 yr.	1	2—5 yrs.	
Delph	49	13	21	46	80	435	284	881	1600	8.88	5.80	17.98	
Golcar	52	65	63	74	202	1267	390	261	1918	24.37	7.50	5.02	
Greenfield	51	32	33	56	121	611	365	698	1674	11.98	7.16	13.69	
Holmfirth	51	74	94	124	292	932	380	368	1680	18.27	7.45	7.22	
Honley	50	32	54	114	200	592	307	288	1187	11.84	6.14	5.76	
Kirkburton	48	27	34	41	102	. 321	117	106	544	6.69	2.44	2.21	
Lepton	49	58	40	57	155	443	147	147	737	9.04	3.00	3.00	
Linthwaite	48	48	49	79	176	888	402	393	1683	18.50	8.38	8.19	
Marsden	52	51	64	132	247	1067	526	754	2347	20.52	10.12	14.50	
Meltham	47	48	42	116	206	876	295	482	1653	18.64	6.28	10.26	
New Mill	52	34	43	115	192	583	386	550	1519	11.21	7.42	10.58	
Şlaithwaite	50	30	43	112	185	459	373	704	1536	9.18	7.56	14.08	
Springhead	49	61	131	106	298	1107	774	589	2470	22.59	15.79	12.02	
Denby Dale	24	37	47	42	126	480	202	159	841	20.00	8.42	6.63	
Skelmanthorpe	24	38	42	21	101	482	100	31	613	20.08	4.17	1.29	
Uppermill	51	40	39	43	122	571	373	360	1304	11.20	7.31	7.06	
	747	688	839	1278	2805	11114	5421	6771	23306	14.88	7.26	9.06	

The monthly sessions of the Weighing Centre at Emley have continued, 24 individual children having made 87 attendances, as compared with 16 children making 118 attendances in 1952.

Premature Babies.

During the year 61 babies weighing 5½lb. or less were born in hospitals or nursing homes to mothers normally resident in the Division, and 13 were born at home. Of those born at home, one died during the first 48 hours and the remaining 12 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

Percent-	Survival in 1952		100.0	91.7	87.5	75.0	40.0	0.00	0.00	0.00	83.3
Fercen-	Survival in 1953		91.3	92.3	100.0	100.0	1.99	0.00	100.0	0.00	91.9
8		H	67	01	+	1-	o1	1	-	1	68
Number Surviving Over 28 Days		0	53	#	63	+	GI	1	1	1	36
r Sur		B2	10	9	+	¢1	t	1	-	1	05
umber Survivir Over 28 Davs		Bi	1	1	17	E	1	1	1	1	1
ž		<	6	G1	1	-	1	.1	1	1	21
Over	dn 11	days	1	I.	1	1	1	1	1	1	-
		17	- 1	1	1	1	1	1	1	1	1
		13	i	1	1	1	1	1	1	1	1
	eek	21	1	1	1	1	1	1	1	1	1
	Second Week	=	1	1	1	1	1	1	1	1	1
val).	secon	10	1	1	1	.1	1	-1	1	-3	1
urvi	٠.	6	1	1	1	1	1	1	1	1	1
Number Dying (days of survival).		00	- 1	1	1	1	1	- 1	1	1	1
(day		1-	1	4	1	1	1	1	1	1	1
ying		9	- 1	1	1	1	3	0	1	1	1
er D	ę,	10	1	1	1	1	1	1	1	1	
quin	First Week	4	1	1	1	1	1	1	1	1	1
Z	Firs	00	-	1	1	1	1	1	1	1	-
		01	-	- 1	- 1	1	1	1	1	1	0
		-	-	_	- 1	1	1	1	- 1	1	0.
ıre		Born	-	es	1	1	1	-	1	-	10
matr		H	46	13	*	1-	63	1	-	1	1.
r of Pre Births	ive	O	56	4	00	4.	01	1	1	1	30
Number of Premature Births	Born Alive	B2	2	1-	-	οį	-	1	-	1	0.0
Yam	Bor	Bi	- 1	1	- 1	1	1	1	1	1	-
-		<	10	¢1	- 1	-	!	1	1	. 1	5
	Weight	lbs.	5-51	44-5	4-44	33-4	3-31	24-3	67-0	1-5-5	

Born at home and attended by a midwife.
Born in a Private Nursing Home.
Born in a Maternity Home.
Born in a General Hospital.
Total. Total adjusted live births

Number of live premature births

Percentage of total live births

Number born dead

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.

Two premature baby outfits are available in the Division and are kept at the Divisional Health Office, Golcar, and at the Mechanics' Institute, Uppermill. 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 at Golcar was called into use on one occasion.

Day Nurseries.

There are no day nurseries in the Division.

Nurseries and Child Minders' Regulations Act, 1948.

One person in the Division is registered as a child minder; she is the propriortress of a small kindergarten school in Saddleworth and the permitted number of children she may mind is 10.

The industrial nursery at "Oakdene," Horsforthe Road, Greenfield was re-opened in January with 8 children aged between 2 and 5 years in attendance, and with the approved number of places having been increased from 14 to 18.

These premises were visited by the Department's medical staff during the year.

SCHOOL HEALTH SERVICE

Introduction.

This account of the School Health Service is a Divisional report and is a combination of the reports already presented to the Upper Agbrigg Divisional Executive and the Saddleworth District Sub-Committee.

As with other sections of the Divisional Medical Officer's Report, all statistics relate to the whole Division for the whole year.

The inclusion of the former Division 21 in Division 20 increased the number of schools or separate departments to 80 and the school population to approximately 11,500. The policy of visiting each school twice yearly for the purpose of routine medical inspections has been introduced in the Saddleworth area and has continued in other parts of the Division. As in previous years the defects found which required treatment or observation were namely, defective vision, defective speech, enlarged tonsils and adenoids and minor degrees of flat feet. The ascertainments of affected pupils in need of special educational treatment has continued cases being added to the list during the year, making a total of 261 at the end of the year.

Whilst it is now much easier to secure the admission of delicate children to Open-air Schools there is still great difficulty in placing educationally sub-normal pupils either in special schools or arranging special educational treatment for them in ordinary schools.

It will be seen again that there is no reference in the report to the School Dental Service. This is because it was virtually non-existent in this District during the period in review. Attempts to recruit Dental Officers have continued but without success. It is however very pleasing to report that the services of two Dental Officers have recently been secured and they are now working in the Division.

Schools in the Area.

There are in the Division 80 schools or separate departments, which include the Royd Edge Special School, Meltham.

The approximate number of pupils on the registers in December, 1953, was 11,455 (an increase of 292 as compared with the previous year) and was composed of:

Infants	Juniors	Seniors
3,481	4,832	3,142

Of the 73 Primary and "Through" Schools 37 are Voluntary and 36 are County Schools.

The	diat	wil.	tion	1	£ 11	lows:-
THE	CHSU	HDU	поп	15 dS	101	ows.—

				olne	100	enby Dale		Iolm- firth	-	Cirk- urton		Mel- nam		ddle- orth	Т	otal
Type o	of Sc	hool	Schools	Pupils	Schools	Pupils	Schools	Pupils	Schools	Pupils	Schools	Pupils	Schools	Pupils	Schools	Pupils
Primary			 8	961	9	1020	15	1628	13	1428	5	506	11	1225	61	6768
Secondary	Mod	lern	 1	283	1	548	1	480	1	264	-	_	1	300	5	1875
Through			 10	1715	-	_	_	-	1	296	-	_	1	203	12	2214
Grammar			 -		-	_	1	545	-		-1	_	-	_	1	545
Special			 -		-	-			_	-	11	53	-	_	1	53
All Types			 119	2959	10	1568	17	2653	15	1988	6	559	13	1728	80	11455

Pupils from Colne Valley attend Royds Hall Grammar School and pupils from Saddleworth attend Hulme, Oldham and Manchester Grammar Schools, but so far as the School Health Service is concerned they are the responsibility of the Huddersfield and Oldham County Borough Councils, and of the Medical Officers of the Independent Schools.

Some pupils from outlying parts of the Division attend Grammar Schools at Mirfield, Penistone, etc.

Medical Inspections.

The periodic medical examination of the three age groups, i.e. entrants (5 years +), intermediate (10 years +) and seniors (14 years +) continued throughout the year, and in addition it was decided in October to introduce a further age group for periodic inspection, i.e. juniors (7 years +.). In all 168 separate inspections were carried out at the 80 schools in the Division. As in previous years pupils continuing attendance at school beyond the age of 15 years were given additional routine medical examinations at 16 and 18 years. Re-examinations of children who at previous periodic or special examinations had been found to have defects requiring treatment or observation were made at each school medical inspection.

Periodic Medical Inspections....

During the year 3906 periodic inspections were carried out as compared with 3559 in 1952.

The number of children inspected in the various age groups is as follows:—

Prescribed	age	group	DS.	
------------	-----	-------	-----	--

T	otal		 3906
Last year secondary		 	 736
First year secondary		 	 46
Last year primary		 	 957
7 to 8 year group		 	 567
Entrants		 	 1600

Findings of Medical Inspections

The following figures show the incidence of certain defects in the 3906 children who were examined at the periodic inspections :—

			No of Chile	dren Requiring
Defect or Disease				Observation
Nose or Throat	* * * *	***	50	316
Speech			30	36
Cervical Glands			6	132
Heart and Circulation			9	23
Lungs	***		23	94
Orthopædic			84	168

Further details will be found in the Table on Page 23a.

Rarticulars of the age grouping of children found at periodic medical inspections to require treatment are given below :—

Groups		For Defective Vision (excluding Squint).	For any of the other conditions recorded in table of defects	Total Individual Pupils	
Entrants			6	222	225
7 to 8 year group			14	36	40
		****	26	48	74
First year secondary		****	2	4	6
Last year secondary			18	25	42
TOTAL			66	335	387

General condition of children.

All pupils at routine medical inspections are classified as to their general condition at the time of the inspection as follows:—

[&]quot;A" (Good) — those better than normal.

[&]quot;B" (Fair) — those normal.

[&]quot;C" (Poor) — those below normal.

Details of the children inspected during the year are as follows:-

	Number	(A)	Good	(B)	Fair	(C)	Poor
Age Groups	of Pupils Inspected	No.	% of Col. 2	No.	% of Col, 2	No.	% of Col. 2
Entrants	1600	789	49.3	776	48.5	35	2.2
7 to 8 year group	567	236	41.6	319	56.3	12	2.1
Last year primary	957	412	43.0	529	55.3	16	1.7
First year secondary	46	15	32.6	31	67.4	-	-
Last year secondary	736	273	37.1	451	61.3	12	1.6
TOTAL	3906	1725	44.2	2106	53.9	75	1.9

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 the previous year and who are seen again are classifled 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 twice in each year.

Other Examinations.

In addition to routine, special, and follow-up examinations of children at school medical inspections a total of 368 children were examined at home or at school for various reasons. These include non-attendance at school, fitness to attend school camps, and also those examined with a view to providing special educational treatment.

Defects Found at Medical Inspections.

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, whether or not this treatment was begun before the date of the inspection.

	Number of Defects.					
	Periodic I	nspections	Special I	nspections		
Defect or Disease.	Requiring Treatment	Requiring Observa- tion but not treatment	Requiring Treatment			
Skin	9	27	-	14		
Eyes: (a) Vision (b) Squint (c) Other	14	448 67 16	37 4 1	542 28 9		
Ears: (a) Hearing	3 5	20 21 11	2 1 4	20 12 21		
Nose or Throat	50	316	22	303		
Speech	30	36	32	38		
Cervical Glands	. 6	132	4	93		
Heart and Circulation	. 9	23	-	19		
Lungs	. 23	94	4	63		
Developmental (a) Hernia (b) Other	1	5 19	1 3	7 8		
Orthopaedic (a) Posture (b) Flat Foot (c) Other	40	25 47 96	2 12 14	11 44 113		
Nervous System (a) Epilepsy (b) Other	10	4 22	3 15	3 25		
Psychological (a) Development (b) Stability		111 11	3 2	29 4		
Other	. 24	36	3	35		
TOTAL	. 401	1587	169	1441		

Uncleanliness.

Methods of dealing with head infestation have continued as described in previous reports. Routine inspections are carried out at all schools as far as possible at least once every term. Parents of children found to be infested with vermin or nits are sent a communication from the Divisional Health Office and where possible visited by the School Nurse. The more heavily infested cases are excluded from school for a few days and if no improvement has been effected by the parents a Cleansing Notice is issued under Section 54 (2) of the Education Act, 1944. The Notice informs the parents that the child must be cleansed to the satisfaction of an Authorised Officer of the Authority within 48 hours and failing that a Cleansing Order may be issued authorising the cleansing of the child by an officer appointed by the Education Authority.

In the Division, excluding Saddleworth, the total number of inspections made was 31,425 and 625 instances of infestation were found as compared with 31,175 and 631 respectively in 1952. There were 307 individual children (3.2% of the school population) found to be infested on at least one occasion, a reduction of 78 as compared with the previous year.

In the Saddleworth Urban District 46 individual children were found to be infected on at least one occasion (2.66% of the school population.

The problem of head infestation still remains a matter of serious concern but it is pleasing to report that the number of individual children found to be infested has shown a continuing improvement, particularly when it is remembered that a much higher standard is now expected and that all infestations, however slight, are recorded. This improvement is no doubt due to the more constant supervision given by the School Nurses.

	Total number of warning letters sent		258
	Total number of exclusive notices served		40
	Total number of home visits paid		237
	Total number of individual children found to b	e	
	verminous		307
	Total number of Cleansing Notices issued		9
Total	number of Cleansing Orders issued		6

(As all the figures in respect of the Saddleworth Urban District are not available none have been included).

When a child who has been cleansed by an officer of the Education Authority as a result of a Cleansing Order is found at a subsequent inspection to be re-infested the Authority may take proceedings against the parents under Section 54 (3) of the Education Act for allowing re-infestation to take place. There were no prosecutions during the year.

Arrangements for 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 16 Infant Welfare Clinics in the area. During the year a total of 970 attendances were made by school children at such clinics.

Special Clinics.

Ophthalmic Clinics.

The arrangements detailed in my report for the year 1950 have continued, Dr. J. V. Kirkwood devoting two sessions per week to clinics in this Division. Additional sessions are arranged when necessary.

During the year 82 special clinic sessions were arranged and these were attended by 643 children who made 781 attendances. Spectacles were prescribed for 195 children, 262 were found not to require any change, and 186 did not require spectacles. The number of children who attended for re-checking of glasses newly obtained was 138.

Cases requiring orthoptic treatment may obtain this either through the hospital service or, if in the Saddleworth Area, they may attend the Orthoptic Clinic, Scottfield, Oldham, which is provided by the Oldham Education Committee. A charge of 5/- per attendance is paid by the West Riding Education Committee.

Ear, Nose, and Throat Clinics.

The special Ear, Nose, and Throat Clinic for West Riding children conducted by Mr. W. O. Lodge, M.D., F.R.C.S., has been continued at the Huddersfield Royal Infirmary. During the year 6 sessions were held and 104 individual children were seen, 31 being referred for operative treatment.

24a

Children from the Saddleworth area are referred to the out-patient department at the Boundary Park General Hospital. Of the 31 cases referred 17 were recommended operative treatment.

Orthopædic Clinics.

The special monthly session for West Riding children has continued at the Huddersfield Royal Infirmary. At the 11 sessions held during the year 200 individual children made a total of 228 attendances. In addition 4 children from the Saddleworth area were referred to the Gainsborough Avenue Clinic, Oldham.

The conditions for which they were referred were as follows:-

Flat Foot					 	46
Claw Foot				1	 	3
Knock Knee	8				 	53
Genu Varum						2
Other Deform	nities of	Toes			 	19
Fractures					 	12
Postural Def	formities				 	11
Other Defor	mities				 	11
Congenital C	ondition	S			 	12
Acute Polion					 	7
Perthes Dise					 	4
Tubercular C		ıs	500		 	2
Other Condi			200		 	22
		0.000000	77.5.5	0.00	7000	
						204

Child Guidance Treatment.

Dr. M. M. Mac Taggart, the County Psychologist, has continued to hold clinics at Wakefield, Shipley, and Mirfield, and 31 children have received treatment. In addition, regular visits have been made by her to the Royd Edge Special School, Meltham.

Ultra-Violet Ray Treatment.

Facilities are now available for treatment by Ultra-Violet Radiation at Golcar, Holmfirth, Denby Dale and Uppermill. Cases for treatment are referred by School and Infant Welfare Medical Officers and by General Practitioners. During the year 119 children received courses of treatment.

Speech Therapy.

Sessions for Speech Therapy have continued throughout the year, these being held at the Divisional Education Office, Huddersfield, the unused Dental Clinic at Honley, the Divisional Health Office, Golcar, the Youth Employment Offices, Uppermill, Scholes County School, Nields County School and Kirkburton C. of E. School.

During the year 206 sessions were held at the various centres.

No. of new cases admitted for trea	tmon	t during	v the	Stammers	Speech Defects
year	···	e during	, the	11	54
No. of cases already attending fo	r trea	tment i	from		
previous year				35	58
Total No. of cases treated				46	112
No. of cases discharged during y Speech normal	ear:-	-		9	34
Unsuitable for treatment				1	5
Left school				2	4
By reason of non-attenda	ince			_	-
No. of cases awaiting treatment a	t the	end of	year	4	12
No. of visits made to schools				2	
No, of home visits			0.0	3	

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 uncontreatment during the year.		
				By the Authority	Otherwise	
Ringworm:	(i)	Scalp	 	 _	_	
	(ii)	Body	 	 _	_	
Scabies			 	 2	_	
Impetigo			 	 17	4	
Other Skin	Dise	ases	 ***	 18	10	
Total			 	 37	14	

2. Eye Diseases, Defective Vision, and Squint.

	Number of case	s dealt with.
	By the Authority	Otherwise
External and Other, excluding Errors of Refraction and Squint Errors of Refraction, including Squint	_	29 683
Total	_	712
Number of Pupils for whom Spectacles	-	
were: (a) Prescribed	-	307
(b) Obtained	_	302

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 Ton-	-	2	
sillitis (c) For other Nose and Throat con-	_	188	
ditions	_	10	
Received other forms of treatment	49	10	
Total	49	210	

4. Orthopædic and Postural Defects.

(a) Number treated as in-patients in Hospitals	3	
	By the Authority	Otherwise
(b) Number treated otherwise, e.g. in Clinics or Out-Patient Departments	_	13

5. Child Guidance Treatment.

	Number of cas	ses treated.
	In the Authority's Child Guidance Clinics	Elsewhere
Number of Pupils treated at Child Guidance Clinics	31	_

6. Speech Therapy.

	Number of cases treated.		
	By the Authority	Otherwise	
Number of Pupils treated by Speech Therapist	158	2	

7. Other Treatment Given.

	Number of cases treated.		
	By the Authority	Otherwise	
(a) Miscellaneous Minor Ailments	 295	161	
(b) Ultra Violet Light	 119	_	
Total	 414	161	

Hospital Schools.

Children requiring prolonged hospital treatment are now often admitted to special "long-stay" hospitals, many of which have educational facilities which are recognised by the Ministry of Education. They are known as Hospital Schools.

The number of children away at these schools, together with the details of admissions and discharges during the year, is as follows:—

Name of Hospital School	No. of children from this Division	Reason	Admitted during 1953	Discharged during 1953
Leasowe Children's Hospital School, Wallasey	1 (G.L.)	Physically Handicapped	-	_
Pinderfields Hospital School, Wakefield	1 (L.H.)	Physically Handicapped	January	-
Fielden Long- stay Hospital, Todmorden	(A.P.) 3 (P.M.) (P.C.)	Physically Handicapped	1953 May	May March August
Heritage Craft School, Chailey	1 (C.P.)	Physically Handicapped	_	_
Biddulph Orthopaedic Hospital, Biddulph, Stoke-on- Trent	1 (E.S.)	Physically Handicapped	February	December
Adela Shaw Hospital, Kirbymoor- side	1 (M.P.)	Physically Handicapped	December	

Convalescent Home Treatment.

Arrangements are made for selected school children to be sent to Convalescent Homes at the expense of the Education Committee. The children selected are usually suffering from general debility and the need for convalescent treatment is approved by the School Medical Officer before financial responsibility is accepted. These do not include cases admitted to Convalescent Homes through the Hospital Service.

During the year 9 children were sent to the following convalescent homes:—

Craig Convalescent Home, Morecambe	3
Toxal Edge Convalescent Home, Whaley Bridge, Near Manchest	er 2
West Kirby Convalescent Home, near Liverpool	1
St. Joseph's Convalescent Home, Freshfield, near Liverpool	1
Prestatyn Convalescent Home, Prestatyn	1
Hillaway Children's Convalescent Home, Stoke-in-Teignhead .	1

Infectious Diseases.

The following table shows the number of cases of infectious diseases occurring in school children.

SCHOOL	Measles	Whooping Cough	Scarlet Fever	Polio- myelitis	Dysentery	Erysipelas	Meningitis	Pneumonia
Clough Head County Golcar C. of E	3	-	4	-!	- 1	-	_	_
Knowl Bank County	33	2	13		_		_	_
Knowl Bank County Infants	12	1	_	_	-1	- 1	- 1	_
Linthwaite C. of E	24	- 1	2	- i	- 1	- 1	- 1	_
Linthwaite County	3	1	1	- 1		- 1	- 1	_
Linthwaite County Infants	31		4	-!	-	-	1	
Marsden County Infants Marsden C. of E	88	1	1	-			=	
Marsden C. of E Marsden Secondary Modern	1		1		_	_	_	
Nields County	3	1	_	- i	- i	- 1	- 1	_
Scammonden C. of E	2	- i	-	- 1	- 1	-	-	
Scapegoat Hill County	8	-	-	-	-	-	-	_
Slaithwaite C. of E	-	-	3	-		_	=	
Slaithwaite C. of E. Infants West Slaithwaite C. of E	1 1	1	3	_	_		_	
Wellhouse County	2	- 1	1	_	- 1	_	_ i	_
Birdsedge County	2	- 1	-	- 1	- 1	- 1		-
Clayton West County	1 1	1	4	-	-	-	-	1
Cumberworth C. of E	4	-	1	-	-	-	-	
Denby Dale County	2	10	3 3		_			
Emley County Scissett C. of E	4	1	_	_	_	_	_	
Scissett Secondary Modern	-	- 1	4	- 1	- 1	-	-	
Skelmanthorpe County	3	-	5	- 1	- 1	-	-	_
Brockholes C. of E	2	-	-	-	-	-	-	-
Hade Edge County	12	1	-	-	_		_	
Hepworth County Holmbridge C, of E	8			= 1	_			1
Holme County	6		_	_	_	_	_	_
Holmfirth County	15	- 1	-	- 1	-	-	-	-
Holmfirth Secondary Modern	3	-	2	-	-	-	-	-
Honley C, of E,	1	1	1	-	-	-	-	
Honley C. of E. Infants Netherthong County	66	=	_				1	
New Mill C. of E	2		_	_	_		_	_
New Mill County Infants	1	-	_	- 1	-	-		-
Scholes County	27	1	1	- 1	-	-	-	-
Upperthong County			-	_	-	-	-	1
Wooldale County Farnley Tyas C. of E	11	3	_			_		-
Flockton C, of E	2	_	1	_			_	
Kirkburton C. of E	1	-	i	-	-	_	1	1
Kirburton Secondary Mod.	2	-	-	_	-	-	-	! -
Kirkheaton C. of E		_	_	_	4	-	_	-
Lepton C. of E Lepton County	13	_	_	_	4	_		-
Shelley County	1 -	1	14			_		-
Shepley County	1	-	3	_		-	-	i -
Helme C. of E	1	-	-	-	-	-	-	2
Meltham C. of E	3	14	1	-	_	-	-	-
Meltham C. of E. Infants Meltham Mills C. of E	23	14					_	1
Meltham Mills C. of E Delph County Primary	9	_	5	_	_			_
Denshaw C. of E	1	-	_	_	_	_	_	-
Diggle County	1	-	_	-	-	1	-	-
Dobcross C. of E	5	-	1	_	-	-	-	-
Doctor Lane C. of E	10	=	1	-	_		_	=
Friezland County Greenfield County	26	3	3		_			
Greenfield County Greenfield C. of E	8	-	_	-	_	_	_	_
Lydgate C. of E	1	-	-	_	-	-	_	-
Saddleworth Parochial	2		3	-	-	-	-	-
Springhead County	1	-	2	_	1	_	_	-
Springhead County Infants	6	_	4	1			_	=
Uppermill Secondary Modern	543		106	1	5	1	3	7

In addition the following cases of infectious diseases were notified by various head teachers:—

Impetigo	 3	Chicken Pox	221
Conjunctivitis	 6	Mumps	171
Jaundice	 12	German Measles	

Diphtheria Immunisation.

The previous arrangements for diphtheria immunisation have continued, the injections being given by private practitioners and at the Welfare Centres, and special immunisation sessions have been held at various schools.

The majority of children are now immunised before entering school. This should always be the case and the importance of immunisation in infancy cannot be over-emphasised. Children protected in infancy should have booster injections when they commence school and five years later.

The following figures indicate the number of children who received primary immunisation after entering school and also the number receiving reinforcement injections:—

		Primary Immunisation	Reinforcement Injections
Colne Valley	 	 55	732
Denby Dale	 	 	21
Holmfirth	 	 110	683
Kirkburton	 	 126	322
Meltham	 	 _	92
Saddleworth	 	 13	56
		304	1906

Deaths in School Children

During the year 5 deaths were registered amongst school children (3 boys and 2 girls) aged 5 to 10 years. The following are brief details:—

Sex and Age	Area	Cause of Death
1. Girl aged 9.	Holmfirth	(a) Cardiac Heart Failure.(b) Mesenteric Thrombosis.(c) Appendicectomy.
2. Boy aged 5.	Holmfirth	Crush injuries on the left side of the face and skull sustained when trapped by the moving end of an electrically operated gate at Rock Mills, Brockholes.
3. Boy aged 10.	Meltham	Respiratory and Heart Failure result- ing from Haemorrhage around the Brain Stem as a result of being acci- dentally struck by a golf club on the right lower jaw.
4. Girl aged 6.	Colne Valley	I(a) Tuberculous Meningitis.(b) Bilateral Basal Pneumonia.
5. Boy aged 10.	Saddleworth	I(a) Left Ventricular failure.(b) Hypertension.(c) Chronic Nephritis.

School Meals Service.

School meals are available at all schools in the Division. In some instances they are cooked in the individual school premises and in others are brought ready cooked from other school canteens. The meals are well cooked and varied. The number of pupils who take school meals varies much from school to school. In some almost 100% stay for the school dinner whilst at others less than half have the meal. Each school child is entitled to $\frac{1}{3}$ of a pint of milk daily free of charge. Here again many children, particularly the older ones, refuse to accept what is provided for their own benefit.

Excluding Saddleworth there were at the end of the year 231 children (2.4% of the school population) receiving meals at the expense of the Education Committee as compared with 152 (1.6%) in 1952. The number of children taking school meals was 5359 (55% of the school population) compared with 5579 (59%) in 1952. A total of 6717 (69.1%) were having school milk compared with 6296 (66.5%) in 1952.

At the end of the year out of 1,728 children on the school rolls in the Saddleworth Urban District 965 were taking school meals and 1,090 were having school milk.

In order to supplement the diet of infants Vitamin A and D. capsules are offered in schools to children of 7 years and under, and orange juice is offered to children under 5 years of age.

New entrants to the staffs of school canteens are examined by the Department's medical staff.

When a candidate is being interviewed her medical history is scrutinised and it is only when she is found to have a history of any of the following complaints that a full medical examination is carried out:—

Enteric, Typhoid, or Paratyphoid Fever.

Dysentery, Recurrent Diarrhoea, or any other ailment of the bowels.

Pulmonary Tuberculosis.

Recurrent boils or septic fingers,

Discharging ears.

Other septic infections.

Eczema, Dermatitis, or other skin diseases.

Persistent cough or spitting of blood.

Experience has shown that a comprehensive medical examination is not practicable and the inconvenience caused may have deterred suitable applicants. This abbreviated procedure is found to fulfil adequately all requirements.

During the year 77 new entrants were examined and in each case a certificate to the effect that the examinee was fit to work in the School Meals Service was forwarded to the Divisional Education Officer.

Youth Employment Service

There is close co-operation between the School Health and Youth Employment Services. The medical records of all school leavers are considered by the School Medical Officer before the pupils are interviewed by the Youth Employment Officer and types of work for which any child is, in the the opinion of the Medical Officer, unsuited, are pointed out.

During the year recommendations were made that 48 children should not be employed in the following categories of work.

1.	Heavy manual work					 8
2.	Work in dusty atmosphere					 5
3.	Normally acute vision					 4
	Normal colour vision					 13
	Normal hearing					2
6.	Work near moving machinery	or me	oving ve	hicles	222	 15
	Prolonged standing, much wa					
	place to place					1

The more seriously handicapped children are recommended to the Youth Employment Officer for inclusion in the Disabled Persons Register.

It is disappointing to report that in spite of the recommendations of the Youth Employment Officer and the School Medical Officer pupils frequently take up work in unsuitable occupations.

In connection with the Employment of Children Bye-Laws 69 children were examined as regards their suitability for employment outside school hours. Certificates were granted for employment as follows:—

Newspaper Delivery	 	 63
Dancing and Entertainment	 	 3
Shop Assistants	 	 3

Handicapped Pupils.

Early ascertainment of Handicapped Pupils is one of the most important functions of the School Health Service.

A register is maintained of all pupils who owing to some mental or physical disability require special educational treatment.

During the year 84 pupils have been examined with reference to their need of special educational treatment, and recommendations for the provision of same were made in 77 cases. During the year 34 children were removed from the register as no longer requiring special educational treatment, or because they were over school age.

At the end of the year 261 pupils were included in the register, the sub-division into the various classes being as follows:—

Moladin	etod					 9
Maladju	stea			***	***	C
Deaf					* * *	 6
Delicate					***	 17
Speech						 63
Partially		ted				 4
Blind						 1
Physicall	lv Ha	andicar	pped			 17
Educatio						 144
						261

The increased provision by the Education Committee of residential school accommodation for Handicapped Pupils has enabled an increasing number of children to receive the special educational treatment they require. The facilities available, however, are still inadequate, particularly for Educationally Sub-Normal pupils, 27 of whom are waiting for admission in special schools, and 91 for special treatment in ordinary schools at the end of the year. Several children are also awaiting placement from the Saddleworth area but it is hoped that it will be possible to arrange for suitable children to be admitted to the Special Day School for Educationally Sub-Normal pupils, which is provided by the Oldham Education Authority.

At the beginning of the year 33 children were in attendance at Special Schools and 18 children (4 educationally sub-normal, 9 delicate, 3 physically handicapped, 1 blind, 1 deaf) were admitted during the year. There were 15 discharges (9 delicate, 2 physically handicapped, 1 deaf, 2 educationally sub-normal, 1 blind) leaving a total of 36 children in attendance at Special Schools at the end of the year, the details being as follows:—

Category	No. away	Location of Special School
Blind	1	Yorkshire School for the Blind, York.
Partially Sighted	4	 3 at School for Partially Sighted Children, Fulwood, Preston. 1 at Exhall Grange School, near Coventry.
Deaf	3	1 at Lawns House School, Leeds. 2 at Royal Residential School for the Deaf, Manchester.
Delicate	7	 at Oak Bank Open-air School, Sevenoaks. Kent. at Netherside Hall School, Grassington. at Ingleborough Hall, Clapham. at Bradstock Lockett, Southport.
Educationally Sub-Normal	13	 4 at Royd Edge, Meltham. 4 at Baliol School, Sedburgh. 3 at Springfield Special School, Horsforth. 1 at Rossington Hall Special School, near Doncaster.
Physically Handicapped	8	 at Chaucer Street Special School, Oldham. at Leasowe Children's Hospital School. at Heritage Craft School, Chailey, Sussex. at Hesley Hall School, Tickhill, near Doncaster.
		 at Derwen Cripples Training College, Oswestry. at Welburn Hall School, Kirbymoorside. at National Children's Home, Chipping Norton, Oxfordshire. at Pinderfields Hospital School, Wakefield. at White Ness Manor Special School, near Broadstairs.

At the end of the year 43 pupils in the following groups were awaiting placement in Special Schools or Hostels:—

							43
Physically Ha	ndicapp	oed			 	5	
Educationally			* * *		 	27	
Delicate				***	 	5	
Maladjusted					 	6	

Home Tuition

Under Section 56 of the Education Act, 1944, education otherwise than at school may be provided for children who by reason of extraordinary circumstances are unable to attend a suitable school for the purpose of receiving primary or secondary education. This education is provided for the following classes of handicapped children.

- 1 Children in hospitals where there are not ordinarily enough children to warrant the establishment of a hospital special school.
- 2 Children who are educable but whose condition is such that it is inadvisable to send them to school.
- 3 Children awaiting a vacancy at a special school,

In order to advise whether home tuition is required such cases are examined by the School Medical Officer or the Educational Psychologist. At the end of the year 4 children were receiving home tuition.

Reports to the Local Health Authority: Education Act, 1944, Section 57.

During the year 6 children were reported to the Local Health Authority as "ineducable" (one being aged under 5) under Section 57(3). In addition 14 children were notified to the Local Health Authority under Section 57(5) as requiring care and supervision after leaving school.

Holiday Camps for Diabetic Children.

During the year the Education Authority accepted financial responsibility for providing 2 diabetic children with two weeks' holiday at the Bewerley Park Camp, Pateley Bridge. The arrangements were made by the Diabetic Association with the co-operation of the Almoner at the Huddersfield Royal Infirmary.

Medical Examination of Teachers and Entrants for Courses of Training.

Since April 1st, 1952, it has been the duty of the School Medical Officer of the area in which they reside to examine candidates applying for entry to training colleges, etc., for the purpose of satisfying the college authorities of their fitness to follow a course of teacher training.

During the year 44 candidates (5 males, 39 females) were examined and a report on Form 4 R.T.C. completed and forwarded to the appropriate college authority. In the majority of cases an X-ray examination of the chest was undertaken through the Miniature Mass Radiography Service.

Entrants to the Teaching Profession completing an approved course of training are examined by the college medical officer but in other cases the examination is now undertaken by the School Medical Officer of the employing authority.

During the year 13 reports on Form 28 R.Q. were forwarded to the Ministry of Education.

Liaison with Hospitals and General Practitioners.

It is pleasing to report that much more information is now being obtained from the hospital service regarding school children who receive treatment in hospital. Recommendations for special educational treatment for handicapped children are also made by the Hospital Consultants.

Under an agreement with 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.

Sanitary Conditions of School Premises.

On the whole the schools in the Division are kept in a reasonable state of repair but owing to their age many of them are lacking in the provision of adequate washing facilities and satisfactory sanitary conveniences. It is intended that these deficiencies shall be remedied as early as practicable.

HEALTH VISITING

The Health Visiting staff has remained fairly constant throughout the year. At the commencement of the year a Superintendent Health Visitor, 10 Health Visitors (one part-time) and, two assistant Health Visitors were engaged in the Division. The assistants only carried out very occasional duties. Three Health Visitors commenced duties in July after completing their training in Leeds but one was transferred to another Division in August for personal reasons; another Health Visitor transferred to another Division following her marriage.

Urban District					Authorised Establishment	Staff at 31-12-53
Superintendent	Health	Visitor			1	1
Colne Valley					4	4
Denby Dale	***				2	1
Holmfirth					4	3
Kirkburton		100		***	3	3*
Meltham					1	1
Saddleworth			1223		4	3
Assistant Healt	h Visite	ors			_	2†
Tuberculosis Vi	sitors				1	
					20	18

^{*} Includes 1 part-time.

[†] Part-time.

Although the establishment provides for one full-time tuberculosis visitor, this work is satisfactorily undertaken by the general health visitors. The number of home visits has shown a general increase over the previous year, the actual figure being much larger due to the inclusion of the Saddleworth Division.

Pre-school examinations of the 3 year old toddlers are most popular. A number of defects were found and placed under treatment.

It has not been possible to increase the number of teaching classes in schools but the health visitors have given occasional talks to the senior groups and one health visitor visits a Secondary Modern school regularly to teach mothercraft. In addition a number of lectures have been given to youth organisations, women's meetings, parent-teacher groups, etc.

.Student health visitors from Leeds and Manchester have worked in the Division and all have expressed their appreciation of the intensive training they have received.

In recent years the work of the health visitor, or Public Health Nurse, has widened considerably and is more concerned now with the health and physical and mental well-being of the family as a whole, rather than concentrating on nursing and expectant mothers and children under five only. The health visitors are also the school nurses and it can readily be seen from the following summary of the visits paid during the year how wide her field is.

		ctant hers	Children 1 year		Child Between		Other Cases	Total
District	First Visits	Total Visits	First Visits	Total Visits	1—2	2—5	Total Visits	Visits
Colne Valley	22	47	329	2850	1115	1805	868	7036
Denby Dale Holmfirth	23	27 59	129 290	946 2165	362 1040	579 1309	1166	2511 6035
Kirkburton	41	118	175	1464	1138	1132	793	4861
Meltham	23	31	75	470	167	236	789	1791
addleworth	40	116	150	1788	1598	585	2250	6527
Division 20	155	398	1148	9683	5420	5646	6311	28761

Mention should also be made of the excellent contribution given by the health visitors during the busy period in April—May in connection with the smallpox outbreak, when their routine work was interrupted for several weeks to assist wherever required.

The visits shown in the above table include 6,950 of a non-routine nature, an analysis of which is as follows:—

Premature Babies	***	 	 	63
Stillbirths		 	 	10
Infant Deaths		 	 	17
Infectious Diseases		 	 	576

Care and After-Care -

	Tuberc	ulosis	Patients		 	1075	
	Tuberc	ulosis (Contacts		 ***	806	
	Dischar	rged fr	om Ho	spital	 	69	
	Others				 	112	
	Post N	latal			 ***	68	
							2130
Home	Help S	Service			 		1535
Aged					 		1387
Other	Visits				 		683
Specia	d Visits	(not	homes)		 		549
							6950

In addition 1,481 home visits were paid to school children for purposes of follow-up after routine inspections, hygiene, neglect, etc.

HOME NURSING

At the commencement of the year 11 home nurses, 2 nurse/midwives, 1 relief Home Nurse, and 2 relief nurse-midwives were engaged in the Division. During the year 3 home nurses resigned their appointments, and 3 midwives were re-appointed nurse-midwives.

With the amalgamation of the Saddleworth Urban District on the 1st October, 1953, 3 additional Home Nurses were taken on to the Divisional staff.

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 as follows:—

Urban District	Authorised Establishment	Staff at 31s	st Dec., 1953
		Home Nurses	Nurse- Midwives
Colne Valley	3	3	_
Denby Dale	2	1	2
Holmfirth	2	3	_
Kirkburton	3	1	2
Meltham	1	_	1
Saddleworth	3	3	_
Relief	1	1	2
Division 20	15	12	7

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.

	Но	me Nursii	ng	Midy	vifery
	Trans- fers	New Patients	Visits Paid	Confine- ments	Visits Paid
Colne Valley Urban District Golcar Marsden and Slaithwaite Linthwaite	28 42 44	221 303 211	3,224 4,228 3,820	3	109
	114	735	11,272	3	109
DENBY DALE URBAN DISTRICT Denby, Cumberworth and Clayton West Emley, Skelmanthorpe and Scissett	24 32	90 260	1,664 5,112	26 29	777 969
	56	350	6,776	55	1,746
HOLMFIRTH URBAN DISTRICT Holmfirth New Mill Honley	37 23 -21	127 78 120	2,715 2,594 2,038 7,347	=	Ξ
KIRKBURTON URBAN DISTRICT Kirkheaton, Lepton & Flockton Kirkburton Shelley and Shepley	35 13 19	262 120 69 451	3,516 2,545 2,645 8,706	12 15 27	430 464 894
Meltham Urban District	25	100	2,625	30	879
SADDLEWORTH URBAN DISTRICT Delph, Dobcross, Denshaw Springhead, Scouthead, Lydgate, Austerlands, Grotten Greenfield, Diggle, Grasscroft, Uppermill	16 15 26	63 74 109	2,052 2,606 2,679 7,337		
		2,207	44,063		3,628

Cases Treated.

As in previous years, the types and duration of cases treated during the year have been analysed. 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 and streptomycin.

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 patients suffering mainly from minor

injuries have made 334 attendances. Cases Discharged.

Of the 1766 cases the nurses ceased to attend during the year, 1,269 were discharged as recovered, 189 were transferred to hospital, and 308 died.

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

Patients under	Freatmen	t		Patients.	
rationts under	reatmen		Recovered	Transferred	Died
Less than 1 week	2116	****	 459	65	101
1- 2 weeks			 515	29	70
2- 4 weeks			 113	25	33
4-13 weeks			 116	30	51
3- 6 months		****	 38	17	23
Over 6 months	****		 28	23	30
TOT	AL		 1 269	189	308

Number of	Vicite Do	1.1			1	Γο Patients Who):
Number of	VISITS I'd	и			Recovered	Transferred	Died
3 or less					187	34	45
4-7					469	42	63
8-15				****	448	32	64
16-30					88	32	62
31-50			1111	74.00	50	17	29
51-75					16	19	16
76-100					7	3	8
Over 100	****				4	10	21
	TOTAL				1,269	189	308

Types of Cases Attended.

The new cases attended and the total visits paid have, as last year, been analysed.

Type of Case		Transferred	New Cases	Visits Paid
Infectious		_	1	15
Pulmonary Tuberculosis		4	23	927
Non-Pulmonary Tuberculosis		3	5	230
I du an an		_	27	147
Pneumonia		4	72	934
Bronchitis		10	193	2535
OU D : I D:		4	27	614
Cancer of Uterus		1	4	206
Cancer of Stomach and Intestir	ies	1	13	412
Cancer of Breast		2	14	969
Cancer of Other Sites		7	50	1,264
Di i i		17	18	1,710
Cerebral Haemorrhage		21	114	3,693
Diseases of Heart and Circulati	on	39	182	4,429
Post-Operative Dressings		20	198	2,683
Injuries		19	96	1,330
73		3	46	647
Septic Conditions (Boils, Absce		5.00	23330	
	****	14	291	3,769
*** * ** *		73	32	878
Other Gynaecological Cases			11	127
Male Genito-urinary Conditions		3	10	568
Rheumatic and Arthritic Condi	tions	17	44	1,409
TO THE CONTROL		12	81	838
11 1 10		31	27	1,444
Impetigo		_	6	147
CAL CLI TY		3	18	200
Chronic Diseases of Nervous Sy:		8	18	1599
37		2	16	145
Annah Aldenie al Conditions		1	18	119
P		8	111	473
Theresis		6	42	722
Y / (1) Yel 1			10	112
Circumsalalan			34	193
Senility		34	129	3,732
Other Conditions		33	226	4,843
TOTAL		400	2,207	44,063

It will be seen that Septic Conditions have again provided the largest number of new cases (291). Post-Operation Dressings (198) were the next most frequent, followed by Bronchitis (193), Diseases of the Heart and Circulatory System (182), Senility (129), and Cerebral Hæmorrhage (114).

New cases of Cancer, all sites, numbered 81, and those of Pneumonia 72.

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

Diseases of Heart and C	ircula	tion	 	4,429	visits
Septic Conditions			 	3,769	,,
Senility			 	3,732	,,,
Cerebral Hæmorrhage			 	3,693	,,
Cancer (all sites)			 	2,851	
Post-Operative Dressings			 	2,683	
Bronchitis			 	2.535	

Travelling Facilities for Home Nurses and Midwives.

No serious difficulties have been experienced during the year with regard to transport and only one midwife was dependent on public transport as a means of conveyance at the end of the year, when the position was as follows:—

		Using County Cars		Dependent on Public Transport
Home Nurses	 	- 8	4	_
Nurse/Midwives	 	2	5	_
Midwives	 	-	5	1
		10	14	1

No additional County cars were allotted for use in the Division but 3 of the older cars were replaced.

THE HOME HELP SERVICE

The Home Help Service is provided under the National Health Service Act, 1946. Section 29 of the Act stipulates the class of case for which provision of a home help can be made. These are as follows:—

(a) Ill.

(e) Aged.

(b) Lying-in.(c) An Expectant Mother.

 (f) A Child not over compulsory school age.

(d) Mentally Defective.

Before a home help can be provided a form of application must be signed by the head of the household. If there are any adults in the house other than the householder and wife, and they are likely to get some benefit from the services of the home help, they also are expected to sign an application form. A medical certificate stating the condition from which the patient is suffering and that a home help is required must be submitted with all applications under Class (a) Ill. Usually a home help can be provided only when the ill person is in the house. If the ill person is removed to hospital then a home help can be provided only if there is need for a home help under one of the other classes, e.g., children not over school age in the house.

In the case of the aged there is no need for the person to be ill in order to qualify for the provision of a home help. The extent of the need depends on the physical capacity of the aged person and the other persons in the household. A home help assisting an aged person can undertake domestic work or household management only and must not be used as a sitter-in. A home help cannot be provided merely because a householder offers to pay full cost; each case is treated strictly on its merits.

Briefly, a home help may be allocated to a household where there is sickness sufficient to require medical or nursing care; she cannot attend where a sick person is removed to hospital unless there is a child under school leaving age at home; she can attend to the domestic duties of the aged, mentally defective, and expectant of child, without stipulation as to sickness. The aged should generally be over 60 years of age, the mentally defective such as have been reported to the Health Committee, and those expectant of child would normally have some disability such as fatigue or varicose veins necessitating rest. She should as far as reasonably possible give her time to domestic duties or to family or household management (as appropriate to the case) and not undertake the duties of a "sitter-in."

Every applicant for a home help must sign an undertaking either to pay the full cost of the home help supplied or to give a statement of his income and capital and agree to pay the assessed charge according to the County Council scale. In assessing the charge the income of all persons assisted is taken into account. The actual assessment is carried out in the Divisional Welfare Office.

The authorised establishment of home helps for this Division is 27 and in terms of full-time home helps the number employed throughout the year has averaged 24.88.

Although an increasing number of home helps have been recruited there has been a marked increase in the demands on the service with the result that the time which could be devoted to any particular case has sometimes been less than was actually required. Every effort has been made, however, to allocate the services available where they were most urgently needed.

During the year 388 cases were provided with home helps as compared with 296 in the previous year. The duration of assistance provides was as follows:—

Under	1-3	3—6	6—9	Over	
Month	Months	Months	Months	9 Months	Total

Details of the assistance given to the 388 patients in the various categories is shown in the following table:—

	Coln	Colne Valley	Denl	Denby Dale	Hol	Holmfirth	Kirl	Kirkburton	Me	Meltham	Sadd	Saddleworth		Total
Category	No. of Pat- ients	Av. No. of hours per Patient	No. of Pat- ients	Av. No. of hours per Patient	No. of Pat- ients	Av. No. of hours per Patient	No. of Pat- ients	Av. No. of hours per Patient	No. of Pat- ients	Av. No. of hours per Patient	No. of Pat- ients	No. of Av. No. Pat- of hours ients per Patient	No. of Pat- ients	Av. No. of hours per Patient
Maternity (in- cluding Expect- ant Mothers	23	76.91	1	73.36	-	63.64	∞	89.53	9	72.67	81	62.94	77	71.47
Tuberculosis	1	20.00	I		¢1	365.50	1		1		1		89	250.33
Chronic Sick (including aged and infirm)	99	147.84	24	126.17	. 15	181.33	55	223.92	58	208.60	99	204.09	250	181.85
Others	6	97.44	61	41.50	15	132.92	10	72.20	4	53.50	21	82,05	28	89.89
Total	68	122.97	37	105.89	76	161.50	43	162.28	388	170.82	105	155,49	388	146.73

National Assistance Acts, 1948-1951.

No action was taken during the year under Section 47 of the National Assistance Act, 1948, whereby a local authority may take action to secure removal to suitable premises of persons in need of care and attention.

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.

The service has worked smoothly throughout the year and complaints have been negligible.

During the year the ambulances from the Huddersfield Depot made 3,922 journeys involving 114,698 miles, and carried 17 022 patients, 2,550 of these being stretcher patients. Included in the 17,022 patients carried were 14,053 hospital out-patients. Particulars of the cases carried are given below:—

Accident		***	 		269
Urgent			 		347
Mental			 		24
Maternity			 		144
Infectious			 	***	21
General			 		2.164
Out-Patient	S		 		14,053
					17,022

In addition to the ambulances stationed at the Huddersfield Depot, an ambulance, the property of the Holmfirth Urban District Council, operated as part of the County Service until November, when, owing to the difficulty of recruiting sufficient men to continue the service, the ambulance was handed over to the County Authorities. Since then all ambulance services in the Holmfirth District have been provided from the Huddersfield Depot.

In the Saddleworth area, the Oldham County Borough Ambulance Service, based at the Central Depot, Council Street, Oldham, provided full ambulance cover for the whole of the Urban District of Saddleworth. All statutory obligations placed on the West Riding County Council by virtue of the National Health Service Act so far as it concerns ambulance work, are carried out by this Service.

For mental cases, County Council ambulances are generally used and the authorised officer comes from Huddersfield with the ambulance he has arranged for the patient's transfer to hospital.

During the year, ambulances of the Oldham Service made 988 journeys involving 11,440 miles and carried 1,368 patients and in addition 1,143 journeys involving 20,944 miles were made by Sitting Case Cars on behalf of 2,390 patients. Of the patients carried 139 were classed as accident cases, 169 emergency cases and 3,450 others.

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. Visits are also made from time to time by the County Psychologist.

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, and in the provision of 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. Training in handicrafts of various sorts is also given to suitable patients.

The work is done mainly by the Mental Health Social Worker and by the Home Teacher.

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.

There is great difficulty in securing institutional accommodation for those patients whose mental, physical, or social conditions make this desirable. As the Local Health Authority no longer provides residential accommodation all that can be done is to make recommendations to the Regional Hospital Board.

During the year 6 children were reported by the Local Education Authority under Section 57 (3) as ineducable and 14 under Section 57 (5) as requiring supervision after leaving school — all were placed under statutory supervision. Three adults were found "subject to be dealt with," 2 of these being admitted to institutions during the year.

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

		Male	Female	Total
Under Guardianship Under Statutory Supervision On Licence from Institutions	***	57	1 46 2	103 2
Under Voluntary Supervision and Observation	24.	5	4	9

Of these patients 18 were in need of institutional care at the end of the year as follows:—

	Male	Female	Total
In urgent need	4	1	5
Not in urgent need	10	3	13
Total	14	4	18

The great need of defectives resident at home is facilities for occupational training either at occupation centres or in small groups or individually at home. The siting of occupation centres for the larger scattered Divisions such as No. 20 is very difficult. To serve the whole of this Division the centre would have to be in Huddersfield, but to gather together all the patients from the outlying areas would require the provision of special transport to an extent impracticable at the present time.

Through the kind co-operation of the Huddersfield and Oldham County Borough Authorities a few vacancies have ben made available for West Riding patients and at the end of the year 4 patients were in attendance at the Scarleigh Occupation Centre, Milnsbridge and 2 at the Oldham Occupation Centre.

The training of smaller groups at the Centres at Linthwaite and Honley has continued under the supervision of Miss E. Ball, the Home Teacher, the number of patients who attended and the number of attendances being made as follows:—

Centre	No. of Sessions	No. of Patients	No. of Attend- ances	Average No. of Attendances per Session
Honley	5	2	5	1.00
Linthwaite	182	18	1111	6.10
Skelmanthorpe	89	11	535	6.01
Uppermill	44	4	103	2.34
Total	320	35	1754	5.48

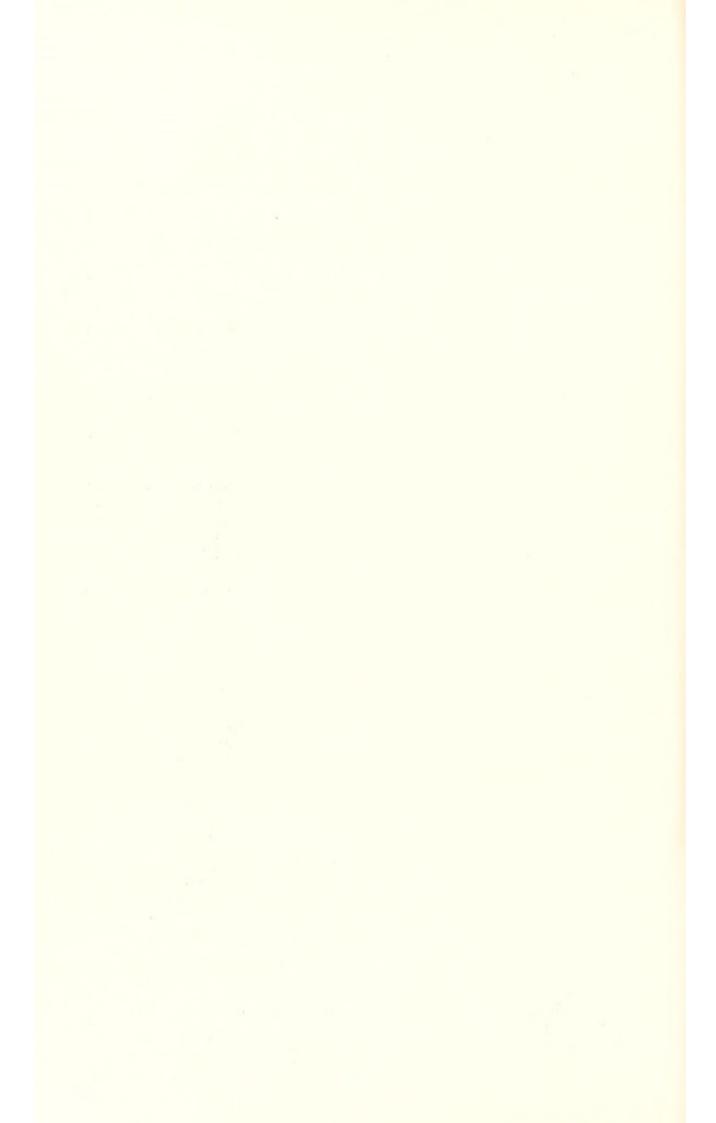
The class at Honley was closed in February owing to lack of attendance.

The social activities during the year have included a combined Coronation party and display of handiwork and a Christmas party. Both were held at the Linthwaite centre and were well attended by patients and their parents from all parts of the Division. The Christmas party was followed by a visit to the pantomime.

Medical Examination for Superannuation Purposes.

New entrants to the County Service are required to undergo a medical examination to see if they are suitable for admission to the Superannuation Scheme, and these examinations have continued to be carried out by the Department's medical staff. During the year 72 such examinations (25 male, 47 female) were carried out.

In addition 2 male members of the County staff resident in this Division, who had been off duty through sickness for a considerable period, were examined to ascertain whether or not they were incapable of discharging with efficiency the duties of their employment by reason of permanent ill-health.



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