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Contributors

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URBAN DISTRICT
OF HOLMFIRTH

ANNUAL REPORT

OF THE

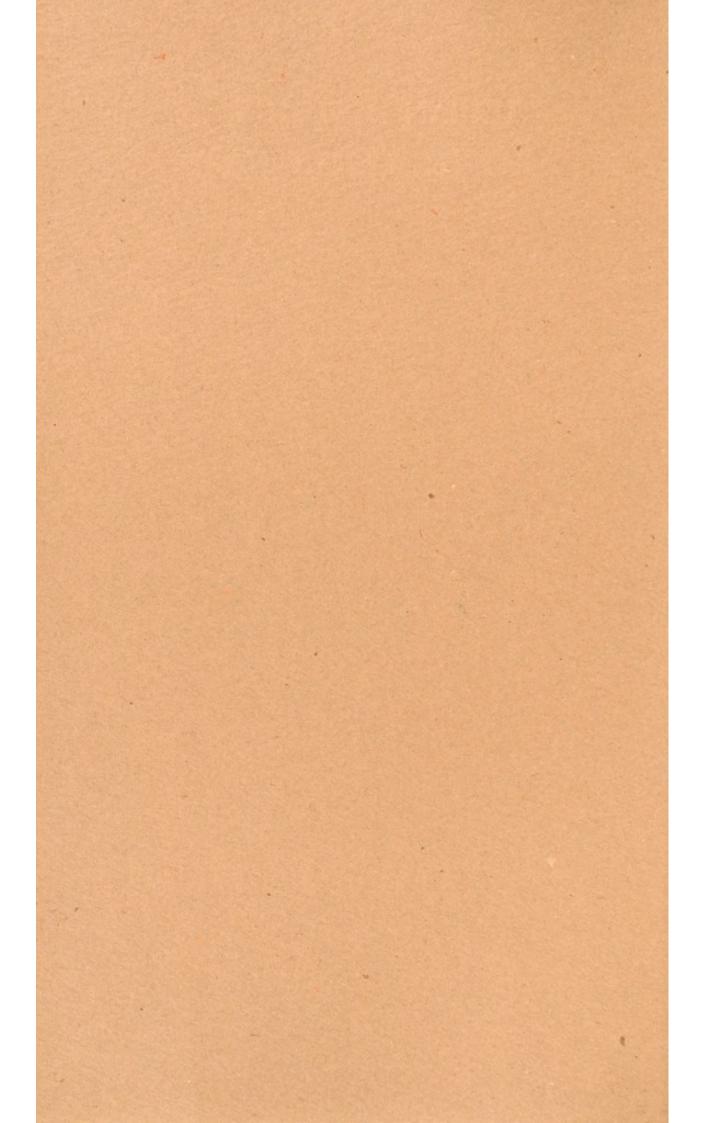
Medical Officer of Health

For the Year 1955

BY

ERIC WARD

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



URBAN DISTRICT OF HOLMFIRTH

ANNUAL REPORT

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MEDICAL OFFICER OF HEALTH

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SLAITHWAITE

A. T. GREEN & CO. (Printers) LTD., CARR LANE
1956

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Holmfirth Urban District

LIST OF COUNCILLORS for the year 1955/56

Chairman:

E. BEEVER, Esq., J.P.

Vice-Chairman:

W. H. MAUDE, Esq.

C. BARBER, Esq. A. HOLMES, Esq. H. BEAUMONT, Esq. G. HOLROYD, Esq. H. BEEVER, Esq. A. HOYLE, Esq. R. A. BERRY Esq. C. HOYLE, Esq. Mrs. E. E. BOOTH P. W. JONES, Esq. J. BRAY, Esq. S. MARRIAGE, Esq. W. BOOTH, Esq. N. MARSH, Esq. A. BROOK, Esq. A. MEWIES, Esq. H. B. J. COLLINS, Esq. *A. MOORE, Esq. W. J. GEDDES, Esq. S. P. OWENS, Esq. A. K. HEYWOOD, Esq. H. QUARMBY, Esq. J. SCOFIELD, Esq. F. HIGGINSON, Esq. E. HINCHLIFFE, Esq. A. TOLSON, Esq. J. HINCHLIFFE, Esq., D.C.M. J. B. TURNER, Esq. W. HIRST, Esq.

All the Members of the Council constitute the Health and Planning Committee

*Chairman of the Health and Planning Committee

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
K. M. C. HAIGH, M.B., Ch.B., D.R.C.O.G., C.P.H.
(Appointed 17-1-55)

Chief Sanitary Inspector and Cleansing Superintendent:

I. HAIGH

Additional Sanitary Inspectors:
W. HARGREAVES
J. T. GREEN
(Appointed 1-9-55)

Divisional Health Office,
Woodville,
Scar Lane,
GOLCAR,
Nr. Huddersfield.
September, 1956.

To the Chairman and Members of the Holmfirth Urban District Council

Mr. Chairman and Gentlemen,

I have the honour to present to you my 9th Annual Report on the health of the Holmfirth Urban District and the work of the Public Health Department during 1955. The Report is in the usual form and is the 18th in the series since the formation of the enlarged Urban District in 1938.

I am again indebted to your Chief Sanitary Inspector for the compilation of Sections III, IV and V which deal with the Sanitary Circumstances of the Area, Housing and the Inspections and Supervision of Food. These Sections form the Chief Sanitary Inspector's Report for the year.

The Registrar-General's estimate of the population of the District at mid-1955 was 18,700 a decrease of 10 on the 1954 figure. The adjusted Birth Rate remains practically stationary at 13.17 per 1000 population whilst the adjusted Death Rate was 1.06 less than in 1954. This rate, however, is 5 per 1000 higher than the average for the West Riding, due mainly to the fact that the deaths of patients in Deanhouse Hospital are included in the Holmfirth statistics no matter where was their normal place of residence.

Much of the year has been occupied with the preparation of the slum clearance programme under which the Council propose to deal with 185 houses within the next 5 years.

As in previous years particulars are given in Section VII of the Report of the Services provided under Part III of the National Health Service Act, 1946 by the West Riding County Council as the Local Health and Education Authority.

In conclusion I again wish to thank the Chairman and Members of the Council for their help and interest and to record my appreciation for the assistance and co-operation received from the Clerk and other Officers of the Council. In particular, my thanks are due to your Chief Sanitary Inspector, Mr. I Haigh and to his assistants, Mr. W. Hargreaves and Mr. T. Green for their loyal services.

I am,

Your obedient servant.

ERIC WARD.

Medical Officer of Health.

SUMMARY OF STATISTICS

1. General Statistics

A			
Area in Acres			17,565
Enumerated Population (Census, 19	951)		19,073
Registrar-General's Estimate of popul	lation (r	niddle of 19	
Registrar-General's Estimate of popu	lation (1	middle of 19	55) 18,700
Number of Inhabited Houses at end	of 1955		6,655
Rateable Value (31st March, 1956)			£159,823
Sum represented by a Penny Rate (March, 1	(956)	£463
2. Extracts from			
			F22 F3F3
Live Births:	Male	Female	Total
Legitimate	116	109	225
Illegitimate	-	- 1	1
	116	110	996
	110	110	226
Crude Birth Rate per 1,000 of estim Adjusted Birth Rate per 1,000 of estir			
Still Births:	Male	Female	Total
Legitimate	5	5	10
Illegitimate	_		
The second secon			
	5	5	10
Crude Death Rate per 1 000 of estin	nated res	ident popula	tion 20 43
Crude Death Rate per 1,000 of estin Adjusted Death Rate per 1,000 of esti Deaths from Puerperal Causes	mated re	sident popula	ation 17.77
Adjusted Death Rate per 1,000 of esti Deaths from Puerperal Causes	mated re 	sident popula	ation 17.77
Adjusted Death Rate per 1,000 of esti	mated re year of	age:	ation 17.77 Nil
Adjusted Death Rate per 1,000 of esti Deaths from Puerperal Causes Number of Deaths of Infants under 1	mated re year of Male	age: Female	ation 17.77 Nil
Adjusted Death Rate per 1,000 of esti Deaths from Puerperal Causes Number of Deaths of Infants under I Legitimate	mated re year of Male	age:	ation 17.77 Nil
Adjusted Death Rate per 1,000 of esti Deaths from Puerperal Causes Number of Deaths of Infants under 1	mated re year of Male	age: Female	ation 17.77 Nil
Adjusted Death Rate per 1,000 of esti Deaths from Puerperal Causes Number of Deaths of Infants under I Legitimate	mated re year of Male	age: Female	ation 17.77 Nil
Adjusted Death Rate per 1,000 of esti Deaths from Puerperal Causes Number of Deaths of Infants under I Legitimate	mated re year of Male 4 —	age: Female	Total 5 —
Adjusted Death Rate per 1,000 of esti Deaths from Puerperal Causes Number of Deaths of Infants under I Legitimate Illegitimate	mated re year of Male 4 4	age: Female	Total 5 —
Adjusted Death Rate per 1,000 of esting Deaths from Puerperal Causes Number of Deaths of Infants under 1 Legitimate Illegitimate Death Rate of Infants under 1 year of the state of Infants under 1 year of the s	mated re year of Male 4 4 of age	age: Female 1 1	Total 5 — 5 — 5
Adjusted Death Rate per 1,000 of esti Deaths from Puerperal Causes Number of Deaths of Infants under 1 Legitimate Illegitimate Death Rate of Infants under 1 year of All Infants per 1,000 live births	mated re l year of Male 4 4 of age	age: Female 1 1 1	Total 5 5 22.12
Adjusted Death Rate per 1,000 of esti Deaths from Puerperal Causes Number of Deaths of Infants under 1 Legitimate Illegitimate Death Rate of Infants under 1 year of All Infants per 1,000 live births Legitimate Infants per 1,000 legitimate	mated re year of Male 4 - 4 of age te live bi	age: Female 1 - 1 - 1	Total 5 5 22.12 22.22
Adjusted Death Rate per 1,000 of esting Deaths from Puerperal Causes Number of Deaths of Infants under 1 Legitimate Illegitimate Death Rate of Infants under 1 year of All Infants per 1,000 live births Legitimate Infants per 1,000 legitimate Infants per 1,000 illegitimate Infants p	mated re year of Male 4 - 4 of age te live binate live	age: Female 1 - 1 - 1	Total 5 5 22.12 22.22
Adjusted Death Rate per 1,000 of esting Deaths from Puerperal Causes Number of Deaths of Infants under 1 Legitimate Illegitimate Death Rate of Infants under 1 year of All Infants per 1,000 live births Legitimate Infants per 1,000 legitima Illegitimate Infants per 1,000 illegitimate Infants per 1,000 population from Death Rate per 1,000 population from	mated re l year of Male 4 4 of age te live binate live	age: Female 1 1 1 irths births	Total 5 5 22.12 22.22 Nil
Adjusted Death Rate per 1,000 of esting Deaths from Puerperal Causes Number of Deaths of Infants under 1 Legitimate Illegitimate Death Rate of Infants under 1 year of All Infants per 1,000 live births Legitimate Infants per 1,000 legitima Illegitimate Infants per 1,000 illegitimate Infants per 1,000 illegitimate Infants per 1,000 population from Pulmonary Tuberculosis	mated re year of Male 4 4 of age te live binate live	age: Female 1 1 irths births	Total 5 5 17.77 Nil
Adjusted Death Rate per 1,000 of esting Deaths from Puerperal Causes Number of Deaths of Infants under 1 Legitimate Illegitimate Death Rate of Infants under 1 year of All Infants per 1,000 live births Legitimate Infants per 1,000 legitima Illegitimate Infants per 1,000 illegitimate Infants per 1,000 illegitimate Infants per 1,000 population from Pulmonary Tuberculosis All forms of Tuberculosis	mated re l year of Male 4 4 of age te live binate live	age: Female 1 1 irths births	Total 5 5 17.77 Nil
Adjusted Death Rate per 1,000 of esting Deaths from Puerperal Causes Number of Deaths of Infants under 1 Legitimate Illegitimate Death Rate of Infants under 1 year of All Infants per 1,000 live births Legitimate Infants per 1,000 legitima Illegitimate Infants per 1,000 illegitimate Infants per 1,000 illegitimate Infants per 1,000 population from Pulmonary Tuberculosis All forms of Tuberculosis Respiratory Diseases (excluding Pulmonary	mated re l year of Male 4 4 of age te live binate live nonary	age: Female 1 1 irths births fuberculosis)	Total 5 5 Nil 22.12 22.22 Nil 0.11 0.11 1.71
Adjusted Death Rate per 1,000 of esting Deaths from Puerperal Causes Number of Deaths of Infants under 1 Legitimate Illegitimate Death Rate of Infants under 1 year of All Infants per 1,000 live births Legitimate Infants per 1,000 legitima Illegitimate Infants per 1,000 illegitimate Infants per 1,000 illegitimate Infants per 1,000 population from Pulmonary Tuberculosis All forms of Tuberculosis Respiratory Diseases (excluding Pulmonary Tuberculosis Respiratory Diseases (excluding Pulmonary Tuberculosis	mated re l year of Male 4 — 4 — of age te live binate live i: nonary	age: Female 1 1 1 irths births Suberculosis)	Total 5 5 17.77 Nil Total 5 22.12 22.22 Nil 0.11 1.71 2.57
Adjusted Death Rate per 1,000 of esting Deaths from Puerperal Causes Number of Deaths of Infants under 1 Legitimate Illegitimate Death Rate of Infants under 1 year of All Infants per 1,000 live births Legitimate Infants per 1,000 legitima Illegitimate Infants per 1,000 illegitimate Infants per 1,000 illegitimate Infants per 1,000 population from Pulmonary Tuberculosis All forms of Tuberculosis Respiratory Diseases (excluding Pulmonary Tuberculosis Infective and Parasitic Diseases (excluding Pulmonary Tuberculosis Infective and Parasitic Diseases (excluding Pulmonary Tuberculosis	mated re l year of Male 4 4	age: Female 1 1 1 irths births fuberculosis)	Total 5 5 17.77 Nil Total 5 22.12 22.22 Nil 0.11 1.71 2.57
Adjusted Death Rate per 1,000 of esting Deaths from Puerperal Causes Number of Deaths of Infants under 1 Legitimate Illegitimate Death Rate of Infants under 1 year of All Infants per 1,000 live births Legitimate Infants per 1,000 legitima Illegitimate Infants per 1,000 illegitimate Illegitimate Infants per 1,000 illegitimate Infants per 1,000 population from Pulmonary Tuberculosis All forms of Tuberculosis Respiratory Diseases (excluding Pulm Cancer Infective and Parasitic Diseases (excluding Syphilis and other V.I. Deaths from Measles (all ages)	mated re l year of Male 4 4 of age te live binate live nonary 7 cluding 7 0.)	age: Female 1 1 irths births fuberculosis fuberculosis	Total 5 5 17.77 Nil Total 5 5 18
Adjusted Death Rate per 1,000 of esting Deaths from Puerperal Causes Number of Deaths of Infants under 1 Legitimate Illegitimate Illegitimate All Infants per 1,000 live births Legitimate Infants per 1,000 legitima Illegitimate Infants per 1,000 illegitimate Illegitimate Infants per 1,000 illegitimate Infants per 1,000 population from Pulmonary Tuberculosis All forms of Tuberculosis Respiratory Diseases (excluding Pulmonary Tuberculosis Infective and Parasitic Diseases (excluding Syphilis and other V.I. Deaths from Measles (all ages) Deaths from Diarrhoea (children under the series of th	mated re l year of Male 4 — 4 of age te live binate live nonary 1 cluding 1 0.) er 2 year	age: Female 1 1 irths births births fuberculosis s of age)	Total 5 5 17.77 Nil Total 5 5 18
Adjusted Death Rate per 1,000 of esting Deaths from Puerperal Causes Number of Deaths of Infants under 1 Legitimate Illegitimate Death Rate of Infants under 1 year of All Infants per 1,000 live births Legitimate Infants per 1,000 legitima Illegitimate Infants per 1,000 illegitimate Illegitimate Infants per 1,000 illegitimate Infants per 1,000 population from Pulmonary Tuberculosis All forms of Tuberculosis Respiratory Diseases (excluding Pulm Cancer Infective and Parasitic Diseases (excluding Syphilis and other V.I.	of age te live binate live innonary and all all and al	age: Female 1 1 irths births uberculosis uberculosis sof age) children under	Total 5 5 17.77 Nil Total 5 5 18

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

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

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

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

VITAL STATISTICS

Population

The Registrar-General's estimate of the population at mid-1955 was 18,700 as compared with 18,710 at mid-1954.

Comparability Factors

Area comparability factors in respect of Births and Deaths have been supplied by the Registrar-General, and for your district these are 1.09 and 0.87 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 0.87 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 1.09 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 226 live births (116 male, 110 female) was registered in the District during the year, a decrease of 4 compared with the previous year.

The ADJUSTED BIRTH RATE is 13.17 per 1,000 of the population, as compared with 13.40 for the previous year, 15.0 for England and Wales, 15.4 for the West Riding Administrative County, and 14.9 for the Aggregate West Riding Urban Districts.

There was one illegitimate live birth (0.44% of the total live births) as compared with 11 for the previous year.

Stillbirths

After adjustments for transfers, 10 stillbirths were registered during the year, as compared with 4 in the previous year. This figure gives a rate of 42.37 per 1,000 live and stillbirths, and 0.53 per 1,000 of the population, as compared with 17.09 and 0.21 respectively for 1954.

Deaths

After correction for inward and outward transferable deaths, the net total deaths registered in and assigned to the District was 382 (172 male, 210 female), a decrease of 23 compared with the year 1954. Of these deaths 151 (70 male, 81 female) occurred in Deanhouse Hospital.

The ADJUSTED DEATH RATE is 17.77 per 1,000 of the population as compared with 18.83 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 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 Circulatory System ... 156
(ii) Intra Cranial Vascular Lesions 91
(iii) Malignant Neoplasms 48
(iv) Respiratory Diseases (excluding Pulmonary Tuberculosis) 32

These four causes accounted for 85.60% of the total deaths. Particulars of the various causes of death and of the age and sex distribution are given in the following table:—

7

Causes of Death	Sex	All Ages	0-	1-	2-	5-	15-	25-	35-	45	55-	65-	75
All Causes		172	4	1		1		1	4	8	19	67	6
1 Tuberculosis, respira-	M	210	i			***		2	1	8	24	61	11
tory	F												-
2 Tuberculosis, other	M F								100		****	111	
3 Syphilitic disease	M										1		
4 Diphtheria	F										****		
No south control of the second	F										***		
5 Whooping Cough	M F									****	****		
6 Meningococcal infec-	M										-		
7 Acute poliomyelitis	M										471	***	
200-700-70	F							1441			****		
٤ Measles	M F		100						****				
9 Other infective and	M										****		
parasitic diseases 10 Malignant neoplasm,	F	4				****						2	
stomach	F	5											
1 Malignant neoplasm, lung, bronchus	M F	2									1	ï	
lung, bronchus 12 Malignant neoplasm,	M										1	0	
breast	F	8				****	440	1834		1	2	3	
13 Malignant neoplasm, uterus	F	1		1111		****		292			1		
14 Other malignant and	M	14								1	5	5	-
lymphatic neoplasms 15 Leukaemia, aleukaemia	M	1.2							4.10				
C Dishetes	F	1						****					
6 Diabetes	F	2						1		3.71	1		
17 Vascular lesions of ner-	M	38 53		2				***	1	1	5 2	19 21	13
vous system 18 Coronary disease,	M	27	1441					1	1	1	4	16	25
angina	F	19								1	4	9	
19 Hypertension with heart disease	M F	6				4-4-1			****		1	3	
20 Other heart disease	M	24								1	1 0	6	1
21 Other circulatory dis-	F	32 20				3000	****		1	2	-	2	2
ease	F	24									1	4	1
22 Influenza	M F	1				***						1	
23 Pneumonia	M	1									144	1	
24 Bronchitis	F	14				****					0	6	
	F	11									1	3	
25 Other diseases of respir- atory system	M F	1 2			-11	****				****			
26 Ulcer of stomach and	M	3								2			1
duodenum 27 Gastritis, enteritis, and	F	1							100			1	1
diarrhoea	F	4		4.61							- 1		
28 Nephritis and nephrosis	M F	3			****			1		****	1		
29 Hyperplasia of prostate	M	1								****		1	
30 Pregnancy, childbirth,	F												
abortion	F	****				****					****	****	
31 Congenital malforma- tions	M F	1	1						1000		****		
32 Other defined and ill-	M	10	3							1		4	1
defined diseases 33 Motor vehicle accidents	F	16	1	1				-		1	2	7	1
	F					132				***		1	
34 All other accidents	M F	6				1	10.00		111		****	-	١.
35 Suicide	M								****	1	****	-	
	F	2	****		***			****			1	1	
36 Homicide and operations			0.000		2000	1000	***						

Maternal Deaths and Mortality

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

Infant Mortality

After correction for transferable deaths there were 5 deaths (4 male, 1 female) of infants under 1 year of age, a decrease of 7 compared with the previous year. Of these deaths 4 infants were under 4 weeks of age at the time of death.

The INFANT MORTALITY RATE is 22.12 per 1,000 live births as compared with 52.17 for the previous year.

The death rate amongst legitimate infants per 1,000 legitimate live births is 22.22 as compared with 50.23 for the previous year.

There were no deaths of illegitimate children under 1 year of age.

Comparative Statistics

BIRTH RATE Per 1,000 estimated population (crude) do. (adjusted)	Holmfirth Urban District 12.09 13.17	Aggregate West Riding Urban Districts 14.8 14.9	West Riding Admin. County 15.3 15.4	England and Wales (provisional figures) 15.0
DEATH RATES All per 1,000 estimated				
population All Causes (Crude) All Causes (Adjusted) Infective and Parasitic	20.43 17.77	12.5 12.7	11.7 12.3	11.7
Diseases (excl. T.B.)	Nil	0.06	0.07	
Tuberculosis of Respiratory System Other forms of Tuberculosis Respiratory Diseases (ex-	0·11 Nil	0.11 0.02	0.11 0.01	0.13 0.02
cluding Tuberculosis of respiratory system) Cancer Heart and Circulatory	1.71 2.57	1.28 2.03	1.21 1.90	2.06
Diseases	8.34	4.71	4.39	*
INFANT MORTALITY	22.12	25.2	26.2	24.9
DIARRHOEA Deaths of infants under 2 years of age per 1,000 live births	Nil			
MATERNAL MORTALITY Puerperal Sepsis Other Causes Total	Nil Nil Nil	* * 0.45	* * 0.67	* * 0.64

^{*} 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 the 6 Urban Districts of which he is Medical Officer of Health.

By arrangement with the County Council one of the Senior Assistant County Medical Officers holds the appointment of Deputy Medical Officer of Health.

In addition there is a Senior Sanitary Inspector, who is also Cleansing Superintendent and Salvage Officer, an Assistant Sanitary Inspector, a temporary 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 depot for the area is situated at Banney Royd, Halifax Road, Huddersfield (Tel. No. Huddersfield 1255/6).

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. Relief nurse/midwives from other parts of the Division have undertaken relief work as required.

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 Royai 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 6,655 houses in the District, 5,951 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 91 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 I, 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	Class	Holme Styes (Chlorinated)	Bradshaw (Temporarily Chlorinated)	See Chlorinated)	Suape	S (Chlorinated)	Batley (Chlorinated)	Fluddersheld (Chlorinated)
27-1-55	II*	I	I	I	I	I	I	I
2-3-55	I	I	I	I	I	I	I	I
23-3-55	I	1	I	I	I	I	I	I
21-4-55	I	1	I	I	I	I	I	I
25-5-55	I	I	I	III*	I	I	I	I
21-6-55	I	I	I	II*	1	111*	I	III
30-6-55	_	_	_	I	_	III*	_	I
25-8-55	III*	I	I	III*	II	11*	I	I
27-9-55	I	I	IV*	III*	I	I	I	1
1-11-55	I	I	I	I	111*	τ	I	I
29-11-55	I	I	I	I	I	I	I	III
								. 1
28-12-55	II	I	I	I	I	I	I	I

Twelve samples of domestic water from private supplies were taken from nine premises and examined bacteriologically at the Public Health Laboratory, Wakefield. Of these samples, 5 were reported as highly satisfactory, 3 as satisfactory and 4 as unsatisfactory.

A total of 26 samples of water from service pipes supplied from the Council's reservoirs were submitted for analysis to determine the plumbo-solvency of supplies. Of these samples 23 were reported as satisfactory and 3 as unsatisfactory.

Drainage and Sewerage

During the year the surface water sewer running from Ford Mill to Kirkroyd Bridge at New Mill was converted into a foul water sewer. The sewer was also extended and the cesspool at Kirkroyds Lane dismantled.

No alterations have been made in the arrangements for sewage disposal during the year but a scheme is under consideration for closing the New Mill Sewage Works and extending the Neiley Sewage Works.

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

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 1955 was as follows:—

Privies	 	 	 867
Pail or tub closets	 	 	 226
Water Closets	 	 	 6,172
Chemical Closets	 	 	 14
			7,279

Particulars of new Water Closets installed and conversions carried out are as follows:—

(a) in new houses:

(i)	Council Houses	 	 	17
(ii)	Private enterprise	 	 	19
				90

(b)	In Existing premises:	Houses	Other Premises
	No. of privies reconstructed as water closets No. of tubs or pail closets reconstructed as		-
	No. of water closets installed in replacement of	4	_
	No. of water closets installed as additional	7	2
	accommodation to existing closets	11	1
		22	3
	No. of closets, other than water closets, converted, dismantled or demolished		13

The Council continued to make a grant of £7 10s. 0d. (or onehalf 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 7 privies and 2 pail or tub closets, and a grant was made in each case.

A detailed analysis of water supply and closet accommodation is given in the tables on page 19.

Refuse Collection and Disposal

Scavenging is undertaken throughout the district by direct labour under the direction of the Cleansing Superintendent, Mr. I. Haigh, 5 motor vehicles being employed in the work. Domestic refuse and pail closet contents are emptied approximately every 2 weeks and privies every 5 weeks. Sanitary dustbins are now provided at approximately 5,700 houses.

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).

The following figures kindly supplied by Mr. Haigh relate to the year ended 31st March, 1956:—

		Total	 	7,420 tons
Honley Destructor and	d Tip		 	1,850 tons
New Mill Tips			 	1,290 tons
Berry Banks Tip .		555	 200	4,280 tons

Salvage collected and sold during the same period:-

			Τ.	cwt	s. qrs.	£	S.	d.
Cartons	 *:1.1:	 	_	_	_	15	14	0
Waste Paper		 	201	5	2	1739	9	7
Metals and T		 	30	12	3	99	6	11
			231	18	1	1854	10	6
			-		-	-		_

Pet Animals Act, 1951

Two premises in the District are licensed as Pet Shops, to which 4 visits of inspection were made during the year.

Shops Acts

No visits were made under the Shops Act during 1955.

West Riding County Council (General Powers) Act, 1951 Registration of Hairdressers

Sixteen premises are registered for carrying on the trade of hairdresser or barber.

Smoke Abatement

A soot deposit gauge is installed at the Neiley Sewage Works. Analysis of the deposits shows that the average monthly deposit of total solids is 13.28 tons per square mile as compared with 13.05 tons per square mile in 1954. Whilst this figure is somewhat less than that recorded at deposit gauges 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 competent authorities that at least half of the pollution is due to domestic chimneys.

No smoke observations were carried out during the year.

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

Tents, Vana and Sheds

There are no sites in the area licensed under the provisions of Section 269 of the Public Health Act, 1936, but one licence was granted to a person authorising him to station and use a moveable dwelling in the District and 3 licences previously issued were renewed during the year. Thus there were 4 moveable dwellings in use at the end of the year.

Swimming Baths and Pools

There are no public or privately owned baths in the District.

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

There were no instances of houses being infested with bed bugs or fleas but one filthy house was cleansed by employees of the Health Department during the year.

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	_	-	_
(2) Factories not included in (1) in which Section 7 is enforced by the Local Authority (3) Other premises in which Section 7 is enforced by	167	5	_	-
the Local Authority (excluding out-workers' premises).	3	2	_	
Total	174	7	-	_

2. Cases in which Defects were Found.

Particulars	Found	Remedied	Referred to H.M. Inspector	Prose- cutions
Want of cleanliness:	_	_	-	_
Sanitary conveniences (a) Insufficient (b) Unsuitable or de-	_		_	_
fective	3	1	3	
Other offences against the Act (not including offences relating to Outwork)	_		-	
Total	3	1	3	_

3. Outworkers

There are 129 outworkers in the District, employed as menders and burlers for various textile firms.

The Prevention of Damage by Pests Act, 1949

Rodent work is carried out in accordance with the recommendations of the Ministry of Agriculture and Fisheries and close liaison exists between the Sanitary Inspector and the Officers of the Ministry. As the Council's rodent operative is engaged only part-time on this work the amount of time he has available for the work of rodent destruction is limited. The following is a summary of disinfestation work carried out during the 12 months ended 31st March, 1956.

	{2280		Dwelling Houses	Others (incl. Business)	Total	Agri- cultural
	Number of properties inspected by L.A. as a result of :—; (a) notification	7	25	19	51	_
	(b) survey	1	1	_	2	_
CE!	Total Inspections and re-inspections	58	89	68	215	_
cre.	Number of properties found to be infested by rats	8	18	14	40	
ell.	Number of properties found to be infested by mice	_	8	5	13	_
	Number of infested pro- perties treated by L.A. (first treatment)	8	26	19	, 53	_
	Total treatments carried out including retreat- ments		26	21	62	_

The following treatments of the Council sewers have been carried out during the 12 months period:—

PAT		Maintenance Treatment No. 2
	Number of manholes	72
	Number of visits	172
by the Samtar	Number of manholes showing bait take	56

Schools

There are in the District 16 schools, 12 being County Schools, including one Secondary Modern School and one Grammar School, and 4 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)

smoke)		itstanding t 31-12-54	Issued in 1955	Abated in 1955	Outstanding at 31-12-55
Informal		_	2	2	_
Statutory	***		_		_

2. Inspections and Visits during 1955:-

	General Sanitary		==
	•		55
	Housing Inspections (including housing nuisance	es) .	1939
	Nuisances (excluding housing and smoke nuisances	ces) .	33
	Tents, Vans and Sheds		5
	Factories — Health Provisions — Factories Act		7
	Factories — Fire escapes		4
	Cleansing Section administration and refuse disp	posal .	994
	Rats and Mice		305
	Building Byelaws (new drainage and new sanitary	y fittings	s) 179
	Infectious Disease and Disinfection		132
	Inspections of meat and other foods		854
	Food Shops		6
	Food preparing premises	,	6
	Food Sampling		28
	Schools		3
	Public Water Supply — sampling		140
	Smoke Abatement		1
	Pet Shops		4
	Total number of inspections and visits		4695
3.	Sanitary Improvements Effected following Action		
	Inspectors		/
	Repair or renewals carried out to:—		
	Roofs		3
	Eaves spouting		1
	Rainwater pipes		1
	Drains		7
	Drains (cleared only)	,	43
	Sink waste pipes		1
	Number of:—		
	Closets repaired		3
	Water closets provided		4
	Dustbins provided		13

Public Water Supplies and Closet Accommod	Supp	lies a	nd Cl	oset	Accor	powu	ation	Ľ.	Dwelling		Houses	at	the 31	31st De	December,	er, 1955	25
breW	Austonley	Cartworth	Fulstone	Нермопъ	Holme	Honley Central	Honley East (includes part Magdale)	Houley South	Honley West (includes	Netherthong	North Central	Scholes	South Central	Thurstonland	Upperthong	Wooldale	Total
Number of Dwelling Houses:-	uses:																
	424	291 98	598	220 149	1111	850 850	362	210	322 274	467	504	464	466	249	454	629	6655 5951 89.4%
Having One W.C.	216	69	346	122	88	486	569	176	231	314	340	227	282	165	328	429	4088
Having 2 or more	38	1	16	=	4	76	10	3	7	11	7	70	01	27	œ	27	318
Not having a W.C. or sharing Accdn.	170	221	236	87	- 61	588	83	31	84	142	157	167	182	57	152	173	2249 33.8%
Estimated Closet Accommodation in Dwelling Houses:-	nodation	in Dwe	lling Ho	nses:—										1	1	1	. 1
No. of W.C.'s	335	76	408	151	105	766	315	194	249	375	401	390	326	232	371	541	5235 84.9%
No. of Privies	61	131	135	61	10	-	00	1	58	19	27	93	67	17	10	58	788
No. of Pails or Tubs	-	=	8	4	-il	27	13	ò	. 28	89	oo .	7	. 1	4	10	16	128
No. of Chemical Closets	3	9	1		I	1		1	1	1	1		61	I	1	1	0.2%
Total Closets	. 16.3	66.1	25.3	30.7	4.5	3.5	6.3	2.5	18.3	14.5	8.0	19.3	17.5	8.3	16.1	7.5	15.1

HOUSING

Housing remains one of the most difficult problems of the district. In spite of the increased number of houses provided by the Council, a long list of applicants still remains. Medical Certificates recommending priority in re-housing, support many of the applications.

As required by Section I of the Housing Repairs and Rents Act, 1954, the Council's proposals for dealing with unfit houses in the area were submitted to the Ministry of Housing and Local Government in November.

These were as follows:-

Total number of permanent dwellings in the local authority's area 6,493*

Part 1.	The Total Problem	
(i)	Estimated number of houses unfit for human habitation within the mearing of Section 9 of the Housing Repairs and Rents Act, 1954 and suitable for action under Section 11 or Section 25 of the Housing Act, 1936 Period in years which the Council think necessary for securing the demolition of all houses in (i)	600
Part 2.	Orders Already Made, etc.	
(iii) (iv)	Number of houses in (i) in clearance areas and already covered by operative clearance or compulsory purchase orders or owned by the local authority Number of houses which are already in clearance areas and for which clearance or compulsory purchase orders have been submitted to the Minister but have not yet	Nil
	become operative	Nil
Part 3.	Action in the First Five Years	
(v)	Number of houses which are already in clearance areas and for which clearance or compulsory purchase orders are to be made or which are to be purchased by agree- ment within the five years	Nil
(vi)	Number of houses which are to be included in clearance areas still to be declared and which within the five years will be owned by the Local Authority or will have been included in a clearance order or a compulsory purchase order submitted to the Minister	50
(vii)		Nil
(viii)	Number of houses under (iii), (iv), (v) and (vi) to be	
(ix)	demolished in the five years	135
	*Excluding Combined Houses and Shops	100

Provision for New Houses

follows	Additional dwelling houses provided during the year were	e as
	 (a) By the Local Authority—New permanent type (b) By private enterprise—New houses (c) By private enterprise—Conversion of existing buildings 	17 18 3
	Housing Statistics Total	38
Numbe	er of dwelling-houses in the District er of back-to-back houses included in the above Not kr	6655 lown
1. In:	spection of dwelling-houses during the year:-	
(1)	 (a) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts) (b) Number of inspections made for the purpose (a) Number of dwelling-houses (included under sub- 	1058 1939
(3)	head (1) above) which were inspected and recorded under the Housing Consolidated Regulations (b) Number of inspections made for the purpose Number of dwelling-houses needing further action:— (a) Number considered to be in a state so dangerous	240 635
	or injurious to health as to be unfit for human habitation (b) Number (excluding those in sub-head (3) (a) above), found not to be in all respects reasonably	22
2. Re	medy of defects during the year without Service of Formal	144
	otices:—	
	 (a) Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers (b) Number of defective dwelling-houses (excluding those shown in (a) above) in which defects were remedied in consequence of informal action 	Nil
3. Ac	tion under Statutory Powers during the year:-	
(a)	Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936:	
	Number of dwelling houses in respect of which notices were served requiring repairs Number of dwelling houses which were rendered fit after service of Formal Notices:	Nil
	(a) By Owners	Nil
(b)	(b) By Local Authority in default of owners Proceedings under Public Health Acts: (1) Number of dwelling houses in respect of which	Nil
	 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: 	21
	(a) By Owners (b) By Local Authority in default of owners	8
	(b) by Local Additionty in default of owners	13

(c)	Pro	ceedings under Section 11 and 13 of the Housing Act,	
	(1)	Number of representations, etc., made in respect of dwelling houses unfit for habitation	Nil
	(2)	Number of dwelling houses in respect of which	
	(3)	Number of dwelling houses demolished in pursuance of Demolition Orders	Nil Nil
	(4)		Nil
(d)		ceedings under Section 12 of the Housing Act, 1936: Number of separate tenements or underground	
		rooms in respect of which Closing Orders were made Number of separate tenements or underground	Nil
		rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit	Nil
(e)	Pro	ceedings under Part III of the Housing Act, 1936:	
	(1)	Number of Clearance Areas represented during the year	Nil
		Number of houses included in these areas Number of persons to be displaced	Nil Nil
	(4)	Action taken during the year in respect of Clearance Areas:— (a) by Clearance Orders, number made (b) by Compulsary Purchase Orders, number made	Nil Nil
	(5)	Number of houses in Clearance Areas demolished during the year	Nil
	(6)	Number of persons re-housed from houses demolished during the year	Nil
4. H	ousin	g Act, 1936 — Part IV. Overcrowding	
(a)	(1)	Number of dwellings overcrowded at the end of the year	7
	(2)	Number of families dwelling therein	8
	(3)	Number of persons dwelling therein	39
(b)		Number of new cases of overcrowding reported during the year	6
(c)	(1)	Number of cases of overcrowding relieved during the year	2
	(2)	Number of persons concerned in such cases	13
5. H	ousin	g Act, 1949	

5

During the year 14 applications were received under Section 20 of this act for grants for improvement of housing accommodation. Ten of these were approved and grants made.

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 8 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) Regula-

tions, 1949 to 1953 were:-

(a) 4 supplementary licences authorising the use of the special designation "Pasteurised."

(b) 3 dealers' licences and one supplementary licence authorising the use of the special designation "Sterilised."

(c) 3 supplementary licences in relation to "Tuberculin Tested"

During the year 5 samples of undesignated milk and 11 samples of tuberculin tested milk, were taken for bacteriological examination for cleanliness or keeping quality. Results showed that 2 of the samples of undesignated milk and one of the samples of tuberculin tested milk were unsatisfactory.

Ice Cream

At the end of 1955 there were 2 premises registered for the manufacture and sale of ice cream, and 47 registered for sale only.

No samples were taken for bacteriological examination during the year.

Meat

Following the de-control of meat and livestock and the re-commencement of private slaughtering in July 1954, regular meat inspection has taken place at 6 of the 9 licensed slaughterhouses in the District.

Three of the slaughterhouses are accepted Ministry of Agriculture, Fisheries and Food Deadweight Certification Centres under the Fatstock Guarantee scheme for pigs, and the Sanitary Inspectors are authorised to carry out the duties of Certifying Officers.

Particulars of inspection are as follows:—

Licer	sed Slaughter	houses	Other Pr	remises (farms,	etc.)
On Weekdays	At Week-ends	Total	On Weekdays	At Week-ends	Total
3062	122	3184	8	_	8
95.9%	3.8%	99.7%	0.3%	_	0.3%

It will be seen that during the year a total of 3.8% of these inspections were carried out at week ends.

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

DISPECTION AND SUPERVISION OF FOOD

	Cattle ex'd'g Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed (if known),		-		-	-
Carcases Inspected	328	11	15	809	± 029
All diseases except Tuberculosis Whole carcases condemned Carcases of which some part		_		1	_
or organ was condemned Percentage of number inspect- ed affected with disease other	51	2		6	35
than Tuberculosis	15.6	18.2	_	0.9	1.7
Tuberculosis only Whole carcases condemned Carcases of which some part	_	_	_	_	_
or organ was condemned Percentage of number inspect-	30	2		_	63
ed affected with Tuberculosis	9.2	18.2	-		3.1

Ministry of Agriculture, Fisheries and Food Fatstock Guarantee Scheme

No. of pigs certified during 1955 ... 646

No. of payment certificates made out ... 221

A comparison of the animals inspected and number of visits made during the past 6 years shows the increase in meat inspection since the recommencement of private slaughtering in July, 1954;—

Animals Inspected:—

Animals	1950	1951	1952	1953	1954	1955
Pigs	351	252	449	576	1230	2029
Cattle	-	-	_	1	122	328
Ows	-	_	_	_	2	11
Sheep & Lambs	=		_	_	7 178	809
Fotal Animals inspected	351	252	449	577	1539	3193
	1950	1951	1952	1953	1954	1955
Visits in connection with above	270	181	220	183	452	854

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 25.

During the year 6 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, 1954	 	 49
(b)	New licences issued during 1955	 	 5
(c)	Licences expired during 1955	 	 13
(d)	As at 31st December, 1955	 ***	 41

Bread

There are 17 bakehouses in the district, 1 of which is underground.

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:—

		G	enuine	Adulterated
Milk samples examined	 		51	3
Drugs examined	 		_	
Other Foods examined	 		11	_
Proceedings instituted	 		_	_
Cautions issued	 		_	3

With regard to the samples shown as "Adulterated," these were not of a serious nature and warnings were sent by the Clerk of the County Council to the persons from whom the samples were procured.

Other Foods

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

Canned	fruit 1	$120\frac{1}{4}$	lbs.	Canned frozen		
,,	meat	$71\frac{3}{4}$,,	egg	46	lbs.
,,	milk	1	,,	Canned		
,,	fish	4	,,	vegetables	$29\frac{3}{4}$,,
,,	cream	14	"	Fish	$12\frac{1}{2}$,,
,,	ham	$29\frac{1}{2}$,,		-	
Lard		56	,,	Total	387	lbs.
Tapioca		16	,,			_

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

During the year 22 cases of food poisoning and one case of Paratyphoid Fever were notified but apart from this and the increased incidence of measles there was no unusual prevalence of infectious or other diseases in the District during 1955.

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 54 children of school age and 119 children under 5 years of age received a complete course of injections whilst 443 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 6 cases of Scarlet Fever were notified, all of which were confirmed, as compared with 4 cases in 1954. The cases occurred in the Fulstone, South Central (2), North Central, Holme and Wooldale Wards, and 5 of the patients were admitted to Mill Hill Isolation Hospital.

Whooping Cough

Cases of Whooping Cough notified during 1955 numbered 38 as compared with 54 in the previous year.

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

Ward	Jan.	Feb.	Mar.	Apl.	May	June	July	Aug.	Sep.	Oct.	Nov.	Dec.	Tot'
Austonley	_	_	_	_	_	1	_	_	1	_	_	_	2
Cartworth	-	-	-	-	-	-	_	-	-	_	-	-	-
Fulstone	4	-	-	-	-	-	-	-		-	-		4
Hepworth	-	_	-	-	-	-	_	-	-	_	-		-
Holme	-	-	-		-	-	-	-	-	_	-	-	-
Honley	-	_	_	_	-	-	1	_	-	_	-	_	1
Netherthong		-	-	-	-	2	_	-	-	-	-	-	2
Scholes	-	_	3	-	-	_	1	-	-	_	-	_	4
N'th Central	2	_	-		2		1	1	-	_	_	-	6
S'th Central	-	_	1	4	-	_	5	3			-	-	13
Thurstonland	-	_	-		_	_	_	-	-	_	_	2	2
Upperthong	2	_	-	_	_	-	1	-	-	_	-	_	3
Wooldale	-	-	-	1	-		-	-		-	_	_	1
Totals	8	_	4	5	2	3	9	4	1			2	38

Measles

Cases of Measles notified during 1955 numbered 179 as compared with 3 cases in the previous year.

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

Ward	Jan.	Feb.	Mar.	Apl	May	June	July	Aug.	Sept	Oct	Nov.	Dec.	T'ta
Austonley	1	13	2		_	3	20	4	-	_		-	43
Cartworth	-	1	-	1		-	-	-	-	_		-	2
Fulstone	1	9	6	1	1	-			_	-	_	-	18
Hepworth		1	_	-	-	-	-		-		-	-	1
Honley	1	_	2	1	_	-	_			-	-	_	4
Netherthong	3	24	3	_	-	-		1	-		_	-	31
Scholes	_	_	1	1	1	1	1	-	_	_	-	_	5
N'th Central	3	6	12	-	-	_	-	2	_	-	_		23
S'th Central	3	8	16	_		-	-		-	-	-	-	27
Thurstonland	-	-	. 1	8		-	-	_	-	_	-	-	9
Upperthong	4	10	_	_	-		-		-	-		-	14
Wooldale	-	-	1	-	-	-	1	-	-	-		_	2
Totals	16	72	44	12	2	4	22	7	_		_	_	179

Acute Primary and Acute Influenzal Pneumonia

Two cases of Acute Primary Pneumonia and one case of Acute Influenzal Pneumonia were notified during the year as compared with none in 1954. Deaths registered during 1955 as due to all forms of Pneumonia total 2, as compared with 7 in 1954.

Enteric Fever and Dysentery

One case of Paratyphoid B occurred during the year, the patient being a boy aged 6 years resident in Upperthong. He was admitted to hospital where he made a rapid recovery.

A full report on this case will be found in Section VII of this report.

No cases of dysentery were notified.

Meningococcal Infections

No cases of Meningococcal Infection were notified during the year as compared with 2 in 1954.

Food Poisoning

During the year 22 cases of food poisoning were notified. These occurred in 2 outbreaks, the first in April in Deanhouse Hospital where 14 cases were involved, and the second in July when 8 cases were involved.

A full report on these outbreaks will be found in Section VII of this report.

Puerperal Pyrexia

No cases of this condition were notified during the year.

Erysipelas

During the year one case of Erysipelas was 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 deaths attributable to Cancer during the year totalled 48 (18 male, 30 female), as compared with 53 in 1954. The Cancer death rate for the year is 2.57 per 1,000 of the estimated population, compared with a rate of 2.83 for the previous year. The corresponding rates for the Administrative County and the Urban Districts are 1.90 and 2.03 respectively.

Tuberculosis

A total of 10 new cases were added to the Notification Register during the year, as compared with 9 in the previous year.

There were two deaths from Pulmonary Tuberculosis, the same number as 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	36	21	4	11
(b) Number of cases notified first time during the year	4	2	1	3
(c) Number of cases restored to Register	1	_	_	1
(d) Number of cases added to Register otherwise than by notification	3	_	_	2
(e) Number of cases removed from the Register	6	2	1	3
(f) Number of cases remaining on the Register	38	21	4	14

		New Ca	ses			Dea	ths	
Age (years)	Pulr	nonary		Non- nonary	Puln	nonary		Non- nonary
	Male	Female	Male	Female	Male	Female	Male	Female
0 1	_				_			
1-5		_	_		_		_	_
5-10	-		_	1		_	_	
10-15	-		_	_	-	_		
15 - 20		1				_		-
20 - 25	2			1			-	_
25 - 35		1		-	-		-	_
35 45	_	_	_	_	1			_
4555	-		1	1	1	_		
55—65 65 and	-	-	-	-		_	-	
upwards	2				-	-	-	-
Totals	4	2	1	3	2		-	

Table showing Cases of Infectious Diseases notified during the Year Holmfirth 1955

			Number						Age	Age distribution of confirmed cases	ontio	jo u	confir	med c	ases					
Disease		in which Admitted Diagno- Mill Hill		Deaths	Under 1	1-3		62	3-4	+	10	5-10	10-15	5 15-20		20-35	35-45		45-65	Over 65
	Notified	sts con-Isolation firmed Tospital	firmed flospital		M F	M	F M	4	M F	N	FM	H	M F	N	F M	щ	MI	FM	124	M F
Measles	62.1	179	-		2 1	7	00	6 6	11 11	11	16 44	4 48	i	1	1	T	1		-	-
Whooping Cough	38	38	-	1	1	-	(3	60	60	10	63	10 5	i	-	1		i		1	1
Acute Primary Pneumonia	94	61	1	2 (a)		İ	-	-	1	1			_	1	1	1	i	1	- 1	1
Acute Influen- zal Pneumonia	-	-	!	1		İ	1	1	i	1	-	1	1	1	i		1	-	-	
Scarlet Fever	9	9	ro.	1		i	+	-	1	1	1	3 1	03	1	T	-	i	1	1	
Erysipelas	1	-	1	I	1	i	1	1	1	1	+	-	ì	1	T	-	i	Ť	- 1	i
Diphtheria	ı	1	1	1	1	1	1	1	1	1	1	1	i	1	i	1	1	1	1	1
Dysentery	1	1	1	1	1	i	1	1	1	1	1	1	i	1	1	1	İ	1	1	I
Meningococcal Infections	1	1	I	1	1	i		1	1	1	-		i	-	-	1	1	-	1	1
Paratyphoid B	-	-	1(5)	1	1	1	1	1	1	1	1	_	1	I	1		ĺ	!	1	1
Food Poisoning	01	67	14 (c)	1	1	1	1	1	1	1	1	1	i	-	1	-	673	-	64	4

(a) Deaths from all forms of Pneumonia.

(c) These cases occurred in Deanhouse Hospital.

⁽b) Admitted to Leeds Road Isolation Hospital, Bradford.

SECTION VII

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 1955

BY

ERIC WARD

M.R.S.C., 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: K. M. C. HAIGH, M.B., Ch.B., D.R.C.O.G., C.P.H.

(Appointed 17-1-55)

W. P. B. STONEHOUSE, M.R.C.S., L.R.C.P., D.P.H. Assistant County Medical Officers and School Medical Officers:

B. R. ELLIS, M.R.C.S., L.R.C.P.

(Appointed 1-12-55)

E. D. SHAW, M.B., Ch.B. Clinic Medical Officers: (Part time)

C. DICKSON, M.B., Ch.B.

(until Dec., 1955)

A. EDWARDS, L.R.C.P., L.R.C.S., L.R.F.P.S. (until Dec., 1955) A. HAND, M.B., Ch.B.

L. E. LUCAS, M.B., Ch.B.

(until Dec., 1955)

H. MERCER, M.B. Ch.B.

H. C. PICKERING, M.R.C.S.,

J. A. STEPHENS, M.R.C.S., L.R.C.P. (Resigned March, 1955)

J. E. TAYLOR, M.B., Ch.B. (Dec'd.) (Resigned March, 1955) J. G. WALLER, M.B., Ch.B. M. V. WILBY, M.B., Ch.B.

(until Dec., 1955)

P. B. WOOD, M.B., Ch.B.

L.R.C.P.

Superintendent Health Visitor: Mrs. A. CORLESS Health Visitors and School Nurses:

Miss B. BAINES Miss D. BROOKE Miss A. COLEMAN Miss M. DAWKINS

(Appointed 18-7-55) *Mrs. E. FISCHER Miss M. FLINTOFF Miss B. HIGTON

Mrs. E. M. HURLEY Miss C. INCHBOARD

Mrs. J. CAPES Miss A. CHARLESWORTH

Mrs. J. COOK

Miss A. ASPINALL Miss A. BEAUMONT

Miss M. BEWSHER (Resigned 1-9-55)

Miss M. BROOK †Miss B. M. COOPER

(Appointed 19-9-55) Miss F. B. EMMOTT

(Appointed 1-2-55)

Miss N. CRABTREE (Resigned 24-5-55)

Miss M. BOOTHROYD (Transferred to Div. 19, 1-9-55)

Mrs. M. CLEMENTS (Appointed 1-9-55)

Mrs. N. EARL †Mrs. M. HART

(Appointed 10-10-55)

Mrs. J. HALSTEAD (Appointed 30-5-55)

Mrs. K. M. KAYE Miss C. LATIMER

Mental Health Social Worker:

Mrs. M. MOORE Speech Therapist:

Mrs. M. J. CARTER

Miss D. MELLOR Miss M. I. MORRIS

Miss M. NUTTALL (Resigned 13-10-55)

Miss B. OWNSWORTH Mrs. A. ROYSTON *Mrs. M. WARD Mrs. E. WILLIAMS

Miss D. WOOD

Midwives:

Mrs. E. GRAHAM Mrs. E. L. B. LYTHE

Nurse/Midwives:

Miss M. J. CUFFE

(Resigned 31-10-55)

Miss S. JONES

Miss L. KAYE Miss M. J. LAKING (Appointed 24-5-55)

Miss M. MIDGLEY

(Resigned 24-5-55) Miss K. M. PURDON

Miss M. P. SPRING (Appointed 24-5-55)

Home Nurses:

Mrs. J. LAUDER Miss A. LODGE Mrs. N. PLATT

Miss E. M. PRENTIS

(Resigned 28-6-55)

Mrs. H. G. RADCLIFFE (Transferred to Div. 22, 30-11-55)

Mrs. H. G. STURGEON Miss S. WADSWORTH

(Appointed 1-11-55)

Mental Health Home Teachers:

Miss E. BALL

Mrs. V. M. E. DUNCOMBE

(Appointed 1-12-55)

Duly Authorised Officer: Mr. R. G. RACE Senior Clerk: Mr. G. A. BEATSON

*Part time

†Temporary

WEST RIDING COUNTY COUNCIL — SERVICES

INTRODUCTION

In this Section an account is given of the services provided by the West Riding County Council in the Division.

The Division, which consists of the Urban Districts of Colne Valley, Denby Dale, Holmfirth, Kirkburton, Meltham and Saddleworth, has a population of 88,980 and an area of 82,750 acres. Although the population is only slightly more than one person per acre on average, owing to the wild moorland nature of much of the Division the majority of the inhabitants live in small urban communities in the various valleys.

STAFF

The Medical Staff consists of a Divisional Medical Officer who is also Medical Officer of Health for the six County Districts in the Division and two 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 are two full-time Assistant County Medical Officers and 5 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 two Mental Health Home Teachers 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.

The statistics given in this Section relate to the whole Division but where practicable they are sub-divided into those for the various districts.

COMPARATIVE STATISTICS FOR 1955

Infant Mortality Maternal Mortality	3.58		- 12	-	-	-	0.90	0.45	0.67	2
Infant Mortality	33-46		22.12			24.15	28-62	25.2	26.2	-
Vascular Lesions of the Nervous Sys-	2.04	1.77	4.87	3-69	1.74	1.99	2.90	2.09	1.90	
Heart and Circul- atory Diseases	5.05	3.86	8.34	11-19	4-64	5.78	6.92	4-71	4.39	1
Cancer	2.18	1.98	2.57	2.54	2.13	2.59	2.38	2.03	1.90	
Respiratory Diseases (excluding tuber- culosis of respir- atory system)	1.02	1.04	1.71	2.25	1-16	0.78	1.37	1.28	1.21	
Other forms of Tuberculosis	-	-	_	_	_	-	_	0.02	0.01	
Tuberculosis of Respiratory system	0.14	0.10	0-11	0.35	-	0.06	0.15	0.11	0-11	
Infective and Parasitic diseases excluding T.B. but including Syphilis and other V.D	0.05	0-10	_	0.29	-	0.06	0.09	0.06	0.07	
,, ,, (Adjusted)	12-99	10-36	17.77	21.62	10-68	11.73	*	12-7	12.3	
Death Rates All per 1,000 est- imated population All Causes (Crude)	13-82	11.26	20-43	25-14	11-61	1 3 ·18	16-89	12,5	11.7	
,, (Adjusted)	13-34	12.73	13-17	13.41	13.61	13.83		14.9	15.4	
Birth Rate Per 1,000 estimated population (Crude)	12-47		12-09	11.76		12.46	12-17	14-8	15.3	-
Deaths under 1 year of age	9	5	5	4	3	5	31	434	645	
Deaths	298	108	382	436	60	219	1503	14,635	18,887	
Still Births	10	2	10	6	_	2	30	17,236	24,601 666	
Live Births	269	110	226	204	67	207	1083	1,167,000	1,610,300	
	16,052 21,570		-streetier			18,485 16,610		380,334	1,609,759	
	Valley	Dale	Holm- firth U.D.	ourtor.		Saddle worth U.D.	Division No. 20	Aggregate West Riding U.D's.	West Riding Admin. County	Ila V fi

VITAL STATISTICS

Births

The number of live births registered in the Divisional area during 1955 was 1083 (569 males, 514 females), an increase of 31 compared with the previous year.

The CRUDE BIRTH RATE was 12.17 per 1,000 of the estimated population as compared with 11.80 for 1954.

The illegitimate live births numbered 29 or 2.68% of the total live births, a decrease of 8 compared with the previous year.

Deaths

The deaths assigned to the Divisional area after correction for transfers were 1503 (716 male, 787 female), a decrease of 11 on the total for 1954.

The CRUDE DEATH RATE from all causes was 16.89 per 1,000 of the estimated population as compared with 16.98 for the previous year.

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

(i) Diseases of the Heart and Circulatory System ... 616
(ii) Intra-Cranial Vascular Lesions 258
(iii) Malignant Neoplasms 212
(iv) Respiratory Diseases (excluding Pulmonary Tuber-

... 122

...

These 4 causes accounted for 80.37% of the total deaths.

...

culosis) ...

Infant Mortality

In 1955 the deaths of infants under one year of age numbered 31, a decrease of 5 on the previous year. Of these deaths 24 infants were under 4 weeks of age at the time of death.

The INFANT MORTALITY RATE was 28.62 per 1,000 live births as compared with 34.22 for 1954.

The death rate amongst legitimate infants per 1,000 legitimate live births was 27.51 as compared with 33.50 for 1954.

The death rate amongst illegitimate infants per 1,000 illegitimate live births was 68.97 as compared with 54.05 for 1954.

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

DEATHS OF INFANTS UNDER ONE YEAR OF AGE.

	Causes of Death	Under 1 day	$\frac{1-2}{\mathrm{days}}$	2-5 days	5-7 days	Total under 1 week	1-2 weeks	2-4 weeks	Total under 1 month	1-3 months	3-6 months	6-9 months	9-12 months	Total under 1 year
	1. Ervthroblastosis Foetalis	-	1		1	1		1	-	1	1	1	1	-
ci	Bronchitis	1	1	I	1	1	1	I	ı	i	ı	1	ı	-
	3. Pneumonia	1	1	1	1	ı	1	1	ı	-	c1	ı	ı	93
4	Congenital Malforma- tions	1	1	61	ı	G1	+	1	eo	1	-	1	1	9
	5. Premature Birth	6	10	8	1	17	1	I	11	1	1	1	1	17
	6. Atelectasis	-	1	1	1	-	ı	1	-	ı	1	I	1	-
	7. Intra-Cranial Haemorrh- age	-	-	1	1	64	1	1	61	ı	ı	ı	I	61
1	TOTAL	12	9	2		103	-		24	61	80	1	-	31

EPIDEMIOLOGY

Smallpox

No cases of Smallpox were reported during the year.

The number of records of vaccinations and re-vaccinations received during the year was 463 and 59 as compared with 304 and 56 respectively in the previous year.

Details of the various age groups vaccinated and re-vaccinated

are given below.

		VAC	CINATION	S		Total
District	Under 1	1	2—4	5—14	15+	Vaccina- tions
Colne Valley	139	12	6	_	4	161
Denby Dale	34	3	2	1	4	44
Holmfirth	74	7	3	5	3	92
Kirkburton	49	5	5	1	1	61
Meltham	28	_	_	1	5	34
Saddleworth	63	1	_	2	5	_ 71
Grand Totals	387	28	16	10	22	463

		RE-VA	ACCINATI	ONS		Total Re-
District	Under 1	1	2—4	5—14	15+	Vaccina- tions
Colne Valley	-	-	1		13	14
Denby Dale	_	_	-	_	6	6
Holmfirth	_	_	1	_	15	16
Kirkburton	_	_	_	_	7	7
Meltham	_	_	_	1	2	3
Saddleworth	-	_	_	2	11	13
Grand Totals	-	_	2	3	54	59

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

Typhoid and Paratyphoid Fever

One case of Paratyphoid B occurred during the year, the patient being a boy aged 6 years resident in the Holmfirth Urban District.

The boy complained of malaise on the 30th April and began to run a slight temperature. This continued and on the 9th May he was admitted to the Halifax General Hospital for investigation. Soon after admission he developed a slight rash and about a week later salmonella paratyphoid B was isolated. The Widal Test reaction was also positive for paratyphoid B.

He was transferred to the Isolation Hospital, Leeds Road, Bradford on the 18th May where he made a rapid recovery. However, he remained an intestinal carrier and this condition required three different courses of antibiotics before three consecutively negative bacteriological

specimens were obtained.

He was discharged home on the 10th July, 1955.

Diphtheria

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

According to records available, only 49.93% of the 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 diphtheria 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 1955

Urban Distri	ct			Courses of Final injection	on
		Under 1	1-4	5—14	Total
Colne Valley		100	105	34	239
Denby Dale		27	51	33	111
Holmfirth		43	76	54	173
Kirkburton		25	52	115	192
Meltham		14	18	_	32
Saddleworth		42	44	1	87
Total		251	346	237	834
				ooster Injection te of injection	n
		Under 1	1—4	5—14	Total
Colne Valley		- 1	36	355	391
Denby Dale		_	3	93	96
Holmfirth			30	413	443
			15	425	440
Kirkburton			21	18	39
Kirkburton Meltham					
		_	5	25	30

Records of the immunisation state of children in the Divisional area as at the 31st December, 1955, are shown below.

Age at 31-12-55 i.e., Born in Year	Under 1 1955	1 to 4 1951-54	5 to 9 1946-50	10 to 14 1941–45	Total Under 15
Number immunised	34	2812	6,976	5,477	15,299
Estimated mid- year child popula- tion 1955.		Children under 5		500	19,200
Percentage of child population immunised		49.93	92	2.24	79.68

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 268 children received protective treatment as follows:—

District	By General Practitioners	At Infant Welfare Clinics	Total
Colne Valley	32	97	129
Denby Dale	1	34	35
Holmfirth	8	32	40
Kirkburton		13	• 13
Meltham	11	8	19
Saddleworth	4	28	32
Total	56	212	268

Dysentery

During the year, 237 cases of Sonne Dysentery were notified in the Division, as compared with 45 in 1954. Of these cases, 177 were notified in the Kirkburton Urban District, 46 in Saddleworth, 7 in Denby Dale, 4 in Colne Valley and 3 in Meltham. No cases were notified in Holmfirth.

The Kirkburton cases occurred in three groups. In the Spring 10 cases came to notice in the Lepton/Almondbury area. These were closely associated with one another and infection was probably imported by school children from a school just over the district boundary, where at this time the disease was prevalent. The family principally affected was engaged in milk production so arrangements were made for the milk produced to be heat treated.

The second group of 8 cases occurred in July in Kirkheaton, again the cases were closely related.

The largest group occurred in Kirkburton village and first came to notice early in November when the Head Teacher of the Kirkburton Church of England School reported that during the previous fortnight some 20 or 30 children had been absent from school, each for a few days, suffering from sickness and diarrhoea. Particulars of the absentees were obtained from the Head Teacher. Visits were paid by the Sanitary Inspector to the three most recent cases and specimens obtained for examination. These were reported by the Public Health Laboratory, Wakefield as being positive for Shigella Sonnei. On receiving this information the Sanitary Inspector visited the school and obtained a list of from 50 to 60 children who had been absent the previous fortnight suffering from diarrhoea or who were contacts of such children. Some 56 specimens were obtained and 50 of these were later reported as positive for Shigella Sonnei.

In the meantime General Practitioners in the area were contacted and informed of the results of the faeces examination. Information was obtained to the effect that cases of diarrhoea had been occurring in the district for some weeks past but no specimens had been sent in for examination. The cases had cleared up clinically quite quickly following treatment with one of the sulpha drugs.

From the information available it was apparent that a widespread outbreak of Sonne Dysentery was in progress in the school. Enquiries were made from the canteen staff at the school as to any intestinal disturbances but none was admitted. An examination of faeces however, showed that two of the women working in the canteen were excreting Shigella Sonnei. One later admitted having had a touch of diarrhoea a week previously but did not stay off work. The other woman found to be excreting did not give any history of diarrhoea.

All children attending the school who gave a history of diarrhoea, and their contacts were forthwith excluded from school until a specimen had been examined. In the case of infants 3 negatives were required from both cases and contacts before return to school was allowed, but in the case of children over 8 years return was allowed when one negative had been obtained, 2 further specimens being examined after return to

school.

Contacts who were food handlers were excluded from food handling duties until one negative was obtained, 2 further specimens being obtained after return to work.

During November new cases were found in decreasing numbers as shown in the following table:—

Week	ending	12-11-55	- 5	92	Week	Ending	10-12-55	-	2
,,	21	19-11-55	- 4	12	,,	,,	17-12-55	_	1
,,		26-11-55	1	3	,,	,,	24-12-55	_	1
,,	11	3-12-55	- 1	0	.,,	"	31-12-55	_	_

The majority of cases were children attending the Church of England School which is a Junior School but some of the contacts who became infected were pupils at the Secondary Modern School.

In all, some 155 cases were notified and accepted as confirmed cases. The age distribution of the cases is shown below:—

0-2	2-5	5-8	8-12	12-15	15-25	25-45	Over 45
7	20	39	31	8	9	31	10

From 123 of these Shigella Sonnei was isolated.

As soon as the size of the outbreak became apparent, Dr. Little of the Wakefield Laboratory kindly investigated specimens from 10 patients for susceptibility and reported as follows:—

"Specimens were sensitive to Chloramphenicol, Streptomycin and Terramycin, slightly sensitive to Aureomycin and resistant to Penicillin,

Erythromycin and Sulpha."

This information was passed on to General Practitioners concerned and treatment with Streptomycin in the form of Guanimycin was carried out in the majority of cases.

The fact that the organism was resistant to sulpha drugs probably accounted for the high percentage of children who were found to be excreting after having apparently recovered from the disease following treatment with one of the sulpha drugs.

The majority of cases ceased excreting after one course of treatment with Guanimycin but some persisted for several weeks as is shown in the following table:—

Period from 1st positive specimen to the 1st negative specimen in the final series

Under 2	2-3	3-4	4-6	6-8	8-10	10-12	12-14
weeks	weeks	weeks	weeks	weeks	weeks	weeks	weeks
37	33	23	20	2	3	4	1

Throughout the outbreak, there was excellent liaison between the General Practitioners, the Head Teacher of the school concerned and the Sanitary Inspectors and I feel that it was largely due to their good will and ready co-operation that the outbreak was cleared up so quickly.

The 7 cases in the Denby Dale area were all members of one family, one child of which attended the Kirkburton Secondary Modern School, thus providing the direct link with the Kirkburton outbreak.

The 46 cases in Saddleworth Urban District occurred mainly in the late Spring and early Summer. In most instances there was some connection, usually through school children, with Oldham, where at the time, an extensive outbreak of dysentery was in progress. No particular school or locality was principally involved.

The 4 cases in Colne Valley were 2 isolated cases and 2 members of the same family, whilst the 3 cases in Meltham were all members of

the same family.

Food Poisoning

During the year 33 cases of food poisoning were notified, 23 of which were confirmed. Of these cases 22 occurred in the Holmfirth Urban District and one in the Kirkburton Urban District.

Holmfirth Urban District

The first outbreak occurred at Deanhouse Hospital on the 2nd April, 1955 and 14 cases were involved. Potted meat was suspected of causing the outbreak but no pathological organisms were grown from samples submitted to the laboratory.

The interval from ingestion to onset was 9 to 15 hours and the main symptoms were vomiting and diarrhoea of moderate severity, the

duration being from 8 to 24 hours.

Staphylococcus aureus (Coagulase positive) was grown from one sample of faeces and two samples of vomit and heat resistant Clostridium

Welchii was also grown from one sample of faeces.

The cases occurred in 4 wards of the hospital but there was no evidence of skin infection or gastro enteric symptoms among the kitchen staff. All patients affected had eaten potted meat and no patient was affected who had not done so. The potted meat had been kept in a refrigerator for 3 days before consumption.

The second outbreak in the district occurred from the 18th to 21st July, 1955 when 8 cases were involved. Pork pies manufactured in Sheffield and brought into the district for sale were suspected of causing the outbreak but no pathological organisms were isolated from samples of pie and sausage meat obtained from the firm concerned.

The interval from ingestion to onset was 48 to 72 hours and the main symptoms were vomiting and diarrhoea of moderate severity.

Salmonella typhimurium was isolated from specimens of faeces

sent to the laboratory.

The Medical Officer of Health for Sheffield reported that specimens were taken from the van driver distributing the pies with negative results and that no cases of food poisoning had been brought to his notice.

Kirkburton Urban District

This was an isolated case of food poisoning, the patient being a male aged 21 years. He visited Blackpool for a week-end and commenced to be ill with vomiting and diarrhoea on his return home. A sample of faeces was obtained from the patient and from this heat resistant Clostridium Welchii was isolated.

The food suspected of causing the illness was tinned tuna fish and this was reported to the Medical Officer of Health for Blackpool who arranged for a tin of fish from the same consignment to be sent to the Laboratory for examination. No pathogenic organisms were isolated from this and the origin of the food poisoning was not determined. The patient made a complete recovery.

Saddleworth Urban District

There were 10 cases of food poisoning notified but in none of the cases was the diagnosis confirmed.

Winter Vomiting

A small outbreak of Winter vomiting occurred at Lepton County Infants School in December. Two children were violently sick in school and five more vomited copiously after arriving home.

A further eight cases of vomiting at home were reported amongst children attending the school, but no reason for the vomiting could be suggested and the children appeared quite fit 24 hours later.

Samples of faeces from the first two cases were sent to the Laboratory for examination but no pathological organisms were found.

Mass Radiography Service

Details of the Surveys carried out in the Divisional area during the year are as follows:—

		A	bnormalitie	s Discove	red
Survey undertaken at	Number Ex'min'd	Tuber	culosis		l
(1)	(2)	Active (3)	Inactive (4)	(5)	(6)
The Mechanics Institute, Uppermll, Saddleworth U.D.	1390	4	7	7	18
The Civic Hall, Slaithwaite, Colne Valley U.D.	1427	1	9	5	15
Messrs. D. Brown (Tractors) Ltd. Meltham U.D.	1629	3	7	13	23
The Carlile Institute, Meltham U.D.	548	1	3	6	10
The Miner's Welfare Baths, Scissett, Denby Dale U.D.	2118	1	10	22	33
TOTALS	7112	10	36	53	99

The non-tuberculosis abnormalities are classified as follows:— (Anatomical abnormalities — Congenital) ... 5 1. (Anatomical abnormalities — Acquired) ... 2. (Congenital Pulmonary Malformation) 3 4. (Bacterial or Virus Pulmonary Infections) 5. (Bronchiectasis) (Emphysema) 9. ... 1 ... (Pulmonary fibrosis: non-tuberculosis) ... 10. ... 11 (Pneumoconiosis) (Spontaneous pneumothorax) 7 11. 12. ... 1 (Benign Neoplasms of Lungs and Mediastinum) ... 5 13. 18. (Pleural thickening) (Abnormalities of Diaphragm and Oesophagus) ... 1 19. (Cardiovascular lesions: congenital) 3 20. (Pneumoconiosis and Tuberculosis) 23. ...

The information given is in respect of people actually examined during the surveys and may, therefore, include persons normally resident in other areas.

MIDWIFERY AND MATERNITY SERVICES

Domiciliary Midwifery

The number of cases attended by the domiciliary midwives during the year was 330. This shows a slight increase of 6 over last year's figure but this is accounted for by the fact that the Maternity Block at Holme Valley Memorial Hospital was closed down for a few weeks during the year owing to shortage of staff, and 11 cases originally booked for admission there were transferred to the domiciliary midwives. There was a reduction of 29 in the number of cases admitted for confinement to Holme Valley Memorial Hospital during the year.

At the commencement of the year, 5 whole-time midwives, 7 nurse/midwives and 3 relief nurse/midwives were engaged in the Division. During the year 2 nurse/midwives and 2 relief nurse/midwives resigned their appointments whilst 3 nurse/midwives and one relief nurse/midwife were appointed.

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

		Staff at 31st	December, 1955
Urban District	Authorised Establishment	Whole-time Midwives	Nurse/Midwives
Colne Valley	3	1	1
Denby Dale	2	_	2
Holmfirth	2	2	_
Kirkburton	2	1	2
Meltham	1	-	1
Saddleworth	2	1	2
Relief	2	-	2
Division 20	14	5	10

Three independent midwives signified their intention to practice in the area.

Of the 1109 births notified and attributed to the Division, 334 occurred at home. The following table shows the number of cases attended:—

MIDWIFE	CONFIN	EMENTS	HOME	VISITS
MIDWIFE	As Midwife	As Mat. Nurse	Ante- Natal	Post- Natal
Whole-time County Mid- wives.				
Lythe	24		255	644
Capes	24		249	522
Charlesworth	48	2	666	945
Cook	26	1	380	658
Graham	35	2	353	786
Nurse/Midwives.	157	- 5	1903	3555
Aspinall	1.1	_	107	251
Beaumont	15		187	381
Bewsher (Resigned 1-9-55)	8	1	91	279
Brook	15		97	320
*Cooper (Appointed 19-9-55)	1	-	31	. 59
Crabtree (Resigned 24-5-55)	7	1	69	105
Cuffe (Resigned 31-10-55)	9	-	172	278
(Apponted 1-2-55)	18	2	145	387
Jones	25	1	242	559
Kaye	1		10	63
(Appointed 24-5-55)	8	-	112	231
Midgley (Resigned 24-5-55)	. 3	-	3	32
Purdon	17	3	186	433
Spring (Appointed 24-5-55)	5	1	17	86
	143	9	1469	3464
Independent Midwives.	13	3	_	
Total	313	17	3372	7019

* temporary appointment

Of the cases attended 3 were twin births, 6 were patients who normally resided outside the Division (outward transfers) and one case was attended on behalf of a neighbouring Division. Thus 326 of the births attended were attributed to the Division. Of the remaining 8 births attributed to the Division, 7 were attended by medical practitioners and transferred immediately to hospital, and one was an inward transfer.

In addition 5 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 puerperium. During the year 258 such patients received nursing care, 981 individual visits being paid to them. Further details are given in the table on page 17a.

Notifications:

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

Death of Child			 	***	4
Stillbirths			 		10
Artificial Feeding		4.4.4	 ***		37
Laying out the Dead			 		1
Liability to be a source	e of infe	ction	 		13

Medical Assistance:

Medical aid forms sent in by midwives during 1955 numbered 174 (115 domiciliary, 59 institutional). The following table summarises the cases for which medical aid was sought:—

PREGNANCY	LYING-IN
Dom. Inst.	. Dom. Inst.
Ante-Partum Hæmorrhage 2 -	- Breast Conditions 6 —
Albuminuria 3 -	- General condition 1 -
High Blood Pressure 1 -	F11 1 1 1 1 1 1
Hydramnios 1 -	D I D I II I II I
Malpresentation ' 1 -	75
Threatened Abortion 1 -	
	18 1
9 —	
LABOUR	THE CHILD
Albuminuria 1 -	
Episiotomy 1 -	n h i
Hæmorrhage 2 -	· Chest Conditions 2 —
Labial Laceration 4	
Malpresentation 2	
Multiple Delivery 2 -	mi i
Obstructed Labour 2 -	
Premature Labour 1	12 —
Prolonged Labour 8 16	
Retained Placenta 2 -	
Ruptured Perineum 50 35	5
Stillbirth 3 1	
Uterine Inertia 1 -	
Vaginal Laceration 1 -	
76 58	3

Gas and Air Analgesia:

At the end of 1955, all the 15 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 201 cases, or 60.91% of the cases attended, as compared with 219 cases in

1954.

Pethidine was administered by domiciliary midwives to 183 cases, or 55.45% of the cases attended, as compared with 198 cases in 1954.

Trilene was administered in one case by a domiciliary midwife under the supervision of the general practitioner.

Ante-Natal Clinics

In the Division there are 3 separate Ante-Natal Clinics and 6 Clinics which are combined with the Infant Welfare Clinics. In addition occasional patients are seen at the Infant Welfare Clinics.

During the year 107 patients made 286 attendances at the various clinics, details of which are given in the following table:—

Clin	ic		No. of sessions	No. of patients	No. of attendances	Average at- tendance per session
Meltham			12	29	82	6.83
Springhead			12	6	23	1.92
Uppermill			13	32	74	5.69
*Denby Dale		1	12	4	9	0.75
*Golcar			12		_	_
*Holmfirth			12	_	_	_
*Lepton			12	22	69	5 75
New Mill			1	2	2	2.00
*Skelmanthorn			12	12	27	2.25
*Slaithwaite			12	_	-	_
	Tota	1	110	107	286	2.60

^{*}Combined with Infant Welfare Clinics.
†Patients seen at Infant Welfare Clinics.

It will be seen that the attendance figures compare unfavourably with the previous year when 127 patients made 362 attendances.

There is no doubt that in this Division, the day of the Local Authority Medical Ante-Natal Clinic is over. Personally I do not think that this should be a matter of regret. The clinics were established at a time when very little ante-natal care was given by general practitioners or midwives and they were, therefore, a part of a pioneer service.

Now 90% of expectant mothers engage the doctor for their confinements and receive from him adequate ante-natal care. It is not reasonable to expect general practitioners to refer their booked cases to ante-natal clinics unless their patients receive something the practitioners cannot provide, e.g. instruction regarding relaxation technique.

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 Denby Dale, Holmfirth, Lepton, Meltham, New Mill, Slaithwaite and Springhead. Where possible these classes are attended by a Health Visitor who gives instruction in mothercraft. This work is valuable as it gives opportunities for the Midwife and Health Visitor to work together as a team, thus affording continuity of advice and service for the mother.

These classes are becoming more appreciated and a number of cases have been referred by Medical staffs at the local hospitals and maternity home, thus relieving the pressure on the hospital physiotherapy department.

During the year 128	patients made	856 attendances as	follows:-
---------------------	---------------	--------------------	-----------

Clinic		No. of Sessions	No. of Patients	No. of attendances	Average attendance per session
Denby Dale		45	24	183	4.07
Holmfirth		40	14	93	2.33
Lepton		44	15	144	3.27
Meltham	***	38	17	107	2.82
New Mill		29	9	45	1.55
Slaithwaite		44	42	227	5.16
Springhead		22	7	57	2.59
Tot	al	262	128	856	3.27

In view of staff shortages and sickness, the Springhead classes were temporarily suspended during the last quarter of the year. It is hoped that these classes will re-commence early in 1956.

"Flying Squad" Arrangements

There have been no changes in the arrangements for "Flying Squads" based on the Huddersfield Royal Infirmary and the Oldham and District General Hospital. No calls were made on the squads to attend patients in the Division during the year.

Institutional Midwifery

Apart from the fact that owing to staffing difficulties the Holme Valley Memorial Hospital was closed to maternity patients for a few weeks during the summer 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 1,109 births attributed to the Division, only 334, or 30.12% took place at home, as compared with 330 or 30.19% for the previous year.

A summary of the cases for which medical aid was sought by midwives in institutions is given on page 15a.

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.

			Ι	ay (of D	ischa	rge				_1	
	3	4	5	6	7	8	9	10	11	12	13	Tota
Colne Valley U.D.				1			1	1	1	1		
No. of Patients	1	-	1	-	1	2	12	38	13	3	2	73
No, of Visits	3	-	5	-	6	10	58	144	36	8	4	274
Denby Dale U.D.							1					
No. of Patients	-	-	-	-	-	1	7	12	12	2	3	37
No. of Visits	-	-	-	-	1-1	4	30	45	43	7	4	133
							1					
Holmfirth U.D.						0	1 0	111	0		0	
No. of Patients	-	-	-	-	-	10	2	14	2 7	-	2	25
No. of Visits	-	_	-	-	-	10	9	1 59	1	-	1	9:
Kirkburton U.D.					i		1				i	
No. of Patients	-	-	-	-	-	-	13	26	10	4	4	57
No. of Visits	-	-	-	-	-	-	63	95	30	8	8	204
Meltham U.D.												
No. of Patients		_	_	1	i — I	1	1	6	5	_	- i	1-
No. of Visits	-	-	-	6	-	6	4	25	14	-	-	58
Saddleworth U.D.												
No. of Patients	_	_	_	_	i— i	2	2	25	22	2	2	55
No. of Visits	-	_	_	_	-	11	9	101	86	10	6	223
Total No. of Patients	1	_	1	1	1	8	37	121	64	11	13	258
rotal 110, of rationts	1						i		i			
m . 1 17 177	"						170	100	210	99	20	98
Total No. of Visits	3	-	5	6	6	41	173	469	216	33	29	98

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

ADMISSIONS TO MATERNITY HOSPITALS

Total	292	48	128	148	45	57	16	11	12	18	775	334	1109
Saddleworth	1	84	1	1	1	57	16	1	9	1	128	73	201
Meltham	52	ı	1	17	7	ı	!	1	1	61	52	16	89
Kirkburton	94	1	ı	28	7	1	ı	77	8	7	140	62	202
Holmfirth	26	ı	128	***	10	1	i	ì	-	61	167	78	245
Denby Dale	50	1	ı	2	3	1	ı	4	67	10	99	46	112
Colne Valley	97	1	ı	96	23	1	1	1	ı	ıc	222	59	281
Place of Confinement	Princess Royal Maternity Home	Woodfield Maternity Home	Holme Valley Memorial Hospital	St. Luke's Hospital, Huddersfield	Huddersfield Royal Infirmary	Hospital	Lakes Hospital, Ashton-U-Lyne	Other Maternity Hospitals	Other General Hospitals	Private Nursing Homes	Total Institutional	Domiciliary	Total Confinements

DISTRIBUTION OF WELFARE FOODS

The arrangements for the distribution of Welfare Foods have continued as detailed in my report for the last year, and no serious difficulties have been encountered. The only changes which have taken place during the year in the distribution arrangements are as follows:—

Golcar—as from the 1st January, 1956 the foods are sold on a Monday afternoon from 2-0 — 4-0 p.m. instead of on a Wednesday afternoon as heretofore.

Lepton—as from 1st September, 1955 the foods are sold on a Thursday afternoon from 2-0 — 4-0 p.m. instead of on a Tuesday afternoon as heretofore.

Shepley—as from the 1st January, 1956 the selling sessions were reduced from the 2nd and 4th Wednesday afternoons in the month to the 2nd Wednesday afternoon in the month only. The sales were so small that it was considered that 2 sessions per month were not justified.

At the 21 distribution centres in the Division, the following welfare foods were distributed during the year.

National Dried Milk 15,568 tins

Orange Juice 48,467 bottles

Cod Liver Oil 10,490 bottles

Vitamins A and D Tablets 3,173 packets

Full details are shown in the following table.

THE REAL PROPERTY AND PERSONS ASSESSED.	Hours	urs			Total	Sales		A	verage Sale	Average Sales per Session	u u
Distribution Centre	or opening	Time	No. of	N.D.M.	C.L.O	Vit.	o.J.	N.D.M.	C.L.O	Vit. Tabs.	o.J.
	Day	p.m.	amoreo de	Tins	Bts.	Pkts.	Bts.	Tins	Bts.	Pkts.	Bts.
Coine Valley											
GOLCAR Woodville, Scar Lane	Mon.	61 	52	1127	857	173	3496	21.67	16.47	3.32	67.23
LINTHWAITE Methodist Church, Stones Lane	Tue.	1-6	30	999	879	126	2218	13.87	7.89	2.62	46.20
MARSDEN Conservative Club	Thur.	4	51	1245	656	151	2157	24.41	12.86	2.96	61.94
SLAITHWAITE Civic Hall	Wed.	2-4	52	1845	1053	312	4894	35.48	20.25	6.00	94.11
Denby Dale											
DENBY DALE Victoria Memorial Hall	1st & 3rd Wed.	- c1	27	143	537	152	2846	6.16	22.36	6.33	118.58
EMLEY Reading Room	3rd Thur.	24	12	28	154	7	664	2.33	12.83	3.66	55.33
SKELMANTHORPE Wesley Reform Chapel	Wed.	57	52	384	447	166	2309	7.38	8.59	3.19	44.40
Holmfirth											
HOLMFIRTH Methodist Sunday School	Thur.	2—4	52	2757	1818	550	7709	53.01	34.96	10.57	148.25
HONLEY Southgate Methodist Sunday School	Fri.	4-61	ic.	745	667	991	3199	14.60	13.07	3.25	62.72
NEW MILL Council Offices	Wed.	2-4	52	1176	810	236	2967	22.61	15.57	4.53	57.05

Kirkburton					_						
FLOCKTON Church School	1st Tue.	2.30—3.30	12	1	41	61	144	1	3.41	0.16	12.00
GRANGE MOOR Upper Whitley County School	Mon.	3.45—4.00	5.2	153	81	9	283	2.94	1.56	0.12	5.44
KIRKBURTON Drill Hall	Tue.	2-4	48	732	411	145	1853	15.25	8.56	3.02	38.60
KIRKHEATON Council Offices	2nd & 4th Wed.	3-4	23	311	106	36	473	13.52	4.60	1.56	20.56
LEPTON Council Offices	Thur.	2-4	49	359	390	73	1213	7.34	7.95	1.48	24.75
SHEPLEY County School	2nd Wed.	2.30—3.30	23	271	180	37	208	11.78	7.82	1.60	22.08
Meltham											
MELTHAM Baptist Schools	Tue.	2-4	48	1438	999	255	2846	29.95	11.79	5.31	59.29
Saddleworth											
DELPH Independent Sunday School	Tue.	1.30—3.30	48	488	185	9	1077	10.16	3.85	1.35	22.43
GREENFIELD Wesleyan Sunday School	Thur.	1.30—3.30	51	705	298	118	1968	13.82	5.84	2.31	38.58
SPRINGHEAD Congregational Sunday School	Fri.	2-4	49	436	350	141	2040	8.89	7.14	2.87	41.63
UPPERMILL Mechanics Institute	Wed.	2-4	52	554	504	219	2603	10,65	69.6	4.21	50.05
TOTALS			901	15568	10490	8173	48467	17.28	11.64	3.52	53.79

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 experienced 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.

In view of the appointment of an additional full-time Assistant County Medical Officer it became necessary in December, to revise the medical staffing at some of the Clinics and the services of 4 general practitioners who had previously undertaken sessional duties at the Clinics had to be terminated. This step was taken with reluctance as the general practitioners concerned had given loyal and co-operative service over a number of years. Because of these staff changes the Golcar Infant Welfare Clinic is now held on a Monday afternoon with effect from the 1st January, 1956, instead of Wednesday afternoon as here-tofore.

The Clinic at Lepton, previously held on a Tuesday afternoon, is now held every Thursday afternoon as from the 1st September, 1955.

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 2,250 children were seen and a total of 20,553 attendances were made, details of which are shown in the following table, as compared with 2,502 children and a total of 22,147 visits in the previous year.

	 No. of	atter	nded	ildren and orn in:	who	by c	hildr of	ttend en wl attend e:—		ten	erage dance Sessio	per
Clinic	sess-	1955	1954	-53 1950	Total			2—5 yrs.	Total	—1 yr.		2—5 yrs.
Delph	. 47	19	23	15	57	336	245	426	1007	7.15	5.21	9.06
Golcar	52	43	67	81	191	998	352	208	1558	19.19	6.77	4.00
Greenfield .	50	34	15	21	70	553	308	434	1295	11.06	6.16	8.68
Holmfirth	51	69	72	134	275	1048	358	467	1873	20.55	7.02	9.16
Honley	50	50	35	86	171	596	286	294	1176	11.92	5.72	5.88
Kirkburton .	48	51	83	31	165	1001	217	93	1311	20.85	4.52	1.94
Lepton .	49	53	19	22	94	395	94	82	571	8.06	1.92	1.67
Linthwaite .	48	21	40	65	126	514	209	307	1030	10.71	4.35	6.40
Marsden .	51	48	49	128	225	792	512	685	1989	15.53	10.04	13.43
Meltham .	47	48	48	91	187	780	300	257	1337	16.60	6.38	5.47
New Mill .	52	35	46	103	184	691	239	431	1361	13.29	4.60	8.29
Slaithwaite	50	39	41	61	141	742	407	432	1581	14.84	8.14	8.64
Springhead .	50	34	43	42	119	792	332	523	1647	15.84	6.64	10.46
Denby Dale .	24	36	35	23	94	492	185	175	852	20.50	7.71	7.29
Skelmanthorp		21	21	23	65	303	116	46	465	12.63	4.83	1.9:
TT	52	42	24	20	86	597	411	492	1500	11.48	7.90	9.40
Total	745	643	661	946	2250	10639	4571	5352	20553	14.27	6.14	7.18

The monthly sessions of the Weighing Centre at Emley have continued, 14 individual children having made 87 attendances, as compared with 21 children making 112 attendances in 1954.

Premature Babies

During the year 51 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, 3 died during the first 48 hours and the remaining 10 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

	4	Zum	ber (B	r of Pre Births	Number of Premature Births	ıre			Z	ump	er D	Number Dying (days of survival).	(day	Jo s.	survi	ival).					C	ž	Jue	I San	Number Surviving	18	Percen-	Percent-
		Bor	Born Alive	live		Don			Firs	First Week	sek					Seco	Second Week	'eek			14 up				2		Survival in 1955	Survival in 1954
	K	B1	B2	O	H	Dead	-	61	60	4	52	9	1	00	6	10	11	12	13	14	days	K	B1	B2	O	H	0007	1007 111
1	6	1	10	13	27	63	4	1	1	1	1	1	1	1.	t	1	1	1	1	1	1	œ	1	4	11	103	85.18	100.0
	+	1	10	9	12	61	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	10	5	11	91.6	97.74
-	1	1	63	10	1-	3	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	4	-	4	2	71.43	66.67
	1	I	63	1	4	ಣ	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	61	1	3	75.0	40.0
	63	ı	63	3	1-	1	4	-	1	1	t	1	1	1	1	1	1	1	1	1	ı	1	1	1	1	G1	28.57	25.0
	1	1	ı	1	C3	89	1	1	1	1	1	t	1	1	L	1	1	ı	ť	1	ı	1	1	1	1	1	50.0	0.03
-	1	1	1	33	65	60	1	co	1	1	1	E	1	1.	1	1	1	1	1	1	1	1	1	1	1	1	0.00	0.00
	ı	Τ	t	1	-1	П	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	0.00
	t	1	1	G1	c1	1	П	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	0.00	0.00
-	13	-	16	34	64	18	12	9	-	1	1	1	1	1	1	1	1	1	1	1	1	10	-	13	21	45	70.31	78.57

A: Born at home and attended by a midwife.	B2: Born in a Maternity Home.	C: Born in a General Hospital. T: Total.
1000	5.91	
Total adjusted live births	Percentage of total live births	Number born dead

At the end of the year there were 3 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 three occasions.

Nurseries and Child Minders' Regulations Act, 1948

One person in the Division is registered as a child minder. She is the proprietress of a small kindergarten school in Saddleworth and the permitted number of children under 5 years of age she may mind is 10. At the end of the year 12 children were in attendance, 5 of them being under 5 years of age.

The proprietress is establishing what is virtually a small kindergarten school and intends to apply to the Ministry of Education for registration as an Independent School in the near future.

There are no day nurseries in the Division provided by the County Council but a private industrial day nursery at Thornleigh Hall, Grotton, Saddleworth, is registered by the County Council and provides accommodation for 6 babies, 22 tweenies and 43 toddlers. Although this nursery is still registered it was temporarily closed down in October owing to trade recession. The firm intend to re-open it at a later date.

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. The statistics relate to the whole Division.

The policy of visiting each school twice yearly for the purpose of routine medical inspections has continued throughout the Division. As in previous years the defects found which required treatment or observation were mainly 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, 49 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 difficulty in placing educationally sub-normal pupils either in special schools or arranging special educational treatment for them in ordinary schools.

Schools in the Area

There are in the Division 79 schools or separate departments, which include the Royd Edge Special School, Meltham.

The approximate number of pupils on the registers in December, 1955 was 11,995 (an increase of 128 as compared with the previous year) and was composed of:—

Infants	Juniors	Seniors
2,949	5,330	3,716

Of the 72 Primary and "Through" Schools 36 are Voluntary and 36 are County Schools.

The distribution is as follows:-

		olne		nby ale		Iolm- firth	-	Cirk- urton		Mel- nam		ddle- orth	T	otal
Type of School	Schools	Pupils	Schools	Pupils	Schools	Pupils	Schools	Pupils	Schools	Pupils	Schools	Pupils	Schools	Pupils
Primary	8	939	9	981	14	1643	13	1409	5	585	11	1226	60	6783
Secondary Modern	1	349	1	691	1	566	1	272	-1	-	1	374	5	2252
Through	10	1788	-1	_	_		1	291	-1	_	1	192	12	2271
Grammar	-	_	-	_	1	635	-	_	-1	_	-	_	1	635
Special	-	_	-1		_	_		-	1	54	-	_	1	54
All Types	19	3076	10	1672	16	2844	15	1972	6	639	13	1792	79	11995

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 four age groups, i.e. entrants (5 years +), juniors (7 years +), intermediate (10 years +) and seniors (14 years +) continued throughout the year. In all 157 separate inspections were carried out at the 79 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 5130 periodic inspections were carried out as compared with 4490 in 1954.

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

Prescri	bed	age	grou	ps:-

Entrants		 	***	1457
7 to 8 year group		 		1642
Last year primary		 		888
First year secondary	y	 		228
Last year secondary		 		698
Other periodics		 		217
	Total	 		5130

Findings of Medical Inspections

The following figures show the incidence of certain defects in the 5130 children who were examined at the periodic inspections:—

			No. of Childre	
Defect or Disease			Treatment	Observation
Nose or Throat		 	30	320
Speech		 	13	63
Cervical Glands		 	6	147
Heart and Circula	tion	 	30	54
Lungs		 	11	117
Orthopædic		 	193	250
Eyes		 	56	1075

Further details will be found in the table on Page 28a.

Particulars 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	1	160	150
7 to 8 year group	19	121	133
Last year primary	7	65	71
First year secondary	3	14	17
Last year secondary	5	43	43
Other Periodics	4	15	13
TOTAL	39	418	427

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 inspection.

							Number of	of Defects.	
	Defe	ect or D	iconce			Periodic I	nspections	Special In	nspections
Delect of Disease.			Requiring Treatment	Requiring Observa- tion but not treatment	Requiring Treatment	Requiring Observa- tion but not treatment			
Skin						12	48	3	22
Eyes:	(a) (b) (c)	Vision Squint Other				39 14 3	931 128 16	92 10 -	680 47 7
Ears:		Hearin Otitis I Other	Media			8 2 3	59 51 20	1 2	36 20 13
Nose o	or T	hroat				30	320	55	279
Speech	h					13	63	12	48
Cervic	al G	lands				6	147	-	80
Heart	and	Circula	tion			30	54	3	36
Lungs						11	117	3	108
Develo	opm	ental (a (b) Hern) Othe	iia r		1 3	6 89	1 -	10 20
Ortho	paed		osture lat Fo	oot		10 100 83	30 45 175	2 25 37	11 30 86
Nervo	us S	ystem (a) Epi b) Oth			3 28	6 27	3	8 33
Psych	ologi	ical (a) (b)	Deve	lopme	nt	2 5	188 49	_	49 26
Other						51	73	18	155
		TOTA	AL.			457	2642	267	1804

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:

"A" (Good) = those better than normal.

"B" (Fair) = those normal.

"C" (Poor) = those below normal.

	Number	Number (A) Good				(C) Foor		
Age Groups	of Pupils Inspected	No.	% of Col. 2	No.	% of Col. 2	No.	% of Col. 2	
Entrants	1457	686	47.1	748	51.3	23	1.6	
7 to 8 year group	1642	820	49.9	798	48.6	24	1.5	
Last year primary	. 888	395	44.5	479	53.9	14	1.6	
First year secondary	228	54	23.7	171	75.0	3	1.3	
Last year secondary	698	278	39.8	408	58.5	12	1.7	
Other periodics	217	61	28.1	156	71.9	_	-	
TOTAL	5130	2294	44.7	2760	53.8	76	1.5	

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 classified as "Specials" at the first examination in each year, and as "Follow-up" 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 232 children were examined at home or at school for various reasons. These include non-attendance at school, children returning to special schools, and also those examined with a view to providing special educational treatment.

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.

The total number of inspections made was 37,097 and 454 instances of infestation were found as compared with 38,417 and 507 respectively in 1954. There were 308 individual children (2.6% of the school population) found to be infested on at least one occasion, a decrease of 171 as compared with the previous year.

Statistics relating to these inspections are as for	ollows:-	-	
			316
			10
Total number of home visits paid			302
Total number of individual children found to be	vermi	nous	308
			1
Total number of Cleansing Orders issued			Nil

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 662 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 90 special clinic sessions were arranged and these were attended by 985 children who made 1054 attendances. Spectacles were prescribed for 275 children, 441 were found not to require any change, and 269 did not require spectacles.

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 3 sessions were held and 46 individual children were seen, 29 being referred for operative treatment.

Children from the Saddleworth area are referred to a special clinic arranged by the Hospital Management Committee at the Oldham and District General Hospital. Of the 32 cases referred 28 were recommended for operative treatment.

Octhopædic Clinics

The special monthly session for West Riding children conducted by Mr. J. Hunter Annan, F.R.C.S. has continued at the Huddersfield Royal Infirmary. In order to cope with the number of children referred several additional sessions were necessary. At the 16 sessions held during the year 233 individual children made a total of 348 attendances. In addition 15 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			 		 43
Club Foot			 		 9
Knock Knee		***	 		 41
Hallux Valgu			 		 17
Other Deform	ities of	f Toes	 		 49
Fractures			 		 12
Postural Defe		s	 		 15
Other Deform			 	***	 2
Congential Co		ns	 		 26
Acute Poliom			 		 9
Perthes Diseas			 		 7
Tubercular Co		ns	 		 2
Other Conditi	ons		 		 16
					248

Child Guidance Treatment

Doctor M. M. MacTaggart, the County Psychologist, continued to hold clinics at Wakefield and Mirfield until August, when she resigned her appointment. In October, Doctor S. M. Leese was appointed County Psychiatrist, and treatment was recommenced at the clinics. During the year 31 individual children received treatment.

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 92 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 Divisional Health Office, Golcar; The Mechanics' Institute, Uppermill; Council Offices, Honley; Civic Hall, Slaithwaite; Scholes County School and Kirkburton C. of E. School. During the year 195 sessions were held at the various centres. The total number of attendances made by the 118 children was 1378.

This year has seen a great improvement in the service with a clinic held at the Civic Hall, Slaithwaite. This has proved most successful, especially in the group treatment of stammerers. It has also meant that children from that area have not had to travel to Huddersfield for treatment and consequently attendance is much more regular. Cooperation between schools and clinics has improved and the main difficulty facing us now is the very poor attendance of children during school holidays, when the majority of children fail to attend at all. It is hoped to have some improvement in the coming year.

Details of the children treated are shown in the following table	e:—
No. of new cases treated during the year	40
No. of cases already attending for treatment from previous	
year	78
Total number of cases treated	118

No. of cases discharge	ed during	the year	:			
Speech Normal						22
Speech improv						12
Unsuitable for						2
Left School						2
By reason of a	ion-attenda	ince				3
No. of cases awaiting	treatment	at the e	nd of t	the yea	r	10
No. of visits made to						5
No. of home visits						2

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 un treatment during the year.			
				By the Authority	Otherwise		
Ringworm:	(i)	Scalp	 	 _	_		
	(ii)	Body	 	 _	_		
Scabies			 	 _	_		
Impetigo			 	 12	6		
Other Skin	Dise	ases	 	 22	10		
Total			 	 34	16		

2. Eye Diseases, Defective Vision, and Squint.

				Number of cases dealt with.			
				By the Authority	Otherwise		
External and Other, ex Refraction and Squint				_	28		
Errors of Refraction, in	cludin	g Squi	nt		716		
Total				_	744		
Number of Pupils for	whom	Spect	acles				
were: (a) Prescribed					380		
(b) Obtained				_	380		

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

	Number of cas	ses treated.
Received Operative Treatment:	By the Authority	Otherwise
(a) For diseases of the Ear (b) For Adenoids and chronic Ton-	_	2
sillitis (c) For other Nose and Throat con-		139
ditions	_	3
Received other forms of treatment	26	4
Total	26	148

4. Orthopædic and Postural Defects.

(a) Number treated as in-patients in Hospitals	11	
	By the Authority	Otherwise
(b) Number treated otherwise, e.g. in Clinics or Out-Patient Departments	_	20

5. Child Guidance Treatment.

			Number of cases treated.			
			In the Author- ity's Child Guid- ance Clinics	Elsewhere		
Number of Pupils Guidance Clinics		t Child	31	9		

6. Speech Therapy.

	Number of cases treate			
	By the Authority	Otherwise		
Number of Pupils treated by Speech Therapist	118	4		

7. Other Treatment Given.

	Number of cas	ses treated.
	By the Authority	Otherwise
(a) Miscellaneous Minor Ailments	 228	138
(b) Ultra Violet Light	 92	_
Total	 320	138

Dental Treatment

With an improved staff of Dental Officers a full dental service has been available for all children attending schools in the Colne and Holme Valleys, Meltham and Saddleworth.

Children from other parts of the Division have received treatment at the Honley, Slaithwaite and Wakefield Clinics on request, although as yet there is no provision for routine dental inspections at schools in Denby Dale and Kirkburton.

Details of the children inspected are summarised below:-

	Honley Clinic	Slaithwaite Clinic	Uppermill Clinic
No. of children inspected No. of children found to	 3314	2858	1700
require treatment	 1074	2027	1169
No. of children treated	 773	1409	792
No. of attendances	 2030	2801	1769

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	Diagnosis	Date Admitted	Date Discharged
Pinderfields Hospital School, Wakefield	(D.P.) 3 (L.H.) (J.L.)	T.B. Synovitis Little's Disease Perthes Disease	8-2-55 15-1-53 15-7-55	7-10-55 25-1-55
Leasowe Children's Hospital School, Wallasey	(G.L.) 2 (M.K.)	Cerebral Palsy Cerebral Palsy	30-6-50 11-1-46	26-11-55
Heritage Craft School, Chailey	(C.P.) 2 (S.R.)	Paresis Congential Paraplegia	26-4-50 6-1-54	
Adela Shaw Orthopaedic Hospital, Kirbymoor- side	(H.N.) (S.G.) 4 (I.E.) (A.H.)	Congenital Spina Bifida Perthes Disease Perthes Disease Muscular Dystrophy	8-10-55 21-5-54 21-5-54 1-6-55	16-7-55 7-12-55
Fielden Long- stay Hospital, Todmorden	(A.M.) 3 (A.S.) (S.P.)	Nephritis Bronchitis Primary Tb.	6-54 12-54 10-5-55	6-55 8-55 10-55

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 3 children were sent to the following convalescent

nomes:—		
Craig Convalescent Home, Morecambe		1
St. Joseph's Convalescent Home, Freshfield, near Liverpool		1
Ormerod Convalescent Home, St. Annes-on-Sea	02.220	1

Infectious Diseases

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

There was an increased incidence of Measles during the year when 707 cases occurred as compared with 89 cases in 1954. The cases were widespread throughout the area.

Of the 66 cases of Whooping Cough reported 33 occurred in the

Kirkburton U.D.

In all, 85 cases of dysentery were notified amongst school children. The disease was prevalent in the Kirkburton area during the Spring and early Summer, but the main outbreak occurred in the late Autumn and was centred on Kirkburton C. of E. School where 62 cases were confirmed.

	1	1	1	1	1	Ī	1
		be	5	ig.		Poliomyelitis	100
SCHOOL	99	Whooping	Dysentery	Pneumonia	4	ıve	Erysipelas
	Measles	ngh	Sen	enn	Scarlet	ion	VSII
	Me	88	D	Pn	Sc	Pol	Er
Clough Head County	3	1 1	1	_	- 1	-	1 -
Golcar C. of E	12	-	_	-	- 1	-	-
Knowl Bank County Infants Lingards C. of E	27	_			1	_	_
Linthwaite C, of E.	4	_	_	_	2	1	_
Linthwaite County Linthwaite County Infants	17	1	-	-	-	-	-
Marsden County Infants	56	4			1	_	
Marsden Secondary Modern	4	-	_	-	1	-	-
Nields County Scammonden C. of E.	31		_	=	1	1	=
Scapegoat Hill County	1	_	_	_	- 1	_	-
Slaithwaite C. of E	13 30	9	-	-	-	-	-
West Slaithwaite C. of E	1	1	_	_	=	=	=
Wellhouse County	2	1	_	2	-	_	-
Wilberlee County Birdsedge County	16	=	_		1	=	-
Clayton West County	1	-	_	_	-	_	-
Cumberworth C. of E Denby C. of E	6 8	-	_	-	1 —	I —	! -
Denby Dale County	43	_	1	=	1	_	_
Emley County	17	-	_	_	-	_	-
Scissett C. of E	2 2	=	_		-	-	-
Skelmanthorpe C. of E	1	-	_	_	_	=	=
Skelmanthorpe County Brockholes C. of E	8	-	_	-	-	-	-
Hinchliffe Mill County	15	2	_	=		=	=
Holmbridge C. of E	4	-	_	-	-	_	-
Holmfirth County	24	8	_	1	3	_	_
Honley C. of E	3	-	_		_	_	_
New Mill C. of E.	16	1	_	-	- 1	-	-
New Mill County Infants	6	1	_	=	1	_	_
Scholes County	2	2	_	-	-	-	-
Upperthong County Wooldale County	13	_	_	=	1	_	=
Flockton C. of E	15	-	-	-	- 1	_	i —
Highburton C. of E Kirkburton C. of E.	20	22	62	-	-	-	-
Kirkburton Secondary Modern	_	-	7		_	_	1
Kirkheaton C. of E	7	-	_	- 1	- 1	-	_
Kirkheaton C. of E. Infants Lepton C. of E	30 7	1	1	=	=	_	=
Lepton County Infants	25	4	1	_	_	_	-
Lepton County Shelley C. of E	6	3	1	_	_	-	_
Shelley County	1	_	_	_	=	_	_
Shepley County	36	-	_	-	1	-	-
Upper Whitley County	6		_	_	=	=	=
Meltham C. of E	1		_	-	- 1	_	_
Meltham C. of E. Infants	8 25	=	_	-	-	-	-
Delph County Primary	32		_	_	1	_	_
Denshaw C. of E.	2	-	-	-	-	-	-
Diggle County Dobcross C. of E	14	1	_	_	1	_	
Greenfield St. Mary's	3	-	_	_	- 1	-	-
Greenfield County Lydgate C. of E.	28 19	_			6	1	_
Saddleworth Parochial	6				2	_	_
Scouthead C. of E	1 3	_	1	-	-	- 1	-
Uppermill Secondary Modern	_	=	3	_	_	=	=
TOTAL	707	66	85	3	29	3	1
	35a						-

In addition the following cases of other infectious diseases were reported by various Head Teachers.

German	es	 	57	Chicken	Pox	 	 178
Impetigo		 1.6.4	8	Mumps		 	 22
Jaundice	 	 	2				

In December a small outbreak of Winter Vomiting involving 15 children occurred at Lepton County Infants School.

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 re-inforcement injections:—

	,		Primary Immunisations	Re-Inforcement Injections
Colne Valley		 	34	355
Denby Dale		 	33	93
Holmfirth		 	54	413
Kirkburton		 	115	425
Meltham		 	_	18
Saddleworth		 4 4 9	1	25
			237	1329

B.C.G. Vaccination

In accordance with the County Council's scheme for the prevention of Tuberculosis, arrangements were made to offer B.C.G. Vaccination to all children aged 13-14 years. Vaccinations were carried out during April and November, and in all 246 were vaccinated.

Details are given below of the work undertaken during the year: No. of children offered B.C.G. 768

ed D.	J.U.				100
					484
	g)	465
					209
					45
					249
					246
	testing	testing	testing	testing	testing

Protection of Children against Tuberculosis

In order to lessen the possibility of children coming in contact with cases of active Tuberculosis, the Ministry of Education require all new entrants to the teaching profession to undergo an X-ray examination of the chest before taking up their duties. The County Council have also agreed that the same requirements shall apply to the non-teaching staffs of schools, including part-time workers in the school

meals service. The examinations are arranged by the Department with the nearest Mass Radiography Unit available. In addition, all teachers and non-teaching staff are urged to take advantage of the facilities provided by the Mass Miniature Radiography Service for periodic examination. Special sessions are arranged for staff at each visit of the Unit to the area.

In January, 1955, notification was received to the effect that a male teacher at a Secondary Modern School was suffering from pulmonary tuberculosis. After consultation with the Consultant Chest Physician and the Medical Officer in charge of the Bradford Mass Radiography Unit, it was agreed that X-ray examination should be offered to all the children and staff likely to have been contacts. Transport was arranged and 133 pupils and 11 staff attended for examination. Fortunately, no cases of tuberculosis were found.

Deaths in School Children

During the year 4 deaths were registered amongst school children (2 boys and 2 girls) aged 9 to 12 years. The following are brief details

Sex and Age	Area	Cause of Death
1. Girl aged 11	Colne Valley	1(a) Cachexia.
		(b) Neuroblastoma and multipe secondary deposits in liver.
2. Boy aged 12	Holmfirth	Carbon monoxide (coal gas) poisoning accidently sustained.
3. Girl aged 11	Kirkburton	1(a) Acute Myeloblastic Leukaemia
4. Boy aged 9	Meltham	Comminuted fracture of skull and laceration of the brain sustained when struck by a motor bus.

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 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.

At the end of the year 345 children (2.9% of the school population) were receiving meals at the expense of the Education Committee as compared with 308 (2.6%) in 1954. The number of children taking school meals was 7291 (60.8% of the school population) compared with 6616 (55.8%) in 1954. A total of 8245 (68.7%) were having school milk compared with 7985 (67.3%) in 1954.

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. During the year 55 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 opinion of the Medical Officer, unsuited, are pointed out.

During the year recommendations were made that 67 children should not be employed in one or more of the following categories of work.

1.	Heavy manual work				8
	Work in dusty atmosphere				3
	Work involving normally acute vision				12
4.	Work involving normal colour vision				23
5.	Work at heights				3
6.	Work near moving machinery or mov	ring	vehicles		19
	Work involving prolonged standing, m				
	quick movement from place to place	e			1
8.	Work requiring freedom from damp			kin	
	defects				1
	Work in a damp atmosphere				1
10.	Work involving normal hearing				2
	Work involving exposure to bad weat	her			2

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 some pupils still take up work in unsuitable occupations.

In connection with the Employment of Children Bye-Laws 44 children were examined as regards their suitability for employment outside school hours. Certificates were granted for employment as follows:—

Newspaper	Delive	ry	 	 35	
Errand Boy	y		 ***	 1	
Shop Assist	tants		 	 5	
Packer			 	 1	
Labourer			 	 1	
Entertainme	ent		 	 1	

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 49 cases. During the year 33 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:-

	****		A CONTRACTOR	CICEDOO	 	
Maladjus	ted				 	 6
Partially	Deaf				 	 2
Deaf					 	 9
Delicate					 	 13
Speech					 	 61
Partially	Sight	ted		***	 	 3
Blind					 	 1
Physically	y Ha	ndica	apped		 	 25
Education					 	 141
						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. In addition arrangements made with the Oldham Education Authority for the admission of suitable children to their Special Day School for educationally sub-normal children at Chaucer Street, Oldham have continued. The facilities available, however, are still inadequate, particularly for Educationally Sub-Normal pupils, 28 of whom are waiting for admission in special schools, and 88 for special treatment in ordinary schools at the end of the year.

At the beginning of the year 48 children were in attendance at Special Schools and 34 children (12 educationally sub-normal, 5 delicate, 10 physically handicapped, 4 deaf, 3 maladjusted) were admitted during the year. There were 24 discharges (9 delicate, 7 physically handicapped, 7 educationally sub-normal, 1 deaf) leaving a total of 58 children in attendance at Special Schools at the end of the year, the

details being as	follow	s:—
Category N	No. Av	vay Location of Special School
Blind	1	Yorkshire School for the Blind, York.
Maladjusted	3	1 at Wennington Hall School, Hornby. 2 at Hoober House School, Wentworth, near Rothg-ham.
Partially Sighted	3	3 at School for Partially Sighted Children, Fulwood, Preston.
Deaf	8	 at Lawns House School, Leeds. at Royal Residential School for the Deaf. Manchester. at Odsal House School for the Deaf, Bradford at Yorkshire Residential School for the Deaf, Doncaster. at Beever Street Day School, Oldham.
Delicate	5	2 at Netherside Hall School, Grassington. 2 at Ingleborough Hall School, Clapham. 1 at Oak Bank Open Air School, Sevenoaks, Kent.
Educationally Sub-normal	25	 4 at Royd Edge, Meltham. 5 at Baliol School Sedbergh. 4 at Springfield Special School, Horsforth. 1 at Rossington Hall Special School, near Doncaster.

1 at Whinburn School, Keighley. 1 at Beechwood Boarding School for Senior

Girls, Liverpool.

1 at Maghull Home for Epileptics, Liverpool. 1 at Newton-Dee House, Bieldside, Aberdeen-

7 at Chaucer Street Special School, Oldham.

Physically Handicapped 4 at Holly Bank School, Huddersfield.
 1 at Leasowe Children's Hospital School.
 2 at Heritage Craft School, Chailey, Sussex.

1 at National Children's Home, Chipping Norton, Oxfordshire.

1 at Pinderfields Hospital School, Wakefield. 1 at White Ness Manor Special School, near Broadstairs.

2 at Adele Shaw Orthopaedic Hospital, Kirby-moorside.

1 at Derwen Cripples Training College, Oswestry

There were 10 physically handicapped children who were receiving special educational treatment in ordinary schools, where they were considered to be suitably placed.

At the end of the year 35 pupils in the following groups were awaiting placement in Special Schools or Hostels:—

Maladjustee	d				 2
Delicate					 1
Educationa	lly Sul)-norma	al		 28
Physically	handic	apped	***	***	 2
Deaf					 1
Partially D	eaf				 1
					35

Audiometric Survey

During the year, there was an opportunity to use a gramophone audiometer in the Division.

I am indebted to Dr. K. M. C. Haigh for the following report:-

"It was decided to test the hearing of children born in 1946 and who were therefore 8-9 years old. This age group is recommended by the Advisory Council on Education in Scotland in their report on 'Pupils who are Defective in Hearing,' and was considered by them to be the most advantageous time for testing with the gramophone audiometer. However, it soon became apparent that some of the children were failing the test for reasons other than defective hearing. It was possible to test 20 children at a time using the gramophone audiometer but owing to the widespread nature of the Division it was very difficult to arrange any uniformity of conditions for the test. The smaller village schools giving much better results than the larger and more overcrowded schools in the built up areas. It was also noticed that the intelligent children did much better and were able to understand the test quicker and pass first time.

A total of 833 children completed the first test, and of these 308 were referred for re-testing. It was, however, only possible for 278 children to complete the second test, the remaining 30 being absentees from school, either because they had left the district or because of illness. At one school an outbreak of dysentery coincided with the second test.

Details are given below of the children who completed both tests:

	Total Failures	% of Test I	8.5%
	Total	No.	89
	Both Ears Failures	% of Test I	1.2%
П	Both	No.	10
GROUP TESTING - TEST II		% of total in Test I	7.2%
STING		Total	58
THE TE	es II	9-11 db	16
GR	Failures II	12-14 db	30
		15-17 db	9
		18 db +	9
		Total Tested	278
ΙΙ		% of Total Tested	34.6%
GROUP TESTING — TEST I	Failures I	Total Ref. for Test II	278
	Fai	Both	98
ROUP I		One	192
5		Total Tested	803

Conclusions: Of the 803 children who completed both tests 34.6% had some impairment in one or both ears at the first test and this high figure was evidently due to external factors, as the percentage was reduced to 7.2% in the second test. From this group 68 children are awaiting further testing on the Pure Tone Audiometer. The ten children who failed twice in both ears are to be seen at the Routine Medical inspections by the School Medical Officer. One of these who had already had an adenotonsillectomy is awaiting admission to hospital for further investigation.

In this Division where there are several small village schools, much of the Health Visitors' time is taken in travelling from school to school and setting up the apparatus for perhaps only 20 children. It would appear from this point of view to be more economical to test the children of 11 years in the Secondary Schools. However, those with defective hearing would have lost a considerable amount of their education in the intervening 3 years and therefore it is important that the assessment should be made as early as possible.

The Children's Home, The Leas, Scholes

The Leas Children's Home at Scholes has accommodation for 97 children and consists of a large hall and six cottages, each of which are equipped to take 12 or 14 children under the care of a Foster Mother.

During the year considerable difficulty has been experienced in obtaining resident staff and because of this three of the cottages have had to be closed with a consequent reduction in the places available for children. At the end of the year 70 children were in residence.

The medical treatment of the children accommodated in the Homes is delegated to a private practitioner with whom the children are registered under the National Health Service Act, 1946. The Divisional Medical Officer is responsible for administering 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, times of rest, etc.

Cases of difficult behaviour, etc. are discussed with the Superintendent Children's Officer and County Psychologist, and during the year 5 children attended the Child Guidance Clinic at Mirfield regularly.

A large number of the children are educationally retarded. At the local County School there is a special class for backward children and the younger children at the Home receive benefit from this. On examination the number found to be educationally subnormal was 13. During the year 4 of these reached school leaving age and were notified to the Local Health Authority under Section 57(5).

Nortonthorpe Hostel for Maladjusted Boys

Nortonthorpe Hostel, Scissett, was opened on the 26th April, 1954, as a hostel for Maladjusted Boys with accommodation for 24 children. At the end of the year 14 boys were in residence none of which were from this Divisional area.

The boys attend the local schools, being of an intelligence capable of benefitting from attendance at an ordinary school.

The purpose of the Hostel is to provide a stable and pleasant background for these socially insecure children, and so enable them to mature and eventually to return to their own homes without breaking down.

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:—

- 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.

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

During the year 2 children were reported to the Local Health Authority as "ineducable" under Section 57(3). In addition 7 children were notified to the Local Health Authority under Section 57(5) as requiring care and supervision after leaving school.

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 purposes of satisfying the college authorities of their fitness to follow a course of teacher training. During the year 54 candidates(11 males, 43 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 5 (1 male, 4 females) 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 good state of repair but owing to their age some of them are lacking in the provision of adequate washing facilities and satisfactory sanitary conveniences. Many improvements have been made in recent years and others will be carried out as soon as practicable.

HEALTH VISITING

Staff

The changes during the year were the appointment of one new Health Visitor in July, and the resignation of another in October in order to take up combined duties in Cambridgeshire. The staff therefore remains numerically unaltered with one Superintendent Health Visitor and 16 Health Visitors including one part-time, and one part-time Assistant Health Visitor.

In the Saddleworth Urban District where the establishment provides for 4 Health Visitors, only 3 are employed and of these one was absent through sickness for over 3 months and one absent through sickness for over 4 months. Thus it will be seen that only 2 Health Visitors were on duty for most of the time.

Urban District				Authorised Establishment	Sta∰ at 31-12-55
Superintendent	Health	Visitor		 i	1
Colne Valley				 4	4
Denby Dale				 2	11
Holmfirth				 4	3
Kirkburton				 3	23*
Meltham				 1	1
Saddleworth				 4	3
Assistant Healt	h Visite	ors	***	 _	1†
Tuberculosis Vi	sitors			 1	_
				20	17

* Includes 1 part-time.

† Part-time.

Owing to the National shortage of health visitors and the reduced number of nurses presenting themselves for training, it is doubtful when the present vacancies will be filled.

The tuberculosis work continues to be carried out by the "allpurpose" health visitor and whilst this system does present minor problems, on the whole it proves satisfactory and does reduce the number of visitors to the home.

Courses

Four health visitors attended a special course for health visitors, held at Grantley Hall on "The Technique of Teaching." Two health visitors attended a post-refresher course in Cambridge during July.

Student Health Visitors

Because of the reduced number of nurses in training, no students were received during the year from Leeds, but four students came from Manchester for practical experience in a rural area.

Toddlers Clinics

The examination of the three year old toddler has continued to be extremely popular. The sessions are held at most of the 16 clinics either periodically as a separate session, or several toddlers are invited to attend each week for examination immediately prior to the Infant Welfare consultation. It is hoped that by the end of 1956, every three year old will have received an invitation to attend for examination.

School Nursing

Health Visitors spend a considerable portion of their time in schools, carrying out medical inspections, with the medical officer; hygiene inspections, follow-up work and teaching where requested and able to do so. Home visiting to school children accounted for 1,601 home visits. How much of this work, especially in the schools, could and should be relegated to a lesser qualified person is a matter for serious discussion.

Care of the Aged and Chronic Sick.

Health Visitors are finding themselves more and more drawn into this branch of work, partly through the home help service and partly through cases referred from other sources. Apart from services rendered by the home helps, many of these old people suffer from extreme loneliness, even within their own family circle, when all too often they are made to feel that their room is preferred to their presence. A great deal is being done through the Old People's Welfare Committees and in some areas visiting commitees have been formed. It must be stressed that the home visiting is equally, if perhaps not more important than some of the functions organised for the aged, for example, where it is the practise to send out teas to the old people unable to attend a party, it would be enjoyed much more if shared with someone else and conversation could be added to the meal. A wireless loaned to an old gentleman has given him a new interest in life—plain knitting to an old lady has made her feel important. Small things to us — major incidents in the life of the lonely aged.

In a very large number of cases the relatives fail to accept their moral obligations thus it falls to the lot of the health visitor to call in all the assistance she can — especially with the border-line case who does not qualify for accommodation in an Old Person's Home and is not ill enough to be admitted to hospital. In this respect a very deep appreciation is felt for those Old People's Welfare Committees who co-operate in such an excellent manner and who would welcome volunteers for the home visiting committees.

Problem Families

A great deal of time, including evening work, is spent on these so-called "Problem Families" who are so quickly criticised and the children often penalised and shunned by the surrounding neighbours. It is the duty of the health visitor to watch for the early signs of a family deterioration and call in the appropriate expert when necessary.

Appreciation is expressed by the health visiting staff for the help received from the Children's Department and the various voluntary organisations which have been called upon from time to time, especially the individual who has taken a very personal interest in any one family and has "kept an eye on things" during intermediate periods. During the year, one mother was admitted with her two children to Spofforth Hall and during the absence of the local health visitor, who was on sick leave, the Superintendent Health Visitor did a great deal in co-operation with the Children's Department and other official and voluntary bodies in the rehabilitation of this family.

The following table shows particulars of the visits made by Health

Visitors during the year.

District	Expectant Mothers		Children under 1 year of age				Other Cases	Total
	First Visits	Total Visits	First Visits	Total Visits	1—2	2—5	Total Visits	Visits
Colne Valley	39	82	258	2876	1631	2257	1335	8181
Denby Dale	3	5	107	594	288	451	697	2035
Holmfirth	7	25	272	1933	738	1099	1302	5097
Kirkburton	58	107	184	1697	888	1344	1893	5929
Meltham	44	52	69	406	135	251	536	1380
Saddleworth	10	18	131	1075	731	531	1296	3651
Division 20	161	289	1021	8581	4411	5933	7059	26273

In addition 1,601 home visits were paid to school children in connection with follow-up work from routine medical inspections, hygiene inspections, handicapped pupils, etc.

The visits shown in the above table include 7,362 of a non-routine nature, an analysis of which is as follows:—

Premature Babies		 	 	15
Stillbirths		 	 	7
Infant Deaths		 	 	12
Infectious Diseases		 	 	273
Care and After-Care-	_			
Tuberculosis P		 	 100	01
Tuberculosis C		 	 56	60
Discharged fro			 (66
Others		 	 25	29
Post Natal		 	 5	22
1031 11444				-1878
Home Help Service		 	 	2492
Aged		 	 	1471
Other Visits		 	 	481
Special Visits (not he		 	 	733
Special visits (not in	Jiii Co j			
				7362

HOME NURSING

At the commencement of the year 11 home nurses, 7 nurse-midwives, and 3 relief nurse-midwives were engaged in the Division. During the year 4 home nurses, 2 nurse-midwives, and 2 relief nurse-midwives resigned their appointments whilst 4 home nurses, 3 nurse-midwives and one relief nurse-midwife were appointed. 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 31	st Dec., 1955
		Home Nurses	Nurse- Midwives
Colne Valley	3	3	1
Denby Dale	2	1	2
Holmfirth	2	4	-
Kirkburton	3	1	2
Meltham	1	_	1
Saddleworth	3	2	2
Relief	1		2
Division 20	15	11	10

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 Nursin	g	Midv	vifery
	Trans- fers	New Patients	Visits Paid	Confine - ments	Visits Paid
Colne Valley Urban District Golcar	23 23	197 96	2,944 1,901	6 13	132 516
Linthwaite and Slaithwaite	72	693	6,237	35	453 1101
The second second		-	,	-	
DENBY DALE URBAN DISTRICT Denby, Cumberworth and Clayton West	26	150	2,883	19	612
Emley, Skelmanthorpe and Scissett	32	131	3,515	24	665
	58	281	6,398	43	1,277
HOLMFIRTH URBAN DISTRICT Holmfirth New Mill Honley	36 22 26	109 124 112	2,771 2,480 2,211	=	Ξ
	84	345	7,462	_	_
KIRKBURTON URBAN DISTRICT Kirkheaton, Lepton & Flockton Kirkburton Shelley and Shepley	39 16 24	228 75 67	3,591 2,399 2,295	3 14 16	138 409 595
	79	370	8,285	33	1142
MELTHAM URBAN DISTRICT Meltham SADDLEWORTH URBAN	11	88	1,628	11	419
DISTRICT Delph, Dobcross, Denshaw, Scouthead	31	115	3,772	17	482
Springhead, Lydgate, Austerlands, Grotton	16	45	2,092	10	399
Greenfield, Diggle, Grass- croft, Uppermill	19	107	2,587	3	113
	66	267	8,451	30	994
Total for Division	416	2044	43,306	152	4,93

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 138 attendances.

Cases Discharged

Of the 1641 cases the nurses ceased to attend during the year, 1220 were discharged as recovered, 149 were transferred to hospital, and 272 died.

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

Patients u	nder '	Freatr	nent		Patients.				
z delozes c	inder .	r rouer	ione		Recovered	Transferred	Died		
Less than 1 we	eek				500	58	88		
1- 2 weeks		****			444	39	67		
2- 4 weeks	****			** **	151	12	43		
4-13 weeks					56	17	32		
3- 6 months					36	9	21		
Over 6 months	S				33	14	21		
Т	OTAL	,			1 220	149	272		

N	of Visits Pa	:a		1	To Patients Who	
Number	or visits Pa	ıd		Recovered	Transferred	Died
3 or less				 117	23	35
4-7				 466	41	60
8-15				 415	39	77
16-30				 149	19	46
31-50			1110	 45	15	30
51-75				 15	6	
76-100				 5	3	8
Over 100				 8	3	8
	TOTAL			 1,220	149	272

Types of Cases Attended

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

Type of Case	Transferred	New Cases	Visits Paid
Infectious	_		
Pulmonary Tuberculosis	8	19	821
Non-Pulmonary Tuberculosis	2	6	188
Influenza	_	2	7
Pneumonia	2	66	610
Bronchitis	5	150	1508
Other Respiratory Diseases	_	17	74
Cancer of Uterus	2	2	66
Cancer of Stomach and Intestines	6	18	425
Cancer of Breast	1	9	527
Cancer of Other Sites	8	49	1,505
Diabetes	7	11	1,929
Cerebral Haemorrhage	22	115	3,266
Diseases of Heart and Circulation	54	154	4,641
Post-Operative Dressings	10	101	1,820
Injuries	7	102	1,238
Burns and Scalds	4	53	598
Septic Conditions (Boils, Abscesses	3		
Carbuncles)	5	265	2,943
Uterine Prolapse	91	32	2,435
Other Gynaecological Cases	_	1	2
Male Genito-urinary Conditions	7	5	602
Rheumatic and Arthritic Condition	ns 24	31	2,142
Ear and Eye Conditions	4	99	1,113
Varicose Ulcers	8	29	1,017
Impetigo Other Skin Diseases		_	_
Other Skin Diseases	_	16	237
Chronic Diseases of Nervous Syste	m 7	3	527
Mastitis	1	25	358
Acute Abdominal Conditions	_	27	135
Constipation	3	68	328
Thrombosis	4	48	1,021
Infantile Disorders	1	2	58
Circumcision	1	62	485
Senility	56	125	5,468
Other Conditions	66	332	5,212
TOTAL	416	2,044	43,306

It will be seen that Septic conditions have again provided the largest number of new cases (265). Diseases of the Heart and Circulation (154) were the next most frequent, followed by Bronchitis (150), Senility (125), Cerebral Hæmorrhage (115), Injuries (102) and Post-operative dressings (101).

New cases of Pneumonia numbered 66.

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

Senility				 5,468	visits
Diseases of Heart and	Circul	ation		 4,641	,,
Cerebral Hæmorrhage				 3,266	,,
Septic Conditions			***	 2,943	,,
Cancer (all sites)				 2,523	,,
Uterine Prolapse	***			 2.435	,,
Rheumatic and Arthriti	c Con	nditions		 2,142	

Travelling Facilities for Home Nurses and Midwives

No serious difficulties have been experienced during the year with regard to transport but one midwife and three home nurses were 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	 		3	5	3
Nurse/Midwives		* * *	3	7	-
Midwives	 		_	4	1
			6	16	4

No additional County Cars were allotted for use in the Division and none of the older cars were replaced.

THE HOME HELP SERVICE

There has been no change in the organisation of the Home Help service or in the conditions whereby the services of a home help can be allocated to a household, full details of which were given in my report for 1954.

It is to be regretted that the number of home helps employed throughout the year fell short of the authorised establishment, this being due to the difficulty in recruiting suitable women to the service. The authorised establishment of home helps was decreased from 30 to 27 giving an average establishment for the year of 28, whilst in terms of full-time home helps the number employed averaged 22.70.

Despite this difficulty 404 cases were provided with home helps as compared with 396 in the previous year, although the time which could be devoted to any particular case was sometimes less than was actually required. Every effort has been made, however, to allocate the services available where they were most urgently needed.

The duration of assistance provided 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 404 patients in the various categories are shown in the following table:—

Category No. of Patentity No. of Patentity		Coln	Colne Valley	Den	Denby Dale	Hol	Holmfirth	Kirk	Kirkburton	Me	Meltham	Sadd	Saddleworth	1	Total
uity (in- others) 17 62.89 5 80.60 9 49.75 11 65.63 8 ulosis 1 21.00 — — — — — — uic Sick 1 21.00 — — — — — — nic Sick 1 116.50 116.50 11 16.50 157.62 26 firm 1 117.73 31 116.50 11 104.41 6 81.00 3 1 109.07 38 106.91 74 137.48 73 137.46 37	Category	No. of Pat- ients			Av. No. of hours per Patient				Av. No. of hours per Patient	No. of Pat- ients		No. of Pat- ients	No. of Av. No. Pat- of hours ients per Patient	No. of Pat- ients	Av. No. of hours per Patient
uic Sick 1 21.00 — — — — — — — — — ling aged firm) 71 117.73 31 116.98 54 158.84 56 157.62 26 12 130.56 2 16.50 11 104.41 6 81.00 3 101 109.07 38 106.91 74 137.48 73 137.46 37	Maternity (including Expectant Mothers)	17	62.89	ın	80.60	6	49.75	=	65.63	20	50.81	9	64.16	99	61.31
71 117.73 31 116.98 54 158.84 56 157.62 26 12 130.56 2 16.50 11 104.41 6 81.00 3 101 109.07 38 106.91 74 137.48 73 137.46 37	Tuberculosis	1	21.00	1	1	1	-	ı		1		-	244.00	21	132.50
12 130.56 2 16.50 11 104.41 6 81.00 3 101 109.07 38 106.91 74 137.48 73 137.46 37	-5 °	71	117.73	31	116.98	54	158.84	99	157.62	26	119.00	61	179.78	299	145.32
101 109.07 38 106.91 74 137.48 73 137.46 37		12	130.56	61	16.50	=	104.41	9	81.00	80	235.00	13	65.69	47	101.98
		101	109.07	38	106.91	74	137.48	73	137.46	37	113.66	81	153.70	404	128.57

Natonal Assistance Acts, 1948-1951

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

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 4,206 journeys involving 131,396 miles, and carried 17,649 patients 3,072 of these being stretcher patients. Included in the 17,649 patients carried were 14,633 hospital out-patients. Particulars of the cases carried are given below:—

Accident	 		 374
Urgent	 		 428
Mental	 		 55
Maternity	 		 159
Infectious	 		 45
General	 ***		 1,955
Out-Patients	 	***	 14,633
			17,649

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 journeys involving 11,340 miles and carried 1,362 patients and in addition journeys involving 25,843 miles were made by Sitting Case Cars on behalf of 2713 patients. Of the patients carried 144 were classed as accident cases, 134 emergency cases and 3,797 others.

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 2 Home Teachers.

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 2 children were reported by the Local Education Authority under Section 57(3) as ineducable and 7 under Section 57(5) as requiring supervision after leaving school. All were placed under statutory supervision. Four adults and 6 children were admitted to institutions during the year and in addition 6 children were accepted for temporary short stay vacancies.

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

	Male	Female	Total
Under Guardianship	_	1	1
Under Statutory Supervision	66	58	124
On Licence from Institutions		3	3
Under Voluntary Supervision and Observation	10	4	14

Of these patients 6 were in need of institutional care at the end of the year as follows:—

	Male	Female	Total
In urgent need	3	2	5
Not in urgent need	1	_	1
Total	4	2	6

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 been 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 4 at the Oldham Occupation Centre. In addition, 2 patients were attending the Oldham Industrial Centre.

The training of smaller groups at the Centres at Linthwaite and Skelmanthorpe has continued under the supervision of the Home Teachers, the number of patients who attended and the number of attendances made being as follows:—

Centre	No. of Sessions	No. of Patients	No. of Attend- ances	Average No. of Attendances per Session
Linthwaite	184	11	948	5.15
Skelmanthorpe	186	14	1256	6.75
Uppermill	11	2	13	1.18
Total	381	27	2217	5.82

Owing to lack of attendance the group training class at Uppermill has been temporarily suspended.

The social activities during the year have included Christmas parties at the Linthwaite and Skelmanthorpe Centres and a visit to the pantomime. All were well attended by patients and their parents from all parts of the Division and were very much appreciated.

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 52 such examinations (24 male, 28 female) were carried out.

In addition 3 male members of the County staff 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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