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THE
HEALTH
OF
HYDE
1966

BOROUGH OF HYDE

BOROUGH OF HYDE

WITH THE COMPLIMENTS OF THE
MEDICAL OFFICER OF HEALTH

MEDICAL OFFICER OF HEALTH

For the year

1911

S. GARDNER, M.B., B.S., D.P.H., F.R.S.P.
Health Department, Grosvenor Street,
Hyde.

Printed by the Borough Council

REPORT OF THE

COMMISSIONERS OF THE
HEALTH DEPARTMENT

BOROUGH OF HYDE

ANNUAL REPORT

MEDICAL OFFICER OF HEALTH

for the year

1966

A. S. DARLING, M.B., B.Ch., D.P.H.
Health Department, Greenfield Street,
Hyde.

Tel: HYDe 4242

REPORT OF THE



ANNUAL REPORT

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A. B. DARWIN, M.B., B.Ch., D.P.H.
Health Department, Grosvenor Street,
London.

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BOROUGH OF HYDE HEALTH COMMITTEE

(31st December, 1966)

Chairman: Alderman B. S. Armitage

His Worship, the Mayor: (Councillor S. Hyde)

Councillor W. Barton

- " H.E. Dunkerley
- " J. B. Keighley
- " H. J. Myles
- " Mrs. I.G. Jones
- " C. Shenton
- " I. Stopford
- " K. Ward

STAFF OF THE BOROUGH OF HYDE HEALTH DEPARTMENT

1966

MEDICAL OFFICER OF HEALTH: A. S. Darling, M.B., B.Ch., D.P.H.

CHIEF PUBLIC HEALTH INSPECTOR: T. Nicholson

DEPUTY CHIEF PUBLIC HEALTH INSPECTOR: A. Blackhurst

ADDITIONAL PUBLIC HEALTH INSPECTORS:

J. E. Williams

A. Swindells

I. Rowbotham (Resigned 16.9.66)

I. Wilson (Resigned 14.8.66)

CHIEF CLERK: B. Gorman

OTHER CLERICAL
STAFF:

H. Norgrove

Mrs. J. A. Mitchell (commenced 7.2.66)

H. J. Gee

SMOKE CONTROL

ASSISTANT: B. Selby

MEMBERS OF THE HEALTH COMMITTEE

(First Session, 1966)

Chairman: Alfonso S. Armitage

Members: the Honorable (Honorable S. Armitage)

Counselor: W. Armitage

- " H. S. Armitage
- " J. S. Armitage
- " H. A. Armitage
- " Mr. I. G. Jones
- " G. Armitage
- " I. Armitage
- " K. Armitage

STAFF OF THE BUREAU OF PUBLIC HEALTH DEPARTMENT

1966

Medical Officer in Charge: A. S. Armitage, M.D., B.Sc., D.P.H.

Chief Public Health Inspector: T. Armitage

Deputy Chief Public Health Inspector: A. Armitage

Additional Public Health Inspectors:

- J. E. Williams
- A. Armitage
- I. Armitage (Resigned 10.9.66)
- I. Armitage (Resigned 10.9.66)

Chief Clerk: B. Armitage

Other Clerical Staff:

- E. Armitage
- Mr. J. A. Armitage (Resigned 7.3.66)
- R. J. Armitage

Bank Officer: E. Armitage

HYDE DIVISIONAL HEALTH COMMITTEE
(Cheshire County Council)

Members of the Divisional Health Committee

As on 31st December, 1966

CHAIRMAN

County Councillor W.H. Griffiths

DEPUTY CHAIRMAN

Councillor I. Stopford.

- EX OFFICIO: Alderman G. Astbury(Chairman,County Health Committee)
Alderman F. McBirnie(Deputy Chairman, County Health Committee)
- COUNTY COUNCIL: W.H. Griffiths Esq., Mrs. M. Bayes
J. Baldwin, Esq., E.F. Myles Esq.,
Mrs. D.A. Topham
- HYDE BOROUGH COUNCIL: C. Shenton Esq., B.S. Armitage Esq.,
W. Barton Esq., E.H. Jessup Esq.,
E.C. Clark Esq., Mrs. I. G. Jones,
A. Cryer Esq., I. Stopford Esq.,
N.M. Edwardes-Evans Esq., P. Walsh Esq.,
- TINTWISTLE RDC.: Councillor The Rev. T.M. Boulton
- LONGDENDALE UDC.: Councillor Mrs. V.I. Clark
Councillor Miss D.E. Green
- CO-OPTED MEMBERS: Mrs. R. Frost, representing Longdendale U.D.C.,
Mrs. P. Morris " Divisional Executive for Education
- Mrs. B.A. Beever " Tintwistle R.D.C.
Mrs. A. Heaton " District Nursing Assn.
Dr. J.C.B. Bennett " Local Medical Committee
Mrs. G.R. Adamson " Hyde Borough Council
Mrs. B.S. Armitage " " " "
Dr. S.H. Jackson " Ashton,Hyde & Glossop Hospital Management Cttee.

...oOo...

CLERK TO THE COMMITTEE: Charles E. Spence, Esq.,

HYDE DIVISIONAL HEALTH COMMITTEE
(Cheshire County Council)

Members of the Divisional Health Committee

as on 1st December, 1966

CHAIRMAN

County Councillor W.M. Griffiths

DEPUTY CHAIRMAN

Councillor I. Stephens

Albertson G. (Chairman, County Health Committee)
Albertson F. (Deputy Chairman, County Health Committee)

- | | | |
|-----------------------|-----------------------------|--------------|
| Mr. N. Jones | W.M. Griffiths Esq., | HYDE COUNCIL |
| Mr. W. Jones | A. Roberts Esq., | |
| Mr. D.A. Taylor | | |
| Mr. S. Linstead Esq., | C. Shenton Esq., | E. BOROUGH |
| Mr. J. Taylor Esq., | W. Barton Esq., | W. BOROUGH |
| Mr. I. G. Jones | Mr. G. Clark Esq., | |
| Mr. I. Stephens Esq., | A. Gayer Esq., | |
| Mr. J. Lewis Esq., | Mr. S. Matthews-Burns Esq., | |

Councillor The Rev. F.H. Boulton

Councillor Mrs. V.I. Clark
Councillor Mrs. D.E. Green

- | | | |
|---|-----------------|----------------|
| Mr. J. Jones, representing Longbridge U.D.C., | | OTHER MEMBERS: |
| Divisional Executive for Education | Mr. P. Lewis | |
| Mr. J. Jones | Mr. S. Dever | |
| Mr. J. Jones | Mr. A. Jones | |
| Local Medical Committee | Mr. J. H. Jones | |
| Hyde Borough Council | Mr. S. H. Jones | |
| " | Mr. S. Linstead | |
| Hyde Health & District | Dr. S. H. Jones | |
| Hospital Management Unit | | |

....

STAFF OF HYDE DIVISIONAL HEALTH AND SCHOOL MEDICAL
SERVICES OF THE CHESHIRE COUNTY COUNCIL

<u>Divisional Medical Officer and School Medical Officer:</u>	* A.S. Darling, M.B., B.Ch., B.A.O., D.P.H.,	
<u>Assistant County Medical Officer:</u>	Jean M. Halliwell, M.B., Ch.B., M.R.C.S., L.R.C.P., D.Obst., R.C.O.G., D.C.H.	
<u>Dental Surgeon:</u>	Miss L. Kippen, L.D.S., D.P.D.,	
<u>Consultant Anaesthetist:</u>	Dr. C.A. Mays, M.B., Ch.B.	
<u>Chief Clerk:</u>	B. Gorman Esq.,	
<u>Clerical Staff:</u>	Mrs. S. Wilson	Mrs. B.A. Marshall
	Mrs. J. Taylor	Miss S.M. Turner
	Miss M. Givens	(commenced 1.1.66.)
	Miss J.C. Atkins	Miss B. Tarrant
	Mrs. G. Starbuck- Ashton	(commenced 31.10.66.)
<u>Health Visitors/School Nurses:</u>	Miss M. Taylor	Miss D. Wood
	Mrs. J. Beaumont	Mrs. M. Harris
	Mrs. M. Sherratt	(Resigned 30.7.66.)
	(Resigned 31.5.66)	Miss M.M. Humphries
	Miss S. Cox	Miss M.A. Lane
	(commenced 1.7.66.)	(commenced 1.7.66.)
	Miss E. Plaiter	
	(commenced 1.2.66.)	
<u>District Nurses - Hyde:</u>	Miss H. Sutton	Miss G. McClean
	Mr. S. Steels	Miss E. Palfreyman
	(commenced 6.6.66.)	
	(Part-time staff in addition).	
	Miss E. Ramsden	Miss N. McClean
<u>District Nurses - Mottran and Broadbottom</u>	Mrs. B. Scott	
<u>District Nurse - Hollingworth and Tintwistle:</u>	Mrs. M.A. Clarke	Miss W. Watkins
<u>Midwives:</u>	Miss M. Coote	Mrs. E. Hudson
	Mrs. K. O'Grady	Mrs. M. Williams
	Miss M.M. Todd	
<u>Adult Training Centre Superintendent:</u>	L.S.C. Thorpe, Esq.,	
<u>Junior Training Centre Supervisor:</u>	Mrs. J. Tomkinson	
<u>Domestic Help Supervisor:</u>	Mrs. F.M. Partridge	

STATE OF WYOMING DIVISIONAL HEALTH AND SCHOOL MEDICAL SERVICES OF THE DISTRICT COUNTY COUNCIL

* A. S. Hopkins, M.D., B.S., D.A.O., D.P.H.,

John H. Halliwell, M.D., Ch.B., M.F.C.S.,
L.H.C.P., D.Obst., B.C.O.G., D.C.H.

Miss L. Klyper, L.D.S., D.F.D.,

Dr. G.A. Hays, M.D., Ch.B.

B. Gorman Esq.,

Miss D. Wood
Mrs. M. Harris
(Resigned 30.7.66.)
Miss M. H. Thompson
Miss M.A. Lane
(Commenced 1.7.66.)
Miss D. Taylor
Mrs. J. Deacon
Mrs. M. Stewart
(Resigned 31.7.66.)
Miss S. Cox
(Commenced 1.7.66.)
Miss E. Miller
(Commenced 1.2.66.)
Miss H. Sutton
Mr. S. Stevia
(Commenced 6.2.66.)
Miss E. Jackson
(Part-time staff in addition.)
Miss M. Jackson

Miss D. Taylor

Miss J. Deacon
Mrs. M. Stewart
(Resigned 31.7.66.)
Miss S. Cox
(Commenced 1.7.66.)
Miss E. Miller
(Commenced 1.2.66.)

Miss G. Jackson
Miss E. Patterson

Mrs. B. Scott

Miss V. Watkins

Mrs. E. Hanson
Mrs. M. Williams

Miss E. Goffe
Mrs. E. O'Grady
Miss M. Todd

L.S.C. Thomas, Esq.,

Mr. J. Pookman

Mr. F.M. Partridge

Medical Officer and
Local Medical Officer:

State & County Medical
Officer:

Local Surgeon:

Resident Assistant:

Lab. Clerk:

Medical Staff:

Miss Victoria School Nurse:

District Nurse - Hyde:

District Nurse - Linton
Widdowson

District Nurse - Hellingthorpe
Widdowson

Nurses:

Maternity Centre Superintendent:

Maternity Centre Supervisor:

Maternity Help Supervisor:

Clinical Specialists attending Clinics in the Division

Orthopaedic Surgeon: / Mr. Wheble, F.R.C.S.,
Gynaecologist: / R.L. Gadd, F.R.C.S., M.R.C.O.G.,
County Oculist: Dr. F.W.C. Brown, M.B., Ch.B., D.P.H.

Practitioners attending Clinics on Sessional basis:

Parsonage Street	Dr. V.M. Gadd
Bayley Hall	Dr. Feingold
	Dr. S.M.Y. Maxwell (Resigned May 1966)
Gee Cross	Dr. W. Tait & Dr. A.M.S. Thompson
Longdendale and Tintwistle	Dr. H.F. Sugden and Dr. R. Clarke
Hattersley	Dr. I. MacPherson & Dr. D.H. Wickenden

Senior Mental Welfare Officer: G. E. Lanceley Esq.,

Speech Therapist: Mrs. R. Eaton

Peripatetic Teacher of the Deaf: D.L. Perry Esq.,

/ Staff of Regional Hospital Board allocated to specific duties within the Hyde Division.

* Part-time Divisional Health, Part-time Borough Health.

Specialists attending Clinics in the Division

Dr. W. H. C. Brown, M.D., D.P.S.
Dr. J. L. Galt, F.R.C.S., M.D., D.O.C.
Dr. W. H. C. Brown, F.R.C.S., M.D., D.P.S.

Specialists attending Clinics on Hospital basis

Dr. V. H. Galt
Dr. J. L. Galt
Dr. S. M. Y. Maxwell (Resigned Nov 1955)
Dr. W. H. C. Brown, M.D., D.P.S.
Dr. J. L. Galt and Dr. S. M. Y. Maxwell
Dr. J. L. Galt and Dr. S. M. Y. Maxwell

Senior Medical Officers

Mr. H. Eaton

Mr. J. L. Perry, B.Sc.

A Staff of Regional Hospital Board allocated to specific duties within the Division.

* Part-time Divisional Health, Part-time Borough Health.

SECTION II

Public Health Department.
Greenfield Street,
HYDE.

Mr. Mayor, Ladies and Gentlemen,

I have the honour to present to you my Report on the Health of Hyde during 1966.

The population of Hyde is moving towards its maximum largely due to the filling up of Hattersley and this has caused an increase in the absolute numbers both of births and deaths.

The death rate remains well above the national average though the actual figure is slightly lower than that of last year. The birth rate is also well above the national average and shows little sign of slackening off.

There has been no item of major importance to report during the year under review. From the point of view of infectious diseases, the year was quiet.

I would like to express my thanks to all the staff of the various departments in the Health Office, both Borough and County.

I am, Ladies and Gentlemen,

Yours faithfully,

A. S. DARLING

Medical Officer of Health

SECTION III

GENERAL STATISTICS

Area (in acres)	....	....	....	....	....	....	4,170
Population (Census 1961)	....	....	....	....	....	....	31,740
Population (Registrar-General's Estimates for 1966)	....	....	....	....	....	....	38,740
Number of Inhabited Houses as at 31st December, 1966	....	....	....	....	....	....	13,800

POPULATION

As the Hattersley Estate fills up so the Hyde population total moves with it. The mid-year figure for 1966 is estimated at 38,740. One result of this increase in population has been to redress the balance between young and old. Where at one time we had a population in which there was a deficiency of young people with an excess of older people, the very large number of children on the Hattersley Estate has given us an overall population structure very much akin to that of the nation as a whole.

LIVE BIRTHS REGISTERED

Legitimate	....Males	340	Females....	347	Total	687
Illegitimate	....Males	27	Females....	21	Total	<u>48</u>
						<u>735</u>

Crude Birth Rate...	Hyde 18.97	England and Wales ...	17.7
	Comparability Factor	...	1.06
	Local adjusted Birth Rate	...	20.0

STILLBIRTHS

Legitimate	....Males	4	Females....	12	Total	16
Illegitimate	....Males	-	Females....	2	Total	<u>2</u>
						<u>18</u>

DISCUSSION ON BIRTH RATE

The adjusted birth rate is 20.00 per thousand of the population. This is slightly up on the adjusted birth rate for 1965 which was 19.11 per thousand, and is well above the national rate.

CAUSES OF DEATH - FEMALE

	Total all ages	Under 4 weeks	4 weeks and under 1 year	AGE IN YEARS										
				1-	5-	15-	25-	35-	45-	55-	65-	75 and over		
1. Tuberculosis, Respiratory	2	-	-	-	-	-	-	-	1	1	-	-	-	
3. Syphilitic Disease	1	-	-	-	-	-	-	-	-	-	-	-	-	
10. Malignant Neoplasm, Stomach	5	-	-	-	-	-	-	-	-	-	-	-	1	
11. Malignant Neoplasm, Lung, Bronchus	1	-	-	-	-	-	-	-	-	-	-	-	3	
12. Malignant Neoplasm, Breast	7	-	-	-	-	-	-	-	2	2	1	1	-	
13. Malignant Neoplasm, Uterus	5	-	-	-	1	-	1	-	1	1	6	2	-	
14. Other Malignant & Lymphatic Neoplasms	23	-	-	-	1	-	1	-	-	-	1	8	7	
16. Diabetes	1	-	-	-	-	-	-	-	-	-	-	1	-	
17. Vascular Lesions of Nervous System	46	-	-	-	-	-	-	1	1	1	3	12	29	
18. Coronary Disease, Angina	56	-	-	-	-	-	-	1	1	1	10	16	28	
19. Hypertension with Heart Disease	2	-	-	-	-	-	4	-	-	-	5	6	2	
20. Other Heart Disease	21	-	-	-	-	-	-	1	-	-	1	1	9	
21. Other Circulatory Disease	7	-	-	-	-	-	-	-	-	-	1	1	5	
22. Influenza	2	-	-	-	-	-	-	-	-	-	-	7	1	
23. Pneumonia	32	-	-	1	-	-	-	1	1	1	1	7	21	
24. Bronchitis	7	-	-	-	-	-	-	1	-	-	1	3	2	
25. Other Diseases of Respiratory System	2	-	-	-	-	-	-	-	-	-	-	1	1	
26. Ulcer of Stomach and Duodenum	1	-	-	-	-	-	-	-	-	-	-	1	-	
27. Gastritis, Enteritis & Diarrhoea	2	-	-	-	-	-	-	-	-	-	-	2	-	
28. Nephritis and Nephrosis	-	-	-	-	-	-	-	-	-	-	-	-	-	
31. Congenital Malformations	2	-	-	1	-	-	-	-	-	-	-	-	-	
32. Other Defined and III-Defined Diseases	31	1	-	-	-	-	-	-	1	1	2	4	23	
33. Motor Vehicle Accidents	3	-	-	-	-	-	-	-	-	1	1	-	1	
34. All Other Accidents	4	-	2	-	-	-	-	-	-	-	-	-	-	
35. Suicide	4	-	-	-	-	-	-	-	-	-	-	-	-	
36. Homicide and Operations of War	3	-	-	-	-	-	-	-	-	-	-	-	-	
	1	-	-	-	-	-	-	-	-	-	-	-	-	
Total all causes	267	2	4	1	2	1	3	4	10	35	71	134		

CAUSES OF DEATH - MALE

1. Tuberculosis, Respiratory	2	Total all Ages	Under 4 weeks	4 weeks and under 1 year	AGE IN YEARS															
					1-	5-	15-	25-	35-	45-	55-	65-	75 and over							
3. Syphilitic Disease	1																			
10. Malignant Neoplasm, Stomach	11																			
11. Malignant Neoplasm, Lung, Bronchus	19																			
12. Malignant Neoplasm, Breast	-																			
14. Other Malignant & Iytrphtic Neoplasms	21																			
16. Diabetes	-																			
17. Vascular Lesions of Nervous System	32																			
18. Coronary Disease, Angina	53																			
19. Hypertension with Heart Disease	1																			
20. Other Heart Disease	18																			
21. Other Circulatory Disease	5																			
22. Influenza	-																			
23. Pneumonia	21			1																
24. Bronchitis	22																			
25. Other Diseases of Respiratory System	2																			
26. Ulcer of Stomach and Duodenum	3																			
27. Gastritis, Enteritis & Diarrhoea	2																			
28. Nephritis and Nephrosis	1																			
29. Hyperplasia of Prostate	2																			
31. Congenital Malformations	1		1																	
32. Other Defined and III-Defined Diseases	12		6																	
33. Motor Vehicle Accidents	6																			
34. All other Accidents	6																			
35. Suicide	1																			
36. Homicide and Operations of War	-																			
Total all causes	242		7	1	-	-	1	5	6	28	55	69	70							

DEATHS REGISTERED

Males 242	Females 267	Total 509
Death Rate: Hyde 13.1	England and Wales: 11.7	
	Comparability Factor: 1.06	
	Local adjusted Death Rate: 13.9	

The total number of deaths registered at all ages was 509 giving a crude death rate of 13.1 per 1,000, compared with the average figure of 14.49 for the previous five years. For comparative purposes with other areas this rate - adjusted by using the comparability figure supplied by the Registrar General - is 13.9 per 1,000 population as against 11.7 for the whole country.

Approximately 68 per cent of the deaths occurred in persons over pensionable age, the actual figures being

	M		F	
	No.	%	No.	%
Deaths under 65 years of age	103	42	62	23
Deaths between 65 and 74 years of age	69	29	71	27
Deaths 75 years and over	70	29	134	50
Totals	242	100	267	100

INFANT AND PERINATAL MORTALITY RATES

The number of infants who died under the age of 12 months was 14 revealing an infant mortality rate of 19.04 per 1,000 births. There were 18 still-births during the year giving a still-birth rate of 23.9 per 1,000. As an indication of the risk of child-birth it is useful to consider the peri-natal mortality, i.e. still-births plus infant deaths in the first week of life. With this standard the Hyde figure is 36.7 per 1,000.

SECTION IV

SOME COMMENTS ON MATTERS AFFECTING PUBLIC HEALTH

1. Housing

New standards against which to measure the fitness or otherwise of a house are not yet in force but there is little doubt that when they are published, that habitability will be regarded as the most important factor in the home and not just the structural make-up of the dwelling. Against such standards, one will have to decide as to how many of the older type of terraced dwelling in Hyde can be improved and how many will have to be replaced. I strongly suspect that replacement will be found to be the only solution for many of the homes under consideration and that Hyde has still a long way to go in its clearance and rebuilding programme.

One disturbing feature of new housing has been the problems provided by the three storey blocks of flats on the Hattersley overspill. These flats have no chimney flue and are heated in the living room by underfloor electric heating. Electric points are provided elsewhere for the use of additional heaters. Though the heat in the living room is provided at off peak rates and is thermostatically controlled, the flats are so designed that the warmth from this room does not reach any of the other rooms. The bedrooms, bathroom and kitchen open off a lobby into which comes steam produced by cooking and washing. As the bedrooms face north and east and have ventilated cavity walls, condensation on the cold inner wall has proved to be a major problem. The only windows available in these flats are of the large pivoting type which are not burglar proof when open. During the night hours and when the family is out they are naturally kept closed, particularly on the ground floors. Cold walls, lack of internal heating and poor ventilation coupled with the large amounts of steam produced when the needs of children are being dealt with, have produced a degree of condensation that goes well beyond what one normally expects. Mould growth has naturally followed and though probably harmless in itself has made the rooms affected look very unsightly and has caused alarm amongst the parents. A further design fault in these flats has in many cases permitted the penetration of driving rain around the windows, in particular in the living rooms. Thus we have had new homes in which the bedrooms have been damp due to condensation and the living room damp at times due to penetrating dampness and it has taken a long time to get these defects put right. I am happy to report that the landlord of these flats is now remedying the structural defects so that penetrating dampness is no longer a major problem. Condensation remains and in my opinion will always remain until adequate burglar proof ventilation is provided, the inner wall of the cavity walls made less cold by sealing the cavity space and by providing a dry form of low cost heating for the rest of the flat as well as for the living room. In my opinion no family of children should be given the tenancy of one of these flats unless they can afford to provide the degree of heat needed throughout all the rooms in the flat.

Old housing in very large numbers to be put right in Hyde and new housing to be put right in the overspill estate of Hattersley will demand much work from the staff of the Senior Public Health Inspector in the years to come.

2. Clean Air

Progress continues in the establishment of clean air zones in the Borough of Hyde but the progress, limited as it is by financial considerations as well as manpower problems, is not fast enough. Domestic smoke contributes substantially to the mortality figures of any urban community. We still have death rates from bronchitis, lung cancer, stomach cancer and heart disease that can be linked directly to the effect of smoke. I hope it will become financially possible to double the rate of progress in the establishment of clean air zones and to keep them clean by ensuring that bituminous coal is not burned in these areas.

3. Tobacco

A repeat survey made by the courtesy and kindness of the Mass Radiography Department under Doctor Rimington shows that there has been no appreciable change in the smoking habits of the Hyde population. The cigarette still remains a major factor in the untimely deaths that figure so largely amongst our men folk. Early deaths from coronary thrombosis, lung cancer and bronchitis remain at a high level and it is sad to think that they are mainly due to the establishment of a habit for which the human body has no real need. I have much sympathy for the individual who has become a habitual smoker. I have no sympathy at all for the commercial interests that spend millions of money in trying to 'hook' the rising generation and so ensure not only an increase in consumption of their own products but also an ever increasing share of the death rate amongst the bread winners of our nation. Of the many environmental causes that act adversely against the human frame the cigarette stands out as the greatest killer of them all. Much more education is needed amongst the very young at an age when the habit has not yet even been thought of. All advertising of tobacco in any shape or form should cease. Above all else the cost of tobacco should be increased to such an extent that the will power of those of all smokers will be very powerfully reinforced against the habit. There is no doubt in my mind that price is by far the most important factor in deciding the level of smoking in a community.

4. Fluoridation

Our drinking water is still grossly deficient in fluoride and as a result the teeth and bones of our population remain more susceptible to disease than they need be. I wonder why? Not just because Manchester says 'No' but because many, in other areas as well as our own, prefer to believe the propaganda put out by a small group of determined fanatics rather than the factual statements of reputable groups of scientists and medical experts. One day a local authority that has decided, against expert advice, not to fluoridate its public water supply will be taken to court by those who will suffer because of its negligence. In that day the local authority will find that it has not a leg to stand on. Not one of the alarming allegations put out by the anti-fluoridationists can be substantiated. All can be disproved; and this is known now.

Why should the medical officers of health of this nation recommend fluoridation if there is thereby any loss or risk to health? Are we all to be adjudged incompetent fools incapable of doing the very job we are trained to do i.e. to assess the evidence and recommend accordingly? Or are we to be dubbed as criminals engaged in some monstrous conspiracy against the health of our country?

We know that fluoridation is both safe and beneficial to the whole community. Why then should our people be denied their rights?

SECTION V

Report of the Chief Public Health Inspector

To the Mayor, Aldermen and Councillors of the Borough of Hyde.

Mr. Mayor, Ladies and Gentlemen,

For the Public Health Inspector's section of the Health Department, 1966, was a year of frustration and sorrow. The loss of two District Inspectors (Messrs. Rowbotham and Wilson), whom we have not been able to replace, has been a severe handicap. Much worse, however, was the long illness of Mr. J. Metcalf, one of our Meat Inspectors, ending in his untimely death in December 1966. We mourn a cheerful, dependable friend and a valued colleague.

We have continued our inspections under the Offices, Shops and Railway Premises Act, 1963, and made steady progress. Slum clearance, meat inspection, smoke control, rodent control and other routine work has also gone forward steadily, but shortage of staff has delayed the work planned in compulsory improvement of dwellings.

I would like to express my appreciation to the Chairman and Members of the Health Committee and to Dr. Darling for their support during the year, and to the staff of the Health Department for their loyal help and co-operation.

Your obedient servant,

T. NICHOLSON

SECTION VI

SANITARY CIRCUMSTANCES IN THE AREA

WATER SUPPLY

Water is supplied by Manchester Corporation (Woodhead supply) and is available to almost every dwelling in the Borough and is satisfactory in quality and quantity. The service reservoirs have all been roofed over, and a new service reservoir to replace Pudding Lane reservoir was ready in March 1965, when Pudding Lane reservoir was taken out of commission.

The new Godley filtration plant is now completed and in commission, which means that all the water supplied to Hyde is now filtered. To those of us who remember the many complaints of discoloured water we used to get only a few years ago, this is a great advance.

A local supply for industrial purposes is stored in small reservoirs in the town and is filtered but considered unfit for domestic use without sterilisation.

15 samples of drinking water were taken, only one of which was unsatisfactory. The Manchester Corporation also maintains regular bacteriological and chemical analysis, including examination for plumbosolvency.

SEWAGE

Reconstruction to extend the Sewage Works was completed in 1939 involving radial flow sedimentation followed by bacteriological filtration and humus treatment. The works have recently required further extension to accommodate increased industrial flow and overspill development in the Hattersley area. These extensions include sludge digestion as part of the treatment, and they were completed early in the year.

PUBLIC SWIMMING BATHS

The Hyde Corporation Baths were opened on 4th May, 1899 and extended in 1913. Of the two Swimming Pools, one has a capacity of 100,000 gallons and the other 60,000 gallons. There are also two suites of Slipper Baths - Males 14 and Females 7; and 1 Russian Remedial Bath which will accommodate 9 persons at a time.

A Municipal Laundry was attached to the Baths in 1955, consisting of eight Laundry Benches in which washer, spin dryer and sink are combined, and twelve drying horses. There were 8,258 users during the year.

The heating of the Baths and Laundry is carried out by a Lancashire Boiler combined with a Hodgkinson's underfeed automatic stoker and automatic water feed-pump.

The water supplied to the Baths is that collected locally for Industrial use stored in reservoirs within the town boundary and is filtered prior to delivery. The Filtration system installed in 1938 consists of two horizontal Pulsometer Filters with a turnover of 3 hours for each pool. Each pool has its own chlorinator which operates the breakpoint system with which a free chlorine residual of 2p.p.m. is maintained. Chlorine content and pH value are tested by means of a colorimetric Lovibond comparator using Houseman Palintest D P.D. Chlorine Tablet No. 1 for chlorine content and phenol red tablet for pH value. An alkalinity test is also taken daily, and a pH value of 7.8 to 8.0 is maintained.

Six samples of water have been taken with satisfactory results. No B.Coli have been found in any sample taken since June 1949.

The number of bathers and spectators for the year ended 31st December, 1966 was 112,111.

SWIMMING INSTRUCTION OF SCHOOL CHILDREN

The Swimming Baths are extensively used by Education Departments for the teaching of swimming to scholars in Hyde, Longdendale, Bredbury and Denton.

Both Swimming Pools are in use from 9 a.m. to 4 p.m. from Monday to Friday inclusive making 286 classes per week. The number of scholars who attended the baths during the 1966 season was 73,183. Three qualified instructors assisted by the class teachers give swimming instruction. Various tests of ability are carried out from time to time. "The Advanced Certificate of Swimming" is the test aimed at by the Education Authority, but many children go on to take the Amateur Swimming Association Personal Survival Awards and also the Royal Life Saving Society Medallions. The winners of the Advanced Certificate of swimming receive free contracts carrying admission to the baths during the following season. 2,538 free contracts were issued in 1966.

SECTION VII
INFECTIOUS DISEASES

The figures given in Tables 1 and 2 reveal the number of cases of infectious disease among the population.

TABLE 1

	CASES OF INFECTIOUS DISEASES NOTIFIED DURING THE YEAR 1966									
	Under 1 year		1	2	3	4	5 to 9	10 to 14	15 to 24	25 plus	Age Unknown
Notifiable Diseases	1	1	2	3	4	5 to 9	10 to 14	15 to 24	25 plus	Age Unknown
Scarlet Fever	1	5	11	4	6	33	4	2	1	-
Whooping Cough	1	-	1	1	1	-	1	-	-	-
Measles	10	37	46	50	40	155	5	2	-	2
Dysentery	-	-	-	-	-	1	-	-	-	-
Pneumonia	-	-	-	-	-	-	-	-	1	-
Encephalitis	-	1	-	-	-	-	-	-	-	-
Respiratory Tuberculosis	-	-	-	-	-	-	-	1	5	-
Other forms Tuberculosis	-	-	-	-	-	-	-	1	-	-
	12	43	58	55	47	189	10	6	7	2

TABLE 2

INFECTIOUS DISEASES 1959 - 1966

This table indicates the trend of the more common infectious diseases since 1959:-

	<u>1959</u>	<u>1960</u>	<u>1961</u>	<u>1962</u>	<u>1963</u>	<u>1964</u>	<u>1965</u>	<u>1966</u>
Scarlet Fever	38	14	19	48	14	12	31	67
Measles	411	17	548	69	302	269	113	347
Whooping Cough	39	29	16	3	7	14	1	5
Tuberculosis of Lungs	8	8	29	9	6	23	11	6
Tuberculosis of other sites	-	2	2	2	-	-	1	1
Poliomyelitis	-	-	2	-	-	-	5	-

REMOVAL TO SUITABLE PREMISES OF PERSONS IN NEED OF CARE
AND ATTENTION

In urgent cases where removal to hospital is required without delay, action can be taken under the National Assistance (Amendment) Act, 1951, and an order can be made by a local Justice of the Peace requiring the patient to be taken to hospital or other suitable accommodation. The action is only taken where there is complete lack of home care and where the person refuses all care and attention.

HOUSING

SLUM CLEARANCE

Nine Clearance Areas were represented during the year, all of which were made the subject of Compulsory Purchase Orders.

The Clearance Areas were:-

No. 118 (Cheapside)	-	C.P.O. No. 35/1966	-	8 houses
No. 119 (Beaconsfield Ave)	-	C.P.O. No. 36/1966	-	9 houses
No. 120 (Syddall Street)	-	C.P.O. No. 37/1966	-	11 houses
No. 121 (Hall Street)	-	C.P.O. No. 38/1966	-	21 houses
No. 122 (Forest Street)	-	C.P.O. No. 39/1966	-	3 houses
No. 123 (Grafton Street)	-	C.P.O. No. 40/1966	-	5 houses
No. 124 (Alexandra Street)	-	C.P.O. No. 41/1966	-	19 houses
No. 125 (Clarendon Street)	-	C.P.O. No. 42/1966	-	3 houses
No. 126 (Reynard Street)	-	C.P.O. No. 43/1966	-	11 houses

No objections were made in respect of five areas - Nos. 122, 123, 124, 125 and 126. Public Inquiries have been held in respect of the other four areas. All the Orders were confirmed, though a total of four houses were raised from "pink" to "grey", and one from "pink" to "pink hatched yellow". One other house was also included as "grey land".

The confirmed Orders included three houses already the subject of Closing Orders.

In addition, five Individual Unfit Houses were represented, these being made the subject of Closing Orders, and three houses on the Slum Clearance programme were demolished by the owners on becoming vacant.

Compulsory Improvement of Houses

During the year our second Improvement Area was declared, the Lodge Lane Area, which contains 345 houses, 55 of which are tenanted. Of the tenanted houses, all but one require improvement.

STATISTICS

NUMBER OF NEW HOUSES ERECTED DURING THE YEAR

1. By the Local Authority 207
2. By other bodies or persons 53

INSPECTION OF DWELLING HOUSES DURING THE YEAR

1. (a)	Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts)	1517
(b)	Number of inspections made for this purpose	3461
2. (a)	Number of dwelling houses (included under sub head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 and 1932.	135
(b)	Number of inspections made for the purpose	135
3.	Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation.	98
4.	Number of dwelling houses (exclusive of those referred to under the preceding sub head) found not to be in all respects reasonably fit for human habitation.	43

REMEDY OF DEFECTS DURING THE YEAR WITHOUT SERVICE OF FORMAL NOTICE

Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their officers	174
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ACTION UNDER STATUTORY POWERS DURING THE YEAR

Proceedings under Public Health Acts:-

(1)	Number of houses in respect of which Notices were served	132
(2)	Number of houses in which defects were remedied:-	
(a)	by owners	86
(b)	by Local Authority	4

OVERCROWDING

Two cases of overcrowding were reported during the year. The first concerned a family of man, wife and ten children ranging in age from 17 years to twelve months living in a two bedroom house. It appeared that when the parents rented the house most of their children were in the care of the County Council, and the house was not overcrowded, but when the children were allowed home it became grossly overcrowded. This was relieved when the family emigrated. The second case concerned two Italian families totalling nine persons living in a two-bedroom house. Overcrowding was relieved when the second family obtained a house of their own.

<u>DEFECTIVE HOUSES</u>	<u>1934-56</u>	<u>1957</u>	<u>1958</u>	<u>1959</u>	<u>1960</u>	<u>1961</u>	<u>1962</u>	<u>1963</u>	<u>1964</u>	<u>1965</u>	<u>1966</u>	<u>Total</u>
Houses demolished or finally closed	545	106	172	199	110	94	185	145	193	237	90	2076
Houses or parts of houses closed or vacated	115	11	1	-	-	-	-	-	-	-	-	127

NUMBER OF PERSONS DISPLACED FROM HOUSES TO BE DEMOLISHED OR CLOSED

<u>From</u>	<u>Families</u>	<u>Persons</u>
Clearance Areas 1966	83	209
Individual Houses 1966	8	27
Total since inception of programme in 1934	1787	5252

BOROUGH OF HYDE - HOUSING DEPARTMENT

Lettings during calendar year 1966

Transfers	87
Exchanges	10
From unfit houses	199

FROM GENERAL WAITING LIST

Lodgings in council houses	18
Lodgings in private houses	7
Tenants	42
Others	17
Total No. of Families	<u>380</u>

CERTIFICATES OF DISREPAIR

No applications for Certificates of Disrepair were received during the year, nor applications for the cancellation of Certificates of Disrepair.

Disinfection and Disinfestation

During the year the following articles were destroyed at the request of their owners, following deaths, long illnesses, or for other reasons -

Beds	116
Bedsteads	52
Mattresses	133
Pillows	100

Five houses were found to be bug infested, and were treated by the Department.

Treatment was also carried out in 31 cases for the eradication of cockroaches from houses and food premises.

CLOSET ACCOMMODATION

The number of premises fitted with closets of the various types at the end of 1966 was approximately:-

<u>W.C's with cistern flush</u>	<u>W.C's hand flushed and waste water</u>	<u>Privies</u>	<u>Pails</u>	<u>Chemical Closets</u>
11,662	1807	9	36	2

In 1948 the Council provided a grant of £5 to be paid towards the cost of converting waste-water closets to cistern-flushed W.Cs, and up to the end of the financial year 1962-63, 1,083 grants had been approved. At this stage the Council decided on a policy of compulsory conversion, and in 1964-65 tenders were accepted for the compulsory conversion of 152 waste-water closets, and in addition provision made for 74 voluntary conversions. The new grant for voluntary conversions was fixed at £13 or half the cost of the work, whichever is the lesser. This amount was increased to £15 in December, 1965.

INSPECTION OF THE BOROUGH

The following table has been prepared to show the number and nature of the inspections made during the year, the number and type of notices served, and the result of such notices.

TABLE 3

STATEMENT OF SANITARY INSPECTIONS FOR YEAR ENDING 31st DECEMBER 1966

Nature	No. of Inspections	NOTICES SERVED		RESULTS OF SERVICE OF NOTICE		
		Informal	Statutory	Complied with by owner or occupier	Complied with by Corporation in default	Notices Outstanding
Noise abatement	29	-	-	-	-	-
Recorded Housing Inspections	135	-	-	-	-	-
Other Houses under P.H.A. or H.A.	1517	370	128	250	33	215
Re-visits to property under notice	1944	-	-	-	-	-
Courts, Yards and Passages	4	-	-	-	-	-
Pail Closets	7	-	-	-	-	-
Ashbins	20	12	4	16	-	-
Slaughterhouses	551	-	-	-	-	-
Visits re Defective Water Supplies	99	-	-	-	-	-
Ice Cream Premises	46	-	-	-	-	-
Bakehouses	69	-	-	-	-	-
Licensed Premises	30	-	-	-	-	-
Other Food Premises	172	17	-	11	-	6
Farms	13	-	-	-	-	-
Ice Cream Samples (Methylene Blue)	8	-	-	-	-	-
Water-Bacteriological & Chemical Samples	27	-	-	-	-	-
Smoke Observations & Other Smoke Visits	23	-	-	-	-	-
Visits and Re-visits re Smoke Control Areas	384	-	-	-	-	-
Common Lodging Houses	9	-	-	-	-	-
Piggeries	8	-	-	-	-	-
Factories with Mechanical Power	64	5	-	1	-	4
Factories without Mechanical Power	5	-	-	-	-	-
Offensive Accumulations	49	17	-	11	-	6
Infectious Diseases	258	-	-	-	-	-
Verminous Premises	55	-	-	-	-	-
Offensive Trades	8	-	-	-	-	-
Rodent Control	167	-	-	-	-	-
Public Conveniences	81	-	-	-	-	-
Shops O.S.R.P.	437	20	-	97	-	168
W.W.C. conversions	1687	-	-	-	-	-
Diseases of Animals Acts	25	-	-	-	-	-
Refuse Removal	265	-	-	-	-	-
Refuse Disposal	333	-	-	-	-	-
Salvage	61	-	-	-	-	-
Movable Dwellings	147	-	-	-	-	-
Committees etc.	65	-	-	-	-	-
Interviews	344	-	-	-	-	-
Pet Animals Act and Animal Boarding Establishments	21	-	-	-	-	-
Totals	9167	441	132	384	33	399

TABLE 4
DEFECTS REMEDIED DURING 1966

Dwelling Houses

Defective ceiling construction	10
" plaster	32
" floors	13
" kitchen ranges, fireplaces and flues	14
" windows and cords	42
" doors	31
" staircases	5
" damp proof courses	34
" sinks	3
" sink waste pipes	18
" skirting boards	3
" water supply	2
" roofs	98
" external walls	5
" pointing and brickwork of walls	24
" chimneys	8
" chimney flashings	5
" rainwater pipes	28
" eavesgutters	51
" dustbins and sanitary pails	2
" drains	68
" choked W.C's	53
" W.C. apparatus	36
" W.C. buildings	24
" Baths	2
" Inspection Chambers and Covers	2

Factories

Miscellaneous Nuisances 1

Food Premises

	<u>Found</u>	<u>Complied with</u>	<u>Mobile Vans</u>
Washing facilities	5	3	-
Floors, walls and ceilings	17	4	-
Limewashing	2	1	-
Others	7	3	1
Roof Leakages	-	-	-
First Aid Boxes	-	-	-
Totals	31	11	1

MEAT AND FOOD INSPECTION 1966

Number of pigs killed	250,021
Number of pigs inspected	250,021

All Diseases or Conditions except Tuberculosis

Whole carcasses condemned	191
Carcasses of which some part or organ was condemned	39,007
Percentage of number inspected affected with disease other than Tuberculosis	15.67%

Tuberculosis Only

Whole carcasses condemned	7
Carcasses of which some part or organ was condemned	5,009
Percentage of number inspected affected with Tuberculosis	2%

Meat Condemned

	Tons.	Cwts.	Qrs.	Lbs
Abscesses	23	18	1	13
Arthritis	4	3	0	1
Anaemia		2	0	5
Bruising	4	17	2	26
Cirrhosis and M.S.	16	0	3	3
Decomposition		2	0	14
Damaged in Slaughter		8	3	25
Enteritis	37	14	0	26
Erysipelas		4	1	8
Emaciation		1	2	22
Fever	1	8	3	9
Gangrene		5	3	20
Jaundice		12	2	13
Lymphadenitis		1	3	20
Metritis		8	3	26
Moribund		19	2	17
Melanosis				8
Multiple malignant tumours		1	2	-
Nephritis		13	2	17
Pericarditis	4	17	0	11
Peritonitis	9	11	2	3
Pleurisy	4	0	3	1
Pneumonia	23	14	2	26
Septicaemia			2	6
Tuberculosis	36	13	3	9
Uraemia		2	1	7
Urticaria		7	3	19
Total:	171	15	0	19

OTHER FOOD CONDEMNED

Meat:-	Tons	Cwts	Qrs	Lbs
Canned Meat	1	3	0	17
Other Food:-				
Canned	1	9	2	23
	2	12	3	12

FOOD HYGIENE (GENERAL) REGULATIONS 1960

During the year 317 visits to food premises were made, particular attention being paid to catering establishments.

The following table shows the number of food premises covered by these Regulations, divided into the various trades, and showing how they comply with Regulations 16 and 19.

Trade Category	Number	Number fitted to comply with Reg. 16	Number to which Reg.19 applies	Number fitted to comply with Reg. 19
Public Bodies (Hospitals etc)	5	5	5	5
Restaurants and Cafes	17	17	17	17
School Canteens	8	8	8	8
Works Canteens	31	31	31	31
Fried Fish Shops	25	25	25	25
Bakehouses	30	30	30	30
Slaughterhouse)				
Bacon Factory and)	1	1	1	1
Meat Products)				
Wholesale Grocers	4	4	4	4
Retail Grocers	70	70	-	-
Butchers	29	29	29	29
Fishmongers	6	6	6	6
Confectioners	20	20	-	-
Miscellaneous	99	99	-	-
Licensed Premises	48	48	48	48
Beerhouses	12	12	12	12
Clubs	19	19	19	19
Off-Licences	27	27	-	-
	451	451	200	200

MILK SUPPLY (REGISTRATION AND LICENCES)

Under the Milk and Dairies (General) Regulations, 1959, there are registered 123 Milk Distributors and 15 Dairies.

MILK SAMPLING

The County Council, as licensing authority, have taken the following samples in Hyde, and submitted them to the appropriate tests in the Public Health Laboratory in Manchester.

Methylene Blue Test

154 samples of Tuberculin Tested Milk (1 unsatisfactory).

Methylene Blue and Phosphatase Tests

No samples of Pasteurised T.T. Milk - all satisfactory.

Turbidity Test

34 samples of Sterilised Milk - all satisfactory.

Biological Test

17 samples of T.T. milk were submitted to biological tests and none were found to contain tubercle bacilli. No sample of raw milk has been found to contain tubercle bacilli since 1959, when there was only one.

Brucella

28 bulk samples of raw milk were tested. Of these 11 were positive to the ring test, but in none were organisms of the brucella group isolated on direct culture.

At the end of 1966, there were nine dairy herds in the borough from which milk was sold to the public.

The Liquid Egg (Pasteurisation) Regulations, 1963

9 samples were taken during the year. Of these, 4 samples satisfied the a-Amylase test. The other 5 samples - of cracked raw eggs or of egg albumen were examined bacteriologically, and in none were organisms of the typhoid or salmonella groups grown.

There are no egg pasteurisation plants in Hyde.

ICE CREAM

There are six manufacturers and 157 vendors of Ice Cream on the register. Of the manufacturers, two manufacture Ice Cream regularly.

During the year 8 samples were submitted to the Methylene Blue Test. One was found to be unsatisfactory.

SMOKE CONTROL

We have four Smoke Control Orders in operation, viz. No. 1 (Cheetham Fold) date of operation 1st June, 1961, and covering 688 premises (677 dwellings); No. 2 (Gee Cross) - date of operation 1st October, 1962 and covering 1702 premises (1,636 dwellings); No. 3 (Hattersley) - date of operation 1st September 1962, and covering 2085 premises (2083 dwellings); No. 4 (Back Bower) covers 918 premises (885 dwellings). These four areas cover a total area of 1982 acres.

INVESTIGATION OF ATMOSPHERIC POLLUTION

Volumetric Method

Apparatus for the estimation of the concentration of smoke and sulphur dioxide by the volumetric method is operated in the Health Department, measurements being taken daily. The following table shows the daily mean concentrations during each month of 1966.

Estimation of Daily Mean Concentration of Smoke and Sulphur Dioxide by the Volumetric Method

Site	Smoke Concentration Microgrammes per cub.meter			Sulphur Dioxide Concentration Microgrammes per cub.meter		
	Average	Highest	Lowest	Average	Highest	Dowest
<u>Health Dept.</u>						
January	188.9	665	65	208.3	448	128
February	191.8	630	72	173.2	332	57
March	236	878	92	165	252	82
April	102	284	51	111	164	79
May	91.6	139	39	112	159	89
June	54	118	35	69	113	33
July	62.5	123	36	72.2	131	29
August	74.3	137	34	77.6	121	48
September	132.3	321	24	91.4	191	52
October	234.2	673	45	130.6	291.0	74.0
November	225	507	99	133.0	316	30.0
December	192.7	326	70	143.9	207	54.0

The average daily mean concentration for 1966 are shown below, compared with corresponding figures for the four previous years.

<u>Year</u>	<u>Estimated Daily Mean Concentrations of</u>	
	<u>Smoke (u gms. per cub.met)</u>	<u>SO₂ (u gms. per cub.met)</u>
1966	149	124
1965	182	167
1964	226	159
1963	202	169
1962	255	201

It is difficult to make comparisons of these figures without taking into account climatic conditions and other factors. But they do suggest that in the town's centre there is a steady diminution in atmospheric pollution.

RODENT CONTROL

Under the Prevention of Damage by Pests Act, 1949, the Local Authority is responsible for inspecting the district to discover rodent infestations. The inspection and treatment of business premises, particularly food premises, occupies a large proportion of the time of the rodent operative.

In addition, much work has been done in treating infestations in private dwellings (this work being carried out free of charge); in inspecting Local Authority property and treating where necessary; and in carrying out two "Maintenance Treatments" for the destruction of rats in sewers together with surface treatments of the Sewage Works.

The number of premises found to be infested during the year was 243 (147 rats, 96 mice). Of the 96 infestations by mice, none could be classed as "serious". A total of 265 treatments was carried out to deal with these infestations, and the number of visits made was 2,423.

The table on the following page gives details of the work done:-

PREVENTION OF DAMAGE BY PESTS ACT, 1949
Report for 12 months ended 31st December, 1966

	Local Authority	Dwelling Houses	TYPE OF PROPERTY All other (including Business & Industrial)	Agricultural	Total
1. No. of properties in district	29	13,800	316	45	15,790
2a. Total no. of properties (including nearby premises) inspected following notification.	1	265	59	1	326
2b. No. infested by i) Rats ii) Mice	3 1	32 22	10 4	1 -	46 27
3a. Total No. of properties inspected for rats and/or mice for reasons other than notification	17	695	265	26	1003
3b. No. infested by i) Rats ii) Mice	9 -	72 62	20 7	- -	101 69
4. Total number of infested properties treated	13	188	41	1	243

PREScribed PARTICULARS ON THE ADMINISTRATION
OF THE FACTORIES ACT, 1961

PART 1 OF THE ACT

1 - INSPECTIONS for purposes of provisions as to health (including inspections made by Public Health Inspectors)

Premises (1)	Number on Register (2)	Number of		
		Inspection (3)	Written notices (4)	Occupiers Prosecuted (5)
(i) Factories in which Sections 1,2, 3,4 and 6 are to be enforced by Local Authorities	18	5	5	-
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	202	64	-	-
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	13	-	-	-
Total	233	69	5	-

2 - Cases in which DEFECTS were found
(If defects are discovered at the premises on two, three or more separate occasions they should be reckoned as two, three or more cases).

Particulars (1)	Number of cases in which defects were found				Number of cases in which prosecutions were instituted (6)
	Found (2)	Remedied (3)	Referred		
			to H.M. Inspector (4)	by H.M. Inspector (5)	
Want of cleanliness (S.1)	5	-	-	4	-
Overcrowding (S.2)	-	-	-	-	-
Unreasonable Temperature (S.3)	-	-	-	-	-
Inadequate Ventilation (S.4)	-	-	-	-	-
Ineffective drainage of floors (S.6)	-	-	-	-	-
Sanitary Conveniences (S.7)					
(a) Insufficient	-	-	-	-	-
(b) Unsuitable or Defective	9	-	-	-	-
(c) Not separate for sexes	-	-	-	-	-
Other offences against the Act (not including offences relating to Outwork)	4	-	-	-	-
Total	18	-	-	4	-

3 - OUTWORKERS. 29 workers were registered, 23 of whom made wearing apparel, and 6 worked on rubber products.

Offices, Shops and Railway Premises Act, 1963

All the premises shown by our survey to require registration under this Act with the local authority have now been registered and after a special effort detailed inspections of the premises were completed before the end of the year. Letters were sent to the owners or occupiers of the premises where defects were found, setting out what was required in the premises concerned.

A total of 407 visits for all purposes have been made during 1966. The following tables give the results of the work in statistics.

Table A Registrations and General Inspections

<u>Class of Premises</u>	<u>No. of Premises registered during year</u>	<u>Total No. of Premises registered at end of year</u>	<u>No. of registered premises receiving a general inspection during the year</u>
Offices	-	57	57
Retail Shops	4	225	229
Wholesale Shops, Warehouses	-	17	16
Catering Establishments open to the public, canteens	2	41	7
Fuel Storage depots	-	3	1

Table B No. of visits for all kinds by Inspectors to registered premises - 407

Table C Analysis of Persons Employed

<u>Class of Workplace</u>	<u>No. of Persons employed</u>
Offices	593
Retail Shops	880
Wholesale Departments, warehouses	176
Catering Establishments open to the public	306
Canteens	6
Fuel Storage Depots	8
	<hr/> 1969
	847 Males
	1122 Females

During 1966 we have followed up the inspection of registered premises which was completed in the previous year by reinspecting those found wanting, and also by inspecting newly registered premises. The table below shows the defects found during the year, and also the number of defects remedied.

Analysis of Contraventions

Section	No. of Contraventions	
	Found	Remedied
4. Cleanliness	30	60
5. Overcrowding	-	2
6. Temperature	35	84
7. Ventilation	2	14
8. Lighting	19	13
9. Sanitary Conveniences	20	56
10. Washing Facilities	13	40
11. Supply of Drinking Water	-	4
12. Accommodation for Clothing	-	15
13. Sitting Facilities	1	22
14. Seats (Sedentary Workers)	3	2
15. Eating Facilities	2	15
16. Floors, Passages and Stairs	25	59
17. Fencing Exposed Parts of Machinery	1	1
24. First Aid - General Provisions	14	59
50. Information for Employees	13	103

Our inspections show that 54 registered premises were found to comply with the requirements of the Act, a further 118 premises have carried out work at our request to reach the required standard, and a further 127 are under notice to do so. Many of these have done some of the work required.

Our inspections also revealed that 126 occupiers of premises who had sent in registration forms (OSR1) had done so in error or had ceased to come within the scope of the Act when the inspection was made.

Accidents

Three accidents were reported during the year, all of which were fortunately of a minor character. All were investigated, and it was considered that no negligence on the part of the employer was evident in any of the cases. Advice designed to prevent a recurrence of the accident was offered - and taken - in one case.

DISEASES OF ANIMALS ACTS

Swine Fever

Hyde was included in a Swine Fever Infected Areas Special Order in May 1966.

In addition to the many licences received concerning movement of pigs to Wall's slaughterhouse, 5 applications for licences and 8 licences reporting movement of pigs were received and the necessary visits and inspections made.

REFUSE COLLECTION

A regular weekly collection of domestic refuse was again maintained, apart from short periods around holidays. This is undoubtedly largely due to the Bin Incentive Bonus Scheme which we have operated since February, 1952. The binmen are required to complete a basic task of 120 bins per man per day, and a bonus of 3d paid for every bin in excess of that figure.

	<u>1966</u>
Total Ashbins emptied	907,523
No. of loads of refuse collected	10,919
Estimated weight of refuse collected	26,204 tons

REFUSE DISPOSAL

Refuse was disposed of by controlled tipping at Raglan Street in January 1966, after which we moved to the Dunkirk Farm site, where a new depot is under construction.

SALVAGE

The following are the quantities of salvage material sold during 1966:-

	<u>tons. cwts. qrs.</u>		
Waste Paper	139	3	2
Bottles	3	13	1
Textiles	3	17	1
Metals	9	2	2
	<hr/>	<hr/>	<hr/>
	147	3	2

Swiss Paper

Hydro installed in a Swiss Paper factory... May 1966

In addition to the many... applications for... and the necessary visits and...

SWISS COLLECTION

A regular weekly collection of domestic refuse was established... 1966

Refuse was disposed of by contractor... 1966

The following are the quantities of refuse collected... 1966

Category	Quantity
Swiss Paper	100
Swiss Paper	200
Swiss Paper	300
Swiss Paper	400
Swiss Paper	500
Swiss Paper	600
Swiss Paper	700
Swiss Paper	800
Swiss Paper	900
Swiss Paper	1000

Swiss Paper... 1966

To the Chairman and Members of the Divisional Health Committee I have the honour of presenting to you a report on certain aspects of the County Health services covering the year 1966.

Before coming to a detailed presentation of the facts and figures that make up the bones of this report may I make a few observations concerning the work. The aspects of "public health" that come directly under the County Health Department are mainly personal services which include:-

- a) The advisory care of young children, expectant and nursing mothers, the chronic sick, the physically handicapped and the aged.
- b) Advice and treatment in some specialities for certain sections of the community. These specialities include chiropody, dentistry, ophthalmology, audiology, psychiatry, speech therapy and family planning (by delegation to the Family Planning Association.)
- c) Preventative measures including all immunisation and vaccination procedures, cervical cytology, health education etc.
- d) Ambulance, home nursing, home midwifery and home help services.
- e) Pure welfare services such as aids, adaptations and clubs for the physically handicapped and convalescent "holidays" for non hospital cases.

Many of these services stem from the old days when hospital, general practitioner and dental services etc. were not freely available to all. The public health departments of those days devoted their energies to the filling of such gaps as they could and with considerable success. Today, however, things are changing and there is now the need to think again. Let me put up a few thoughts which even if they are shot down may, in the act of shooting down, provoke some thought in others.

INFANT WELFARE CLINICS

During 1966 there were 886 live births in the Hyde Division. In addition other newly-borns moved into the area with their families. As a result no less than 892 new born babies visited one of the seven clinic centres during the year and all received a routine medical examination. There was a time when for many babies this would have been the first occasion on which they would have been seen by a Doctor, but not so today. Virtually every baby is now medically examined at birth or soon after and abnormalities requiring treatment are almost always spotted long before the first clinic visit.

Once, old wives tales and doubtful habits of feeding and care were the rule and much time was needed to put this right. Today the need for such advice is very much less and for the great majority of babies and their mothers the routine visit to the clinic is now only a social occasion at which the weighing of the baby and the purchase of feeding stuffs is as much a part of the time honoured ritual as is the biscuit and the cup of tea.

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- 1) The advisory care of young children, adolescent and nursing mothers, the chronic sick, the physically handicapped and the aged.
- 2) Advice and treatment in some specialties for certain sections of the community. These specialties include obstetrics, dentistry, ophthalmology, audiology, psychology, speech therapy and family planning (by referral to the Family Planning Association).
- 3) Preventative measures including all immunisation and vaccination procedures, cervical cytology, health education etc.
- 4) Tuberculosis, home nursing, home midwifery and home help services.
- 5) Some other services such as aids, adaptations and clubs for the physically handicapped and convalescent "holidays" for non hospital cases.

Many of these services stem from the old days when hospital, general practitioners and dental services etc. were not freely available to all. The public health departments of those days devoted their energies to the filling of such gaps as they could and with considerable success. Today, however, things are changing and there is now the need to think again, not so put up a few thoughts which even if they are not down my, in the end of shooting down, proved more thought in others.

DEAF AND DEAF-BLIND

During 1966 there were 836 live births in the Hyde Division. In addition other newly-borns moved into the area with their families. As a result no less than 922 new born babies visited one of the seven child centres during the year and all received a routine medical examination. There was a time when for many babies this would have been the first occasion on which they would have been seen by a doctor, but not so today. Virtually every baby is now medically examined at birth or soon after and anomalies requiring treatment are almost always spotted long before the first clinic visit.

Once, old wives tales and doubtful methods of feeding and care were the rule and much time was needed to get this right. Today the need for such advice is very much less and for the great majority of babies and their mothers the routine visit to the clinic is now only a social occasion at which the weight of the baby and the progress of feeding trials is as much a part of the husband's ritual as is the biscuit and the cup of tea.

A pleasant outing, I hope, for 'mum' but is it really necessary? Is such routine supervision needed? In my opinion, "no". In nine out of ten cases the child is safe and well cared for in the hands of its mother who can be trusted to get help when she really needs it. This help is available from the Health Visitor and the Family Doctor and the Hospital Consultant on demand. Foods which used to be obtainable more cheaply at Welfare Centres than elsewhere can now often be bought as cheaply through normal retail outlets.

Paradoxically it is the mother who is in most need of supervision who is least likely to come to the clinic. For her the answer is more home visiting.

I believe that Infant Welfare Clinics on a reduced scale are still needed - maybe for those who require reassurance and hesitate to trouble their busy General Practitioner; for examination and assessment of those at risk of some special handicap and for those who prefer that the child receives its "pricks" at the hands of a Doctor other than the one who must visit the child when he or she is unwell. Babies in these categories will be in the minority and for the majority I believe that routine attendance at a clinic is no longer essential.

There are other departments in which the work done by the County Health Staff is also being done by other qualified people. Do we really need Ante Natal Clinics run by the General Practitioner, the Regional Hospital board and the local authority? Do we really need to provide the wide range of specialist clinics that is also provided by the Regional Hospital Board. I don't pretend to know the answer but I think there is much room for second thoughts.

FAMILY PLANNING

During 1966 the pioneer scheme of domicilliary Family Planning approved by your Committee came to an end. It had however, proved to be so successful that a like scheme was planned by the County Medical Officer of Health to be introduced throughout the whole of the County. This, however, was anticipated by a new government request that local authorities should make Family Planning advice available to all who needed it on medical grounds, free of charge where cost was a barrier. In Cheshire, arrangements have now been made that any individual requiring Family Planning advice and treatment on medical grounds, may obtain it, if necessary, free of charge when so recommended by any Doctor. Such cases are then referred through the local Divisional Health Office to the nearest Family Planning Association Clinic. Clinics in this area in 1966 were available in Ashton, Glossop, Stockport and Manchester but when the report for 1967 is written it will be recorded that clinics have been opened by the Family Planning Association at the new Clinic Centre in Hyde and on the clinic premises in Hattersley.

CERVICAL SMEAR TEST

Public Clinics for this service were not opened during 1966 in the Hyde Division because of the inability of the Hospital Service to take more slides for examination than were already coming in from other sources. The report for 1967 will show that Clinics are now available.

PROBLEM FAMILIES

For many years Public Health Departments have played a large part in coping or attempting to cope with the needs of inadequate parents. Such families usually come to light through the presence of young children in varying stages of neglect. The Health Visitor was and still is deeply involved but many others are also concerned. Officials of the Child Care Service, the Ministry of Social Security, the N.S.P.C.C., the Probation Service, the Local Education Authority and others are all too often also involved in providing help. It was soon realised that co-ordination of such help was essential and this was provided by formal meetings and ad hoc consultations. No one department however, had the authority or the resources to do all that was required. Today this picture is changing and on the staff of the Childrens' Area Officer are qualified social workers able to deal with the problems in depth. I am happy to record that, in my experience, the Childrens' Officer is now willing to assume overall responsibility for the care of such families. He is able to help financially when money is needed and to give advice, supervision and support to an extent not possible before through any one source. His officers still confer frequently with the others concerned but they carry the main burden and are well qualified to do so. Here is one sphere of service where the Health Visitor, though retaining her responsibilities for the health and well-being of children, is happy to hand over some of the load.

WELFARE OF THE AGED

As in the case of the problem families here again we are witnessing the emergence of a group of trained social workers whose job it is to meet the needs of the elderly. Here too, responsibility in the past has been so widely scattered and so vaguely defined that no one department ever felt that final responsibility for any particular person was their headache. Even today there is no one desk on which "the buck" is entitled to come finally to rest. I believe that this is wrong. Health Visitors, District Nurses, Home Help Supervisors and staff, neighbours, relatives and friends and hosts of voluntary helpers all on occasions do devoted work, often out of hours. They have been doing this for years and I am sure they will continue to do so but there is still the need for that one desk from which help is always available. Help however, from another source is steadily increasing. I refer to the County Welfare Department.

Originally it was concerned only with homes for the elderly and emergency accommodation for the homeless. It has now turned its attention more and more to the task of helping old folk to remain in their own homes to the end. The Welfare Department helps in the provision of "sheltered" or warden controlled accommodation with community centres and, if needed, communal feeding. Here the local district authority, the W.R.V.S. and the County all work usefully together and it is often County Welfare that takes the initiative in getting schemes under way. In addition the Welfare Department is now providing much more staff in the field. Trained social workers are becoming available to pay regular visits to some of those that are in need and to help solve some of their problems. At the moment the Health Visitor and the Welfare Workers continue to work side by side. Both however, do much the same job and in my opinion the time is ripe to hand over the bulk of the social welfare of the aged to the Welfare worker and to leave the specific health problems to the General Practitioner/Geriatric Consultant/Health Visitor/District Nurse team.

A. S. DARLING

DIVISIONAL MEDICAL OFFICER

Hyde Health Division,
HYDE.

Services administered by the Hyde and Longdendale Divisional Health Committee through powers delegated by the County Council.

CARE OF MOTHERS AND YOUNG CHILDREN

Divisional Health Office and Central Clinic

The new building was completed and handed over to the County Council on 14th November, 1966.

It was not occupied before the end of the year, however, and details of the transfer of the various services to the new accommodation will be given in my Annual Report for 1967.

Two other new Clinics were completed and handed over during 1966, namely, Mattersley on 20th April, and Hollingworth on 22nd August: the first child welfare sessions being held in these Clinics on the 2nd June, and 20th October respectively.

Each of the Clinics in the Division continues to be well supported by Voluntary Committees whose members perform many responsible duties thereby enabling Health Visitors to concentrate more freely on matters requiring knowledge of a more technical nature. The assistance rendered by the ladies concerned is genuinely appreciated by all concerned.

The Clinics administered by the Divisional Committee and the attendances thereat are as under:-

<u>TABLE I</u> <u>(a) Infant Welfare</u>	<u>No. of</u> <u>Sessions</u>	<u>New</u> <u>Cases</u>	<u>Total</u> <u>Attend</u> <u>ances</u>	<u>Examined</u> <u>by</u> <u>Doctor</u>	<u>1966</u>	<u>Average</u> <u>Attendances</u> <u>Previous 5</u> <u>years</u>
Hyde (Parsonage St.)	52	219	4356	323	83	62
Hyde (Bayley Hall)	100	207	4550	651	44	47
Hyde (Stockport Road)	48	116	2540	211	51	-
Hyde (Mattersley)	51	206	2896	1203	39	-
Hollingworth	24	82	1415	230	59	52
Tintwistle	24	24	633	118	36	31
Broadbotton	24	38	796	177	32	29

A summary of attendances at ante-natal classes for mothers expected to be confined at home is given in Table I. (b). The attendances have risen over the years and almost every mother who has her baby at home is now being seen. Routine blood specimens are taken; relaxation classes are held and co-operation with family doctors is well maintained.

(b) Mothers

	<u>No. of sessions</u>	<u>New Cases</u>	<u>Total Attendances</u>	<u>Examined by Doctor</u>	<u>Average Attendances 1966.</u>
Ante-natal (Domiciliary Cases)	51	219	913	963	18
Ante-natal (Relaxation Classes)	46	147	786	-	17
Ante-natal (Hattersley)	52	172	1278	1278	24
Dental (Expectant and Nursing Mothers)	-	-	-	-	-

HYDE - PARSONAGE STREET

In addition to services run by the County Council these premises are used daily for Physiotherapy treatment under the administration of the Hyde Orthopaedic After-Care Committee. There is also an ante-natal clinic for mothers who are to have their babies in hospital which is attended by a Consultant Obstetrician and Staff from the Aspland Maternity Home. Sessions are held as follows:-

(The tenancy of these premises was relinquished in 1967. All clinics mentioned below have been transferred to the Clinic Centre, Corporation St.)

Tuesday (2nd & 4th)
(10.a.m.-12noon)

Clinic for testing hearing of toddlers. This is conducted by a specially trained Health Visitor.

Wednesday (2 - 4p.m.)

Child Welfare Clinic attended by a Medical Officer and two Health Visitors.

Thursday (2 - 4p.m.)

Ante-natal Clinic for cases who wish to be confined at home. A Medical Officer, Health Visitor, and Domiciliary Midwife attend and relaxation classes are conducted by Physiotherapists.

HYDE -BAYLEY HALL
Monday (1st & 3rd)
(2 - 4p.m.)

Clinic for testing hearing of toddlers. This is conducted by a specially trained Health Visitor.

Tuesday (2 - 4p.m.)

Child Welfare Clinic attended by a Medical Officer and Health Visitor.

Friday (2 - 4 p.m.)

Child Welfare Clinic attended by a Medical Officer and Health Visitor. (Transferred in 1967 to Clinic Centre, Corporation Street.)

HYDE -GEE CROSS

Monday (2 - 4p.m.)

Child Welfare Clinic at which a Medical Officer and Health Visitor attend.

HYDE -HATTERSLEY

Thursday (2 - 4p.m.)

Child Welfare Clinic at which a General Practitioner and a Health Visitor attend.

HOLLINGWORTH

The undermentioned sessions formerly held at Wedneshough Green Clinic are now continuing in the new Clinic in Market Street:-

Tuesday (2 - 4p.m.)	Ante-natal Clinic at which a Health Visitor and Midwife attend.
Thursday (1st & 3rd) (2 - 4p.m.)	Child Welfare Clinic at which a general practitioner and Health Visitor attend.
Tuesday (2 - 4p.m.)	Minor Ailment Clinic at which a Health Visitor attends.

A Medical Officer attends monthly at an immunisation clinic.

BROADBOTTOM

A Child Welfare Clinic is held at the Methodist Church School on the first and third Wednesday of each month and a general practitioner and a Health Visitor are in attendance.

TINTWISTLE.

A General Practitioner and Health Visitor attend the Child Welfare Clinic which is held in Christ Church School on the second and fourth Thursday of each month.

GENERAL

From the above clinics children under 5 may be referred for opinion or treatment to special clinics. Ophthalmic and Dental cases are dealt with at the School Clinic; Orthopaedic and Ultra Violet Ray Clinics are held at the Physiotherapy Centre, Parsonage Street. Hearing tests of infants are carried out by specially trained Health Visitors.

Details are given in Table II below.

<u>TABLE II</u>	<u>New Cases</u>	<u>Total Attendances</u>	<u>Professional Consultations</u>
Orthopaedic.....	49	397	222
Ultra Violet Ray-Children..	13	252	117
Ophthalmic.....	62	294	4
Dental-Children.....	40	52	24
Hearing-Children.....	507	511	-

SALE OF WELFARE AND PROPRIETARY FOODS

National Welfare Foods

National Dried Milk, Orange Juice, Cod Liver Oil, and Vitamin Tablets are issued from the Divisional Office and from each of the Child Welfare Clinics. Table IIIa gives particulars of the issues during the year.

TABLE III(a)

National Dried Milk	2,714 tins	at 2/4d each	...	...	...	...	£316.12. 8.
National Dried Milk	2,261 "	at 4/-d "	...	...	...	...	452. 4. 0.
National Dried Milk	78 "	free	...	...	...	...
Orange Juice	8,659 bottles	1/6d "	...	...	...	...	649. 8. 6.
Orange Juice	504 "	Free	...	...	...	...
Cod Liver Oil	534 "	at 1/-d "	...	...	...	...	26.14. 0.
Cod Liver Oil	123	free	...	...	...	...
Vitamin A & D	702 packets	6d "	...	...	...	...	17.11. 0.
Vitamin A & D	9 "	free	...	...	...	...

Proprietary Foods

Certain infant foods, mainly milk and cereal products are available at the Infant Welfare Centres and particulars of sales at Hyde are given in table III(b). At other clinics the sale of proprietary foods is controlled entirely by the Voluntary Committees and details of sales are not available.

TABLE III (b)

	<u>Total Sales</u>		
	£	s	d
Parsonage Street...	640	12	3
Bayley Hall	657	13	0
Gee Cross	667	4	7
Hattersley	401	14	9
	<hr/>		
	£2,367	4	7

HEALTH VISITORS

At the end of the year there were six Health Visitors employed on full time duties in the Borough of Hyde and one Health Visitor was employed in the Longendale and Tintwistle districts.

The duties of the Health Visitor include the visiting of families with children under 5. She advises the parents on general health, matters affecting the family and on the mental, physical and emotional health of children including advice on parent-craft and house-hold management where necessary. Apart from the routine first visit to new born babies further visiting is of necessity selective.

Health Visitors attend Child Welfare and Ante-natal Clinics and in conjunction with the Midwives give advice and talks on health education and mother-craft. An increasing amount of time is occupied in visiting the aged members of the population and in many instances the Health Visitor has co-operated with voluntary organisations and the family doctor in an endeavour to keep old persons healthy in their own homes as long as possible.

In her general role of family visitor she is often the first person to observe the onset of physical or mental stress and can arrange help either through statutory or voluntary services at an early stage.

TABLE IV
Numbers and Types of Visits to Homes

	<u>Mothers</u> <u>Ante-</u> <u>Natal</u>	<u>Under</u> <u>1 year</u>	<u>Children</u> <u>1 - 5</u> <u>years</u>	<u>School</u>	<u>Re</u> <u>Home</u> <u>Helps</u>	<u>T.B.</u>	<u>After-</u> <u>Care</u>
Hyde	260	4,488	6,299	264	137	100	1,144
Longdendale and Tintwistle)	140	877	1,418	52	20	20	783
Total 1966	400	5,365	7,717	316	157	120	1,927
Total 1965	391	3,413	6,839	392	153	159	1,713

The total number of visits during the year was 16,002 as against 13,060 in 1965.

The majority of Health Visitors possess motor cars and travelling expenses are paid by the County Council under the Essential Car User Scheme.

DISTRICT NURSING

We now have eight full-time District Nurses employed throughout the Division; one male and seven female, and these are assisted by part-time staff when necessary. The male nurse is employed also in the Stalybridge and Dukinfield Division.

This service is, of course, administered by the County Council but general practitioners are authorised to call directly on the service and much of the work is connected with the elderly and infirm who in many cases are permanently confined to bed and require regular visits from the nurses. It will be appreciated that as the number of elderly persons increases more and more demands are made on the nursing staff. A considerable amount of time also is spent in advising the relatives of chronic sick patients who may be living with them.

Special reference is made in the Care and After-Care section of this Report concerning the loan of nursing requisites although the District Nurses play a big part in the issue of smaller items of equipment.

DOMICILIARY MIDWIFERY

		<u>Hyde</u>	<u>Longdendale</u>	<u>Tintwistle</u>	<u>Total</u>
Total number of births in Division	Live	735	129	22	886
	Still	18	1	-	19
Deliv		753	130	22	905
<hr/>					
		<u>Hyde</u>	<u>Longdendale</u>	<u>Tintwistle</u>	<u>Total</u>
Delivered at home	Live	177	39	4	220
	Still	2	-	-	2
		179	39	4	222

There are five midwives in the Division; three for the Hyde area, one for Longdendale and Tintwistle and, one for Mattersley. Although the Midwives are allocated to the areas mentioned above they do, in practice perform duties in any part of the Division should the necessity arise.

IMMUNISATION AND VACCINATION

1) Immunisation against Diphtheria, Whooping Cough and Tetanus

The figures contained in the following table show the number of children who have been protected against Diphtheria, Whooping Cough and Tetanus. It is in fact usual to employ a mixed vaccine effective against Diphtheria, Whooping Cough and Tetanus for infants and to use a product effective against Diphtheria and Tetanus for the Booster injections given upon entry to school.

	<u>Primary and Reinforcing Treatment</u>						Total under 16
	<u>Year of Birth</u>					Others under 16	
	1966	1965	1964	1963	1959 -1962		
Diphtheria	-	-	-	-	-	-	-
Diphtheria & Tetanus	1	-	5	3	583	560	1,152
Diphtheria and Whooping Cough	-	-	-	-	-	-	-
Tetanus	-	2	-	-	1	2	5
Triple	214	317	159	61	92	6	849
Quadrilin	15	46	29	7	2	-	99

2) Vaccination against Smallpox

The following table shows the number of persons vaccinated in the Division during 1966.

	<u>Under 1</u>	<u>1</u>	<u>2 - 4</u>	<u>5 - 14</u>	<u>Total</u>	<u>(1965)</u>
Number vaccinated	36	5	195	67	303	219
Number re-vaccinated	-	-	5	45	37	70

3) Vaccination against Poliomyelitis

Routine vaccination of infants continued satisfactorily throughout the year. The primary course now being given at the same time as the Triple Antigen.

The oral vaccine is now used exclusively in the clinics and the consensus of opinion is in favour of the extra protection provided by the oral vaccine.

The following tables show the numbers of doses given since the beginning of the campaign in 1956:-

	<u>Year</u>	<u>Total Doses Given</u>	
	1956	2,138	
	1957	2,332	
	1958	9,048	
	1959	8,866	
	1960	4,077	
	1961	6,586	
	1962	3,600	
	1963	2,164	
	1964	1,918	
	1965	4,263 *	
<u>Doses given in 1966</u>		<u>Oral</u>	<u>Quadrilin</u>
First dose		666	65
Second "		643	65
Third "		621	65
Fourth "		480	34
		<u>2,410</u>	<u>229</u> (Total) 2,639

* This figure does not include the special campaign during the outbreak of Poliomyelitis in the Division in 1965.

4) Vaccination against Tuberculosis

No. of children offered B.C.G.	423
No. of consent forms received	309
Number tested	266
" negative	247
" positive due to previous B.C.G.	10
" positive due to a natural infection	9
Percentage naturally positive	3
Number given B.C.G.	247

It will be noted that of over 423 children who were eligible to receive B.C.G. only 247 actually received the vaccine. To this 247 there should be added another 10 who had received B.C.G. in previous years and being still immune did not require revaccination. This left about 59 (15% of the total) who did not receive the vaccine. 9 (3% of the total) of these had applied but on being tested were found to have sustained a natural infection already. For then the chance of B.C.G. came too late.

The total numbers recorded in the Tuberculosis Registers in the Division at 31st December, were:-

	<u>Pulmonary</u>		<u>Non-Pulmonary</u>		<u>Total</u>
	<u>Males</u>	<u>Females</u>	<u>Males</u>	<u>Females</u>	
Hyde	65 (82)	39 (43)	5 (4)	9 (9)	118 (138)
Longdendale	19 (11)	22 (15)	4 (4)	3 (3)	48 (33)
Tintwistle	- (-)	- (-)	1 (1)	- (-)	1 (1)
	<u>84 (93)</u>	<u>61 (58)</u>	<u>10 (9)</u>	<u>12 (12)</u>	<u>167 (172)</u>

(1965 totals are shown in brackets)

The Supply of Nursing Requisites, etc.

The issue of nursing requisites, on loan to patients nursed in their own homes continued throughout the year. These articles are stored partly in this office and partly by the District Nurses in their own homes, although, in the case of larger items of equipment, these are issued from the Divisional Office. In addition there are some items at Hollingworth Clinic and one small store is kept in a private house in Broadbottom for which a rental of 10/-d. per annum is paid to the house-holder.

The following aids were issued during the year:-

Walking Aid.....	11	Commode.....	9
Wheel Chairs.....	21	Air-rings and Cushions.....	19
Back Rests.....	19	Rubber Sheets.....	3
Feeding Cups.....	2	Bed-pans.....	32
Enuresis Alarm.....	3	Urinals.....	16
Crutches.....	3	Hoists.....	2
Bed-cradle.....	1	Walking Sticks.....	5
		Beds.....	3

Once again, through the generosity of residents in the Division, it was possible to provide a number of needy families with many items of furniture and equipment. These are greatly appreciated by the recipients.

In addition to this source of supply the W.V.S. have organised a similar service and have co-operated at all times in making this a worthwhile venture.

There is excellent co-operation between the W.V.S. and the Divisional Health Department and many articles given to the Department are in fact stored in the same warehouse on the understanding that in case of need, either party may distribute any goods which were originally given to the other.

Convalescent Treatment

The Divisional Health Committee is not responsible for sending patients to convalescent homes where it is really an extension of hospital treatment. Cases normally accommodated are those people who require a rest and change of air following illness treated at home, or where other circumstances in the home necessitate a period of complete rest and a change of environment.

During the year accommodation was arranged for 14 adults and 15 children. The cost incurred during the year was £249.18. 9. Adults in receipt of National Assistance and children of school age are accommodated free of charge.

Chiropody

As the Committee are now well aware the Chiropody Service is available to persons of pensionable age and certain handicapped people. Treatment is provided free to patients whose income falls below a given figure and over 90% of the cases are receiving free treatment.

Patients may go to the Chiropodist of choice provided the Chiropodist has such qualifications as entitle him to be on the approved list of the Cheshire County Council. The patients are enabled to have an initial course of six treatments at monthly intervals, and thereafter to have six treatments every year. In certain very exceptional cases, more frequent treatment may be obtained if authorised by the Divisional Medical Officer.

Details as to the number of persons receiving treatment under the County Scheme at 31st December, 1966 are summarised in the following table:-

PLACE OF TREATMENT	CATEGORY OF PERSON					
	AGED 65 YEARS AND OVER		PHYSICALLY HANDICAPPED		EXPECTANT MOTHERS	
	No. of patients	No. of treatments	No. of patients	No. of treatments	No. of patients	No. of treatments
Chiropodists' surgery	550	2643	7	27	Nil	Nil
Home of patient	400	2090	6	18	Nil	Nil
Club	Nil	Nil	Nil	Nil	Nil	Nil

No. of cases for which County Council paid Full fees 912 Part fees 51
 No. of treatments for which County Council paid Full fees 4498 Part fees 280

HANDICAPPED PERSONS

Under Section 29 of the National Assistance Act, 1948, the County Council provides Welfare Services for Handicapped Persons and a scheme under this heading has been made the responsibility of the County Health Committee.

In addition to the services rendered by Nurses, Health Visitors and Home Helps the following aids were provided for handicapped persons during 1966.

Bath safety rails.....	9	Wooden ramps.....	4
Flagged ramp.....	1	Footpath crossings, driveways etc.....	3

Much of the work for handicapped persons in the Division is carried out by voluntary associations who receive grants from the County Council. The Blind Welfare Society at Ashton-under-Lyne and the Ashton Institute for the Deaf carry out much work in the Division.

Car badges used by handicapped persons were renewed as necessary.

DOMESTIC HELP SERVICE

This service continued as a most valuable aid in the maintenance of sick and aged people in their own homes. In addition some help was given to mothers leaving their babies in their own homes.

The Supervisor also visits new applicants for Domestic Help in order to assess their respective needs. During 1966 domestic assistance was provided as below.

	<u>No. of Cases.</u>
Persons aged 65 years or over on first visit in 1966.....	272
Aged under 65 on first visit in 1966.....	
(i) Chronic sick and tuberculous.....	26
(ii) Mentally disordered.....	3
(iii) Maternity.....	14
(iv) Others.....	14

All the Domestic Helps are employed as temporary staff; the total number of hours worked being 34,193 $\frac{3}{4}$.

Varying charges for Help are made according to the income of the household and at present range from 3d to 4/9d per hour.

Arrangements can be approved by the Divisional Health Committee whereby the cost of a Domestic Help can be recovered in the future from the estate of an aged person.

CARE OF THE AGED

The majority of elderly people in this Division, when the time comes that they are unable to look after themselves, receive great help from the services of the Health Visitor, Domestic Help, District Nurse, or Chiropodist. In addition the Meals on Wheels Service administered by the Women's Voluntary Service in the area, provides a hot meal on one or two days a week for a large number of people. Provision of accommodation in hospital or old people's home is insufficient particularly during the winter, and again the Division can usually provide services during the waiting period for such accommodation.

Pole Bank Hall and Bowlacre

During the year visits of inspection were made to these two old peoples' homes run by the Borough of Hyde Welfare Committee. At Bowlacre there is accommodation for 45 elderly people, (19 men and 24 women) and at Pole Bank Hall accommodation for 40 women. The homes proved most satisfactory and provided a most useful service for the old people of Hyde.

County Council Welfare Homes.

There are several homes throughout the County administered by the County Welfare Committee. The preliminary investigation as to the need and suitability for such accommodation is commonly made by the Health Visitors in the Division. During the year 36 cases were referred to the County Welfare Department through the Divisional Office, and 4 were referred by other people, for example by the patient's general practitioner.

MENTAL HEALTH

During the year the Senior Mental Welfare Officer and members of his staff have investigated and dealt with many cases referred to them for various reasons. The following report is as submitted by the Area Mental Welfare Officer:-

There was a total of 188 cases of mental illness referred to the Local Mental Health Department for appropriate action under the Mental Health Act 1959 and various other allied acts. This was made up of 61 Males and 127 Females and all cases were referred to the appropriate department for treatment.

Since the implementation of the Mental Health Act, 1959, there has been a steady decline in the number of patients who have been removed on a compulsory basis under that act into hospital. This was envisaged with the better facilities and more adequate staffing of the Mental Welfare Departments to carry out the after care necessary to maintain people in the community, who are suffering from mental illness. For the whole of the area covered by the Mental Welfare Department, Officers from this department made 1,287 after care visits to the homes of people suffering from mental disorder.

In close co-operation with the Hospital Service, the Mental Welfare Officers have accompanied the Consultant Psychiatrists to patient's homes on 204 occasions with a view to deciding the best form of treatment to be afforded to the patient.

Domiciliary supervision of Subnormal and Severely Subnormal patients residing in the community have been carried out within the district and a total of 553 visits were made to them by the Mental Welfare Officers. During the year 3 Males and 4 Females were admitted into various Homes and Hospitals for Subnormal children on a short term basis, in order to give the relatives some respite from their responsibilities. 1 Male Subnormal was admitted on a permanent basis into Local Authority Hostel accommodation.

Unfortunately during the year, 2 patients were committed to hospital by the Magistrates Court under Section 60 of the Mental Health Act and 1 male was committed to Rampton Special Hospital by the Court of Quarter Sessions. In each of these cases this department was involved and we eventually transferred patients to the hospital named in the order.

Patients in the community have been conveyed to the Out Patient's Clinic for consultation with the Consultant Psychiatrists, or to receive treatment throughout the year, as and when necessary and close contact has been maintained at all times with the Psychiatrists and hospital staff covering this area.

I am pleased to report that the Grange Road Youth Club for Subnormals continues to flourish and meetings are held each Wednesday at the Hyde Adult Training Centre. We did have some difficulty in organising transport to convey them to the Club, but this has now been eliminated by the kind offer of the loan of a minibus from Glengarth and also by M.E.N.C.A.P. Society who have undertaken to pay the expenses of a second minibus for the conveyance of trainees.

STAFF Mr. G.E. Lanceley successfully completed a one year course on Social Work at the Manchester College of Commerce.

Miss Gaynor Price, Trainee Mental Welfare Officer resigned at the beginning of the year and her place was taken by Mrs. Doreen Kinsella who joined the Staff from the Wallasey County Borough.

During the year we lost the services of Mr. N. Power, who was transferred to the Sale district.

TRAINING CENTRES

Junior

At the end of the year there were 61 children on the register; 14 of these being in the Special Care Group.

The staff at the Centre was:-

- Supervisor
- Deputy Supervisor
- 48 Assistants
- 1 Meals Assistant
- 2 coach escorts
- 1 cleaner (full-time)

Special Events

- | | | | |
|-------------------------|----------------|---|--|
| <u>Parents Evening:</u> | 18th July | - | when childrens work was on display. |
| <u>Open day:</u> | 26th July | - | demonstration by children - including dancing, P.E., music and drama |
| <u>Barn Supper:</u> | November | - | the proceeds from which were used towards the expenses at Christmas. |
| <u>Childrens Party:</u> | 13th December- | | when, once again, Hyde Rotary Club rendered valuable assistance. |
| <u>Nativity Play:</u> | 20th December- | | which was very well received. |

Outings

These were arranged during the summer-time and included:-

1. an afternoon excursion by the Infants to Manor Park, Glossop:
2. a visit by the Junior and Senior classes to Southport: and, for the Senior Group,
3. a trip by train to Liverpool, where they were very interested in seeing oil tankers, cargo ships, and passenger liners. The purpose of this particular journey was to illustrate a project being undertaken by the seniors.

Conferences etc.

Each member of the staff attended a one-day conference in Manchester organised by the National Association of Teachers of the Mentally Handicapped.

Mrs. Brewerton, Deputy Supervisor, attended also a one-day course on Special Care Units.

Visits to the Centre

Interest in the care of the Mentally Handicapped has been increasing during recent years and this became even more apparent during 1966 as evidenced by the number of visitors including hospital social workers, student teachers from Training Colleges, and representatives of many voluntary societies.

The Centre was also visited by Miss Gardner, Ministry of Health Inspector, who expressed pleasure at seeing agility apparatus in the Centre, and stressed the value of "outside" visits by the children in preparing them to meet the demands of the community.

ADULT:

There were 69 trainees on register, 39 male and 30 female.

Two special care units were in operation during the year.

Approximately twenty trainees received swimming instruction and took part in a swimming gala held at Hyde Baths in July. All parents were invited to attend this event.

The Centre was open to the public during Mental Health Week and a Bring and Buy Sale and a Coffee Evening, also in July, realised £52 which was paid into the Trainees Comforts Fund.

Forty-four trainees were taken for a week's holiday to St. Annes (1st - 8th October) and accommodated in two private hotels. The coach was retained for the week and several events were arranged including visits to the Lake District and a sail on Lake Windermere; a visit to Blackpool Tower; Stanley Park; an Ice Show; an evening trip along the Promenade to see the illuminations; and a day trip to Southport.

A dinner party was held at the Centre at Christmas when the Trainees entertained themselves by giving a Concert.

Contract work was again carried out for James North Limited., Industrial Glovemakers.

MISCELLANEOUS

Day Nurseries

Inspections have been made of the Day Nursery at Ashton Brothers, Carrfield Mills, Hyde. This Nursery is registered to have 56 children and has proved satisfactory in all respects.

Forty-four trainees were taken for a week's holiday to St. James (Sat - Sun October) and accommodated in two private hotels. The coach was retained for the week and several events were arranged including visits to the Lake District and a walk on Lake Windermere; a visit to Blackpool Tower; Sturley Park; an Ice Show; an evening trip along the Promenade to see the illuminations; and a day trip to Southport. The week was very successful.

A dinner party was held at the Central Christian School for the trainees and entertained themselves by giving a concert. After dinner, during the evening, a number of the trainees were invited to give a performance. The concert was a success and the trainees were again invited to give a performance at the Central Christian School.

MICHELLANUS

Michelleanus was a member of the team who took part in the competition. He was a very good player and was much liked by the other members of the team.

Day Nurseries

Investigations have been made of the Day Nurseries at Ashton Brothers, Carrfield Mill, Lyde. This nursery is reported to have 56 children and has proved satisfactory in all respects.

The nursery is situated in a very quiet area and has very good facilities. The children are well looked after and the staff are very friendly. The nursery is a very good example of a day nursery and is well worth a visit.

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