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IN THE COUNTY OF LANCASTER

The

ANNUAL REPORT

of the

Medical Officer of Health

and

Chief Public Health Inspector

For the Year

1969



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1969

GILBERT R. BRACKENRIDGE, M.B., Ch.B., D.P.H.,

Medical Officer of Health

Public Health and Health and Welfare Offices,

Town Hall, Middleton

(Tel.: 061-643 6291)

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1969/70

HEALTH COMMITTEE

Chairman:

Councillor J. L. Albiston

Vice Chairman
Councillor A. Dodd

His Worship The Mayor—Councillor J. O. Johnson
Alderman F. Sansom
Councillor G. Allen
Councillor J. Cunningham
Councillor Mrs. M. Gittins
Councillor Mrs. P. N. E. Hawton
Councillor H. Hill
Councillor K. Holland
Councillor R. Lewis
Councillor I. T. Saxon

Co-opted Member: Dr. R. Peck

Medical Officer of Health: GILBERT R. BRACKENRIDGE, M.B., Ch.B., D.P.H.

> Deputy Medical Officer of Health: JOAN M. CURTIS, M.B., Ch.B., D.P.H.

Staff of the Public Health Department

Chief Public Health Inspector:

A. T. TRAYNOR, M.A.P.H.I., M.Inst. P.C., M.R.S.H.
Cert. of Meat and Other Foods, Smoke Inspector's Cert.

Testamur of Inst. P.C.
City & Guilds in Boiler House Practice

Deputy Chief Public Health Inspector:
C. KELLY, D.P.A., M.A.P.H.I., M.R.S.H.
Cert. of Meat and Other Foods
Cert. of Meat and Other Foods (Liverpool)
Diploma R.Inst. P. Health and Hygiene
City & Guilds in Boiler House Practice

Additional Public Health Inspectors:

L. H. KERR, M.A.P.H.I., Cert. of Meat and Other Foods J. R. DYKES, Dip. P.H.I.E.B., M.A.P.H.I., M.R.S.H. (left November)

W. HOLLINGWORTH, M.A.P.H.I.
P. WHITTAKER, Dip. P.H.I.E.B., M.A.P.H.I. (left May)
J. FISHER, Dip. P.H.I.E.B., M.A.P.H.I.

Clerical Staff:

R. A. COOK (Senior Clerk)
MRS. I. FIELDEN(Clerk-Typist) (commenced September)
MISS C. PORTER (Shorthand-Typist) (commenced January)

Pupil Public Health Inspectors:
A. C. MORTIMER, Inter P.H.I.E.B. (Pupil)
R. CALDERBANK (Pupil)

Smoke Officer:

R. MILLER, M.A.P.H.I.,
(Cert. of Meat and Other Foods),
Smoke Inspector's Certificate

Technical Assistant Smoke Control: L. GALLAGHER (Coal Utilisation Council's Cert.)

DELEGATED HEALTH AND WELFARE FUNCTIONS

Medical Officers: (Departmental)

JOHN M. TAINSH, M.B., Ch.B., Dip.Soc.Med., D.I.H.

M. COATES, M.B., Ch.B., D.P.H.,

D.I.H., D.M.R.T. (commenced 6, 9.69)

A. K. KENWAY, L.R.C.P., M.R.C.S.

Part S. MILLS, M.B., Ch.B.

Time S. L. ROYCE, M.B., Ch.B.

A. REITH, M.B., Ch.B. (died 21, 9.69)

L. SCHREIBER, M.B., Ch.B., M.D.

J. S. B. MACKAY, M.A., M.B., Ch.B.,

D.P.H. (resigned 28, 7.69)

Part-time Consultant Obstetrician: H. A. ROWLEY, M.B., B.S., F.R.C.O.G.

> Senior Administrative Officer: Mr. J. GLEESON

> > Home Help Organiser: MISS P. OGDEN

Assistant Home Help Organiser:

MRS. M. McNAB

Social Welfare Officer of the Blind:

Mrs. A. CLANCY

Senior Mental Welfare Officer: Mr. D. MacCORQUODALE

Mental Welfare Officers:

Mr. J. CHADWICK

Mr. A. COOK

MR. G. HOWARTH

Mr. J. M. MOODYCLIFFE

MISS D. SHACKLETON

(Part-time Officers, seconded from Health Division 14)

Divisional Welfare Organiser:

MR. J. E. TAYLOR

Social Welfare Officer (Middleton area):
Mr. A. KOTT

Public Health/Health and Welfare Departments,

Town Hall,

Middleton,

M24 4EA.

July, 1970

To The Chairman and Members of the Health Committee

Mr. Chairman, Ladies and Gentlemen,

I have pleasure in presenting my Annual Report on the Health of the Borough in 1969.

There was again a slight decrease in the Registrar General's estimate of mid-year population, the total of 57,510 being 350 less than the 1968 estimate. There was again a fall in the Birth Rate, the total of 790 births being 40 less than in 1968, and giving a crude birth rate of 13.7 and an adjusted rate of 13.3 to compare with a national rate of 16.3. The number of deaths (585) was higher than in 1968, giving a crude death rate of 10.2 and an adjusted rate of 15.0 to compare with a national rate of 11.9. The total number of infant deaths was 22, giving an Infant Mortality rate of 28 per 1,000 live births. The inference to be drawn from these figures is that in the absence of further major migratory movement, there may continue to be a gradual decline in population in the next few years, and there have been few more fascinating studies than the changes in the Local Birth Rate over the past 20 years.

The total notifications of Infectious Diseases (507) were some 100 lower than in 1968. The incidence of measles (287 cases) was almost exactly as in 1968, but there was a welcome reduction in the cases of Dysentery and Food Poisoning, both of which had given rise to concern in the previous year. While notifications of Infective Jaundice increased sharply, the total of 78 cases cannot be compared directly with previous years, as the disease was not notifiable until 1st June, 1968. As is mentioned in the body of the report (Immunisation—Section B) the present percentage of young infants receiving routine immunisation and vaccination in the Borough is far from satisfactory. While accepting that a proportion of parents have sincere objection to immunising procedures, it is my opinion that far too few of today's parents are willing to face up to their responsibilities in obtaining for their children protection from the more serious and preventable communicable diseases.

The functioning of Delegated Health and Welfare Services is fully set out in Part B of this report and I would only comment upon them briefly here. The long awaited reconstruction

of Durnford Street Clinic commenced in February, 1969 and was completed in September. There was considerable inconvenience to both public and staff during this period but the end result has been worth while with two modern, well equipped clinics in the Borough. Although not the direct responsibility of the Borough, the completion of the third purpose-built Home for Elderly-Shawbury, in Grimshaw Lane-was a welcome addition to our Welfare Services. Negotiations proceeded for the acquisition of the site for an Adult Training Centre, off Martindale Crescent, and construction work commenced this year. During 1969, approval was given under the Home Office special Urban Aid Programme to the acquisition of the Cromer Day Nursery premises; these have now been purchased by the County Council but require major adaptation before being re-opened as a Local Authority Day Nursery. The future of the Long Street clinic premises, now used mainly for Child Guidance service purposes, is now limited, but no firm decision has been taken on alternative premises for this service. Negotiations were reopened with the Alkrington Community Centre regarding the use of certain rooms for Child Health Clinic purposes, but the Alkrington sessions were continued at the Congregational Church throughout 1969.

As in the past few years, our major staffing difficulty continues to be in the recruitment of full-time Medical Officers and of qualified Health Visitors. One can see no indication of any solution to our difficulties with recruitment of either group in the immediate future. During the year a substantial amount of work was created by the full implementation of Section 60 of the Health Services and Public Health Act, 1968 involving the much wider registration of Child Minders and Play Groups. In contrast with the position in some large County Boroughs there had not been any evidence of any major abuse of previous legislation locally.

As is usual, I leave to Mr. Traynor, your Chief Public Health Inspector, the major comment upon environmental health services, fully reported upon in Part C of this report. Although a number of technical difficulties arose at the new Refuse Disposal plant one's surprise was that these were so few, and that the basic design is excellent. The number of properties represented for clearance was 55, the lowest for some years. In addition, however, a substantial number of substandard properties in the Town Centre development area were inspected in detail by the Public Health Inspectorate, in connection with compulsory purchase although they were not classified as unfit properties. Moreover, it had become necessary to pause in our programme of representation so as to allow the Council to catch up with the backlog of tenants in Confirmed Clearance Areas awaiting rehousing, 208 unfit properties were actually demolished and 288 new properties completed during the year, 233 of the latter being for the Council. Four Smoke Control areas (covering 418 properties) were submitted for Ministerial approval

during the year and at 31st December there were 8,714 properties within the 16 Smoke Control areas in operation in the Borough.

At the time of writing, the future pattern of Health Services in the country remains a matter for speculation. The Local Authority Social Services Act, 1970 received the Royal Assent in the closing days of the last Government: it remains to be seen how far the new Secretary of State will direct its full implementation in 1971. If fully enacted the Borough will lose its delegated powers for Welfare, Mental Health, Day Nursery and Home Help Services to a new Social Services Department. Although it would appear that the new Government will not feel bound by its predecessors plans for local Government and Health Service re-organisation I am in little doubt that some restructuring will be undertaken within the next 4-5 years. One can only hope that due regard will be paid to preserving the integrity of existing functionally unified or related services. The present prolonged climate of uncertainty is one of the root causes of low morale in some sections of local Health Authority Services.

Before concluding this letter I must acknowledge, on behalf of my staff, the debt we owe to Dr. S. C. Gawne, who retired as County Medical Officer of Health during the year. Dr. Gawne, as architect of the County Divisional system of Health Service Administration, had always insisted that 'delegation' should be a working reality, not a legal fiction, and that, provided the County Health Committee's broad policies were accepted, Delegated Authorities should exert effective day-to-day control over their own affairs. I am certain that Dr. C. H. T. Wade, his successor, will wish equally to see Delegated Authorities discharge their responsibilities efficiently and humanely.

I must thank you, Mr. Chairman, the members of your Health Committee, and the staffs of Public Health and Health and Welfare Departments for their continued support and loyalty throughout the year. I would also thank the Town Clerk for his advice and willing assistance when required. Finally, I must acknowledge with much gratitude the help given by so many of my staff in the preparation of this report.

I am, Mr. Chairman, Ladies and Gentlemen,

Your obedient servant,

GILBERT R. BRACKENRIDGE, Medical Officer of Health.

PART A

STATISTICS AND INFECTIOUS DISEASES REPORT

Table A.1 GENERAL STATISTICS Area of the Borough (acres) 5,170 Population at Census (1951) 32,620 Population of Census (1961) 57,674 Registrar General's Est. Mid-Year Population (1969) .. 57,510 Number of persons per acre 11.12 Number of Inhabited Houses (estimated) 17,696 Rateable Value at 31st March (1968-1969) £1,665,965 Sum represented by a Penny Rate (1968-1969) £6.625

GENERAL CONDITIONS OF LOCALITY

The Borough of Middleton, which forms part of the South East Lancashire industrial conurbation, lies to the North of Manchester and is roughly equidistant from the nearby County Boroughs of Manchester (to the South), Bury (North-West), Rochdale (North-East) and Oldham (East). The district is fairly low lying, the original township having developed along the banks of the River Irk, which flows from East to West through the Borough.

The district was formerly almost entirely dependent on cotton spinning for economic prosperity but many of the mills have been closed or adapted for other purposes and the major industries of the district now include foam rubber upholstery, tobacco manufacture, industrial chemicals, light engineering and preserve manufacture. There is also a long-established brewery. Since 1950 the district has seen intensive residential housing development, with its population nearly doubled. There is a limited amount of farming land principally to the North of the Borough.

The town has good road communications with adjacent districts and the Borough is served by regular bus services of the SELNEC transport undertaking and also by the North Western and Ribble Companies.

The principal problems faced by the Borough Council as a Health Authority are:—

- The remaining areas of unfit houses or sub-standard houses in parts of the district.
- 2.—The atmospheric pollution common to South-East Lancashire.
- The absence of a sewer to the peripheral villages of Birch and Bowlee.
- 4.—The recruitment and retention of qualified staff.

TABLES A.2 & A.3 POPULATION & HOUSING—1966 CENSUS

The following tables are based on information published by the Registrar-General.

Total Population	n (both sexes)	57,020	100%
	Children under school age	5,510	9.5%
Child Population	Schoolchildren aged 5-14	10,900	19%
	Total children under 15	16,410	28,5%
Total Males 15-	64 "Working Population"	17,930	31.5%
Females	Age 15-44 "Reproductive Population"	11,610	20,5%
	Age 45-60	5,010	9%
	Females 60 and over	4,370	7.5%
Elderly Persons	Males 65 and over	1,690	3%
	Total "Pensionable"	6,060	10.5%

Total "H	Iouseholds''		17,380	100%
Tenure		ity Owned	7,540 7,740	43.5% 44.5%
		Tenure	1,770 350	10%
		Hot Water System	16,260	94%
Amenities With exclusive use of		Fixed Bath	15,150	87%
	use of	Water Closet	16,630	96%

NOTE—Above figures are based on a 10% sample and are accordingly subject to statistical "sampling error." There is a 95% probability that true figure is within range n + or — $20\sqrt{n10}$ where n= number given above.

Table A.4

VITAL STATISTICS

Live Births			790
	Males	Females	
Legitimate	. 339	374	
Illegitimate	. 42	35	
Live Birth Rate per 1,000	population :—		
Crude Rate			13.7
Adjusted Rate			13.3
Illegitimate Live Births	per cent of total	live births	10
Stillbirths			19
Stillbirths rate per 1,000	live and stillb	irths	23
Total live and stillbirths			809
Infant Deaths (death u	nder 1 year)		22
	Males	Females	
Legitimate	. 7	10	
Illegitimate	. 3	2	
Infant Mortality Rates :	_		
Total infant deaths	per 1,000 total	live births	28
Legitimate infant de births	eaths per 1,000	legitimate live	24
Illegitimate infant live births		00 illegitimate	65
Neo-Natal Mortality Rat 1,000 total live	e (deaths unde births)		20
Early Neo-Natal Mortali per 1,000 total	ty Rate (deaths live births)		18
	(stillbirths and ned per 1,000 t	total live and	41
Maternal Mortality (incl			Nil
Maternal Mortality per			Nil
Total deaths (all ages)			585
Death Rate per 1,000 pop			
Crude Rate			10.2
Adjusted Rate			15.0

Table A.5

COMPARATIVE TABLE OF VITAL STATISTICS

		1969	1968	1964	1959	1949
Live Births	No. Adj. Rate	790 13.3	830 13,9	1074 18.4	1086 17.5	526 16.3
Stillbirths	No. Rate	19 23	18 21	20 18.3	27 24.3	9 17
Total Live and Stillbirths	No.	809	848	1094	1113	535
Total Infant Deaths	No. Rate	22 28	20 24	27 25.1	27 24.9	17 32
Maternal Deaths	No. Rate	Nil. Nil.	Nil Nil	Nil. Nil.	Nil. Nil.	1 1.87
Total Deaths	No. Adj. Rate	585 15	539 13.9	532 14.0	495 13.4	436 13.5

Table A.6
INFANT MORTALITY

			Ages at	t Death		
Cause of Death	Under 1 day	1 day and less than 7	1 week and less than 4		6 months and less	Total
Pneumonia	_	1	1	3	1	6
Other diseases of respiratory system	_	_	_	1	_	1
Gastritis, enteritis and diarrhoea	_	_	_	_	1	1
Congenital anomalies	_	_	_	1		1
Certain causes of perinatal mortality	9	3	_	_	_	12
All other causes .	_	1	_	_	_	1
Totals	9	5	1	5	2	22

COMMENT ON STATISTICAL TABLES

The population of the Borough has now remained relatively stable for the past 5 years. The unusual age structure of the population, with considerable "weighting" of younger age groups has been borne out by the 1966 Census (see table A.2).

With 2 more infant deaths recorded than in 1968 the infant mortality rate has increased to 28 per 1,000 live births. The local infant mortality rate is higher than the national rate conforming to the pattern of all recent years except 1967.

The general trend of principal vital statistics may be seen from table A.5, which gives a comparison of 1969 figures with those of one, five, ten and twenty years before. It is necessary to bear in mind the substantial changes in population over those 20 years and also to exercise great caution in interpretation of certain statistical figures.

		1969	
CAUSES	Male	Female	Total
Enteritis and other Diarrhoeal diseases Tuberculosis of Respiratory System Other Tuberculosis incl. late effects Syphilis and its sequalae	- 2 1 1 - 1 - 3 5 188 1 - 2 - 1 90 3 244 99 1 199 19 1 6 2 - 1 1 3 - 2 1 4 2 9 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	$\begin{array}{c} 1\\ 4\\ 1\\ 1\\ 1\\ 2\\ 1\\ 3\\ 2\\ 8\\ 7\\ 2\\ 3\\ 3\\ 5\\ 3\\ 7\\ 1\\ 4\\ 2\\ 3\\ 1\\ 3\\ 2\\ 3\\ 1\\ 4\\ 2\\ 3\\ 1\\ 3\\ 2\\ 9\\ 2\\ 1\\ 6\\ 1\\ 2\\ 3\\ 9\\ 6\\ 1\\ 2\\ 3\\ 9\\ 6\\ 1\\ 2\\ 3\\ 9\\ 1\\ 2\\ 1\\ 2\\ 3\\ 2\\ 3\\ 2\\ 3\\ 2\\ 3\\ 3\\ 2\\ 3\\ 3\\ 2\\ 3\\ 3\\ 4\\ 2\\ 3\\ 3\\ 4\\ 3\\ 4\\ 3\\ 4\\ 3\\ 4\\ 3\\ 4\\ 3\\ 4\\ 3\\ 4\\ 3\\ 4\\ 4\\ 4\\ 4\\ 4\\ 4\\ 4\\ 4\\ 4\\ 4\\ 4\\ 4\\ 4\\$
TOTALS	276	309	585

Years	Male	1 9 6 9 Female	Total
Under 4 weeks	7	9	16
4 weeks and under 1 year	3	3	6
1— 5	4	_	4
5—15	3	1	4
15—25	3	2	5
25—35	5	3	8
35—45	11	8	19
45—55	31	25	56
55—65	64	42	106
65—75	76	70	146
75 and over	69	146	215
Totals	276	309	585

COMMENT ON DEATHS

The reader will note the considerable difference between the crude death rate 10.2 per 1,000 and the adjusted rate of 15.0. This "adjustment" is a statistical device to level out the differences between areas due to unusual age/sex structure of the local population.

As in recent years, the principal causes of d	eath were:—
Diseases of Heart and Circulation	205 deaths (37 per cent)
Cancer (all sites)	110 deaths (19 per cent)
Disease of Respiratory System	84 deaths (14 per cent)
Vascular Lesions of Nervous System	78 deaths

These four major groups are thus responsible for 83 per cent of deaths.

From a study of Table A.8 it will be noted that while 75 per cent of men had died before the age of 75, a much lesser proportion (52 per cent) of women died before this age. It will also be noted that just over half (54 per cent) of local men lived to pensionable age.

INFECTIOUS DISEASES

The full revised list of diseases notifiable to the Medical Officer of Health is now as follows:—

Anthrax Paratyphoid Fever

Cholera Plague
Diptheria Poliomyelitis (Acute)

Dysentery Relapsing Fever
Encephalitis (Acute) Scarlet Fever

Food Poisoning Smallpox
Infective Jaundice Tetanus
Leprosy Tuberculosis
Leptoning Smallpox
Tetanus
Tuberculosis

Leptospirosis Typhoid Fever Malaria Typhus

Measles Whooping Cough Meningitis (Acute) Yellow Fever

Ophthalmia Neonatorum

MEASLES

The total of cases notified (287) was almost the same as in the previous year. The majority occurred in the first half of the year. It would perhaps be premature to comment on how far future outbreaks of this disease will be modified by vaccination against measles.

WHOOPING COUGH

The 4 cases notified represent a substantial reduction on previous returns. The disease should be a comparative rarity if parents accept the responsibility for securing routine immunisations for their children in infancy.

DYSENTERY

The reader will note (Table A.12) the total of specimens submitted for laboratory examination from cases, suspect cases and family contacts. Although dysentery is seldom a dangerous infection, save in early infancy, a substantial amount of work falls on the Health Department, and the Public Health Laboratory in arranging collections and examinations of specimens on this scale.

INFECTIVE JAUNDICE

This disease was not notifiable until June, 1968. It may be some years before one can gauge its "normal" incidence in the community. The principal hazard presented to the Health Department is its occurrence in food handlers.

FOOD POISONING

The prevalance of this disease appears to vary widely from year to year. As with dysentery, arrangements for visiting and obtaining specimens from cases, suspect cases or contacts can occupy considreable time for the staff of the Health Department.

Table A.9

PREVALENCE OF INFECTIOUS DISEASES—1969

DISEASE							FOTAI	CAS	ES N	TOTAL CASES NOTIFIED	ED				
Total acases at all at all at all acases at all acases at all acases are all acases at all at all at all acases are all acases at all acases are all acases at all acceptance at all acases at all acceptance at all accep	MOMENTA DI E					7	AGE I	PERIC	100		RS				
$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	DISEASE	Total cases at all ages	-0						5	10			25 ar		Age
4 2 1 15- 45- 65 and over 65 75-	Measles (excluding rubella) Dysentery Scarlet fever Acute meningitis	287 10 35 2	188	15 33	60	14 4	4	5151	78 	ω H 4		0 10	4		10 01
$\begin{array}{c ccccccccccccccccccccccccccccccccccc$				I		2—		15			- 12		65 and o		Age
$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	Food poisoning	4		2		1		1			1		1		1
$\begin{array}{c ccccccccccccccccccccccccccccccccccc$							T		1						Age
$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	ndice	78	1			21	2	9	5	00	1	-	i	_	1
Ophthalmia neonatorum 1	piratory er igh	9 1 4	11-			-	111	111	-	111	23	2		111	
	Ophthalmia neonatorum	1													

Notifiable Diseases	1969	1968	1964	1959
Scarlet Fever	35	38	140	64
Paratyphoid		1	_	1
Measles	287	286	716	1203
Whooping Cough	4	23	107	315
Pneumonia *	-	11	16	26
Dysentery	10	106	55	82
Opthalmic Neonatorum	1	_	_	-
Erysipelas *	_	2	3	3
Food Poisoning	4	21	26	16
Poliomyelitis Paralytic	_	_	1	-
Acute Meningitis	2	2		2
Infective Jaundice †	78	_	_	_
Tuberculosis Pulmonary	9	14	22	22
Tuberculosis Non-Pulmonary	1	3	2	4
Totals	431	507	1088	1738

^{*} Not notifiable after 30th September, 1968 † Notifiable after June, 1968

NEW CASES AND MORTALITY DURING 1969

		New	Cases			I	eaths	
Age Periods	Pulmo	onary		on- onary	Pulm	onary		on- ionary
Years	М	F	М	F	М	F	M	F
1 year	_	-	_	-	_	-	-	-
2— 4 years	_) -	-	-	_	-	_	-
5— 9 years	_	-	_	-	_	-	_	-
10—14 years	_	1	_	-	-	-	_	-
15—19 years	_	-	_	-	-	-	_	-
20—24 years	-	-	_	_	-	-	- 1	-
25—34 years	1	-	_	-	-	-	- 1	_
35—44 years	_	-	_	-	_	_	_	_
45—54 years	1	1	_	-	_	-	_	-
55—64 years	2	-	_	_	_	_	-	-
65—74 years	2	1	_	-	_	_	-	-
75 and over	_	-	_	-	_	-	-	-
Age unknown	_	1	_	1	- 1		_	_
Totals	6	4	_	1		_		_

While 10 new cases were notified during the year the total number remaining on the "Supervision" register at 31st December, 1969 was reduced to 150. It will be noted that 7 of the new cases were over 45 years of age. The majority of young people are notified in the early stages where there is every prospect of rapid control of infection by drug treatment: it is unfortunate that a number of older cases appear to have avoided seeking medical attention until the disease has progressed to a chronic stage.

As a result of changing pattern of this disease in the community, there has been a change in policy by the Mass Miniature X-Ray units to provide a regular "screening" service to General Practitioners, with lessened emphasis on attracting a self-selected clientele.

LABORATORY FACILITIES

Blood specimens from the ante-natal clinics were sent either to the Pathology Department, Oldham and District General Hospital; The Serological Laboratory, Withington Hospital, or to the National Blood Transfusion Service, Royal Infirmary, Manchester. Otherwise practically all the routine specimens were submitted to the Public Health Laboratory, Withington Hospital, Manchester, 20.

During the past year the following specimens were submitted to the Public Health Laboratory for examination:—

Table A.12

Faeces Specimens 490

Thanks are due once again to the Director of the Public Heath Laboratory and his staff for their ever-ready co-operation and practical help given to the Health Department.

SWIMMING BATHS

Middleton Corporation owns the sole swimming bath in the Borough. This was constructed in 1938, and consists of a large pool (100ft. x 35ft.) with a maximum depth of 10ft. 3ins., a smaller children's pool (30ft. x 22ft.) with a maximum depth of 3ft., 16 slipper baths, 4 hot and cold showers and changing accommodation. Chlorinated footbaths are provided from the dressing accommodation to the plunge baths.

The baths are supplied with water from the town mains (West Pennine Water Board) and further treated by chlorination and sand filtration. A total of 98,396 bathers used these baths during the season May to October, plus 26,094 schoolchildren receiving lessons.

During the winter months, the building is closed to bathers and used as a social centre. The slipper baths remain open throughout the year.

HOSPITALS

There are no hospitals situated in the Borough and patients are admitted to hospitals in the surrounding districts, chiefly Oldham and Manchester.

NATIONAL ASSISTANCE ACTS, 1948 (SECTION 47)

One elderly female patient was removed to a Home for the Elderly under the provisions of this act.

DISPOSAL OF THE DEAD

There are two Corporation controlled cemeteries in the Borough in addition to a small number of church burial grounds. The old cemetery (6½ acres) is adjacent to the Parish Church near the centre of the town, while the New Cemetery (12 acres) lies on the edge of the Boarshaw estate near the eastern boundary. A total of 105 interments took place in those cemeteries in 1969 and a further 408 remains were cremated at the Borough Crematorium. The Medical Officer of Health is Medical Referee to the Crematorium.

PART B

DELEGATED HEALTH AND WELFARE SERVICES

CARE OF MOTHERS AND YOUNG CHILDREN

There are 5 Child Health Centres in the Borough; 2 being at purpose-built combined Clinics at Durnford Street, Middleton and at Borrowdale Road on the Langley Estate. The remaining 3 were held in rented premises at Middleton Junction (Wade Street Scout Hall), Rhodes (All Saints Parish Church School) and Alkrington. The Congregational Church premises at Alkrington were used during 1969 and until 28th February, 1970, following which sessions were transferred to the Alkrington Community Centre.

Child Health Clinic Sessions are held as follows:-

Durnford Street Clinic—Tuesday and Thursday, 2—4 p.m.

Langley Clinic—Wednesday 10 a.m.—12 noon and Thursday 2—4 p.m.

Alkrington—Monday 2—4 p.m. and Wednesday 10 a.m.—12 noon.

Wade Street—Wednesday 2—4 p.m.

Rhodes-2nd and 4th Wednesdays 2-4 p.m.

In February, 1969, work commenced on the reconstruction of Durnford St. Clinic and this was not finally completed until September. During this period, there was considerable inconvenience both to staff and public. However, the final result has fully justified the temporary discomfort in providing much needed facilities for all users. It does mean that the Borough now has two modern, well equipped major clinics. Within the past few weeks, notification has been received from the Department of Health that loan sanction for the Alkrington branch clinic is likely to be authorised in 1971/72.

Routine examinations of infants is normally undertaken at these child health sessions (see also Table B.2., page 34) and the National Welfare Foods—National Dried Milk, Orange Juice, Cod Liver Oil and Vitamin Tablets—are available in addition to certain proprietary brands of baby foods and vitamin supplements available for purchase on the recommendation of the Medical Officer.

Ante-Natal and Post-natal Clinics

(See under Midwifery and Table B.3., page 35).

Family Planning

Neither the Borough Council nor the County Council run their own Family Planning Clinics, but have arrangements with the Family Planning Association, and evening sessions are held at Durnford Street Clinic, Middleton, each Monday and Wednesday. Also a Tuesday evening session at Langley Clinic. Intrauterine devices can be fitted by arrangement at this latter clinic. A female doctor is in attendance at these sessions.

The County Council have agreed on case payments, and where necessary, the supply of appliances, in respect of women referred to the Family Planning Clinic on medical grounds.

Care of Unmarried Mothers and their Children

All the provisions for the care of married mothers are also available to unmarried mothers. Further provisions are also made, principally in securing admission to residential accommodation during the later stages of pregnancy. Should an unmarried mother keep her child and seek employment outside home, she is given priority for admission to a County Council day nursery. Health Visitors, Visitors of the Children's Department and Moral Welfare Workers of the various religious denominations, and other voluntary organisations, co-operate closely in this rather difficult work.

During the year, 6 unmarried mothers were admitted to homes run by voluntary organisations.

Care of Premature Infants

A premature infant is one whose birth weight is 5½lb. or less and during the year, 63 infants were born to mothers normally resident in the Borough. Of this total, 3 premature infants were born at home and the remainder in hospital. Detailed particulars are given in Table B.4., page 36.

Ophthalmia Neonatorum

There were no cases of Ophthalmia Neonatorum in domiciliary practice during the year.

DAY NURSERIES

(a) Local Authority Day Nurseries

There are no local authority day nurseries within the Borough, but Middleton residents may apply for admission of children, under the age of 5, to day nurseries in adjacent districts administered by Lancashire County Health Division No. 14. Charges to parents are assessed in accordance with a County Income Scale.

The Cromer Mill Day Nursery, the only industrial nursery operating in the Borough, closed on 30th September, 1967 and the certificate of Registration was cancelled. The Borough Council subsequently recommended the County Council to acquire the premises to establish a Local Authority day nursery. After lengthy negotiation, Government approval was obtained to acquire and adapt the premises under the Governments Urban Aid programme for areas of high social need.

(b) Child Minders

Following upon the operation of Section 60 of the Health Services and Public Health Act, 1968, there was substantial modification of the provisions for registration of Child Minders. Considerable work was necessary to deal with the flood of applications for registration as many applicants had little or no knowledge of legal requirements and standards recommended. Further, a number of applicants were registered as Child Minders only to surrender their certificates within a matter of months.

At 31st December, 1969, there were 10 Child Minders registered in the Borough, permitted to accept a total of 16 children.

Readers are reminded that under present legislation, ANY person looking after ONE or MORE children for reward for TWO HOURS or MORE in the day, and who is not a close relative of the children, MUST apply for registration.

(c) Pre-School Playgroups

All playgroups operating for more than two hours in the day were similarly required to make formal application for registration under the amended Nurseries and Child Minders Regulation Act. Prior to registration, the organisers must satisfy the Local Health Authority that both staffing and premises are adequate for the partial day care of young children.

At 31st December, 1969, playgroups were registered in the Borough as follows:—

(1) Alkrington Community Centre—30 children under 5

(2) St. Stephen's Playgroup—18 children under 5

(3) St. John's Playgroup, Thornham-24 children under 5

All would-be organisers of playgroups are URGED to contact the Medical Officer of Health at an early stage in their planning.

MIDWIFERY SERVICE

(Establishment at 31st December, 1969 was 11)

There were 11 District Midwifery Sisters all of whom were qualified to administer analgesics.

Mrs. C. F. Copland

Mrs. H. Greenfield

Mrs. C. Hartle

Mrs. C. N. Holland

Mrs. F. Hutchinson

Mrs. R. S. Jones

Mrs. S. M. Lees

Mrs. I. R. Richards

Mrs. D. B. Smith

Mrs. A. Stuttard

Mrs. M. E. Ward

During the year the Midwives attended 191 confinements; analgesia was administered in 127 cases.

Ante-natal Clinics are held twice weekly at Langley School Clinic. They were also held twice weekly at 63, Long Street,

Middleton until 3rd November, 1969, after which they were transferred to the reconstructed Durnford Street Clinic. The number of women attending local clinics, and the number of attendances have fallen considerably in recent years due, in part to the falling local birth rate and in part to increasing proportion of hospital confinement and ante-natal care.

By reason of the reduced local work on Middleton midwives, certain of the staff have been temporarily working in adjacent County areas.

Blood tests are carried out routinely on all mothers attending the ante-natal clinics and blood specimens are submitted to Oldham and District General Hospital and Withington Hospital.

Midwives complete a short report on each individual expectant mother at the time of booking. From an analysis of 195 cases booked locally in 1969, one should record that in 2 cases the physical state of the expectant mother was not satisfactory at the time of booking; 29 of the mothers were pregnant for the 5th or later time; 35 mothers did not book until after the 24th week of pregnancy, including 5 booking between 32nd and 35th week and 1 after 36th week. Such later bookings inevitably mean a drastic curtailment of normal ante-natal care.

All Local Health Authorities maintain a register, and notify the Registrar General, of all infants who are recognised to have any form of Congenital Abnormality at or after birth. This information is obtained primarily from the midwife or maternity nurse in attendance. In Middleton, 8 infants were born with malformations (including two stillborn infants) an incidence of 9.8 per 1,000 total births. An analysis of abnormalities recorded is shown in Tables B.8 and B.9.

Relaxation classes are held weekly at Durnford Street Clinic on Thursday evenings. A Physiotherapist is in attendance and the Medical, Health Visiting and Midwifery staff run a joint weekly education programme at these classes.

81 mothers attended the classes in the year ended 31st December, 1969.

HEALTH VISITING

(Establishment at 31st December, 1969 was 16)

Health Visitors employed were:

Mrs. N. Brady

Mrs. B. Cotton (commenced 6.9.69)

Mrs. S. E. Evans (part-time)

Miss J. M. Fletcher

Mrs. D. Green

Mrs. M. Hartley

Mrs. J. M. Hext (resigned 18.12.69)

Mrs. E. Knight

Mrs. V. Simpkins (resigned 31.10.69)

There were also 5 School Nurses:-

Mrs. C. M. Dunkerley

Mrs. I Denholm (resigned 31.1.69)

Mrs. M. T. Greenfield (part-time) (commenced 30.9.69)

Mrs. M. M. Hudson (part-time)

Mrs. D. Mort

Miss B. M. Winfield (commenced 31.3.69)

There was a net loss of one full time Health Visitor during the year, and a net increase of one part time School Nurse. Our Health Visitor strength is thus well below 50% of authorised establishment. Although the School Nurses can relieve Health Visitors of certain routine school and clinic work, they are not authorised to carry out the full range of Health Visiting duties.

Health visiting staff are deployed on the basis of partial attachment to most large-list General Practitioners, in the town and not as formerly on a geographical basis. While this arrangement does lead to improved liaison with General Practitioners, it is not possible to derive the full benefit of liaison arrangements, which by reason of shortage of staff, are on little more than a token basis. Similarly, by reason of staff shortage, Health Visitors have too little opportunity for extending their work in Health Education.

The scope of work undertaken by Health Visitors has changed from concentration on services to mothers with young children, and now includes a larger proportion of services to the elderly. In 1969, Health Visitors paid 12,077 visits to children under 5 and 328 visits were paid to expectant mothers, 1,428 visits were paid to those over the age of 65. The Health Visitors duties also include School Medical work, although the more routine work of medical inspections is shared by School Nurses without Health Visitor qualifications.

Details of this service are given in Table B.10., page 39.

District Nursing Service

Total establishment at 31st December, 1969 was 15.

District Nursing Sisters:

Mrs. H. Ashwell

Mrs. J. M. Bolton

Mrs. M. Burgess

Mrs. D. Halliwell

Mrs. J. Harvey

Mrs. I. M. Marr

Mrs. B. Smith

Miss E. Swindells

District Charge Nurse:

Mr. J. D. Begg

District Nurses (S.E.N.'s):

Mrs. E. M. Ogden Mrs. I. Ridings Mrs. J. Rogers

Nursing Auxiliaries:

Mrs. M. Bramall Mrs. E. C. Hogan

Miss C. Yates (resigned 30.11.69)

The District Nursing Service continues to carry out extremely useful and valuable work in co-operation with the General Practitioners within the Borough and the major proportion of their time is devoted to the care of the elderly. The Service considerably eases the burden on relatives, undertaking long term care at home, and reduces the need for General Practitioners to request hospital accommodation for the chronic sick.

All nursing staff in the Borough are organised as a series of "teams"—usually comprising 2 District Nursing Sisters, one District Nurse and/or Nursing Auxiliary. The teams are allocated duties on the basis of each team covering the patients in groups of General Practitioners in the Borough. This arrangement does lead to a much closer working liaison between General Practitioners and District Nursing staff.

The nurses issue, on loan, various articles of equipment required by their patients. However, there is an urgent need for a proper lean store room especially since the reconstruction of Durnford Street Clinic.

During the year, the nurses paid a total of 48,820 visits to individual patients, an increase of 11% over 1968.

Details of the services are given in Tables B.11 and B.12 on pages 39 and 40.

IMMUNISATION AND VACCINATION

Smallpox

During the year, 243 persons, of whom 118 were infants under the age of two years, were given primary vaccination against smallpox. A further 20 individuals were re-vaccinated.

Public acceptance of vaccination may be roughly gauged from the percentage of children under the age of two vaccinated. Applying the Ministry of Health formula, there is locally an "acceptance rate" to children under 2 of 14%. This is totally unsatisfactory and indicative of public indifference save in the face of any local threat of smallpox.

For details see Table B.13., page 41.

Diphtheria, Whooping Cough and Tetanus

Only some 50% of infants are protected in their first year of life by combined immunisation against these three diseases although this causes minimum disturdances and inconvenience to both mother and child. Older children are, in general, given booster doses against either diptheria only or with combined material against diphtheria and tetanus. A number of younger children, for various reasons, are immunised with separate antigens.

Joint arrangements with Health Division 14, Oldham County Borough, and the Oldham Hospitals offer active immunisation against tetanus to all casualties with open wounds attending Oldham Royal Infirmary.

Detailed figures of routine immunisation are given in Table B.14., page 42.

Poliomyelitis

With the virtual disappearance of poliomyelitis as an "epidemic' disease, there has been a considerable decline in interest in poliomyelitis vaccination by the general public. 328 persons under 16 received full course of immunisation during 1969, of which 207 were children under 2 years of age. From returns submitted, it appears only 40% of young children are receiving this vaccination as a routine measure.

Measles

During 1969, supplies of measles vaccine were extremely erratic, due to production difficulties encountered by one major pharmaceutical firm. Additionally, the national publicity given to side effects of the vaccine made it difficult to secure a wide public acceptance of this single-dose vaccine. Supplies of vaccine, augmented by American-manufactured material, are now good and it is hoped that much wider acceptance will be received in the future.

During the year, 211 children in the Borough received measles vaccine—only around 40% of the 1969 total.

AMBULANCE SERVICE

There is one Ambulance Station within the Borough (situated in Highfield Street, off Oldham Road) but the Ambulance Service is administered by Lancashire County Council Health Division No. 14. The vehicles are now directed by the radio control centre at Whitefield (Tel. No.: Whitefield 6666).

Five ambulances and four dual-purpose vehicles are based on the Middleton Station, which is manned on a 24 hour basis. The vehicles also serve Chadderton Urban District and parts of Failsworth and Royton.

PREVENTION OF ILLNESS—CARE AND AFTER CARE

(a) Health Education

Leaflets and booklets dealing with various aspects of Health Education are distributed at the Child Health Centres and Clinics, together with poster exhibitions there and at various industrial premises in the Borough. It is, however, probable that the most valuable form of Health Education is in the contact between Health Visitors and individual families and in opportunities for discussion between expectant mothers and their Midwives and Medical Attendants.

Facilities are available for lectures, informal talks or film displays on various health subjects to interested voluntary organisations, e.g. Women's Guilds or groups and Youth Clubs; Group Secretaries wishing to enquire regarding this should write to the Medical Officer of Health.

(b) Co-operation with Hospital Services

Active co-operation is maintained by the medical staff with the medical staff and almoners of the hospitals serving the Borough and arrangements are made for necessary information to be interchanged, in particular with regard to arrangements for cases discharged from hospital requiring support from the local health authority domiciliary services.

(c) Convalescence

This service is primarily intended for those requiring a short period of convalscence to restore full activities after a recent acute illness. Vacancies are obtained for approved applicants in private convalescent homes, and on average stay for 2 weeks. This is not a free service and applicants are assessed on County Income scales. This service should not be confused with holiday accommodation for elderly or chronic sick in County Council homes, nor with the School Health Service convalescent arrangements.

During the year, 13 adults were admitted to convalescent homes—see Table B.15., page 43.

(d) Tuberculosis

The Chest Clinic serving the Borough is situated at Oldham and District General Hospital and close liaison is maintained with the Consultant Chest Physician. 24 persons received inoculation with B.C.G. vaccine during the year (this does not include school children given B.C.G. vaccine through the School Health Service).

There is one Health Visitor with special responsibility for Tuberculosis cases—Mrs. E. Lindley—in the district and her duties include visits to patients at home, arrangements for examination of cintracts, reports of environmental and economic difficulties and attendance at the Chest Clinic. For statistical details of this service, see Table B.16., page 44.

For details of B.C.G. vaccination see Table B.17 and B.18, pages 44 and 45.

(e) Laundry Service

The service, which also permits the supply of disposable incontinence pads, is intended for any sick person in need of constant changes of bed linen, and where no family help is available and with soiled linen not normally be accepted by a commercial laundry.

Laundering is carried out at Oldham and District General Hospital and individual arrangements are normally made through the District Nurses.

This service has been free to recipients since 1st April, 1967.

During the year, the service was utilised by 73 patients, a substantial increase on previous years.

(f) Chiropody Service

Chiropody sessions were held three times weekly—twice at Durnford Street Clinic, and once at the Chiropodist's own surgery in view of the limited clinic accommodation. The chiropody service is a free service to men and women of 65 and over, expectant mothers and registered handicapped persons. Over 40% of cases are treated in their own homes.

During the year, a total of 663 individuals received Chiropody treatment. Of this total, 318 were treated at Clinic sessions, 41 at the Chiropodist's surgery and 304 at home. The service was almost wholly utilised by aged persons.

For details see Table B.19., page 46.

(g) Cervical Cytology

Since May, 1966, cervical cytology screening tests have been carried out weekly by County medical staff. Applications may be made direct to Durnford Street or Langley Clinics, or through patients own doctors. During the year, 216 first tests and 3 repeat tests have been taken. One woman was referred to her General Practitioner for other conditions.

At present, special clinics are operated at Durnford Street on Friday mornings and on two evenings per month. It is, however, disappointing that comparatively few applications are made by women who have borne more than two children.

Apart from this Local Authority service, facilities for Cervical Smear examinations are also provided by the Family Planning Association and by a number of General Practitioners in the Borough.

HOME HELP SERVICE

Demands on this service have increased by 2% during the year, and it should be noted that, of 723 patients receiving the service during the year, 611 were aged 65 or over. In many instances the Home Help Service is the only way of assisting elderly people living alone who would otherwise have to be accommodated in old people's homes.

There is no fixed establishment for Home Helps, who are engaged as and when required by the Home Help Organiser (Miss P. Ogden) under the direction of the Medical Officer of Health. Currently some 124 part-time Home Helps are employed.

Applications for the services of a Home Help should be made to the Medical Officer of Health and arrangements will then be made toinv estigte individual cases. This is not a free service and recipients are liable for payment under County Council scales; details of the services are shown in Table B.20., page 47.

Great difficulty is experienced in recruiting Night/Evening Helps in the district by reason of high demands on female labour at higher rates of pay. During the year, Night Helps made 170 attendances to 18 patients.

WELFARE SERVICES

The Borough has responsibility for Welfare Services in regard to care of the handicapped, in accordance with Sections 29 and 30 of the National Assistance Act.

Such services are intended to provide for care of handicapped people in their own homes and at social centres run by the local authority themselves or in co-operation with voluntary organisations.

Responsibility for residential accommodation under the Act is not delegated to the Borough and such accommodation is administered by Lancashire County Council Health Division No. 14.

There are now a total of eight Divisional Homes for the elderly, including three in Middleton (Schofield House, Saxonside and Shawbury), two in Windsor Road, Oldham (Coppice and Claremont) and one each in Chadderton (Broadway), Crompton (Laburnum House), and Failsworth (Briarfields). There is accommodation for 300 residents in these eight homes. The new home (Shawbury) in Middleton Junction) was opened in February, 1969.

(a) Physically Handicapped (excluding blind)

A social centre for the handicapped is held once weekly at the Community Centre on Windermere Road, Langley, where handicraft tuition is provided in addition to social activities. A substantial number of handicapped also attend the weekly meetings of the Cripples Help Auxiliary, a voluntary organisation, at the Community Centre, Wood Street.

Handicapped persons may secure various articles on loan, such as bath seats, bath rails and walking aids. In addition the County Council is prepared to contribute generously to major adaptations in the homes of handicapped persons who are able to benefit from such adaptions. In 1969, 3 such adaptions were carried out. Handicapped persons, or their doctors, who consider major adaptions might be beneficial, should apply via the Medical

Officer of Health for such assistance before placing any orders with contractors, as retrospective grants are not normally considered.

Details of handicapped persons (excluding blind) on the welfare services register at 31st December, 1969 were as follows:—

	Age Groups										m 4 1	
Ministry of Labour Groups			Male	e		Female					Totals	
Zasour Groupe	0—	16-	30—	50-	65—	0—	16—	30-	50-	65—	М	F
Amputations	_	-	2	4	2	-	-	-	2	2	8	4
Rheumatism Congenital	-	2	1	4	1	j —	1	6	13	30	8	50
Deformities Specified	3	1	-	3	-	-	1	-	1	-	7	2
Diseases	_	1	-	8	2	-	-	-	2	5	11	7
Specified Injuries	_	-	4	4	1	ļ —	-	1	1	5	9	7
Organic Ner- vous Diseases	1	2	8	16	2	1	2	6	10	5	29	24
Psychosis, etc	_	-	-	-	-	-	-	-	-	-	-	-
Respiratory Tuberculosis	_	-	-	-	-	-	-	-	-	_	_	-
Other Tuberculosis	_	-	-	-	-	-	-	-	2	_	_	2
Miscellaneous	-	-	2	1	-	-	-	-	-	-	3	-
Totals	4	6	117	40	8	1	4	13	31	47	75	96

(b) Blind

One Social Welfare Officer for the Blind is engaged to provide Statutory services to registered Blind and Handicapped persons. In addition to routine visiting in the home, hospital or other residential establishments, she co-operates with the (voluntary) Middleton Social Committee for the Blind in the organisation of a weekly social centre and a number of other social activities.

At 31st December, 1969, there were 94 blind and 91 partially sighted persons registered. The Social Welfare Officer endeavours to visit all registered at least once monthly.

(c) Meals and Recreational Facilities for the Elderly

The Lancashire County Council operate a grant scheme in co-operation with County districts, including Middleton, to give financial assistance to voluntary organisations providing meals and/or recreational activities for the elderly. Under this scheme, grants may be given to such organisations as Meals on Wheels, Luncheon Clubs and similar projects.

In 1969/70, the Borough Health Committee made grants totalling £1,675 under this scheme, including £610 to the W.R.V.S. in connection with their Meals an Wheels service. The Middleton Old People's Welfare Council received a grant of £400 for their luncheon club based at the Salvation Army Hall.

Grants can only be made to bona fide clubs or organisations who are able to satisfy the Health Committee that they are in a position to utilise such grants for specific projects.

MENTAL HEALTH SERVICE

A very close working relationship is maintained between the Mental Welfare Officers working in the Borough and the Psychiatric Unit at Oldham and District Hospital. Members of the Mental Welfare staff carry out daily duties in the Borough including visits to mentally ill and subnormal, arrangements for placing in employment, liaison with General Practitioners and visits, where necessary, with the Consultant Psychiatrist.

During the year, a total of 88 patients were referred to Mental Health staff—for sources and categories of patients, see Table B.21., page 48.

At 31st December, 1969, 199 patients were under County Council care—for details see Table B.22., page 49.

Note—The details given above and in the tables, do NOT include work done at the Child Guidance Clinic, Middleton, which is operated under School Health Service auspices.

OTHER SERVICES

(a) School Health Service

The School Health Service in the Borough is administered by the Middleton Education Committee on behalf of the County Council. The medical staff of the Health Department are also School Medical Officers and the Health Visiting staff are partially engaged on School Health work. A report on the School Health Service during 1969 was submitted to the Borough Education Committee in March, 1970.

(b) Special Medical Examinations

A total of 500 medical reports were completed during the year. Of this, 292 reports were made without examination after scrutiny of a declaration of fitness form. For details of the remaining 208 reports after examination, see Table B.23., page 50.

NOTIFICATION OF BIRTHS

Notified births (i) occurring in, and (ii) finally belonging to the Borough in 1969

					-	-							
	-11	ths:	14				_			9	9		
Total	Still- births		M	4	1	1	1	4		6	6	13	
	Live Births	Total	H	100	1	1	1	100	-	303	304	404	
		To	M	58	1	1	1	18	m	303	306	391	
		Mature	H	97		1	1	97	1	268	269	366	
			M	58		1	1	18	00	278	281	366	
		*Prema ture	Ē	60	1	1	1	60	1	35	35	38	
			M	T	1	1	I	1	1	25	22	25	
	Still- births		Ŧ	61	1	1	1			1	1	61	
			M	4	1	- 1	1	4	1	1	1	4	
e	Live Births	Total	Ŀ	100	1	1	1	100	1		1	100	
Hom			M	88	1	1	1	58	1	1	1	58	
In the Home		Mature	H	97	1	1	1	97	1	1	1	97	
1			M	- 82	1	1	1	128	1	1	-	38	
		*Prema ture	ы	m 		1	1	69		1	1	60	
			M	T	1	1	1	1		1	T	1	
etc.	Still- births M F		1	1	1	1	1		9	9	9		
mes,			M		1	1	1	- 1	1	6	6	6	
y Ho	Live Births	Total	E		1	1	1	- 1		303	304	304	
ernit			M		1	1	-	1	n	303	306	306	
Mat		Mature	ы	1	1	1	1	- 1		268	269	269	
itals,			M	1	1	1	1	- 1		278	281	281	
In Hospitals, Maternity Homes,			*Prema	H		1_	-	1	1		355	35	35
In		*Pren	M	1	1	1	1	1		8	32	25	
				ring in the Borough No. transferred out of	Borough:— (i) to other Divisions (ii) to County	Boroughs or other Counties	fers	Net No. occurring in and belonging to Borough	transferre orough:— from other ivisions			Final No. belonging to Borough	

* A birth is regarded as "premature" if the birthweight is 5½lbs. or less.

Number open at 31st December, 1969—5 Work done at individual centres during the year.

Address of Child Health Centre	No. of sessions	Number attended	Number of individual children attended and who were born in :	children e born in :	Number of	At ages: Number of attendances of children	of children
		1969	1968	1964- 1967	-0	1	2-4 inclusive
Durnford Street, Middleton	100	197	191	100	2,025	396	122
Wade Street, Middleton Junction	20	28	62	27	906	509	47
All Saints School, Rhodes, Middleton	22	32	27	21	277	46	24
Alkrington, Middleton	97	91	118	167	1,394	533	324
Borrowdale Road, Langley	101	169	168	101	1,626	312	133
Totals	370	547	566	416	6,228	1,496	650

Number open at 31st December, 1969—2 Work done at individual clinics during the year.

Address of Clinic	No. of Sessions	No. of individual women attending	No. of Attend- ances
63, Long Street Middleton (to 29.10.69) Durnford Street	102	143	1,170
Middleton(from 3.11.69) Borrowdale Road, Langley	116	153	1,064
Totals	218	296	2,234

PREMATURE LIVE BIRTHS

(i.e., live births of 5½lbs. or less at birth, occurring during the year in cases where the mother was normally resident in the district)

				Pre	Premature Livebirths	irths			
Weight at Birth	В	Born in Hospital	tal	Born	Born at home and nursed entirely at home	nursed	Born ferre	Born at home and trans- ferred to hospital on or before 28th day	trans- on or ty
	Total	Died within 24 hours of birth	Survived 28 days	Total	Died within Survived 24 hours of birth	Survived 28 days	Total	Died within Survived 24 hours 28 days of birth	Survived 28 days
2lbs. 3ozs. or less	9	4	1	1	1	1	1	1	1
over zibs, sozs, up to and melud- ing 3lbs, 4ozs,	20	23	1	1	ı	1	1	1	1
Over 31bs. 40zs. up to and including 41bs. 6ozs.	11	53	6	1	1	1	1	1	1
Over 41bs. 60zs. up to and includ- ing 41bs. 15ozs.	14	1	13	I	I	1	1	1	1
Over 4lbs. 15 ozs. up to and including 5lbs. 8ozs.	24	63	22	က	I	က	1	1	1
Total	09	111	45	60	1	3	1	1	_

Table B.5

MIDWIFERY SERVICES

Summary of work done by Midwives during the year Livebirths, stillbirths, hospital discharges and deaths.

		Cases attended where		Deaths
Livebirths	Stillbirths	patient had been confined in hospital and discharged before 10th day	Mother	Child (under 1 month)
	9	407	1	

Table B.6

VISITS

miscarriages shown above	To Hospital discharges shown above	Total
		0 0 4 5

Table B.7
Confinements at which analgesics were administered

Trilene	Gas/Air	Nitrous oxide and oxygen	Totals
127	_	_	127

Table B.8

Incidence of Congenital Abnormalities

Mother's Age	20 & under	21-25	26-30	31–35	36-40	41 & over	All
1st Confinement	3	1	_		-	_	4
2nd Confinement	_	2	_	_	-	_	2
3rd Confinement	-	-	-	-	-	_	-
4th Confinement	-	-	1	_	-	-	1
5th Confinement	_	-	-	-	-	_	-
6th or later Confinement .	_	_	_	_	1	_	1
All Confinements	3	3	1	_	1	_	8

Table B.9

Congenital Abnormalities Notified (8 infants; 6 with single abnormality only)

Nature of abnormality	Male	Infants	Female	Infants
	Living	Stillborn	Living	Stillborn
Anencephaly	_	1	_	-
Hypospadius	2	-	_	-
Spina Bifida	1	-	_	_
Cleft Palate/Hare Lip	1	-	_	-
Exomphalos	_	-	1	-
Congenital Heart Disease	1	-	1	_

No. of visits paid by Health Visiting Staff during year.

Vis	sits to:— To	tal visits
1.	Children under 5 years of age	12,077
2.	Adults under 65	
	Expectant Mothers	328
	Tuberculosis Cases	93
	Tuberculosis Contacts	280
	Other Adults	1,868
3.	Adults over 65	
	Tuberculosis Cases	21
	Tuberculosis Contacts	16
	Other Adults	1,428
4.	Visits to Assorted Agencies	2,940
5.	Ineffective visits	1,993

Table B.11

DISTRICT NURSING

Total completed cases analysed by sex and age groups during the year.

	No.	Per cent
Total completed cases analysed	667	100
Sex and age groups (age in years) 0— M	5	0.7
F	5 1	0.1
5— M	12	1.8
F	2	0.3
15- M	24	3.6
F	63	9.4
45— M	76	1/1.4
F	74	11.1
65— M	146	21.9
F	264	39.6
All ages— M	263	39.4
F	404	60.6

Analysis of Completed Cases (by diagnosis)

		Du	ration o	f Treat	ment
Disease or Ailment	Total No. of Cases	Average duration of treat-	Total '	Visits	Average No. of visits
		ment (weeks)	Day	Night	per case per week
Tuberculosis of respiratory system	-	.0	-	- 1	.0
Other infective & parasitic diseases	12	3.4	267	-	6.6
Cancer	55	9.3	1978	-	3.0
Diabetes	13	14.6	843	-	4.4
diseases	51	45.4	3583	_	1.5
Mental Psychoneurotic Cerebral haemorrhage,	5	6.0	82	-	2.7
cerebral embolism and thrombosis	44	12.1	926	3	1.7
nervous system Diseases of eye, ear and	26	12.1	1613	-	5.1
mastoid process Diseases of heart and circu-	6	9.2	257	-	4.7
latory system	46	12.4	1134	-	2.0
Influenza	1	0.6	3	-	5.0
Pneumonia	7	6.3	270	-	6.1
Bronchitis Other diseases of respira-	15	8.7	295	-	2.3
tory system	16	1.9	211	- 1	6.9
Diseases of digestive system Diseases of genito-urinary	76	4.5	1218	-	3.6
system	33	12.2	636	_	1.6
Diseases of the skin Diseases of bones & organs of movement (including	68	10.9	2397	-	3.2
rheumatism & arthritis)	41	20.1	1385	-	1.7
Senility and ill-defined conditions	89	9.7	2835	10	3.3
Burns and scalds	7	4.6	206	_	6.4
Other accidents, injuries, etc.	41	10.5	1034	_	2.4
All other conditions	15	2.6	180	-	4.6
Totals	667	12.6	21353	13	2.5

SMALLPOX VACCINATION

Table B.13.

		At C	At Clinics		By Ger	neral		
	Depart Medical	By Departmental Medical Officers	By General Practitioners on sessional basis	eneral oners on d basis	Practitioners in course of Private Practice	oners se of ractice	To	Total
	Age ir	Age in years	Age in	Age in years	Age in years	years	Age in	Age in years
	0	5—15 inc.	-0	5—15 inc.	٩	5—15 inc.	0	5—15 inc.
Primary vaccination	75	58	1	ı	119	21	194	49
Re-vaccination	1	1	1	1	2	15	2	15

IMMUNISATION

Table B.14

against Measles, Poliomyelitis, Diphtheria, Whooping Cough and Tetanus Children resident in the District Vaccination and Immunisation

		H	Primary-		By year of birth	birth			Rein	forcem	ent—B	y year	Reinforcement—By year of birth	
	1969	1968	1967	1966	1962	Others Under 16	Total	1969	1968	1967	1966	1962	Others Under	Total
Children protected against:—														
Diphtheria	00	164	54	24	26	6	315	1	20	92	25	520	28	745
Whooping Cough	∞	150	47	20	36	4	265	- 1	45	64	16	1110	13	248
Tetanus	∞ .	165	55	26	62	34	350	1	20	93	25	525	81	774
Poliomyelitis	20	199	48	24	38	11	328	-	15	24	∞	405	- 64	517
Measles	-	27	64	38	78	60	211	I	1	1	1	1	1	1

CONVALESCENT HOME CARE

PATIENTS ADMITTED TO CONVALESCENT HOMES

A	dults		en under ool age
Male	Female	Male	Female
5	 3	_	_
_	2	_	_
2	_	_	_
_	1	_	_
	Male 5 - 2	5 3 2 2 -	School School Male

TUBERCULOSIS—CARE AND AFTER-CARE

Summary of visits of Tuberculosis Health Visitor during the year.

- (1) No. of domiciliary visits
 - (i) Cases:

(a) under	65	93
(b) 65 and	l over	21

(ii) Contacts:

	(a)	under	65	280
	(\mathbf{b})	65 and	over	16
(iii)	Mis	scellane	ous visits	145

555

Table B.17 B.C.G. VACCINATIONS BY CHEST PHYSICIAN

	Under 2 years of age		5 & under 15 years of age	15 years of age and over
No. of persons tested (for suitability for B.C.G. vaccination)	4	1	2	1
No. found positive	_	-	1	_
No, found negative	4	1	1	1
No. of persons vaccinated	21	1	1	1

B.C.G. VACCINATION OF SCHOOL LEAVERS AND STUDENTS

		No. of pa	No. of parents' consent forms	ent forms		No. of	No. of children	
Category	No. of schools completed	Sent to	Retu	Returned	Tuberculin test	Tuberculin test	Tuberculin Tuberculin Tuberculin Vaccinated test test with	Vaccinated
		parents	Refused	Refused Consented	performed	positive	negative	B.C.G.
School children — under 14		240	41	130	1/14	က	96	96
14+	-	1		1	1	1		1
Students — further education		1	-	1	1	1	1	1

	No. of Clinics	Total No. of clinic		No. of treatments given to patients	given to	patients	Z	No. of individuals treated	luals treat	pa
Service	operating at year end	operating sessions at year held end	In	In Surgeries	At	Total	In	In Surgeries	At	Total
Direct	1	137	1,076	240	1,155	2,471	318	41	304	663
Voluntary Associations	ı		•	1		1	1	1		- 1
Total	1	137	1,076	240	1,155	2,471	318	41	304	663

HOME HELP SERVICE

Cases attended during the year

	Aged	under 6	5 years		Aged	over 65	years	
Confine-	Confine- ment away from home	Tuber- culosis	Chronic sick	All other cases	Tuber- culosis	Chronic sick and infirm	All other	Special cases
_	7	_	55	49	_	611	1	_

Table B.21

No. of patients referred to County Council during year ended 31st December, 1969

		Menta	Mentally III		Elderly Mentally Infirm	Elderly Mentally Infirm		Subnormal	rmal		Sev	Severely subnormal	ubnori	nal
Referred by	Under	Underage 16	16 &	16 & over			Underage 16	age 16	16 & over	over	Under	Under age 16	16 & over	ver
	M	म	M	F	M	FI	M	- -	M	댼	М	- H	M	FI
General Practitioners	1	1	п	4	F	1	1	1	1	1	1	1	ı	1
Hospitals, on discharge from in- patient treatment	1	1	∞ _	14	1	1	1	60	1	1	1	1	1	1
Hospitals, after or during out- patient or day treatment	1	1	15	24	1	1	1	1	-	1	1	1	1	1
Local Education Authorities	1	1	-1	1	1	1	1	1	-	1	1		1	1
Police and courts	1	1	1	1	1	1	1		1	1	1	1	1	1
Other sources	1	_	4	65	1	1	1	1	1	-	2			1

No. of Patients under County Council care at 31st December,1969

		Mentally Ill	пу пп		Eld men inf	Elderly mentally infirm		Subnormal	ormal		Seve	rely	Severely Subnormal	mal
	Under	Underage 16	16 & over	over			Under	Underage 16	16 &	16 & over	Underage 16	age 16	16 & over	over
	M	F	M	F	M	দ	M	[zi	M	[z ₄	M	Į.	M	H
Total No. of patients under care	-		20	45	16	28	10	11	20	910	10	9	12	5
No. of above attending day training centre			23	5		1	10	11	11	14	10	9	. 80	4

MEDICAL EXAMINATIONS

Particulars of medical examinations carried out by medical staff during 1969.

No. of examinations

(i) Fitness for employment—County Council employees—	
(a) No. of medical examinations carried out in connection with posts designated as requiring them	15
(b) No. of medical examinations carried out following scrutiny of declaration of fitness forms	Nil
(ii) Other local authority Super- annuation schemes	6
(iii) Children in care of Children's Committee	126
(iv) Entry to Teachers' Training Colleges	57
(v) Entrants to Teaching profession	4

PART C

THE REPORT OF THE CHIEF PUBLIC HEALTH INSPECTOR

Public Health Department,
Town Hall,
Middleton,
Manchester.
July, 1970.

TO THE CHAIRMAN AND MEMBERS OF THE HEALTH COMMITTEE

Mr. Chairman, Ladies and Gentlemen,

I have pleasure in presenting my 9th Annual Report to the Committee, being that for the year 1969.

During the year, the Department's activities were again affected by national economic considerations, the effect being particularly marked in the reduced number of houses dealt with under the clearance provisions of the Housing Act, 1957, and the lack of progress in the making of smoke control orders.

The year was notable also for the "Dustmens' Strike" which occurred in the autumn, and which included a withdrawal of labour in Middleton for one week in September. This strike brought to attention nationally the deep unrest amongst manual workers in the local government service, and the dissatisfaction with low basic wage rates. It also perhaps illustrated that incentive schemes themselves may not be the answer to the problem, and that job evaluation may well be.

In my own view, the basic rates now paid to men who carry out the mundane but vital tasks upon which modern communities in part rely for their continuing existence, are unrealistic.

These factors, together with the need for work measurement and method study to replace the incentive scheme introduced in 1962, caused unrest amongst the collection staff, and the service suffered; for most of the year, the standard of collection provided was below that which has prevailed for some years past.

Also in the autumn were heard the first rumblings of the storm which was to arise later over the shortage of solid smokeless fuels. I will not here explain in detail the reasons for the shortage, which affected the Town only slightly during 1969-1970, but confine myself to the fact that there is likely to be a very tight situation in the winter 1970-71, and that it is forecast that there may well still be a shortage in the winter 1971-1972, but that there should be no difficulties thereafter.

This hiatus which has arisen as the Gas Board solid fuels were to be replaced by other solid fuel producers, has caused many existing solid fuel users to convert to piped and wired fuels, and will certainly greatly affect the number of people choosing solid fuel in future smoke control areas.

The most important aspect is, I feel, that the Committee should avoid applying for suspension orders in existing smoke control areas if at all possible. The vast amount of work, the investment, and the public goodwill which has gone into the Clean Air programme should not be put at risk because of a temporary difficulty in the supply of one type of fuel.

Amongst the new duties which the Department undertook during the year was the disposal of abandoned vehicles, a task which is likely to escalate in volume. The Housing Act of 1969 will also place a further burden on the Department, particularly in respect of certain aspects of house improvements, and this in turn will in some cases involve the Rent Act and the issue of qualification certificates relating to rent increases; there will be very close liaison with the Borough Engineer and Surveyor on these matters.

The Committees' paper baling depot became as big an attraction for visitors as is the incineration plant and Messrs. Thames Board Mills Limited included it in a technical film made on the subject. On October 1st, 1969, the Royton Urban District Council began to bring into the plant the whole of the household refuse arising in its district, under an agreement made with the Council. Throughout the year the Department continued its co-operation with the Warren Spring Laboratory of the Ministry of Technology in its research into the commercial possibilities of incinerator ash.

I take this opportunity of expressing my appreciation to the members of the Committee, and the Medical Officer of Health for the encouragement and support and to the staff of the Department for their work during the year.

I also wish again to thank the Chief Officers of other departments for their willing assistance and co-operation.

I am.

Mr. Chairman, Ladies and Gentlemen,

Your obedient servant,

A. T. TRAYNOR.

Chief Public Health Inspector

SANITARY CIRCUMSTANCES OF THE AREA

SEWAGE DISPOSAL

Middleton's sewage up to three times dry weather flow, is treated at the Manchester Corporation Sewage Works at Davyhulme. Volumes in excess of six times dry weather flow are discharged to the River Irk by means of storm overflows.

A £6½ million scheme of extensions to the Davyhulme Sewage Works was officially opened in May, 1965. These works, which are the first major scheme of extensions to the works since the 1939-1945 war, have taken approximately 10 years to complete, and comprise new screening plant, grit separation equipment, storm tanks, sedimentation tanks and activated sludge treatment for the settled sewage; heated sludge digestion with secondary sludge thickening tanks. The gas evolved from the digestion process is used in a new works power station to generate all the power required for plant operation.

With the exception of isolated farmhouses, the only areas of the Borough without proper drainage and sewerage are the villages of Birch and Bowlee. A survey was carried out during 1967 and there are now 163 pail closets serving 192 premises.

In April, 1962, the pail collection service was reorganised within the Incentive Bonus Scheme referred to elsewhere, and since that time all pails have been emptied twice weekly. Disinfectants and deodorants are utilised in the collection.

WATER SUPPLY

The town is supplied with water by the West Pennine Water Board. The supply is upland water of good quality.

The number of dwellings supplied by the Board is 18,305.

Water supplies are drawn from the gathering grounds in the Cheesden and Naden valleys, north west of Rochdale. The Cheesden Valley feeds the Ashworth Moor reservoir, containing some 350 million gallons capacity, while the Naden Valley drains into three small reservoirs (total capacity 400 million gallons) and the large new Greenbooth reservoir, completed in 1964, with a capacity of 800 million gallons. Total main reservoir capacity is therefore some 1,550 million gallons.

The water is filtered through either of two filter stations (a) the Ashworth Moor Filter Station, containing 4 Permutit continuous filter tanks, which filters supplies from Ashworth Moor principally supplying Heywood or, (b) the Clay Lane Filter

Station. This station has a store reservoir of 60 million gallons, a battery of 6 Permutit Caluminous filter tanks and takes supplies from Ashworth Moor and also the whole supply from the Naden Valley. There is a spall (open) reservoir for filtered water.

The Middleton service reservoir at Hatters Farm was opened during the year. It contains approximately 6,000,000 gallons and will constantly supply the whole Borough by a "ring main."

Existing water mains have been extended by 1,432 yards during the year.

A small number of outlying farms have independent water supplies from wells.

CLOSET ACCOMMODATION

The types and numbers of closets existing in the Borough at the end of the year were:—

Table C.1

Pail Closets		163
Waste water	closets	445
Fresh water	Closets	16,129

Under the provisions of Section 47 of the Public Health Act, 1936 the Corporation offers to owners a grant towards the cost of conversion of waste water closets, etc., to fresh-water closets.

During the year 10 owners took advantage of this facility.

REFUSE COLLECTION

In April, 1962, a Group Incentive Bonus Scheme was put into operation for a trial period of six months. The scheme was adopted permanently in September 1962, and a weekly (viz., Monday to Friday) service is now provided throughout the Borough.

The basic task above which Bonus becomes payable is 100 bins per man per day, and the total work load to achieve a weekly collection is about 173 bins per man per day. Since fewer men are now employed to do the work there has been no additional cost. Average bonus earnings are from £3 2s. 0d. to £4 15s. 0d. per man per week.

There are in the Borough:

20,477 Moveable Dustbins

140 Ashpits

165 Special Containers (flats, etc.)

and these are dealt with by a labour force of 5 Driver/Loaders and 25 Ashbinmen.

Trade refuse and extraordinary household refuse are collected by an additional vehicle with a crew of 2 men, whilst a further vehicle, also with a crew of 2 men, deals with pail closets and shop salvage collection. Both these crews are included in the Bonus Scheme.

REFUSE DISPOSAL

In 1905, the Authority constructed an Incinerator for the disposal of refuse. With the growth of the town, the annual tonnage of refuse collected became more than the Incinerator could handle.

By 1936, almost one quarter of the refuse was having to be tipped, and the Incinerator was finally closed down in 1937.

In June, 1938, a new Separation and Incineration Plant was officially opened. Again the growth of the town outstripped the capacity of the plant, and after 24 years, it was finally closed down in early 1962, being in need of complete renewal.

In 1966, the Council accepted the tender of Messrs. Mother-well Bridge (Tacol) Limited for the provision of a full incineration plant, to the design of Vereinigte Kesselwerke, A.G. of Dusseldorf, West Germany (the "Dusseldorf system") and a new Depot, including garages, stores, fitters shop and store, paper bailing buildings, sanitary and welfare facilities. Loan sanction in the sum of £364,274 was received.

The plant was officially opened by the Rt. Hon. Anthony Greenwood, M.P., Minister of Housing and Local Government on 18th October, 1968. The buildings were taken over by the Council in May, 1969 and the Department moved into the new Depot, to enjoy facilities which it had never before experienced. The plant itself, still in a commissioning period, was not taken over, although the vast majority of the refuse arising in the Town during the year was processed in it.

There was a flood of visitors to the plant, from local authorities, from professional bodies, from engineering consultants new to this field, and from various other Countries throughout the World; all were lavish in their praise for the Council in its pioneering work in this new phase of refuse disposal—now of course being followed by many local authorities all over Great Britain.

The tip at Alkrington Park Road continued in use.

SALVAGE

During the year, there was a continued improvement in the waste paper market. Stocks held nationally by the Board Mills had fallen and there was a steadily increasing demand for paper salvage, there was every indication that the Council's improvements to the paper collection and baling arrangements together with an incentive scheme would result in a highly efficient service which would not merely show a profit but would also assist the disposal service by keeping down the calorific value of the refuse delivered to the Plant and increasing Plant capability.

Table C.2

INCOME FROM SALES OF SALVAGED MATERIALS

	T.	C.	Q.	£	s.	d.
Bailed Cardboard	$\frac{83}{370}$	1.0	2	$\frac{972}{3558}$		
	454	9	3	4530	11	2

Table C.3

SANITARY INSPECTION OF THE AREA

The following tables give details of the various inspections carried out by the Public Health Inspectors during the year.

(a) PUBLIC HEALTH ACTS, 1936-1961	
(4) 101110 111111111111111111111111111111	Inspections made etc.
Duoinaga wank	1,367
Drainage work	299
Conversions	
Water Supply	180
Fried Fish Shops	35
Licensed Premises (PHA)	66
Tents, vans, sheds, caravans, etc	107
Schools	92
Workshops and workplaces	30
Outworkers	20
Hairdressers and barbers	31
Pet shops	13
Accumulations	102
Factories	108
Bakehouses	20
Pest control	201
Stables, piggeries, farms, etc	12
Houses	1,241
Investigation of Infectious Diseases and	
Disinfection	526
Verminous conditions and disinfestation	54
Miscellaneous visits and re-visits	439
Total	4,943
(b) HOUSING ACTS, 1936-1964	
Houses inspected	759
Life queries	486
Investigations—overcrowding	20
Miscellaneous visits and re-visits	713
Total	1,978

(c) FOOD AND DRUGS ACT, 1955

Samples taken:—	
Milk designated for bacteria 15	
Milk for chemical analysis 45	
Other foods for chemical analysis 84	
Food preparing, etc., premises	135
Dairies, milk shops, milk vehicles	88
Market and shops	920
Unsound food	228
Butchers shops	122
Fish and chip shops	35
Ice Cream shops	57
Fishmongers and Poulterers	$\frac{38}{92}$
Greengrocers Clubs	10
Restaurants and Confectioners	140
Grocer's shop	317
Bakehouses	70
Miscellaneous visits and re-visits	228
Schools	26
Wholesalers	41
Canteens	46
Street Vendors	52
Licensed premises	99
Total	2,744
Poultry inspection:	
roundy inspection.	
(i) Number of poultry processing promises within	
(i) Number of poultry processing premises within	9
(i) Number of poultry processing premises within the district	2
the district	
the district	
the district (ii) Number of visits to these premises	. 38
the district (ii) Number of visits to these premises	. 38
the district (ii) Number of visits to these premises (iii) Total number of birds processed during the year (iv) Types of birds processed — turkeys, hens, broilers, capons	10,000
the district (ii) Number of visits to these premises	10,000
the district (ii) Number of visits to these premises	38 10,000 Yes all types 2%
the district (ii) Number of visits to these premises (iii) Total number of birds processed during the year (iv) Types of birds processed—turkeys, hens, broilers, capons (v) Percentage of birds rejected as unfit for human consumption	10,000 Yes all types
the district (ii) Number of visits to these premises	38 10,000 Yes all types 2% 1,600lbs.
the district (ii) Number of visits to these premises (iii) Total number of birds processed during the year (iv) Types of birds processed—turkeys, hens, broilers, capons (v) Percentage of birds rejected as unfit for human consumption (vi) Weight of poultry rejected as unfit for human consumption (vii) Comments on poultry processing and inspection Mostly sold to Asian Restaurants and Section 1997.	38 10,000 Yes all types 2% 1,600lbs.
the district (ii) Number of visits to these premises	38 10,000 Yes all types 2% 1,600lbs.
the district (ii) Number of visits to these premises (iii) Total number of birds processed during the year (iv) Types of birds processed—turkeys, hens, broilers, capons (v) Percentage of birds rejected as unfit for human consumption (vi) Weight of poultry rejected as unfit for human consumption (vii) Comments on poultry processing and inspection Mostly sold to Asian Restaurants and Skeepers.	38 10,000 Yes all types 2% 1,600lbs.
the district (ii) Number of visits to these premises	10,000 Yes all types 2% 1,600lbs.
the district (ii) Number of visits to these premises	10,000 Yes all types 2% 1,600lbs.

(e) OFFICES, SHOPS AND RAILWAY PREMISES	ACT , 1963
Visits	737
(f) DISEASES OF ANIMALS ACTS	104
(g) PREVENTION OF DAMAGE BY PESTS ACT,	1949
Rat Infestations	370
Mice Infestations	455
(h) CLEAN AIR ACT, 1956	
Number of visits industrial	51
Number of visits on survey	161
Smoke observations	51
Distribution of leaflets	185
Other visits	64
Total	512

Table C.4

Prevention of Damage by Pests Act, 1949

Year ended 31st December, 1969

DOODEDWIES OTHER THAN SEWEDS	Types of I	Property
PROPERTIES OTHER THAN SEWERS—	n-Agricultural	Agricultural
l. Number of properties in district	17,419	46
2. (a) Total number of properties (incl. nearby premises) inspected following notification	634	30
(b) Number infested by (i) Rats	340	30
(ii) Mice	454	1
 (a) Total number of properties inspec- ted for rats and/or mice for reason 		
other than notification	72	30
(b) Number infested by (i) Rats	30	38
(ii) Mice	23	1

(j) CLEAN AIR ACT, 1956

(a) Smoke Control Areas:

The position at 31st December, 1969 is as follows:-

		Acres	Total Premises	Dwellings
Middleton	No. 1 (Alkrington)	104	693	692
,,	No. 2 (Alkrington)	427	1,912	1,880
,,	No. 3 (Clough Road)	7	90	90
,,	No. 4 (Sedgley Street)	8	93	93
,,	No. 5 (Hollin)	112	476	475
,,	No. 6 (Croft Gates)	4	88	88
,,	No. 7 (Alkrington)	53	371	364
,,	No. 8 (Langley)	221	2,510	2,440
,,	No. 9 (Alkrington)	180	374	371
,,	No. 10A (Langley)	85	858	851
,,	No. 10B (Langley)	62	808	805
,,	No. 11 (Hollin Lane)	650	42	36
,,	No. 12 (Whittle Lane)	248	5	5
,,	No. 13 (Rhodes Green)	294	113	110
,,	No. 14 (Top of Middleton)	9	78	74
,,	No. 15 (Compton Way)	35	47	42

Following upon Circular 69/1963 of the Ministry of Housing and Local Government, which announced that all future Smoke Control Orders in the North-West would be required to be based upon fuels other than "soft" coke, the estimated costs of adaptations increased considerably.

Consequently, it was necessary for the Council to reduce in size the area which could be dealt with in any financial year. The completion date, by which the whole of the Borough is to be covered by such Orders, was extended from 1967 to 1981. This latter date is now further extended by the deceleration in the programme occasioned by present national economic considerations.

INDUSTRY:

51 visits were paid to industrial premises either as routine or to inspect alterations and fitting of equipment, and in connection with smoke emissions.

CHIMNEY HEIGHTS:

No action was required under Section 10 in respect of new chimneys.

POLLUTION INVESTIGATIONS:

The Corporation is a Member Authority of the South East Lancashire and North Cheshire Consultative Committee for the Investigation of Atmospheric Pollution. This body again did much valuable work during the year, and the fourth annual revision of the Schedule of Standard Costs of Conversion was carried out in June.

Two volumetric smoke and sulphur dioxide measuring apparatus and a lead dioxide candle are maintained in the district, the readings taken are passed to the Warren Spring Laboratory of the Ministry of Technology. Average readings for the years 1961 to 1969 inclusive are shown in Table C.13., (page 70).

MISCELLANEOUS VISITS

Atmospheric pollution	572
Fairs and markets	241
Interviews with owners, builders etc.	520
Public conveniences	34
Tip and salvage depot	399
Refuse Collection	102
Improvement grants	28
	330
Land charge searches	7.70
Noise nuisance	98
	0.004
Total	2,324
Total number of visits	14 970
Total number of visits	14,379
COMPLAINTS	
Number of complaints during the year	2,238
NOTICES	
Nuisances found	1,293
Nuisances abated	945
Verbal notices given	569
Verbal notices complied with	452
Informal notices served	275
Informal notices complied with	267
	33
Statutory notices served	32

Table C.5

WORK CARRIED OUT IN COMPLIANCE WITH NOTICES

Fresh water closets	8
Waste water closets	18
Drains cleared, repaired or reconstructed	40
Rainwater pipes and eavesgutters repaired	34
Damp ceiling and walls	49
Bins provided	16
Accumulations	113
Roofs repaired	20
Derelict vehicles	15
Defective floors	9

N :	10
Noise nuisance	10 38
Doors and windows repaired	38
Removal of caravans	37
Blocked chutes	10
Fireplaces and flues repaired	3
Condensation	70
Offensive Odours	8
Other nuisances abated	49
Pending	9
Table C.6	
FACTORIES ACT, 1961	
Defects found	5
Written notices served: 5	
Verbal notices given:— —	
(a) Sanitary defects — Remedied	5
Table C.7	
ERADICATION OF BED BUGS	
(a) Number of Council Houses found to be infested	9
Number of Council Houses disinfected	9
(b) Number of other houses found to be infested	5
Number of other houses disinfected	5
Premises are treated by spraying with DDT or BHC either kerosene or water formulations. Malathion and Gamexane Emulsion conc. are also used.	

HOUSING

Table C.8

STATISTICS

91	ATISTICS		
		1969 Figur	es
	Number of new houses erected during the year	Traditional permanent houses	Flats
1.	By the local authority	153	80
2.	By other local authorities	Nil	Nil
3.	By other bodies or persons	55	Nil
	Total number of dwellings owned by authority, existing in district at end of		8,701
1.	INSPECTION OF DWELLING HOUSEAR:	SES DURING	THE
	(1) (a) Total number of dwelling hous formally or informally for hou (under Public Health or Hous	sing defects	1,980

	(b) Number of inspections, formal made for the purpose	or inform:	al 	1,262
	(c) Number of dwelling houses i found to be not in all respect fit for human habitation but being rendered fit	s reasonab capable o	ly of	85
(2)	Total number of dwelling how at end of year which were unfi- habitation and not capable a expense of being rendered respect of which:—	t for huma t reasonab	n le	
	(a) Demolition clearance or closing been made (at anytime)		.е 	363
	(b) Demolition, clearance or clo			636
	nave not yet been made			000
НО	USES DEMOLISHED			
In (Clearance Areas:—		Disp	laced
		Houses Demolished 1969	during Per-	g year
(1)	Houses unfit for human habitation	n 208	494	208
(2)	Houses included by reason of bac arrangement, etc.		_	_
(3)	Houses on land acquired under Section 43 (2) Housing Act, 1957		_	_
Not	in Clearance Areas:—			
(4)	As a result of formal or informa procedure under Section 17 (1 Housing Act, 1957)	_	
(5)	Local Authority owned house certified unfit by the Medica Officer of Health	l	_	_
(6)	Houses unfit for human habitation where action has been taken under local acts	•	_	
(7)	Unfit houses included in Unfitness			-

2.

3.	UNFIT HOUSES CLOSED		
			Displaced during year Per- Fami-
		Number	sons lies
	(1) Under Section 16 (4), 17 (1), and 35 (1) Housing Act, 1957		
	(2) Under Sections 17 and 26 Housing Act, 1957	_	
	(3) Parts of buildings closed under Section 18, Housing Act, 1957	_	
4.	HOUSES MADE FIT AND HOUSES IN WERE REMEDIED:	WHICH	DEFECTS
	WERE REMEDIED.	By Owner	By Local Authority
	(1) After informal action by Local Authority	85	_
	(2) After formal notice under (a) Public Health Acts	_	_
	(b) Section 9 and 16, Housing Act, 1957	_	_
	(3) Under Section 24, Housing Act, 1957	7 —	_
5.	UNFIT HOUSES IN TEMPORARY USE 1957):	r	No. of sepa- ate dwellings contained in Column 1
Po	sition at end of year :—		
	(1) Retained for temporary accommodati	on:—	
	(a) Under Section 48	_	_
	(b) Under Section 17 (2)		_
	(c) Under Section 46		
	(2) Licensed for temporary occupation		
	und r Sections 34 or 53	_	_
6.	PURCHASE OF HOUSES BY AGREEMEN	NT:	
			No. of occu-
		No. of house:	
	Houses in Clearance Areas other than those included in confirmed Clearance Orders or Compulsory Purchase Orders, purchased during		
	the year		

7. HOUSING ACT, 1949 AND HOUSING (FINANCIAL PROVISIONS) ACT, 1958, IMPROVEMENT GRANTS, ETC.

Action during year:	or ind	e bodies lividuals No. of dwelling houses or other buildings affected	No. of	No. of dwelling houses or other buildings
(a) Submitted by priving individuals to lo				
authority	5	0	_	_
(b) Approved by lo	-	0	_	_
(c) Submitted by lo authority to Ministry		_	_	
(d) Finally approved Ministry		_	_	_
(e) Work completed	5	_	_	_
(f) Additional separa dwellings included (c) above	in		_	_
(g) Any other action tal under the Acts		_	_	_
HOUSE PURCHASE AN HOUSING ACTS, 1961 A				
			dv or	No. of vellinngs other uildings
Action during year:				ffected
(a) Submitted to Local	Authorit	y		44
(b) Approved by Local A	uthority			37
(c) Work completed				21

8.

HOUSING ACTS, 1936-1957

Summary of Properties Included in Clearance or Compulsory Purchase Orders in 1969

No.	of Area	ı I	Designat	ion of	Area	No.	of	Properties	Involved
Α.	(1)	The	Castle	Street	Comp	oulso		Purchase rder, 1969	12
	(2)	The	Higher	Wood	Street	No.	1	Clearance Order	
	(3)	The	Higher	Wood	Street	No.	2	Clearance Order	
		7733						au.	37
	(4)	The	Higher	Wood	Street	No.	3	Clearance Order	
	(5)	The	Higher	r Woo				ompulsory rder, 1960	
								Total	49
В.	closing	or c	lemolitic	on orde	rs or v	olun	tar	individual ily closed	Nu
C	or den								Nil
C.								t, capable extend life	10

INSPECTION AND SUPERVISION OF FOOD

(a) Food and Drugs Acts

The number of samples submitted for analysis during the year was 129, particulars of which are given below:—

Table C.9

Sample	Number	Not Genuine
Stewed Steak with Gravy	1	
Mustard	1	
Beef Sausage	5	2
Meat Pies	3	
Blackcurrant Jam	1	
Barley	1	
Salad Oil	1	
Slimming Preparation	1	
Linctus	1	
Pork Sausage	2	2
Fresh Salad	1	
Pure Ground Coffee	1	
Biscuits	1	
Tincture of Iodine	1	

		Not
Sample	Number	
Red Salmon	1	
Apples	2	
Salad cream	1	
Lemon and Lime Drink	1	
Chocolate Peanuts and Raisins	1	
Tomato Ketchup	1	
Fruits for salad	1	
Mixed Pickles	1	
Shandy	1	
Stout	1	
Whole Fruit Drink	1	
Plain Flour	î	1
Black Pudding	î	-
Fish Fingers	î	
Salmon Fish Paste	î	
Marmalade	î	
Lettuce	î	
Ham	i	
Potted Beef	2	
Boiled Ham	1	
Buttercup Syrup	2	2
Cooling Powders	1	2
Health Salts	1	
Corned Beef	1	
Roast Pork	1	
Self Raising Flour	1	
	1	
Hydrogen Peroxide Tinned Cream	1	
	1	
Sponge Pudding	1	
Indigestion Tablets	1	
Mincemeat	1	
Mixed Nuts		
Xmas Pudding	2	
Beechams Powders	$\frac{1}{2}$	
Bacon		
Cut Mixed Peel	1	
Cream of Mushroom Soup	4	
Whisky	-	
Rum	4	
Gin	4	
Ground Almonds	1	
Glace Cherries	1	
Lemon Sponge Pudding	1	
Mixed Peel	1	
Salad Dressing	1	
Sponge Pudding	1	
Pure Suger—Confectionery	1	
California Syrup of Figs	1	
Bronchial Mixture	1	
	0.1	
	84	1
	-	

FOOD AND DRUGS ACT, 1955

Sam		Analyst's Report	Action Taken
24	Pork Sausage	Meat content 81%. Contained 80 parts per million sulphite preservative (expressed as sulphur dioxide) without declaration.	Suggest vendor be interviewed and cautioned re preserva- tive.
53	Plain Flour	Nicotinic Acid content 1.35 milligrams per 100 grammes flour. Slightly low in Nicotinic Acid.	No action advised.
55	Beef Sausage	Lean 35.0 Fat 17.5 52.5	Suggest vendor be interviewed & cautioned.
		Contained 120 parts per million of sulphite preserva- tive (expressed as sulphur dioxide) without declaration.	
71	Buttercup Syrup	Contained 0.37% chloroform compared with 0.48% declared.	Suggest packers be informed.
90	Beef Sausage	Meat content 56.5% contained 315 parts per million of sulphite preservative without declaration.	Suggest vendor be notified.
95	Buttercup Syrup	Contained 0.28%, w/v chloro- form compared with 0.48% chloroform declared in formula.	Suggest packers be communicated with.
93	Pork Sausage	Meat content 75.5%. Contained 140 parts per million of sulphite preservative (expressed as sulphur dioxide) without declaration.	Suggest vendor be interviewed and cautioned re preserva- tive.

FOOD AND DRUGS ACT, 1955 MEAT AND OTHER FOODS WHERE LEGAL PROCEEDINGS TAKEN—1969

Case 1	No.	Fine	3	Cos	ts
10/69	Parsley and Thyme infested with weevils	£10			
15/69	Mouldy Leaf	£20			
18/69	Bacen Joint containing maggots	£30			
19/69	Mouldy Steak and Kidney Pie	Case d	ismisse	d	
20/69	Dinner Ccb containing fly	£20	£1	163.	0d.
21/69	Bacon containing maggots	£20	£10	13s.	0d.
	TOTALS	£100	£12	9s.	0d.

Dealt with Informally: -

Sampl No.	e Nature of Sample	Action Taken
1/69	Half shoulder of English Lamb	Complainant re-imbursed.
2/69	Small piece of cotton on lid of baby food	Complainant re-imbursed.
3/69	Apples and Rice baby sweet	Complainant re-imbursed.
4/69	Foreign bodies in milk bottle	Complainant re-imbursed.
5/69	contents of Scotch Broth Soup	Complainant re-imbursed.
6/69	Prawns in berried condition	Complainant re-imbursed.
7/69	Tomatoes (squashed)	Complainant re-imbursed.
8/69	Small white sliced loaf (containing part of fly)	Complainant re-imbursed.
9/69	Sausages (decomposing)	Complainant re-imbursed.
1/69	Sausage containing foreign body	Complainant re-imbursed.
2/69	Sausage	Complainant re-imbursed.
3/69	Bacon	Complainant re-imbursed.
4/69	Unsound steak and kidney pudding	Complainant re-imbursed.
6/69	Mouldy Loaf	Complainant re-imbursed.
7/69	Section of hide in Meat and Potato Pie	Complainant re-imbursed.
1/70	Caterpillar in tin of processed peas	Complainant re-imbursed.
/69	Meat Pie	Complainant re-imbursed.
3/69	8 oz. tin of baked beans	Complainant re-imbursed.
5/69	1 pint bottle milk—cement in bottom	Complainant re-imbursed.
6/69	Decomposed Cheese Spread with Tomato	Legal proceedings pending.

Table C.10

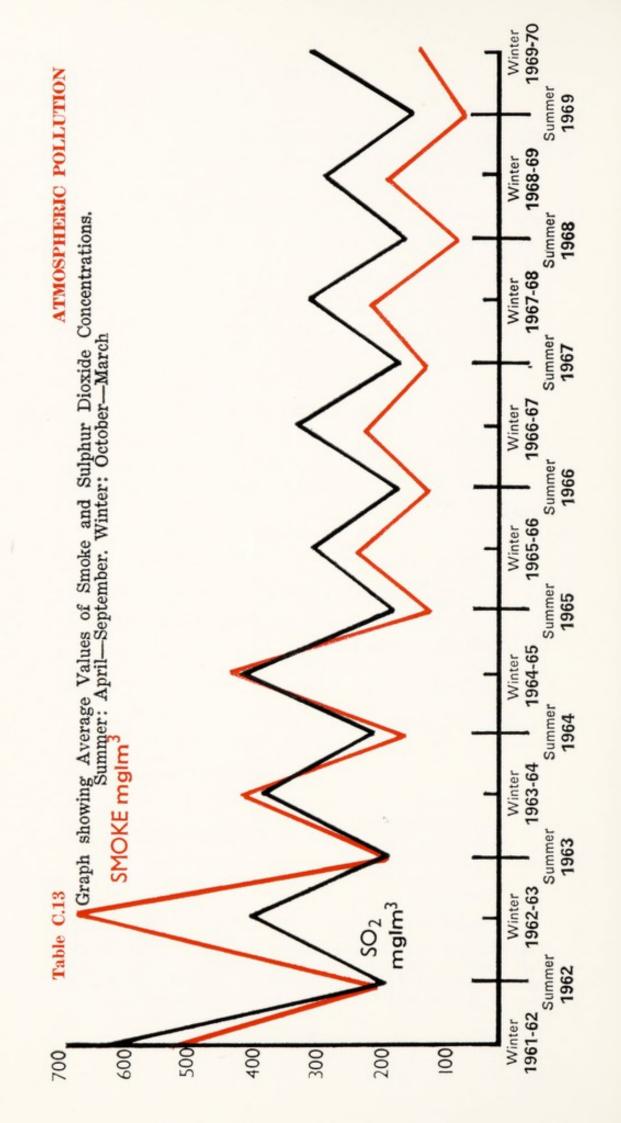
MEAT AND OTHER FOODS CONDEMNED—1968

	Tons	Cwts.	Qrs.	Lbs.	Ozs
(Total quantity of stock e	xamine	d and d	conden	ined)	
Loose Meats	-	2	0	0	0
Cooked Meat and Meat					
Products	-	1	1	19	0
Canned Meats	_	2	0	0	0
Other Canned Foods	_	2	2	6	0
Fish (fresh)	_	_	-	-	_
Fruit and Vegetables (fresh)	_			-	_
Other Foods	_	10	1	4	0

Table C.11

Number	and Dairies (General) of registered distributors				
(a) (b)	Dairies in the district Shops in the district of	ther th	an dairie	s	18 109
	(Special Designation)				
	of dealers' licences in				respect
(a) (b)	Pasteurising plant (Re Sterilising plant (Reg.				Nil Nil
(c)	Pre-packed milk (Reg.				102
(d)	Untreated Milk				21
Tub	erculin Tested Milk (Re	g. 12(1) (d))		Nil
		610			
	Table	C.12			
MILK S	AMPLING				
		No. of		Unsatis-	
(1) 01		amples	Satisf'ry	factory S	amples
	tutory Tests:				
Raw Mil					
	Methylene Blue Test eated Milk:	9	6	3	_
	A F 13 1 TO 10 1				
(b)	Methylene Blue Test		-	_	_
(b) (c)	Phosphate Test	_	_	_	=
	Phosphate Test Methylene Blue Test	_	_	=	=
(c) (b) (d)	Phosphate Test Methylene Blue Test Turbidity Test				
(c) (b) (d)	Phosphate Test Methylene Blue Test				= = = = = = = = = = = = = = = = = = = =
(c) (b) (d) (e)	Phosphate Test Methylene Blue Test Turbidity Test			_ _ _ _	= = = = = = = = = = = = = = = = = = = =
(c) (b) (d) (e)	Phosphate Test Methylene Blue Test Turbidity Test Colony Count Test plogical Examination:				
(c) (b) (d) (e)	Phosphate Test Methylene Blue Test Turbidity Test Colony Count Test plogical Examination:	— — — — No. of amples	Positive	 Negative	
(c) (b) (d) (e)	Phosphate Test Methylene Blue Test Turbidity Test Colony Count Test plogical Examination:		Positive	Negative	
(c) (b) (d) (e) (II) Bio	Phosphate Test Methylene Blue Test Turbidity Test Colony Count Test plogical Examination:	amples 9	Positive —		
(c) (b) (d) (e) (II) Bio	Phosphate Test Methylene Blue Test Turbidity Test Colony Count Test plogical Examination: S Tuberculosis	amples 9	_	9	
(c) (b) (d) (e) (II) Bio	Phosphate Test Methylene Blue Test Turbidity Test Colony Count Test plogical Examination: S Tuberculosis Brucellosis—Ring Test Brucellosis — Culture	amples 9	_	9	

Brucella Abortis—Action taken in respect of positive sample:—Guinea pig inoculated but died after 15 days. Further specimen submitted for inoculation no evidence of Brucella infection from this test.



APPENDIX

Factories Act, 1961

Prescribed particulars on the Administration of the Factories Act, 1961

PART I OF THE ACT

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

	Number	Number of			
Premises (1)	on Register (2)	Inspections (3)	Written notices (4)	Occupiers prosecuted (5)	
1. Factories in which Section 1, 2, 3, 4, and 6 are to be enforced by Local Authorities	7	2	_	_	
2. Factories not included in (1) in which Section 7 is enforced by the Local Authority	163	119	3	_	
3. Other premises in which Section 7 is enforced by the Local Authority excluding out-workers' premises)	7	2	_	_	
Total	177	123	3	_	

2. Cases in which DEFECTS were found.

	Nu	Number o			
Particulars			Refer	which	
(1)	Found (2)	Remedied	To H.M. Inspector (4)	By H.M. Inspector (5)	prosecu- tions wer instituted (6)
Want of cleanliness					
(S.1.)		_	_	_	
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 (c) Not separate for	5	5	_	-	_
Sexes	_	-	_	_	_
to Out-work)					
Total	5	5	_	_	_

PART VIII OF THE ACT

Outwork (Sections 133 and 134)

	S	ECTION 13	3	SECTION 134			
Nature of Work	required	No. of cases of default in sending lists to the Council	No. of prosecu- tions for failure to supply lists	No. of instances of work in unwhole- some premises	Notices served	Prosecu- tions	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	
Wearing apparel Making etc.		1	_	_	_	_	
Household Linen		_	_	_	_	-	
Stuffed Toys	_	_	_	_	_	_	
Xmas Crackers	3	_	_	_	-	-	
Total	18	1	_		_	_	

