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MIRFIELD URBAN DISTRICT



ANNUAL REPORT
OF THE
MEDICAL OFFICER OF HEALTH

For the Year
1 9 5 5

WILLIAM MASON DOUGLAS, M.B., Ch.B., D.P.H.
Medical Officer of Health.



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WESTERN DISTRICT



ANNUAL REPORT
OF THE
MEDICAL SOCIETY OF THE WESTERN DISTRICT

FOR THE YEAR
1884

WILLIAM HAZEN DOUGLAS, M.D., CLINICAL
PROFESSOR OF MEDICINE

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Mirfield Urban District Council

1955-56

CHAIRMAN

Councillor MILNER DAY, J.P.

DEPUTY CHAIRMAN

Councillor ERNEST CHARLES BARRACLOUGH

COUNCILLORS

BARRACLOUGH, Joseph Herbert

CLARKE, George Arthur

COPLEY, Frank

FRETWELL, Sandy, J.P.

HARDY, John, J.P.

LYDALL, Frank Berti

SHEARD, Ernest Harold

TALBOT, George Walker

WALKER, Cecil

WEBSTER, George

PUBLIC HEALTH AND HOUSING COMMITTEE

Councillor TALBOT, Chairman

Councillor LYDALL, Deputy Chairman

Consists of all the Members of the Council.

October, 1956.

TO THE CHAIRMAN AND MEMBERS OF THE MIRFIELD URBAN DISTRICT COUNCIL.

Mr. Chairman, Gentlemen,

I have the honour to submit to you my Annual Report relating to the Urban District of Mirfield, and the work of the Health Department for the year 1955. In so far as the so-called personal health services provided by the County Council are concerned it continues to be a matter of regret to me that no formula has yet been sought for delegation of responsibility to locally elected bodies. There is in consequence failure to develop that sense of informed local interest which I believe to be important for the efficiency of the services and to conduce to good local government. However, in this Report I have repeated the custom of including information relating to these County Council services which are operated under my executive direction in Mirfield, as these give a comprehensive picture of what is essentially one preventive health service, in spite of the duality of responsibility.

The vital statistics relating to a small community such as Mirfield are liable to considerable fluctuations from one year to another which are seldom of statistical significance, and this should be borne in mind in studying the column of comparative figures relating to the country as a whole and to the administrative county given on page 16 of the Report. As compared with last year the number of births (175) has remained virtually static, but the deaths (176) show an increase of thirty-four and thus there is a natural decrease of one in the population compared with an increase of thirty-four last year. Infant mortality (five deaths) has also remained steady, and the causes of death were in three cases due to abnormality of the infant at birth and in two cases to premature birth. All of these confinements took place in hospital and in no case did any of the patients attend the local authority ante-natal clinic. There have, however, been fewer stillbirths this year giving a rate of 23.1 stillbirths per thousand total births. In the four cases which occurred two were due to abnormalities associated with the unborn child and in two cases no cause for the stillbirth could be discovered. Taken over the years the reduction in "peri-natal" mortality, *i.e.*, neo-natal deaths and stillbirths in Mirfield has at least matched that in similar areas throughout the country.

As mentioned previously there were thirty-four more deaths this year compared with last year and this increase has taken place in the age groups 45-64 and 65-74. Whereas last year the percentage of deaths occurring in the three upper age groupings was 17% at ages 45-64, 28% at 65-74 and 46% at 75 and over, this year the figures for all three groups individually are approximately 30%. This is mainly due to increases in the number of deaths from cancer, coronary disease and vascular lesions of the nervous system in the group 45-64, and in coronary disease and vascular lesions of the nervous system in the group 65-74. There is no reason to believe that a similar pattern of mortality will persist from year to year. One certainly hopes not. With regard to one form of cancer, namely, cancer of the lung, which caused four deaths, it seems to be fairly well established that there exists a strong relationship with excessive cigarette smoking and with atmospheric pollution. The confirmed smoker may have much difficulty in reducing his own consumption, but he should do all within his power to discourage young people from acquiring the habit.

With regard to notifiable infectious diseases there was during the year an epidemic of measles occurring principally in the first and second quarters. Whooping cough was also prevalent in the second half of the year and this at least is largely preventable and it is a matter for regret that more parents do not have their children immunised against this distressing complaint than is at present the case. Four cases of poliomyelitis were notified, all in young children, and apparently unconnected with each other. Fortunately all of these cases survived and it is likely that in only one case will a slight degree of paralysis persist. Although in comparison with the common infectious diseases such as measles, poliomyelitis is not numerically dramatic it can be a serious and crippling disease, and one looks forward with hope to the successful employment of preventive vaccines similar to those on trial in America.

Vaccination or immunisation procedures which are in common use are those for the prevention of smallpox, diphtheria, whooping cough and tuberculosis, and while the public health staff make every effort to encourage the employment of these methods, the response cannot be held to be wholly satisfactory, and this attitude of *laissez-faire* is a difficult and time consuming one to overcome.

The Sections of the Report dealing with the personal health services are necessarily brief, but I believe they show that these have reached a high stage of development in this area, and this is largely due to a keen and enthusiastic staff adequately trained in the practice of preventive health work. One surely cannot help but be impressed with the gradually improving standards of physical fitness among the children of to-day, and with the facilities which are available to parents for medical or social guidance in their upbringing. Only 0.3 per cent. of the children examined at school were considered to be of poor physical development, and the number of defects recorded among the 729 children examined totalled only 224, many of these defects being slight, to the extent that only 57 were considered to require treatment. Once again, too, I am pleased to say that the cleanliness inspections show a further decline in the incidence of head louse infestation, which so far as I can see, is lower than it has ever previously been in Mirfield, during the years when adequate inspection has been carried out. The health education talks given by the nurses at the Secondary Modern School have continued with the full help and co-operation of the Head Teacher and staff concerned. The scope of the lectures cover the normal experiences of life, from conception to adolescence, and I feel that this is an important part, if not the most important part, of public health educational methods. There must surely be scope for extension along these lines in the future.

I reported last year that provision had been included in the County Council estimates for 1955/56 for a school dental clinic in Mirfield, and I regret that I have as yet no information as to when this is likely to become an actuality.

In the work of the health visitor, and school nurse, and indeed of all those who are concerned in infant and school welfare there is increasing emphasis on mental hygiene, with a view not only to securing the best emotional environment for the development of personality but also for the prevention of maladjustment in later years. This is one of the most difficult and one of the most distressing problems which is encountered in our work to-day. From a remedial aspect I am particularly pleased that a properly staffed Child Guidance Clinic has commenced in the Division under Dr. Leese, the Child Psychiatrist. There is great need for such a service and it is already doing a very good job of work.

It is always a pleasure to me to record details of the provision made for the care of those who are handicapped either in mind or in body, when one thinks of the days not so very long ago, when little indeed was done for those so afflicted. From the Mirfield area seven children are receiving special education in residential schools, and there are only three children waiting admission to schools for educationally sub-normal children. Of the nineteen ascertained mental defectives only six require institutional treatment and of the remainder four are attending occupation centres by arrangement with neighbouring Authorities and nine receive supervision of home care. All the patients discharged from mental hospitals during the year, thirteen in number, received help and guidance towards their rehabilitation by Mrs. de la Cour, the mental health social worker, who also undertakes the social supervision of mental defectives. Eleven children received speech therapy in the special clinic which operates in the district.

So far as care of the aged is concerned this is a very great problem and the pattern which this care should best take is not yet fully clear. For our part we co-operate closely with the voluntary committees and the welfare authority. The home help service, which is ever expanding, was absorbed as to 93 per cent. of its availability by the aged and the infirm. It is noticeable also that the work of the home nursing service has an increasing bias towards the care of the aged in their own homes. Details of these and other aspects of the Department's work are contained in the body of the Report.

With regard to environmental hygiene, which is the direct responsibility of the Council, it will be noticed that once again it has been possible to carry out a large amount of basic routine public health work and that the activities are widespread. The importance of this work, like the training and qualifications of the sanitary inspectors, is not always fully appreciated, and it would be idle to pretend that there does not exist at times a sense of frustration and grievance among sanitary inspectors generally, which is being reflected in an inadequate intake into the training colleges. We have been fortunate, however, that staffing difficulties did not arise in Mirfield during the year under review.

In this year seventeen houses unfit for human habitation were dealt with ; in three cases by the making of closing orders and in fourteen cases by informal action. Fifty new houses were completed by the Local Authority and I regret that the Council have not yet

felt able to devote a greater part of its housing resources to a more vigorous policy of slum clearance. This business of slum clearance is one which should be tackled with enthusiasm ; there can be little which offends the eye of the sanitarian or of the doctor more than the unhealthy slum properties of the area.

If there is any factor in the environmental circumstances which gives comparable offence it is that of atmospheric pollution. During the year some 155 tons of solids per square mile were deposited from the atmosphere, and this together with the sulphur compounds also present, destroys amenity and is injurious to health. The problem in small semi-industrial areas such as this, sandwiched as it were between two populous County Borough areas, is not one which is easy of solution, but I confidently expect that the Clean Air Act now before Parliament will provide opportunity for the go-ahead Authority which has the support of a strong public opinion to alleviate these conditions.

Considerable attention has been paid during the year to the supervision of premises and personnel engaged where food is prepared or sold for human consumption. The development of communal feeding habits during recent years has increased the importance of food hygiene, and far too much sickness is caused by carelessness and inadequate supervision. The Food Hygiene Regulations which came into force on the 1st January should strengthen the powers of Local Authorities in this connection and provide substantially higher standards than previously, in regard to premises, and in the requirements of employees.

The privy midden and tippler conversion schemes have lagged somewhat this year, but out of ninety-three remaining privies only five are at present capable of conversion to the water carriage system. Of course, pail closets, of which there are now seventy-five in the district, are a poor substitution for water closets but the nature of the area is such that it would be extremely difficult if not well-nigh impossible to extend the sewerage system to many of the districts where these are to be found.

I am happy to say that a very good refuse collection service has been maintained throughout the year, and wish to record my appreciation of the workmen engaged on this arduous task for their endeavours.

The section of the Report relating to the work of the sanitary inspectors has been compiled by Mr. Johnson, the Chief Sanitary Inspector, to whom once again my thanks are due for this, and for his continued loyal support at all times.

In conclusion may I say how grateful I am for the ready co-operation which has been forthcoming to myself, and the members of my staff, from the general practitioners in the area, and also from the head teachers and staffs of schools, and from officials of the other departments with whom we are in almost daily contact. I am also grateful for the courteous reception and helpful support which the Health Committee have accorded to me throughout the year.

I am, Mr. Chairman and Gentlemen,

Your obedient servant,

W. M. DOUGLAS,

Medical Officer of Health and
Divisional Medical Officer.

MIRFIELD URBAN DISTRICT.

Area of district in acres at 1951 census	...	...	...	3,394
Population at 1951 census	...	...	...	11,885
Number of inhabited houses at 1951 census	...	...	...	3,939
Number of families or separate occupiers at 1951 census	...	...	...	3,948
Number of rooms at 1951 census	...	...	...	15,228

Statistical Summary of the area for 1955

In comparison with 1954.

	1954	1955
Area of the district in acres	3,394	3,394
Estimated population (mid-year)	11,850	11,860
Average number of persons per acre	3.5	3.5
Estimated number of dwellinghouses (end of year)	4,445	4,521
Rateable value at 1st April	£57,247	£58,254
Product of Penny Rate (estimate)	£221	£231
Crude Death Rate per 1,000 estimated population	12.0	14.8
Comparability Factor	0.96	0.96
Standardised Death Rate	11.5	14.2
Crude Birth Rate per 1,000 estimated population	14.8	14.6
Comparability Factor	1.02	1.02
Standardised Birth Rate	15.2	14.9
Still-birth Rate per 1,000 total live and still-births	38.2	22.6
Infant Mortality Rate per 1,000 live births	28.4	28.9
Maternal Mortality Rate	Nil	Nil

VITAL STATISTICS FOR THE YEAR 1955.

Live Births. (Registered)

					Males	Females	Total
Legitimate	...	...	...	...	93	75	168
Illegitimate	...	...	...	...	4	1	5
Total ...					97	76	173

Birth rate per 1,000 estimated population : 14·6.

Live and Stillbirths Notified in the District.

Ward					Males	Females	Total
Battleyford	...	...	...	...	10	6	16
Eastthorpe...	...	...	...	...	—	2	2
Hopton	...	...	...	...	2	—	2
Northorpe	...	...	...	...	3	3	6
					15	11	26
Crossley Maternity Home	...	...					382
Total ...							408
Deaths Transferable from District							249
							119

Births Transferable to the District.

(a) Hospitals	...	...	...	...			37
(b) Other Institutions...	...	...	...	...			19
Total Net Births belonging to District							175

Stillbirths.

					Males	Females	Total
Legitimate	...	...	...	...	2	2	4
Illegitimate	...	...	...	...	—	—	—
Total ...					2	2	4

Stillbirth rate per 1,000 total live and still-births : 22·6.

The birth rate has remained steady as compared with last year, and at 14·6 remains comparable with that of similar districts throughout the country. The Registrar General supplies a "comparability factor." In the case of Mirfield, for births, this is 1·02, and multiplying our crude birth rate by this figure we obtain a standardised birth rate of 14·9, which would represent the birth rate for Mirfield if its population had the same age and sex constitution as that of the country as a whole.

Approximately 85% of births took place in hospital or maternity homes, and this is substantially greater provision than is required on social or medical grounds. The reason for this is to be found almost entirely in the propinquity of Crossley Maternity Home, and of course the fact that general medical practitioners can attend their own patients in this Home under conditions of ideal convenience does not lead to the encouragement of domiciliary confinements.

There were fewer stillbirths this year and the rate of 22·6 compares very favourably with similar districts. None of these mothers received their ante-natal care at the Local Authority clinic, but as far as it can be determined it is extremely unlikely that any of these could have been prevented.

Deaths.

	Males	Females	Total
Total Deaths assigned to district ...	94	82	176
Deaths registered in the district ...	65	56	121
Deaths transferable to the district ...	30	32	62
Deaths transferable from the district ...	1	6	7
Death Rate per 1,000 estimated population			14·8
Standardised Death Rate ...			14·2
Deaths from puerperal causes ...			Nil

Deaths of Infants under 1 year :—

	Males	Females	Total
Legitimate ...	3	1	4
Illegitimate ...	1	—	1
	4	1	5

There were 176 deaths assigned to the district giving a crude death rate of 14·8. The Registrar General's "comparability figure" for deaths is 0·96 and multiplying the crude death rate by this factor we obtain 14·2 which would represent the death rate for Mirfield if its population had the same age and sex constitution as the country as a whole. The mortality table this year is quite unusual in that the number of deaths in the age group 45-64 was similar to that in the higher age groups, and this was due to an increase in the number of deaths from cancer, coronary disease and vascular lesions of the nervous system in this group.

Five deaths occurred in infants aged under one year, due in three cases to congenital abnormality, and in two cases to premature birth. There were no deaths of mothers associated with child birth during the year.

CAUSES OF AND AGES AT DEATH DURING THE YEAR 1955

	All Ages	Under 1 year	1-4	5-14	15-24	25-44	45-64	65-74	75 and Over	Males	Females	Deaths in Institutions
Syphilitic Disease ...	2					1			1	2		1
Other Infective and Parasitic Diseases ...	2					1			1		2	
Cancer—												
(a) Stomach ...	3					1	2			3		
(b) Lung, Bronchus ...	4						4			3	1	1
(c) Breast ...	5					1	4				5	
(d) Uterus ...	3						1	2			3	
(e) Other ...	11						3	6	2	6	5	3
Diabetes ...	2							1	1	1	1	1
Vascular Lesions of Nervous System ...	30						11	11	8	12	18	14
Coronary disease, angina ...	33					1	12	15	5	20	13	6
Hypertension with heart disease ...	9						4	3	2	4	5	2
Other heart disease ...	24						2	7	15	15	9	2
Other circulatory disease ...	8						1	3	4	5	3	4
Pneumonia ...	1								1		1	1
Bronchitis ...	9					1		3	5	6	3	5
Other diseases of respiratory system ...	2						2			2		
Ulcer of stomach & duodenum	2						1		1	1	1	2
Gastritis, Enteritis and and Diarrhoea ...	2					1		1			2	2
Congenital Malformations ...	3	3								3		2
Other defined & ill defined diseases ...	14	2				1	4	2	5	8	6	8
Motor vehicle accidents ...	2				1		1			1	1	2
All other accidents ...	3						1	1	1	1	2	2
Suicide ...	2						1	1		1	1	
TOTAL—All ages ...	176	5			1	8	54	56	52	94	82	58

CAUSES OF INFANTILE MORTALITY IN MIRFIELD URBAN DISTRICT, 1955

Cause of Death	Under 1 day	1 day	2 days	3 days	4 days	5 days	6 days	7—13 days	14—20 days	21—28 days	28 days—2 months	3 months	4 months	5 months	6 months	7 months	8 months	9 months	10 months	11 months	12 months	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	In First Year
Multiple Deformities	...				1						1											1				1
Hydrocephalus	...								1												1	1				1
Prematurity	...	1																				1				1
TOTALS	...	1			1				1		1										1	3	1	1		1

PREMATURE INFANTS.

Domiciliary Confinements

Birth lbs.	Weight ozs.	No. of Infants	No. of Infants who survived		
			24 hours	2-7 days	1 month
3	14	1	1	1	1
5	2	1	—	—	—
Totals		2	1	1	1

Institutional Confinements

Birth lbs.	Weight ozs.	No. of Infants	No. of Infants who survived		
			24 hours	2-7 days	1 month
3	3	1	1	1	1
3	6	1	—	—	—
3	12	1	1	1	1
4	5	2	2	2	2
4	7	1	1	1	1
4	8	2	2	2	2
4	12	1	1	1	1
4	13	1	1	1	1
5	—	2	2	2	2
5	1	2	2	2	2
5	2	1	1	1	1
5	7	1	1	1	1
Totals		16	15	15	15

**Birth and Mortality Rates for 1955 for the West Riding Administrative
County and England and Wales.**

	Aggregate of U.D's.	Aggregate of R.D's.	Adminis- trative County	England & Wales	Mirfield
Crude Birth	14.8	16.6	15.3	15.0	14.6
Adjusted Birth	14.9	16.8	15.4	15.0	14.9
Crude Death	12.5	9.6	11.7	11.7	14.8
Adjusted Death	12.7	11.0	12.3	11.7	14.2
Tuberculosis, Respiratory	0.11	0.08	0.11	0.13	0.00
Tuberculosis, Other	0.02	0.02	0.01	0.02	0.00
Tuberculosis, All Forms	0.13	0.10	0.12	0.15	0.00
Cancer	2.03	1.54	1.90	2.06	2.19
Vascular Lesions of the Nervous System	2.09	1.40	1.90	*	2.53
Heart and Circulatory	4.71	3.55	4.39	*	6.24
Respiratory Diseases	1.28	1.03	1.21	*	1.01
Maternal Mortality	0.45	1.19	0.67	0.64	0.00
Infant Mortality	25.2	28.6	26.2	24.9	28.9
Neo-Natal Mortality	16.9	18.6	17.4	17.3	17.3
Stillbirth	26.4	26.2	26.4	23.1	22.6

*Figures not available.

The Infant and Neo-natal Mortality Rates are per 1,000 live births.

The Maternal Mortality and Stillbirth Rates are per 1,000 live and stillbirths.

The remaining rates are per 1,000 estimated home population.

DIPHTHERIA IMMUNISATION AND WHOOPING COUGH IMMUNISATION. SMALLPOX VACCINATION.

Diphtheria immunisation, whooping cough immunisation and smallpox vaccination is made available free of charge by arrangements made by the County Council with the general practitioners and through the Public Health Services. Arrangements are made to carry out immunisations at the Child Welfare Centres and School Clinics in the area, and special sessions are held at schools where sufficient numbers justify it. Approach is made to the parents of every child entering school for the first time and again when they reach the age of ten years in an attempt to raise and maintain the general level of immunity of the school population in particular against diphtheria.

The records which are here presented show that 82% of children under five have been protected against diphtheria and that of all the children under fifteen years of age 85% have been so protected, although in the latter case 26% of these have not received a re-inforcing injection within the previous five years. In view of the amount of propaganda and the hard work of the Public Health staff in the encouragement of the adoption of this procedure these results cannot be considered to be entirely satisfactory. As fear of the disease has receded from public consciousness it has proved ever harder to attain a high level of immunity among the child population and this situation is fraught with danger.

The incidence of whooping cough immunisation, as is shown in the following table, is disappointing in view of the great suffering which may be spared to many a child by immunisation against the disease. The response to vaccination against smallpox is somewhat better than previous years, but generally this matter receives still little response from the general public in this area.

The following table shows the amount of diphtheria immunisation carried out during the year :—

Primary Injections.

Period	Age at final injection			Total
	Under 1	1-4	5-14	
Six months ending 30th June, 1955	75	11	6	92
Six months ending 31st December, 1955	18	48	2	68
Totals for 1955	93	59	8	160

Re-inforcing Injections.

Period	Age at re-inforcing injection			Total
	Under 1	1-4	5-14	
Six months ending 30th June, 1955	—	10	25	35
Six months ending 31st December, 1955	—	52	146	178
Totals for 1955	—	42	171	213

Number of children immunised for the first time during each half-year :—

	First half-year	Second half-year	Total
1947	32	80	112
1948	127	145	272
1949	69	52	121
1950	62	50	112
1951	106	3	109
1952	67	67	134
1953	108	54	162
1954	86	80	166
1955	92	68	160

I give below a table showing the numbers and percentages of children who have had a course of immunisation within the last five years separated from those who had a course of immunisation previously :—

Age at 31-12-55 i.e., Born in year :	Under 1 1955	1—4 1954—1951	5—9 1950—1946	10—14 1945—1941	Under 15 Total
Last complete course of injections (whether primary or booster)					
A. 1951-1955	18 (10%)	517 (72%)	582 (61%)	466 (57%)	1583 (59%)
B. 1950 or earlier	—	—	347 (36%)	336 (41%)	683 (26%)

The following table shows the amount of Whooping Cough Immunisation carried out during the year :—

Age at final injection	
Under 6 months ...	—
6 months to 1 year	100
1—2 years ...	21
2—3 years ...	3
3—4 years ...	—
	124

Immunisation in relation to Child Population.

Number of children at 31st December who had completed a course of immunisation at any time before that date.

Age at 31/12/55 i.e. born in year	Under 1 1955	1 1954	2 1953	3 1952	4 1951	5 1950	6 1949	7 1948	Total
Number immunised	27	133	87	89	32	15	6	5	394

Table showing Persons Vaccinated and Re-vaccinated during 1955.

Age at date of vaccination	Under 1	1	2-4	5-14	15 or over	Total
Number Vaccinated	40	29	1	—	2	72
Number Re-Vaccinated	—	—	—	—	9	9

CASES OF INFECTIOUS DISEASE
occurring in Mirfield Urban District classified according to Age Groups and Wards, 1955.

Disease	All Ages	Under 1 year	1 to 5 years	5 to 15 years	15 to 25 years	25 to 45 years	45 to 65 years	Over 65 years	Hopton	Battye- ford	East- thorpe	Nor- thorpe	Removed to Hospital
Pneumonia ...	2	—	1	—	—	1	—	—	—	—	—	2	—
Scarlet Fever ...	8	—	4	2	2	—	—	—	—	6	—	2	2
Measles ...	240	4	125	111	—	—	—	—	34	93	51	62	—
Puerperal Pyrexia ...	3	—	—	—	1	2	—	—	—	—	—	3	—
Whooping Cough ...	21	1	7	13	—	—	—	—	3	5	2	11	—
Poliomyelitis Paralytic ...	4	—	3	1	—	—	—	—	—	1	2	1	—
TOTALS ...	278	5	140	127	3	3	—	—	37	105	55	81	2

CASES OF INFECTIOUS DISEASE
occurring in Mirfield Urban District classified according to Wards and Quarters, 1955.

Disease	Hopton				Battysford				Northorpe				Eastthorpe				Mirfield			
	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
Pneumonia ...	—	—	—	—	—	—	—	—	2	—	—	—	—	—	—	—	2	—	—	—
Scarlet Fever ...	—	—	—	—	1	2	1	2	—	—	—	—	—	—	1	—	1	2	1	4
Measles ...	24	8	2	—	21	71	1	—	14	45	3	—	35	13	—	3	94	137	6	3
Puerperal Pyrexia ...	—	—	—	—	—	—	—	—	—	1	1	1	—	—	—	—	—	1	1	1
Whooping Cough ...	—	—	3	—	—	—	2	3	—	—	7	4	—	—	2	—	—	—	14	7
Poliomyelitis ...	—	—	—	—	—	—	1	—	—	—	1	—	—	—	1	1	—	—	3	1
TOTALS ...	24	8	5	—	22	72	5	5	16	46	12	7	35	13	3	4	97	140	25	16

TUBERCULOSIS.

Notifications of respiratory tuberculosis have declined steadily in Mirfield during the past seven years and I am happy to say that only two such notifications were received during the year under review. During these years, however, the bulk of the notifications have been in respect of young persons under the age of 25 years, and although treatment of this disease has made such substantial advances in recent years, it is on the side of prevention that the greatest endeavour should lie. One aspect of this preventive action is shown in the section relating to the School Medical Services for the first time, and relates to tuberculin testing and subsequent employment of B.C.G. Vaccination, as an immunisation against tuberculosis. This has given promising results in other countries, and it is hoped that this will play its part in future years, in reducing the incidence of pulmonary tuberculosis, particularly in the younger age groups.

Nurse Smith has continued her duties as tuberculosis visitor in this area, maintaining supervision of patients in their own homes, and assisting in the tracing of contacts of persons suffering from the disease. She is the link, as it were, between the Public Health Department, the general practitioners, the Consultant Chest Physician, and the patient, and I believe the arrangement to be convenient, happy and efficient. This particular disease brings in its wake many social problems, which are not always easy of solution, but which it is vital should be tackled by competent and experienced staff.

The statistical details of Tuberculosis in Mirfield are as follows :—

	Pulmonary		Non-Pulmonary	
	Male	Female	Male	Female
(a) Number of Cases on Register at commencement of year ...	25	14	4	8
(b) Number of Cases notified first time during the year ...	3	—	3	—
(c) Removals from other areas	—	—	—	1
(d) Number of Cases removed from the Register ...	3	4	—	1
(e) Number of Cases remaining on the Register ...	24	10	7	8

Age Periods	New Cases				Deaths			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	M.	F.	M.	F.	M.	F.	M.	F.
0	—	—	—	—	—	—	—	—
1	—	—	1	—	—	—	—	—
5	—	—	1	—	—	—	—	—
10	—	—	—	—	—	—	—	—
15	—	—	—	1	—	—	—	—
20	2	—	—	—	—	—	—	—
25	—	—	1	—	—	—	—	—
35	—	—	—	—	—	—	—	—
45	—	—	—	—	—	—	—	—
55	—	—	—	—	—	—	—	—
64 and upwards	—	—	—	—	—	—	—	—
Totals	2	—	3	1	—	—	—	—

Five notifications were received of admission of persons suffering from Tuberculosis to Sanatoria and two discharges.

The following are the institutions to which tuberculosis patients were admitted :—

			Admission	Discharges
Whitley Grange, Dewsbury	...	...	2	2
Pinderfields Hospital	...	...	1	—
Seacroft Hospital, Leeds	...	...	1	—
Killingbeck Hospital	...	...	1	—
			<hr/>	<hr/>
	Totals	...	5	2
			<hr/>	<hr/>

MENTAL HEALTH SERVICES.

Statistically the information relating to mental deficiency and mental illness in the Mirfield area is given below, and the social work in connection with these conditions continued to be carried out throughout the year by Mrs. de la Cour. These conditions, perhaps more than any other, are productive of social problems, often of great complexity, and it is not only the patients to whom attention requires to be directed, but also to the families and close relatives of the patients, and on occasions larger sections of the community. The social work carried out in connection with the rehabilitation of persons who have suffered from mental illness is an essential part of treatment, and will, I feel sure, require to be developed to a much greater extent, before the Medical Clinician and the Public Health Officer, can feel some measure of satisfaction. It is something, however, to know that we are doing much more now than we ever did before, and that co-operation between the Mental Hospitals and the general practitioners on the one hand, and the Public Health staffs on the other, has greatly improved within recent years. With regard to mental deficiency, it is a wonderful thing to me that useful employment and a place in the community has been found for so many of these persons who suffer from this affliction, and that the existence of those more severely handicapped is safeguarded by continual supervision, in order that they may receive their full measure of kindness and human understanding.

Mental Deficiency Statistics.

	Males	Females	Total
1. Number of defectives on register :			
(a) at home	8	5	13
(b) in institutions	3	3	6
	11	8	19
2. Number of defectives under supervision at home :			
(a) Statutory Supervision	7	4	11
(b) Voluntary Supervision	—	1	1
(c) On licence from institutions ...	1	—	1
Total under supervision ...	8	5	13
3. (a) Number of defectives in gainful employment	—	—	—
(b) Number attending occupation centres	2	2	4
(c) Number awaiting admission to Institution	1	—	1
Totals	3	2	5
4. Placed under supervision in 1955 ...	1	1	2
5. Placed under guardianship in 1955 ...	—	—	—
6. Admitted to institution in 1955 ...	—	—	—
7. Admitted to occupation centres 1955 ...	—	—	—
8. Visits paid during 1955 :—			
(a) To cases on Licence	8	—	8
(b) To Cases under Statutory Supervision	112	146	258
(c) To cases under Voluntary Supervision	—	4	4
(d) For home reports for institutions	6	4	10
	126	154	280

Mental Illness Statistics.

	Males	Females	Total
Number of patients discharged from Mental Hospitals during the year	6	7	13
Number of patients followed up	6	7	13
Number of visits made to patients during 1955	18	49	67
Number of reports on home conditions, requested by, and forwarded to mental hospitals	1	1	2
The Duly Authorised Officer dealt with the following cases from Mirfield during the year :—			
	Males	Females	Total
Certified	1	3	4

HOME NURSING SERVICE.

There was again a slight decrease in the number of cases during the year and the total number of visits to cases were also decreased. This was due to staffing difficulties during the year and the heavy winter during which there was a substantial amount of sickness among the staff. The system of employing Nurse Gamble as a relief nurse in all districts throughout the Division has proved sound administratively, and has facilitated the continuity of the care of patients throughout the year. The home nurse undertakes practical work under the direction of the general medical practitioners, and there has been at all times the friendliest co-operation and understanding between the doctors and the nurses. Increasingly, home nursing care is required for the chronic sick and infirm in their own homes, and this, together with the other social services available for such cases, is doing untold good in making it possible for them to remain in their own home environment, and among their friends and neighbours. There is little doubt that the demand for home nursing will grow.

1. No. of cases visited during 1955—

(a) Medical cases	...	...	...	...	...	...	124
(b) Surgical	...	...	...	...	...	...	42
(c) Infectious diseases	...	...	...	...	...	...	—
(d) Tuberculosis	...	...	...	...	...	...	4
(e) Maternal complications	...	...	...	...	...	...	1
Total							171

2. No. of visits paid during 1955 to—

(a) Medical cases	...	...	...	...	...	...	2,844
(b) Surgical cases	...	...	...	...	...	...	946
(c) Infectious diseases	...	...	...	...	...	...	—
(d) Tuberculosis	...	...	...	...	...	...	188
(e) Maternal complications	...	...	...	...	...	...	20
Total visits paid							3,998

MIDWIFERY.

I have pointed out for some years past the decline in domiciliary midwifery work in this area, which is largely due to the lavish availability of maternity beds in local hospitals. Only 15 per cent. approximately of all the births in the district took place in the mothers' own homes. Nevertheless, with the reduced staff of domiciliary midwives, they were kept busy throughout the year, and especially since they also undertake regular ante-natal visits to all patients in their own homes, attend the ante-natal clinics, and conduct classes in ante-natal exercises for expectant mothers. Gas and air analgesia was administered by the domiciliary midwives in 22 cases, and pethidine was administered in 13 cases.

The form which the maternity services in this country should take, and the manner in which they should be administered is receiving active consideration in all quarters. The divergence of the views expressed within the medical profession, however, leaves one little hope that an early and generally accepted formula can be found. In the Public Health Service it is felt that insufficient attention is paid to preparation for motherhood, and on this account the decline of the ante-natal clinics and of domiciliary midwifery work over recent years is regretted.

Details are given of the work done by District Midwives during the year :—

(a)

Details of Deliveries				Total No. of Cases
Dr. Not Booked		Dr. Booked		
Present	Not Present	Present	Not Present	
—	4	1	21	26

(b) Ante-natal visits	...	...	...	...	251
(c) Post-natal visits	...	...	...	...	379
(d) No. of cases receiving Gas & Air Analgesia					22
(e) No. of cases receiving Pethidine	...	...			13

The midwives sought medical aid on seven occasions, details of which are given below :—

(i) Pregnancy	...	...	...	...	2
(ii) Labour	...	...	...	...	2
(iii) Lying-in ...	...	...	...	...	Nil
(iv) The child	...	...	...	...	3

Pregnancy.

Ante-Partem Haemorrhage	...	...	...	...	1
Malpresentation	...	...	...	...	1

Labour.

Ruptured Perineum	2
-------------------	-----	-----	-----	-----	---

The Child.

Eye condition	...	...	...	...	1
Prematurity	...	...	...	...	1
Deformity	...	...	...	...	1

ANTE-NATAL CLINICS.

The proportion of expectant mothers attending the ante-natal clinic for complete or partial ante-natal care has again declined this year although the total number of attendances increased. Indeed it is becoming very doubtful whether the continuance of this clinic is justified. One hesitates to close it completely, feeling that those who do attend have something to gain which it is very difficult for them to get elsewhere. Apart from the medical aspects of pregnancy, prime importance is attached to the preparation of patients for motherhood, and it is perhaps in this field that the greatest scope for preventive work lies. It is felt that it is in this sphere of activity that the trained staffs of the Public Health Department can supply a need inadequately met at the present time, either by the general practitioner or hospital services, and as the value of this work comes to be more fully appreciated, it may well be that attendances at these clinics will again reach the proportions which they did immediately prior to the inception of the National Health Service, when upwards of 75 per cent. of all expectant mothers in this area attended the ante-natal clinics.

It is difficult to understand the reluctance of general practitioners and hospital medical staff to encourage patients to attend these Local Authority clinics, where by and large the work is complimentary to their own care and is in no sense competitive.

Relaxation classes were held at the Ings Grove Clinic, and during the year 100 attendances were made.

Ante-Natal.	1954	1955
No. of women who attended during the year	29	22
No. of women attending for the first time ...	17	12
Total No. of attendances	82	106

Post-Natal.		
No. of women who attended during the year	5	5
No. of women attending for first time ...	4	5
Total No. of attendances	6	5

HEALTH VISITING AND CHILD WELFARE.

In the County service the duties of health visiting are combined with those of school nursing, and this has the advantage of giving the individual nurse intimate knowledge and continuous supervision of the child and his family over a long period of years. In so far as the infant welfare aspect of the work is concerned, we in this Division concentrate our efforts on visits to the home, as it is considered that this provides the best environment in which to impart information which is necessary for the proper upbringing and development of the child, both physically and mentally. Any such advice which is given, without regard to the social circumstances and individual family considerations, is likely to be ineffective, and it is in this field of health education, that the health visitor having due regard to the positive requirements for physical and mental health of future generations stands supreme. I am very pleased to say that in this field of endeavour, and indeed in all her work the health visitors here enjoy the full support and co-operation of the general practitioners, and this of course is essential to the success of the work of both. The kindly and interested reception by the vast majority of parents is also an encouragement to the staff, and an indication of the general desire for improving standards of parentcraft. It is becoming more and more obvious that the defects and social maladjustments which are becoming evident in an increasing number of children and young adults, have their roots in mismanagement in the earliest years of life, and it is towards preventive work in the field of mental health that the health visitors attention should be increasingly directed.

The child welfare clinics also have their useful part to play, and enable the medical officers and nurses to see larger numbers of children in the pre-school years, than could economically be done by home visiting alone. It is here too that the various immunising procedures are carried out, and the use of welfare foods is encouraged. Indeed it is only through these clinics that cod liver oil, orange juice, and national dried milk, can now be obtained, and there can be little doubt of the beneficial effect which these dietary supplements have had in the life of the young children of the country. It is true to say that here again the stress is on health education, and in association with certain of these clinics talks have been given to groups of mothers, and young mothers' clubs have been held in the evenings. The statistical summary of these services shows the ever extending influence they exert.

Number of visits paid by health visitors during year :—

(a) To expectant mothers :—	1954	1955
(i) First visits 	40	34
(ii) Total visits 	117	96
(b) To children under 1 year of age :—		
(i) First visits 	178	156
(ii) Total visits 	2,930	2,715
(c) To children between the ages of one and five years :—		
(i) Total visits 	1,076	1,100
(d) To other classes :—		
(i) Total visits 	1,672	1,650
(e) No. of attendances at Clinics 	307	195
(f) No. of parentcraft lectures 	71	75
(g) No. of visits to schools for medical inspection, minor ailments, cleanliness surveys, etc. 	394	429
(h) No. of home visits in connection with school-children	371	293

Number of children who first attended the Child Welfare clinic during the year and who at the date of their first attendance were under 1 year of age 81

Number of children who attended during the year and who were born in :—

1955 	75
1954 	87
1953-1950 	51
Total 	213

Number of attendances during the year made by children who at the date of attendance were :—

Under 1 year 	1370
1, but under 2 	185
2, but under 5 	57
Total 	1612

Number of medical consultations 824

PROBLEM FAMILIES.

Although in Mirfield the average standard of parental care is quite satisfactory there are, of course, many families who require greater supervision because of their inability or unwillingness to maintain a consistently satisfactory level. In this connection the staff work in close co-operation with the officials of the National Society for the Prevention of Cruelty to Children, and I must record my thanks to Inspector Jenkins for his conscientious work and ever ready co-operation throughout the year.

So far as the care of the children in such families is concerned, neglect is the principal cause for concern, and this usually in the form of lack of cleanliness, and failure to provide adequate clothing, bed clothing, etc. There can be little doubt that whereas a complete cure is seldom to be expected, supervision by trained staff does much to prevent the disruption of these families, and leads at least to an acceptable minimum of living standards in the majority of cases.

Inspector Jenkins reports as follows :—

1.	Number of cases dealt with during 1955	...	...	...	4
2.	Classification :				
	(a) Neglect	...	...	...	3
	(b) Ill treatment	...	...	...	1
3.	Source of information :				
	(a) General public	...	...	...	2
	(b) Other officials	...	...	...	1
	(c) Discovered by Inspector	...	...	...	1
4.	Number of children involved :				
	(a) Boys	...	...	...	3
	(b) Girls	...	...	...	6
5.	Number of visits paid	...	...	...	63

Five children were removed from their home. The parents were later prosecuted, found guilty, and the children were brought before the Juvenile Court and placed in the care of the Local Authority.

CONVALESCENT HOME TREATMENT.

There were no requests for the County Council to provide convalescent home treatment under Section 28 of the National Health Service Act, 1946.

HOME HELP SERVICE.

The Home Help Service in Mirfield was maintained at the same level as last year. This is accounted for by the reduction in the number of maternity cases attended and an increase in the chronic sick and infirm cases attended. Our permitted Divisional establishment during the year was 28 full-time Home Helps, and this was utilised in the form of approximately 70 part-time workers. The administration of such a service is extremely difficult, and I must thank Nurse Day, the Senior Health Visitor, for the capable and efficient manner in which she has dealt with the administration in detail. It is quite remarkable how few major difficulties have been encountered, and the part-time staff have worked conscientiously, and with due regard to the needs of individual cases.

It will be seen that 93 per cent. of all cases supplied with Home Help fall into the category of chronic sick and infirm, and it is largely due to the provision of such a service, taken in conjunction with others, such as home nursing, that so many elderly and infirm persons are able to remain in their own homes, and among their friends and families, rather than having to spend their declining years in hospitals or institutions. It is also a pleasure to see that the standards of cleanliness and tidiness in most of these homes do not deteriorate, due to the age and infirmity of the occupants.

Reason for Provision	No. of Cases	Hours worked	Percentage
Maternity	4	222	1.5
Tuberculosis	—	—	—
Chronic Sick & Infirm	81	14241	93.1
Others	4	833	5.4
Totals ...	89	15296	100

SCHOOL HEALTH SERVICE.

The following part of the report shows in statistical form something of the work carried out in connection with the supervision and care of school children in Mirfield. The foundation of the School Medical Service is the routine medical inspection which enables an assessment to be made of the condition of the children in the age groups, entrants, eight year olds, first year secondary school, and leavers. From the facts elicited at these examinations, it is possible to deduce the lines which the School Medical Service should follow, in improving even on to-day's high standard of physical fitness, which is general among school children. The statistical records have been sectionalised to show the activity in regard to different aspects of the work, and it requires little imagination to understand the cumulative value of this service over the years.

There are, of course, disturbing factors in connection with the care of school children, which cannot be set to rights over-night, but equally I believe it is true to say that there has been a gradual but significant improvement in the facilities available over the past ten years. There is, for example, quite inadequate special schooling available for the educationally subnormal child, and there is equally no doubt that the child guidance facilities will require to be greatly expanded. This question of behaviour difficulties, maladjustments, and psychological upset is becoming more and more evident in the cases referred by parents and school teachers, for examination by School Medical Officers. Such cases can usually only be dealt with adequately by the Child Guidance Clinic, but because of the small amount of time which they have available, it often happens that the condition is firmly established before referral, and this prolongs the time required for treatment and often prejudices the outcome.

On the other hand in conjunction with the improved general condition of the school children, the number of defects recorded at the medical examinations is declining year by year, and I have already referred to the fact that the incidence of louse infestation is this year lower than it has ever been before. The health education talks which the nurses give to senior girls at the secondary modern school are, I believe, successful in interesting the mothers of to-morrow, in the basic principles of family life and personal hygiene, and I feel that time will bring an extension in this field of endeavour also.

During the year we commenced for the first time the scheme of tuberculin testing children in the thirteen year old group, and offering B.C.G. vaccination to those who appear never to have acquired any natural immunity to the disease. Inclusion of a child in the scheme is, of course, entirely voluntary, and it was disappointing that only 66 per cent. of the parents approached were willing for these procedures to be carried out. One feels, however, that as the novelty wears off, this percentage is likely to increase. No difficulties were encountered with the scheme, other than the administrative difficulty of fitting it into an already crowded programme. I must record with gratitude, however, the co-operation and tolerance of the headteachers of all the schools involved.

Total number of children examined at Routine Medical Inspections.

Entrants	...	...	...	...	...	...	149
7-8 Year Group	...	...	...	...	...	...	313
Intermediates	...	...	...	...	...	...	110
Leavers	...	...	...	...	...	...	157
Total							<u>729</u>

Total number of children who have been re-examined for follow-up defects 22

Standards of physical development classified into age groups :—

Age Group	Physical Condition Above Average	Physical Condition Average	Physical Condition Poor
Entrants	54	95	—
7-8 Years	153	160	—
Intermediates	62	48	—
Leavers	82	73	2
Totals	351	376	2

Percentages.

Age Group	Physical Condition Above Average	Physical Condition Average	Physical Condition Poor
Entrants	36·2	63·8	—
7-8 Years	48·9	51·1	—
Intermediates	56·4	43·6	—
Leavers	52·2	46·5	1·3
Totals	48·1	51·6	0·3

During the year 14 free issues of dietary supplements in the form of iron tonics were made to school children where recommended by the School Medical Officer.

The following table shows the type of defects discovered at the routine School medical inspections :—

Defects Table.

Defects	Recommended for Treatment	Recommended for Observation	Totals
Skin	6	10	16
Ears :			
(a) Hearing ...	3	3	6
(b) Otitis Media	2	11	13
(c) Other ...	1	—	1
Nose and Throat	3	17	20
Speech	3	3	6
Cervical Glands ...	1	2	3
Heart and			
Circulation ...	1	—	1
Lungs	2	23	25
Developmental :			
(a) Hernia ...	1	13	14
(b) Other ...	1	7	8
Orthopaedic :			
(a) Posture ...	5	13	18
(b) Flat foot ...	3	8	11
(c) Other ...	21	32	53
Nervous System :			
(a) Epilepsy	—	—	—
(b) Other	—	4	4
Psychological			
(a) Development	—	10	10
(b) Stability	—	8	8
Other Defects ...	4	3	7
Totals ...	57	167	224

SPECIAL EXAMINATIONS.

In accordance with the requirements of the Education Act, 1944, a number of children have been referred by the Education Authority which has necessitated the arrangement of special examinations. During the year 9 children were examined involving 12 examinations altogether. The following recommendations for special education were made :—

Education in a School for the Partially Sighted	...	...	...	I
" " " " " Physically Handicapped	...	...	...	I
" " " " Educationally Subnormal Pupils	...	...	...	I

Reported to Local Authority for the purposes of the Mental Deficiency Acts—

Section 57 (3) (incapable of receiving education at school) —
Section 57(5) (require supervision after leaving school) ... —

One child was admitted to a School for Partially Sighted Pupils. There were no discharges from special schools during the year.

The following table shows the number of children from Mirfield receiving, and those awaiting, education in special schools at 31st December, 1955 :—

Type of School	No. of children receiving special education	No. of children awaiting special education
School for partially sighted ...	1	—
School for the deaf	1	—
Open Air School for Delicate pupils	1	—
School for physically handicapped	2	—
School for Educationally subnormal pupils	1	3
Home Tuition	1	—

EYES.

The eyes of all children attending school are tested at school by the school nurses each year, and those whose vision is worse than 6/9 Snellin in one eye are referred for further examination by the Ophthalmologist who attends the clinic at Ings Grove as the need arises. This ensures the quick treatment of defective vision and has its preventive aspect in the preservation of good eyesight. During the year there has been no delay in the provision of spectacles.

The following statistics give details of the cases examined :—

Number of children examined for the first time	...	43
Number of re-examinations	... ..	135
Total number of attendances	... ..	178
Number of sessions held during the year	... ..	16
Number for whom spectacles were prescribed for first time		19
Number for whom spectacles were prescribed subsequently		58
Number referred for other treatment	... ..	2
Number referred for operative treatment	... ..	2

MINOR AILMENTS

Minor ailments are treated by the nurses both at the clinics and in the schools. The following table gives details of such treatments during 1955 :—

Minor Ailment	No. treated
Skin :	
Ringworm—body	—
Scabies	—
Impetigo	20
Other skin diseases	4
Eye Disease :	
(External and other, but excluding squint, errors of refraction and cases admitted to hospital).	1
Ear Defects :	
Otitis media	—
Otorrhoea	—
Other	—
Miscellaneous	332
(e.g., minor injuries, bruises, sores, chilblains, etc.)	
Total	357
Total number of attendances at Authority's Minor Ailment Clinics	396

ULTRA VIOLET LIGHT CLINIC.

The Ultra Violet Light Clinic continued to be held during the year at Ings Grove Clinic. Cases attended twice weekly for an initial period of six weeks, after which they were re-examined by the doctor and the necessity for a continuation of treatment decided. The following table gives details of attendances and the types of cases treated :—

Total No. of sessions held	...	...	...	...	73
No. of sessions held weekly	...	...	...	...	2
No. of cases treated	...	...	...	...	59
No. of treatments	...	...	...	...	574
Average number of attendances per session	...	...	...	...	9.5
Average length of course of treatment	...	...	...	...	8 sessions
No. on register at end of year	...	...	...	...	11

Details of cases treated :

Debility following Tonsillectomy	...	...	...	...	1
General Debility	...	...	...	...	6
Anaemia and Bronchitis	...	...	...	...	1
Recurrent Bronchitis	...	...	...	...	10
Asthma	...	...	...	...	2
Frequent Colds	...	...	...	...	15
Catarrh	...	...	...	...	2
Tuberculous Glands	...	...	...	...	1
Styes	...	...	...	...	2
Chilblains	...	...	...	...	4
Boils	...	...	...	...	1
Re-current Tonsillitis	...	...	...	...	4
Malnutrition	4
Otitis media	2
Post Rheumatic Fever	1
Post Influenzal Debility	3

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SPEECH THERAPY.

The Speech Therapist resigned in December of last year, and it was not possible to obtain a replacement for her until September, from which time one half-day session was held every week at the Ings Grove Clinic. During the nine months we were without the services of a Speech Therapist, a considerable waiting list was built up, but by the end of the year a start had been made in reducing this. Cases are referred mainly from School Medical Inspections and by the Headteachers of the schools. I give below details of attendances at this clinic.

No. of half-day sessions held during year	...	...	...	16
No. of new cases treated during year	...	...	...	4
No. of cases attending for treatment from previous year	...	...	...	7
Total number of cases treated	...	...	...	11
No. of cases awaiting treatment at end of year	...	...	...	—
No. of visits made to schools	...	...	...	1
No. of home visits	...	...	...	—
Analysis of Cases Treated :				
		Boys	Girls	
Stammerers	...	3	2	
Defects of Articulation—				
(a) Dyslalia	...	2	—	
(b) Rhinolalia, due to Cleft Palate	...	1	1	
Defective speech due to				
(1) Educational sub-normality	...	1	—	
(2) Deafness	...	1	—	
Analysis of Cases Discharged :				
Discharges during year	...	1	2	
Speech normal	...	—	2	
Non-co-operation	...	1	—	

CONSULTANT PAEDIATRIC CLINIC.

Dr. M. F. G. Buchanan of the Department of Child Health, Leeds University, attended Elm Bank Clinic in a consultant capacity and during the year twenty-two sessions were held. Cases were referred to him both from the Assistant County Medical Officers and from General Practitioners in the area.

I give below details of attendances and the types of cases seen :—

No. of sessions held during the year	...	...	...	20
No. of individual patients seen :				
(a) Pre-school children	...	...	...	7
(b) School children	...	...	...	46
Total number of attendances	...	...	...	91
Types of cases seen :				
(a) Enuresis	...	...	...	24
(b) Obesity	...	...	...	1
(c) Heart Defects	...	...	...	2
(d) Epilepsy	...	...	...	3
(e) Congenital abnormality	...	...	...	1
(f) Lung defect	...	...	...	6
(g) Miscellaneous	...	...	...	16
Total				53

CHILD GUIDANCE CLINIC.

Dr. M. M. MacTaggart, the County Psychologist, continued to hold her clinic once a week at Ings Grove, Mirfield, until the end of July, and from October a properly staffed Child Guidance Clinic has been conducted by Dr. S. M. Leese, the Consultant Child Psychiatrist. The staff comprises, medical psychiatrist, educational psychologist, and psychiatric social worker, and there is no doubt that great benefit will follow from the establishment of this clinic in the area. Children are, of course, referred to this centre from other districts, and one's only regret is that so little time is available for more preventive work.

	Boys	Girls	Total
1. No. of new cases seen during year	6	3	9
2. No. of cases continuing attendance from previous year	7	6	13
3. Total number of cases seen during year ...	13	9	22
4. Total number of attendances made during the year for—			
(a) individual interview	39	13	52
(b) group therapy	43	10	53
5. No. of cases recommended for residential treatment in—			
8. (a) Hostel for Maladjusted Children ...	1	—	1
(b) E.S.N. Special School	—	2	2
(c) Other	2	—	2
6. No. of cases referred for psychiatric opinion	1	—	1
7. No. of cases examined at the particular request of the Magistrates	—	—	—
8. Types of problem for which cases were referred to Child Guidance Clinic—			
(a) Behaviour	7	4	11
(b) Delinquency	—	—	—
(c) Nervous problems	3	5	8
(d) Enuresis	1	—	1
(e) Others	2	—	2

PHYSIOTHERAPIST.

The Physiotherapist continues to attend in Mirfield for one half-day session each week, and during the year 47 half-day sessions were held. The following table shows details of attendances and types and numbers of defects referred :—

No. of children on register 1st January, 1955	...	...	14
No. of children referred for treatment	...	...	11
Total number of attendances	...	...	285
Total number of treatments	...	...	310
No. of children discharged	...	...	12
No. of children on register 31st December, 1955	...	...	13

Defect.	Number.
Asthma	4
Bronchiectasis	2
Bronchitis	2
Postural	10
Flat feet	4
Knock knee	1
Scoliosis	1
Poliomyelitis	1
	<hr/> 25 <hr/>

Chiropody.

49 half-day sessions were held by the Chiropodist at Mirfield Clinic during 1955. A total of 263 cases was seen by the Chiropodist. The 263 cases seen made 588 attendances and the following table gives the types and numbers of conditions treated :—

Defects	No.	Defects	No.
Hallux Valgus	27	Under/Overlapping Toes	54
Hammer Toes	18	Corns & Callus	72
Metatarsalgia	6	Verruca	49
Nail Conditions	24	Pes Cavus	2
Weak Foot	15	Chilblains	32
Tinea Pedis	3	Septic Conditions	3

Cleanliness Inspections.

Three routine inspections were carried out at each school by the school nurses and a total of 4,555 inspections and re-inspections was carried out. In 157 instances infestation was detected and this involved 110 individual children, the condition of some of the children being unsatisfactory on more than one occasion. It should be pointed out that in the majority of cases the degree of infestation is extremely light.

The remedial procedure adopted on the discovery of these defects is to notify the parents informally in the first instance, visiting if necessary to give advice on the methods of dealing with infestation. If cure is not effected the nurse visits the home and interviews the parents, and finally, if it is evident that insufficient care is being exercised, the Statutory Notice under the Education Act, 1944, is sent requiring the child to be cleansed to the satisfaction of the Medical Officer or of the person appointed by him for that purpose within 48 hours. No Statutory Notices were issued during the year.

MASS RADIOGRAPHY SURVEY.

The Mass Radiography Unit of the Leeds Regional Hospital Board visited the district in August and I give below the results supplied to me by the Unit. It is not possible, however, to draw any conclusions at all from such evidence since the persons examined constitute only a small proportion of the population and are not necessarily representative of the population taken as a whole. The information given is in respect of people actually examined during the survey and may therefore, include persons normally resident in other areas.

	Males	Females	Total
1. Examinations carried out :			
(a) Miniature X-rays taken	424	441	865
(b) Number recalled for large film ...	11	12	23
2. Analysis of Provisional Findings :			
(a) Cases of active Tuberculosis ...	—	—	—
(b) Cases of inactive Tuberculosis ...	3	3	6
(c) Other abnormalities (see below)	7	5	12
(d) Failed to re-attend for large film	—	—	—
3. Analysis of Abnormalities other than Tuberculosis (2(c) above) :			
Pulmonary fibrosis : non-tuberculous ...	1	2	3
Primary Malignant Neoplasms ...	2	—	2
Pleural thickening	2	2	4
Cardiovascular lesions : congenital ...	1	—	1
Cardiovascular lesions : acquired ...	1	1	2
Awaiting classification	—	—	—

B.C.G. SCHEME.

Under this scheme all school children in their thirteenth year of life, subject to parental consent, are given a skin (Mantoux) test to determine whether they have previously encountered and overcome infection with the tubercle bacillus. Those whose test is negative are given an injection of B.C.G. vaccine into the skin since experience of this in other countries has shown that a degree of immunity to tuberculosis persists for a number of years. It is hoped in this way to reduce the incidence of tuberculosis in young adults, particularly in the years following school life when they are often subject to special risk, both because of their age and because for the first time they are taking their place in industry and hence more liable to come into contact with hidden cases.

The scheme commenced in February and the routine adopted was a preliminary Tuberculin Jelly test together with a preliminary Tuberculin (Mantoux) test of a strength of 1 : 1,000 given intradermally in the forearm on a Tuesday. The results were examined on the following Friday and positive reactors were eliminated as naturally protected and not requiring vaccination. Negative reactors were vaccinated with B.C.G. intradermally over the site of the insertion of the deltoid muscle.

Such vaccinations were inspected after eight to ten weeks and a final conversion test of 1 : 1,000 O.T. (old tuberculin) was given again intradermally to test the efficacy of the vaccination.

Children who, through illness and other causes missed readings of tests and vaccinations were dealt with later in the year, thus completing the B.C.G. vaccinations of the 1942 group of children. The opportunity which we took to test the value of Tuberculin Jelly testing as a screening procedure convinced us that in children of this age it is not sufficiently reliable, and reliance will in the future be placed only on the Mantoux test.

The following is a statistical summary of the results of the scheme for the year :—

No. of thirteen year olds on school register	...	...	138
No. offered testing and vaccination	...	...	135
No. found to have been vaccinated previously	...	...	3
No. of acceptances	...	...	88
Percentage of acceptances	...	...	66·7%
No. of children tested	...	...	88
Result of Mantoux test :—			
(a) Mantoux Positive	...	...	32
(b) Mantoux Negative	...	...	56
Percentages :—			
(a) Mantoux Positive	...	...	36·3%
(b) Mantoux Negative	...	...	63·7%
No. of children vaccinated	...	...	56
No. of conversions at ten weeks	...	...	56

No severe local or general reactions were encountered in any case.

86 children were given Jelly Tests and of these 10 or 32·2% of the positive results did not agree with the Mantoux Test, and 10 or 18·0% of the negative results did not agree. Hence the total error in the Jelly readings for all the children was 23·2%.

The section of the report which follows, relating to the Sanitary Circumstances of the area and the work of the Sanitary Inspectors, has been compiled by Mr. H. H. Johnson, Chief Sanitary Inspector.

SANITARY CIRCUMSTANCES OF THE AREA.

Sanitary Conveniences.

The position existing at the year ending 1955 is as follows :—

Number of Privies	93
„ Privy Middens	51
„ Water Closets	4,704
„ Waste Water Closets	17
„ Pail Closets	75

Number of Water Closets provided during the year is as follows :

By conversion of Privies to Water Closets	5
By provision of extra closet accommodation to existing property where insufficient	22
By provision to new property	76
By conversion of Waste Closets to W.C's.	13
By conversion of Pail Closets to W.C's.	—
Total	116

Conversion of Privies to Chemical Closets	7
No. of Chemical Closets Provided	—
No of Chemical Closets discontinued	1
Number of Dry Ashpits	5
Number of Dust Bins	4,257

Ward	Privies	W.C.	Waste W.C.	Pail Closets	Bins
Eastthorpe Ward ...	9	1117	—	2	981
Hopton Ward ...	36	716	8	43	795
Battleyford Ward ...	24	1712	9	12	1359
Northorpe Ward ...	24	1159	—	18	1122
Totals ...	93	4704	17	75	4257

It is noticeable that the number of pail closets has increased considerably. This is in accordance with the policy of the department to substitute where no conversion to the water carriage system is possible, chemical closets for privies and earth closets. These are emptied weekly and the increase throws additional work on the Department but is, from a public health point of view, to be advocated.

SANITARY INSPECTION OF THE DISTRICT.

Details of inspections made

Total number of inspections made	...	...	...	...	...	...	3180
							No of
Dwelling Houses.							Inspections
Ordinary	...	...	...	...	...	...	392
Municipal Houses	...	...	...	...	...	...	52
Municipal Applications	...	...	...	...	...	...	186
Housing Act 1936, Overcrowded	...	...	...	...	...	...	2
Housing Act, 1936	...	...	...	...	...	...	250
Houses (Cons. Regs.)	...	...	...	...	...	...	9
Re Notifiable Disease	...	...	...	...	...	...	23
Disinfection—Infectious Disease	...	...	...	...	...	...	9
Improvement Grant	...	...	...	...	...	...	101
Certificate of Disrepair	...	...	...	...	...	...	12
Sanitary Conveniences.							
Water Closets	...	...	...	...	...	...	54
Privies	...	...	...	...	...	...	58
Cesspools	...	...	...	...	...	...	2
Septic Tanks	...	...	...	...	...	...	15
Refuse Storage.							
Ashbins	...	...	...	...	...	...	175
Drains.							
Inspections	...	...	...	...	...	...	109
Tests	...	...	...	...	...	...	25
Sewers.							
Sewers	...	...	...	...	...	...	28
Factories.							
Factories (with mechanical power)	...	...	...	...	...	...	7
Factories (means of escape)	...	...	...	...	...	...	1
Food Storage, Preparation, etc.							
Food Premises	...	...	...	...	...	...	49
Slaughter Houses	...	...	...	...	...	...	576
Food Byelaws	...	...	...	...	...	...	14
Meat & Food Inspections	...	...	...	...	...	...	588

	No. of Inspections
Smoke Abatement and Atmospheric Pollution.	
Atmospheric Pollution...	77
Boiler Houses ...	1
Smoke Observations ...	5
Rodent Control.	
Inspections ...	238
Shops.	
Inspections—Shops Act ...	19
Miscellaneous.	
Inspections ...	112

NOTICES SERVED.

Informal Notices Served	97	} 102
Informal Notices outstanding at end of 1954	5	
Informal Notices complied with	89	
Statutory Notices Served	4	
Statutory Notices complied with	1	
Notices Outstanding at end of 1955	16	
Verbal Notices given and complied with for the Remedy of Defects, etc.	27	
Letters sent	14	
Complaints received	188	
Complaints confirmed	179	

SUMMARY OF SANITARY IMPROVEMENTS EFFECTED.

Houses.

Houses made fit	62
Lighting improved	—
Washing accommodation improved	1
Overcrowding Abated	—
Roofs Repaired	24
Eaves, Spouting, Rain Water Fall Pipe Repaired	15
Rain Water Pipe Disconnected	1
External Walls Repaired	4
Water improved	3
Internal Walls Repaired	5
Floors Repaired	2
Doors Repaired	7

Houses (cont.)

Fire-places Repaired	...	...	...	...	...	1
Dangerous Structures Removed	...	...	...	...	...	6
Coal Stores Improved	...	...	...	...	...	6
Ventilation Improved	...	...	...	...	...	4
Ceilings Repaired	...	...	...	...	...	5
Chimneys Repaired	...	...	...	...	...	3

Drains.

Repaired & Re-constructed	...	...	...	...	...	6
Cleansed by Owner	...	...	...	...	...	8
I.C. Constructed	...	...	...	...	...	12
Ventilated	...	...	...	...	...	15
New drain constructed	...	...	...	...	...	20
Open for inspection	2

Accumulations.

Manure	2
Other	3

Animals, Poultry, etc.

Nuisances Abated	1
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Ash-bins and Ash-places.

Bins Renewed	175
Ash-places Abolished	5

Closets.

Cleansed or Limed	2
Reconstructed & Repaired	...	...	...	...	...	...	35
Privies Repaired	...	...	...	...	...	...	2
Tub Closets Repaired	...	...	...	...	...	...	1

Sinks.

New Sinks Provided	...	...	...	...	...	...	15
Waste Pipe Trapped & Repaired	...	...	...	...	...	...	12

SHOPS ACT, 1934.

19 inspections have been made under the Shops Act, 1934, during the year. No contraventions of the Act were found.

Licensed Premises.

Following the survey of Sanitary accommodation provided at Licensed Premises in the Area, interviews have been held with representatives of a number of the Breweries concerned, and discussions have taken place on suggested improvements.

The sanitary accommodation at three of the licensed premises was improved during the year and is now satisfactory.

SMOKE ABATEMENT AND ATMOSPHERIC POLLUTION.

The emission of smoke from industrial premises has been observed during the year. In general there has been an improvement in smoke emission. One or two individual factories only cause some concern.

It has to be remembered that under existing legislation the emission of black smoke for a period not exceeding three minutes each half hour does not constitute an offence and a factory may emit smoke more or less continuously in moderate quantities.

The atmospheric pollution stations were maintained during the year. The records show that no serious increase in pollution is taking place in the area and the deposits follow a similar pattern as is observed nationally.

The readings of the stations are set out in the following table.

MONTH	FIELD HEAD				HOPTON LANE			EASTHORPE		KNOWL HOUSE
	Rainfall ins.	Total Solids Tons/Sq. M.	Mg. SO ₃ /Day	Rainfall ins.	Total Solids Tons/Sq. M.	Mg. SO ₃ /Day	Rainfall ins.	Total Solids Tons/Sq. M.	Mg. SO ₃ /Day	
January ...	1.53	15.20	4.03	1.53	13.85	3.29	1.96	19.63	2.34	
February ...	1.53	7.82	2.48	1.43	8.85	2.07	1.75	10.03	1.46	
March ...	2.15	14.01	1.59	2.0	11.96	2.31	2.32	24.70	1.77	
April ...	0.77	10.55	1.50	0.77	9.40	1.61	0.77	13.63	2.24	
May ...	*	*	1.74	2.71	14.30	1.30	2.78	15.96	1.04	
June ...	1.28	12.02	1.45	1.49	12.22	1.28	1.55	19.77	0.72	
July ...	0.12	8.08	1.21	0.46	4.44	0.83	0.63	10.49	0.69	
August ...	0.15	14.08	1.19	0.41	10.87	1.07	0.46	10.05	0.53	
September ...	0.77	9.22	1.68	1.12	16.02	1.40	1.13	15.54	1.00	
October ...	1.54	12.27	2.28	1.79	12.36	1.97	1.80	15.60	1.58	
November ...	1.54	8.02	3.41	1.54	6.59	1.93	1.58	13.64	1.20	
December ...	*	*	3.63	3.37	19.78	2.08	3.66	22.17	1.96	

*No reading available. Damage to equipment.

PREMISES AND OCCUPATIONS WHICH CAN BE CONTROLLED BY BYELAWS AND REGULATIONS.

All premises and occupations within the district which can be controlled by byelaws are already so controlled. There are no lodging-houses or underground sleeping rooms and five van dwellings only in the district.

One site is licensed to accommodate eight trailer type caravans.

WATER.

The district receives the bulk of its supplies from Huddersfield Corporation. The supply is constant and direct to the houses.

There has been some improvement in the supply during the year, particularly in respect of lack of pressure. This is attributed to the operation of the new Digley Reservoir and the improvement is appreciated.

A number of houses still complain of a poor supply of water but this is now attributed to defective service pipes and these cases are under investigation.

With the exception of two houses which will be the subject of demolition orders in the near future the whole district is now on a piped supply from the mains. We may, I think, consider this to be another important step in Public Health progress in the district.

PLUMBO-SOLVENCY OF WATER SUPPLIES.

Two samples of water from the Huddersfield Corporation mains supply were submitted for examination as follows :—

SUPPLY Date Sample Collected	Address at which collected	RESULT OF EXAMINATION		P.H. Value
		Approx. Length of Lead Service Pipe	Lead Content (grains per gallon)	
Huddersfield Corporation				
After standing in pipe for a measured period of $\frac{1}{2}$ hour				
25-3-55	Council Offices, Mirfield	35 ft.	Nil	7.0
27-9-55	do.	35 ft.	Nil	7.8
After standing in pipe all night				
25-3-55	Council Offices, Mirfield	35 ft.	Nil	7.0
27-9-55	do.	35 ft.	Nil	7.6

DRAINAGE AND SEWERAGE.

Except in isolated cases the district is provided with sewers. No other extension has been made during the year, with the exception of sewers to the housing estates. Consideration should now be given to the question of sewer extension to enable further areas to be put on the water carriage system of sewage disposal, as referred to under the heading "Sanitary Conveniences."

RIVERS AND STREAMS.

The River Calder runs through Mirfield and is in a polluted state when it enters the district. Considerable improvement has been made in the disposal of trade effluent from the majority of factories in the area which now enters the sewer, and as a result is improving the condition of the Calder.

HOUSING.

During the year 50 houses were completed by the Council. In addition 26 private houses were completed by private enterprise. This rate of building is most encouraging and has materially improved the housing situation in the district.

The problem of the many sub-standard houses in the district has for some time been a deep concern. It is encouraging to be able to report that during the past year it has been possible to deal with 17 such houses, 3 under the Housing Act, Section 12 (Closing Orders) and 14 by informal action.

HOUSING ACT, 1949,—IMPROVEMENT GRANTS.

The intention of the Council to take every action possible to improve the housing conditions in the district is evidenced by their decision to make grants under the above Act for the improvement of suitable houses. During the year 12 such grants have been approved, amounting to £1,505, as against 22 grants amounting to £3,015 in the previous year. The work involved has thrown additional strain on the Department, but is felt to be well worth while.

HOUSING POINTS SCHEME.

The inspection of applicants under the Council's Points Scheme was continued during the year. The scheme continues to work reasonably satisfactorily but I feel that in the near future the scheme will have to be revised in relation to the overall housing needs of the district.

OVERCROWDING.

Two new cases of overcrowding were found during the year. The position of the statutory overcrowding cases in the area is, very satisfactory; only thirteen cases are known to exist. Many acute cases of moral overcrowding however still exist and the figures do not include those families who are living with parents and friends and are without a house of their own.

Overcrowding Particulars.

(1)	(a)	Number of dwelling houses overcrowded at the end of the year	...	...	...	...	13
	(b)	Number of families dwelling therein	...	...	...	...	13
	(c)	Number of persons dwelling therein	...	...	...	...	70
(2)		Number of new cases of overcrowding reported during the year	...	...	...	...	2
(3)	(a)	Number of cases of overcrowding relieved during the year	...	...	...	...	—
	(b)	Number of persons concerned in such cases	...	...	...	...	—

INSPECTION AND SUPERVISION OF FOOD.

Milk Supply.

Regular inspections have been made at all dairy premises in the district and the provisions of the Milk and Dairies Regulation, 1949, as applicable to dairies and distributors have been enforced. The common practice of depositing milk bottles and crates on footpaths has been discontinued, apart from isolated instances which are dealt with as they arise.

Number of distributors registered in the area	...	...	34
Number of Dairies registered in the area	...	...	3

MILK (SPECIAL DESIGNATIONS) REGULATIONS 1949.

The licences issued by the Council under the above Regulations are as follows :—

Tuberculin Tested (Dealers)	...	...	...	...	12
Tuberculin Tested (Supplementary)	...	...	...	...	14
Pasteurised (Dealers)	...	...	...	...	12
Pasteurised (Supplementary)	...	...	...	...	16
Sterilised (Dealers)	...	...	...	...	14
Sterilised (Supplementary)	...	...	...	...	6

There were no contraventions of the Regulations during the year.

The Milk (Special Designations) (Specified Area) (No. 3) Order, 1953, became operative in the District as from 1st January, 1954. It is now an offence to sell undesignated milk in the district and has abolished the use of the hand delivery churn and sale of loose milk. All milk is now delivered in sealed bottles.

FOOD AND DRUGS ACT, 1938.

The West Riding County Council, acting as Food and Drugs Authority for the area, submitted during the year 40 samples for analysis under the Act.

Number of Samples taken under the Food and Drugs Act, 1938.

Milk		Drugs		Other Foods	
Genuine	Adulterated	Genuine	Adulterated	Genuine	Adulterated
22	3	—	—	15	—

Number of proceedings—Nil

Cautions issued—Nil

Note on samples of milk classified by the Public Analyst as Adulterated.

The 3 milk samples classified as adulterated were found to be slightly deficient in fat content but on "appeal to Cow" samples being taken the milk was found to be of naturally poor quality.

FOOD BYELAWS.

Close attention has been paid during the year to the handling and wrapping of food as controlled by the Byelaws. There has generally been a marked improvement particularly in the display of unwrapped food-stuffs. Details of contraventions found at the various food premises are as follows :—

Type of Premises	No. of Premises	No. of Contraventions
General Grocery	43	2
Restaurants, Cafe's, Canteens, &c. ...	17	—
Confectionery	11	—
Bakehouses	5	—
Fruit & Vegetables	10	—
Wet Fish	11	1
Fish Frying	11	6
Butchers	19	—
Premises used for preparing of sausages, &c.	12	—

The contraventions found were mainly instances of unwrapped foodstuffs and of confectionery being displayed on open counters where they are liable to contamination by the public.

I am particularly pleased with the progress made in food hygiene in the district since the Food Byelaws were introduced. The Food Traders in general have co-operated with the department most satisfactorily and there is now a noticeable improvement throughout the area in the display of unwrapped foodstuffs and the handling of food generally.

The department has achieved these results by regular visits of inspection and informal discussions with traders and this work continued throughout the year.

REGISTRATION OF FOOD PREMISES.

(a) Ice Cream.

Twenty-seven premises are registered for the sale of ice cream (pre-packed).

Two premises are registered for the sale and manufacture of ice cream (Cold Mix).

Visits have been made to all registered premises during the year. Two premises only manufacture ice cream and both are manufacturing the complete Cold Mix and comply with the requirements of the Ice Cream (Heat Treatment Regulations) 1947.

(b) **Register of Food (Preparation and Manufacture) Premises.**

Twelve premises are registered for the preparation or manufacture of food products.

Eleven are registered for the preservation of fish by cooking.

All the premises now comply with the requirements of the Food & Drugs Act and have been well maintained during the year.

BAKEHOUSES.

Regular inspections have been made at the five bakehouses in the area. Throughout the year the general standard of cleanliness has been satisfactory.

SLAUGHTERHOUSES.

There is one licensed slaughterhouse only in the district. The Public Abattoir at Spenborough is available to any traders wishing to carry out their own slaughtering.

During the year regular post mortem inspections of all pigs slaughtered at the Bacon Factory were carried out. Details of inspections and condemnations are shown as follows :—

No. of Pigs Slaughtered	CONDEMNATIONS			
	Tuberculosis	Weight lbs.	Other causes	Weight lbs.
20,483	21 carcasses and organs	3,135	15 carcasses and organs	2,339
	319 heads	3,828	2 forequarters	60
	69 stomachs and intestines	690	33 heads	396
	4 plucks and intestines	48	1 pluck and intestines	12
	179 plucks	1,253	5 stomachs and intestines	50
			37 plucks	259
			371 livers	1,484
			7 heart and lungs	28
			332 lungs	996
			37 hearts	37
			33 kidneys	16½
			9 flares	27
			2 flanks	7
			2 part legs	12
			trimmings	5
			neck	4
			pork	13
			1 chine bone and loin	20
			1 leg	12
Total		8,954		5,777½

CONDEMNATIONS OF UNSOUND FOOD.

The following items were surrendered and condemned as unfit for human consumption during the year :—

200 lbs.	Pig livers.
36 lbs.	English Lamb.
32 lbs.	Ham.
240 lbs.	Canned corned beef.
30 lbs.	Canned Ox Tongue.
5½ lbs.	Canned Pork Luncheon Meat.

RODENT CONTROL.

PREVENTION OF DAMAGE BY PESTS ACT 1949.

A first maintenance treatment of the Sewers was carried out in March when 33 manholes were baited, with takes of bait recorded at 24 manholes. This was followed by a 10% test baiting in August involving 27 manholes and a further maintenance treatment in November. Prebaiting took place at 33 manholes, takes being recorded at 17 manholes. A survey and treatment of the Council's refuse tip at Northorpe Old Sewerage Works was made during the year. In addition 76 treatments were carried out at 65 private premises and 11 business premises.

The Prevention of Damage by Pests Act 1949 places an obligation on the Local Authority to ensure that as far as practicable its area is kept free from rats and mice. District Councils are directly responsible for the administration of the Act. The Act provides for the submission of reports to the Ministry and the making of grants to Local Authorities of one-half of the irrecoverable expenditure incurred by them in the performance of their functions under Part I of the Act.

Responsibilities are placed on Local Authorities to ensure that the provisions of the Act are carried out in their area. The procedure recommended by the Ministry of Agriculture and Fisheries is being carried out. Mr. J. Brown, the Assistant Sanitary Inspector, and Mr. F. F. W. Popplewell have been largely responsible for carrying out this work in a most efficient manner.

SCAVENGING.

The Scavenging of the District during the year has been satisfactory. A weekly collection of refuse is maintained with the exception of holiday periods. The Department has a fleet of modern Refuse Collecting Vehicles, and the district has a Refuse Collection Service which will bear favourable comparison with that of any similar district.

Details of the work carried out by the Department during the year are set out below :—

Wagon No.	Loads to tip	Bins	Privies	Ashpits	Pail Closets	Trade Refuse
1	763	92,946	—	—	—	—
2	630	19,827	877	550	3381	722
3	795	82,482	—	—	23	—
Totals	2188	195,255	877	550	3404	722

The Council are fortunate in that excellent tipping facilities are available for many years to come.

COLLECTION AND DISPOSAL OF REFUSE.

EXPENDITURE				£	s.	d.	£	s.	d.	£	s.	d.
Wages	...	...	...	5754	11	0						
National Insurance	...	...	...	200	0	0						
Superannuation	...	...	...	112	0	0						
							6066	11	0			
Vehicle Repairs	...	...	...				272	5	10			
Vehicles—Licence and Insurance	...	...	...				192	19	0			
Petrol and Oil	...	...	...				620	4	4			
Rents	...	...	...				50	0	0			
Salvage	...	...	...				27	2	6			
Loan Charges	...	...	...				280	0	0			
Sundries	...	...	...				63	17	2			
										7572	19	10
INCOME												
Trade Refuse	...	...	...				100	0	0			
Salvage	...	...	...				789	7	8			
										889	7	8
NET COST				...			£6683	12	2			

SALVAGE 1955-1956.

The results of the salvage effort during the year are set out below. The income amounting to £789 7s. 8d. is again very gratifying.

I thank all those householders and business houses who have throughout the year regularly saved their waste paper. This material is now practically the only article salvaged. We rely on a substantial income from Salvage to assist in the economic running of the Cleansing Department and it is now more essential than ever that the Public co-operate in this work.

SALVAGE RETURNS.

1954-55				1955-56			
Tonnage			Income £ s. d.	Tonnage			Income £ s. d.
T.	C.	Q.		T.	C.	Q.	
112	3	2½	760 15 1	97	15	2	789 7 8

INCOME FROM SALE OF SALVAGED MATERIALS.

				Tonnage			Income		
				T.	C.	Q.	£	s.	d.
Paper	...	...	...	92	17	0	773	9	11
Scrap Metal	...	...	...	2	4	2	7	15	9
Tins	...	...	...	2	14	0	8	2	0
				97	15	2	£789	7	8

INCOME FROM SALE OF SALVAGED MATERIALS—1940-55.

					Tonnage			Income		
					T.	C.	Q.	£	s.	d.
1940-50	...	...	...	...	2015	16	1	8284	5	6
1951	...	...	...	...	181	6	2	1905	4	4
1952	...	...	...	...	169	17	1	1101	16	8
1953	...	...	...	...	133	17	2	792	18	4
1954	...	...	...	...	112	3	2½	760	15	1
1955	...	...	...	...	97	15	2	789	7	8
					2710	16	2½	£13634	7	7

The above are the results of the salvage efforts in the area during the past years and indicate the benefits accruing to the nation and to the district by this means.

APPENDICES.

- A.** Vital Statistics of the Mirfield Urban District for 1946-1955.
- B.** Infantile and Maternal Mortality Rates of Mirfield for the past twenty years.
- C.** Notifications of Infectious Disease in Mirfield Urban District, 1936-1955.
- D.** Adoptive Acts in force in the District.
Bye-Laws in force in the District.
- E.** Staff of the Health Department.

APPENDIX A

VITAL STATISTICS OF THE MIRFIELD URBAN DISTRICT FOR 1946-1955.

Year	Population estimated to middle of each year	Births		Net Deaths belonging to the District		
				Under 1 year		At all ages
		No.	Rate	No.	Rate per 1,000 Births	No.
1946	11,480	154	13.4	5	32.0	163
1947	11,690	239	20.4	8	33.5	192
1948	11,950	205	17.2	6	29.2	170
1949	11,940	187	15.6	4	21.3	167
1950	11,930	168	14.1	1	6.0	149
1951	11,840	195	16.5	7	35.9	164
1952	11,760	196	16.7	4	20.4	174
1953	11,830	151	12.8	3	19.9	165
1954	11,850	176	14.8	5	28.4	142
1955	11,860	173	14.6	5	28.9	176

APPENDIX B

**INFANTILE AND MATERNAL MORTALITY RATES OF
MIRFIELD FOR THE PAST 20 YEARS.**

Year	Births	Infant Deaths	Maternal Deaths	Infant Mortality Rate	Maternal Mortality Rate
1936	144	7	—	48·6	—
1937	142	7	1	49·3	6·8
1938	146	6	1	41·1	6·5
1939	121	7	—	57·8	—
1940	132	6	—	45·1	—
1941	112	11	—	97·3	—
1942	158	11	—	69·6	—
1943	161	4	—	24·8	—
1944	193	6	1	31·1	5·2
1945	197	5	—	25·4	—
1946	154	5	—	32·0	—
1947	239	8	—	33·5	—
1948	205	6	—	29·2	—
1949	187	4	—	21·3	—
1950	168	1	—	6·0	—
1951	195	7	—	35·9	—
1952	196	4	1	20·4	4·9
1953	151	3	—	19·9	—
1954	176	5	—	28·4	—
1955	173	5	—	28·9	—

APPENDIX C

NOTIFICATIONS OF INFECTIOUS DISEASE IN Mirfield Urban District, 1936-1955.

Year	Smallpox	Poliomylitis and Polioencephalitis	Enteric Fever	Scarlet Fever	Diphtheria	Pneumonia	Cerebro-Spinal Fever	Erysipelas	Malaria	Puerperal Fever	Puerperal Pyrexia	Ophthalmia Neonatorum	Respiratory Tuberculosis	Other Tuberculosis	Measles	Whooping Cough	Encephalitis Lethargica	Dysentery	Other Diseases	Totals
1936	—	—	—	14	11	2	—	—	—	1	—	1	—	—	—	—	—	1	—	48
1937	—	—	—	17	3	—	—	—	—	—	—	1	—	—	—	—	—	—	—	37
1938	—	—	1	31	3	—	—	—	—	—	—	1	—	—	—	—	—	—	—	58
1939	—	—	—	5	4	—	—	—	—	—	—	—	—	—	—	3	—	—	—	27
1940	—	—	—	13	22	3	4	—	—	—	—	—	—	—	237	2	—	—	—	293
1941	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
1942	—	—	—	109	20	4	—	—	—	—	—	—	—	—	33	11	—	—	—	195
1943	—	1	—	60	23	—	1	—	—	—	—	—	—	—	233	7	—	1	—	339
1944	—	—	—	22	4	—	1	—	—	—	1	—	—	—	12	5	—	—	—	55
1945	—	—	—	20	7	—	1	—	—	—	—	—	—	—	110	6	—	—	—	157
1946	—	—	—	17	—	1	—	1	—	—	—	—	—	—	18	5	—	—	—	49
1947	—	6	—	2	—	1	—	—	1	—	—	2	—	—	172	5	—	—	—	200
1948	—	—	—	16	—	1	—	4	—	1	—	—	—	—	43	20	—	1	—	97
1949	—	11	1	6	—	1	—	1	—	1	—	—	—	—	140	26	—	1	1	202
1950	—	—	—	9	—	—	—	1	—	—	—	—	11	—	109	27	—	—	—	167
1951	—	—	—	24	—	—	—	—	—	—	—	—	10	—	110	33	—	1	—	188
1952	—	2	—	9	—	—	—	3	—	—	—	—	7	—	55	29	—	—	—	113
1953	—	3	—	4	—	—	—	—	—	—	—	—	4	—	130	3	—	—	—	157
1954	—	1	—	14	—	1	—	—	—	—	—	—	2	—	—	1	—	2	—	26
1955	—	4	—	8	—	2	—	—	—	—	3	—	2	4	240	21	—	—	—	284

ADOPTIVE ACTS, ETC., IN FORCE IN THE DISTRICT

Act	Date of Operation
Public Health Acts Amendment Act, 1890—	
Part III	1st July, 1891
Private Street Works Act, 1892	1st June, 1899
Public Health Acts Amendment Act, 1907—	
Sections 27 and 33 and the whole of Part III	28th September, 1909
Part VI	17th January, 1921
Sections 15 to 23 inclusive	24th August, 1926
Public Health Act, 1925 :—	
Sections 13 to 19 (inclusive), 23 to 33 (inclusive), 35, 36 to 43 (inclusive) and Part IV	18th October, 1926
Sections 21, 22, 44 and Part V	1st February, 1927
Furnished Houses (Rent Control) Act, 1946	18th March, 1949
West Riding County Council (General Powers) Act, 1951 :—	
Section 36	9th July, 1955

BYE-LAWS IN FORCE IN THE DISTRICT

Cleansing of Footways	1874
Scavenging	1874
Hackney Carriages	1881
Offensive Trades	1922
Public Parks and Recreation Grounds	1928
Smoke Abatement	1929
Slaughter-houses	1932
New Streets	1932
Cycling on Footpaths	1938
Dogs Fouling Footways	1949
Sale of Food	1950
Wireless Loudspeakers, Gramophones, Etc.	1950
Employment of Children and Street Trading	1950
Unauthorised Persons on School Premises	1950
Building	1953
Removal of Mud, etc., from Wheels of Vehicles	1954

STAFF OF THE HEALTH DEPARTMENT

Medical Staff.

WILLIAM M. DOUGLAS, M.B., Ch.B., D.P.H.
Medical Officer of Health.
Divisional Medical Officer.

Sanitary Inspector's Staff.

H. H. JOHNSON, M.S.I.A., Certificates of the Royal Sanitary Institute for the Inspection of Meat and Other Foods. Chief Sanitary Inspector. Cleansing Officer.

J. BROWN, Certificate of the Royal Sanitary Institute and the Sanitary Inspectors Examination Joint Board. Certificate for the Inspection of Meat and other Foods. Certificate in Sanitary Science. Additional Sanitary Inspector.

Mrs. W. BROWN, Clerk.

Divisional Public Health Staff (Division 17, comprising Spenborough and Mirfield Urban Districts).

Medical Staff.

ELEANOR M. WHITEHEAD, M.B., Ch.B., Assistant County Medical Officer.

GEORGE CUST, M.B., Ch.B., Assistant County Medical Officer.

Clerical Staff.

Mr. P. MARSHALL, D.P.A., Chief Clerk.

Miss G. M. HARTLEY

Mrs. M. HAYNES.

Miss N. HOLLIDAY.

Miss A. JOHNSON.

Mrs. V. THEWLIS.

Mrs. E. M. THOMIS.

Mr. H. R. COX, (Resigned 25th January, 1955).

Mr. G. RISHMAN (Commenced 1st February, 1955).

Health Visitors (Part-time School Nurses).

Miss D. DAY, S.R.N., S.C.M., H.V. Cert. of R.S.I., Senior Health Visitor.

Mrs. M. J. BARR, S.R.N., S.C.M., H.V. Cert. of R.S.I.

Miss M. GREENHOUGH, S.R.N., S.C.M., H.V. Cert. of R.S.I.

Miss M. HARTLEY, S.R.N., S.C.M., H.V. Cert. of R.S.I.

Miss C. JANSE, S.R.N., S.C.M., H.V. Cert. of R.S.I.

Miss D. A. LEAKE, S.R.N., S.C.M., H.V. Cert. of R.S.I.

Mrs. D. PICKUP, S.R.N., S.C.M., H.V. Cert. of R.S.I.

Mrs. M. RAYNER, S.R.N., S.C.M., H.V. Cert. of R.S.I.

Miss A. SEELIG, S.R.N., S.C.M., H.V. Cert. of R.S.I.

Assistant Health Visitors (Temp. School and Clinic Nurses).

Mrs. G. MARSHALL, S.R.N.
Mrs. E. I. SMITH, S.R.N.

Midwives.

Miss C. I. BROADLEY, S.R.N., S.C.M., Queen's Nurse.
(Commenced 17th October, 1955).
Mrs. D. M. GOMERSALL, S.R.N., S.C.M.
Miss B. HEPPLESTON, S.R.N., S.C.M.
Miss L. M. THOMPSON, S.R.N., S.C.M.
(Resigned 30th September, 1955).

District Nurses.

Miss E. BIRD, S.R.N., S.C.M., Queen's Nurse.
Miss F. E. GAMBLE, S.R.N., Queen's Nurse.
Miss M. LAYCOCK, S.R.N., S.C.M.
(Resigned 14th November, 1955).
Miss F. METCALFE, S.R.N., C.M.B., Queen's Nurse.
Miss E. PHILLIPS, S.R.N., Queen's Nurse.
Mrs. E. SAYLES, S.R.N., S.C.M.
Miss B. D. SHARP, S.R.N., S.C.M.
(Resigned 14th November, 1955).
Miss W. SPENCER, S.R.N., S.C.M., H.V. Cert. of R.S.I. (Queen's Nurse).

Child Guidance Clinic.

Dr. S. M. LEESE, County Psychiatrist.
Mr. D. G. PICKLES, Educational Psychologist.
Mrs. J. P. NURSTEN, Psychiatric Social Worker.

Dental Staff.

Mr. H. TAYLOR, L.D.S.,
Miss K. COLLETT, Dental Attendant.

Part-time Staff.

Dr. M. M. MACTAGGART, M.P.S., B.Ed., Ph.D., County Psychologist. (Resigned August, 1955).
Mr. B. D. VAINES, M.Ch.S., Chiropodist.
Miss D. RENDER, M.C.S.P., Physiotherapist.
Mr. L. WITTELS, M.D. (Vienna), D.O., Consultant Ophthalmologist.
Mrs. M. M. DE LA COUR, Mental Health Social Worker.
Miss H. M. PHILP, Speech Therapist
(Commenced 5th September, 1955).



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