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Contributors

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RURAL DISTRICT COUNCIL
OF
OSGOLDCROSS

ANNUAL REPORT

of the

Medical Officer of Health

and the

Chief Public Health Inspector

FOR THE YEAR

1972

THE UNIVERSITY OF CHICAGO


RURAL DISTRICT OF OSGOLDCROSS

ANNUAL HEALTH REPORT OF THE MEDICAL OFFICER
OF HEALTH FOR THE YEAR 1972

By

J. F. FRASER

M.B., B.S., M.F.C.M., D.P.H., D.R.C.O.G.



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OSGOLDCROSS RURAL DISTRICT

PUBLIC HEALTH COMMITTEE

as at 31st December, 1972

CHAIRMAN

Councillor Mrs. E.A. Sharpe, M.B.E.

VICE-CHAIRMAN

Councillor R. Wilson

COUNCILLORS

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G. Senior

R. Walker

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K. Woodward

Mr. C. Clarke

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W.M. Hodgkiss, Esq., A.C.B.I.

Medical Officer of Health:-

John F. Fraser,

M.B., B.S., M.F.C.M., D.P.H., D.R.C.O.G.

Chief Public Health Inspector:-

D.E. Parrington, Esq.,

M.I.P.H.E., M.R.S.H., M.A.P.H.I.

MEMORANDUM FOR THE DIRECTOR
OF THE BUREAU OF HEALTH
AND HUMAN SERVICES

CHAIRMAN

Commissioner Mrs. H.A. George, M.D.

VICE-CHAIRMAN

Commissioner H. Wilson

COMMISSIONERS

- H. A. George
- J. F. Johnson
- H. Egan
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- C. Hill
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- C. A. Jones
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- L. Woodward
- H. G. Clark

Director of the General and Civil Hygiene Division

H. A. George, M.D., A.D.D.

Medical Director of Health

John V. Hunter

H. A. George, M.D., A.D.D., H. A. George, D.R.C.O.C.

Chief Public Health Inspector

H. E. Thompson, M.D.

H. A. George, M.D., A.D.D., H. A. George, M.D.

Medical Officer's Section
Health Department,
Baghill House,
Walkergate,
Pontefract.

To: The Chairman and Members of the Council.

Ladies and Gentlemen,

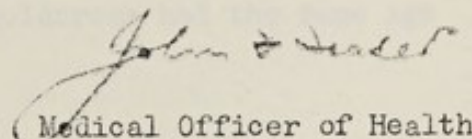
I have the honour to present, for your information and consideration, my 25th Report on the Health and Health Services of the District during the year, 1972.

The Annual Report of the Chief Public Health Inspector, dealing with the Sanitary Circumstances of the District, Housing and the Inspection and Supervision of Food Supplies, is complementary to this Report.

For your information, certain details of the personal Health Services administered by the County Council are included.

I am,

Your Obedient Servant,


Medical Officer of Health

National City, Ohio
Health Department
Health Officer
Washington
District

To: The Chairman and Members of the Council.

Ladies and Gentlemen,

I have the honor to present, for your information and
consideration, my 25th report on the Health and Health Services of
the District during the year, 1925.

The Annual Report of the Chief Public Health Inspector, dealing
with the sanitary conditions of the District, Housing and the
Inspection and Supervision of Food Supplies, is complementary to this
Report.

For your information, certain details of the personal Health
Services administered by the Health Council are included.

I am,

Very Respectfully,
Your obedient Servant,

Walter H. Smith
Health Officer of Health

PART I

Statistics and Social Conditions of the area

Area of District in Acres	33,954
Population, mid year, Registrar General's estimate...	9,320
Number of Inhabited houses at the end of 1972	3,303
Rateable Value	£840,376
Product of Penny Rate	£8,321

Summary of Vital Statistics of the District for 1972 in comparison with 1971

	<u>1972</u>	<u>1971</u>
Population.....	9,320	9,110
No. of Live Births.....	129	137
No. of Still Births.....	1	1
No. of Infant Deaths under 1 year of age.....	8	-
No. of Deaths (All ages).....	106	86
Comparability Factors (see footnote)		
Births.....	1.07	1.01
Deaths.....	1.20	1.21
Crude Birth rate.....	13.8	15.0
Adjusted Birth rate.....	14.8	15.5
Crude Death rate.....	11.4	9.4
Adjusted Death rate.....	13.7	11.6
Infant Mortality rate.....	62.0	-
Perinatal Mortality rate.....	54.0	7.0
Neonatal Mortality rate.....	54.0	-
Maternal Mortality rate.....	-	-

The comparability Factors for births and deaths are supplied by the Registrar General and when the crude rates are multiplied by these Factors, the resulting rate is that which would apply if Osgoldcross had the same age and sex constitution as the Country as a whole.

Vital Statistics for the Year, 1972

<u>Live Births</u>	<u>Male</u>	<u>Female</u>	<u>Total</u>
Legitimate	44	70	114
Illegitimate	12	3	15
	56	73	129
Crude Birth Rate per 1,000 population:	13.8		
<u>Deaths (All ages)</u>	<u>Male</u>	<u>Female</u>	<u>Total</u>
	54	52	106
Crude Death Rate per 1,000 population:	11.4		
<u>Still Births</u>	<u>Male</u>	<u>Female</u>	<u>Total</u>
Legitimate	1	-	1
Illegitimate	-	-	-
	1	-	1
Still Birth Rate per 1,000 Live and Stillbirths:	8.0		
<u>Infant Mortality</u>	<u>Male</u>	<u>Female</u>	<u>Total</u>
Legitimate	1	7	8
Illegitimate	-	-	-
	1	7	8
<u>Infant Mortality Rates</u>			
Total Infant Deaths per 1,000 Live Births:	62.0		
Legitimate Infant Deaths per 1,000 Legitimate Live Births	70.0		
Illegitimate Infant Deaths per 1,000 Illegitimate Live Births:	-		
<u>Neonatal Mortality</u>			
No. of deaths of Infants under four weeks:	7		
Mortality Rate per 1,000 Live Births:	54.0		
<u>Perinatal Mortality</u>			
No. of Still Births and Deaths under 1 week:	6		
Mortality Rate per 1,000 total Live and Still births:	54.0		

Maternal Mortality

There were no Maternal Deaths during the year.

Causes of Death (All ages)

The principal causes of Death are set out in the following Table:-

Cause of Death	Male	Female	Total
Measles	-	1	1
Malignant Neoplasm, Oesophagus	2	-	2
Malignant Neoplasm, Stomach	2	-	2
Malignant Neoplasm, Intestine	-	2	2
Malignant Neoplasm, Lung, Bronchus	6	-	6
Malignant Neoplasm, Breast	-	4	4
Malignant Neoplasm, Uterus	-	2	2
Other Malignant Neoplasms	4	2	6
Benign and Unspecified Neoplasms	-	1	1
Other Diseases of Nervous System	1	1	2
Hypertensive Disease	2	-	2
Ischaemic Heart Disease	17	8	25
Other Forms of Heart Disease	1	3	4
Cerebrovascular Disease	7	9	16
Other diseases of Circulatory System	-	2	2
Influenza	-	1	1
Pneumonia	-	1	1
Bronchitis and Emphysema	4	2	6
Other diseases of Respiratory System	1	1	2
Peptic Ulcer	-	1	1
Cirrhosis of Liver	1	1	2
Other diseases of Digestive System	1	-	1
Other diseases of Genito-urinary System	2	1	3
Diseases of Musculo-Skeletal System	-	1	1
Congenital Abnormalities	-	1	1
Birth Injury, Difficult Labour, etc.	-	3	3
Other causes of Perinatal Mortality	1	2	3
Symptoms and Ill defined Conditions	1	-	1
All other accidents	-	2	2
Suicides and Self Inflicted Injuries	1	-	1
TOTAL ALL CAUSES	54	52	106

Vital Statistics of the Rural District over the Ten Years 1963 - 72

Year	Population	Birth Rate	Death Rate	Infant Mortality Rate	Stillbirth Rate	Maternal Mortality
1963	8,570	18.1	10.3	12.9	25.2	12.58
1964	8,940	15.5	8.6	21.6	7.1	Nil
1965	8,860	18.2	8.9	43.5	18.3	Nil
1966	9,230	16.3	9.6	6.6	13.2	Nil
1967	9,330	15.8	8.9	20.4	20.0	Nil
1968	9,340	12.4	8.7	8.6	25.2	Nil
1969	9,330	14.0	9.6	22.9	Nil	Nil
1970	9,320	14.9	9.0	36.0	7.0	Nil
1971	9,110	15.0	9.4	Nil	7.0	Nil
1972	9,320	13.8	11.4	62.0	7.7	Nil

Comparison of Osgoldcross Vital Statistics with other West Riding areas, the West Riding Administrative County and England and Wales, 1972

	Osgoldcross Rural District	Aggregate West Riding Rural Districts	West Riding Administrative County	England and Wales
Crude Birth Rate	13.8	15.7	15.4	14.8
Adjusted Birth Rate	14.8	15.6	15.5	14.8
Crude Death Rate	11.4	10.5	12.1	12.1
Adjusted Death Rate	13.6	12.2	12.9	12.1
Tuberculosis Respiratory	-	0.02	0.02	+
Tuberculosis Other Forms	-	0.01	0.01	+
Tuberculosis All Forms	-	0.03	0.02	+
Cancer of Lung and Bronchus	0.64	0.43	0.54	+
Cancer All Forms	2.58	1.90	2.23	+
Vascular Lesions of Nervous System	1.72	1.56	1.79	+
Heart and Circulatory Diseases	3.54	3.92	4.67	+
Respiratory Diseases	1.07	1.55	1.73	+
Maternal Mortality Rate	-	-	0.04	+
Perinatal Mortality Rate	53.8	21.9	22.5	22.0
Neo-natal Mortality Rate	54.3	12.7	11.8	12.0
Infant Mortality Rate	62.0	18.8	17.6	17.0
Stillbirth Rate	7.7	11.5	12.2	12.0

+ Figures not available

Prevalence of and control over Infectious and Other Diseases

The following tables show the prevalence of Infectious Disease, other than Tuberculosis during the Year, 1972.

Disease	Jan/ March	April/ June	July/ Sept	Oct/ Dec	Total	No. Admitted to Hospital
Infective Hepatitis	2	-	-	1	3	-
Scarlet Fever	2	1	-	1	4	-
Measles	-	69	53	4	126	-
Total	4	70	53	6	133	-

Table showing corrected notifications of Infectious Diseases 1963 - 72

Year	Measles	Whooping Cough	Scarlet Fever	Dysentery	Total
1963	59	1	9	-	69
1964	125	5	5	1	136
1965	96	-	8	1	105
1966	181	-	15	2	198
1967	53	5	48	-	106
1968	36	1	1	2	40
1969	-	-	3	-	3
1970	106	11	3	-	120
1971	5	1	2	1	9
1972	126	-	4	-	130

Provision of and control over labor in the United States
 The following table shows the prevalence of infectious diseases, other than
 tuberculosis during the year, 1932.

Disease	Male	Female	Total	No. admitted to hospital
Infective hepatitis	1	1	2	1
Scarlet fever	1	1	2	1
Measles	60	50	110	1
Total	62	52	114	1

Table showing reported notifications of infectious diseases, 1932 - 1933

Year	Scarlet fever	Measles	Diphtheria	Total
1933	1	52	-	53
1934	1	118	1	120
1935	1	96	1	108
1936	1	101	1	103
1937	1	52	-	53
1938	1	36	1	38
1939	1	1	1	3
1940	11	106	-	117
1941	1	1	1	3
1942	1	116	-	117

Tuberculosis

The number of new cases and the number of deaths occurring in 1972 are shown in the following Table:-

Age Group	NEW CASES				DEATHS			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	M	F	M	F	M	F	M	F
0 - 5	-	-	-	-	-	-	-	-
6 - 14	-	-	-	-	-	-	-	-
15 - 24	-	-	-	-	-	-	-	-
25 - 44	-	-	-	-	-	-	-	-
45 - 64	-	-	-	-	-	-	-	-
65 and over	-	-	-	-	-	-	-	-
Totals	-	-	-	-	-	-	-	-

The following table gives the position regarding Tuberculosis in Osgoldcross Rural District in 1972.

Summary of Register

	Respiratory	Non-Respiratory	Total
Number of cases on Register 1st January	34	8	42
New cases notified during year	-	-	-
Restored to Register	-	-	-
Transferred from other areas	-	-	-
TOTAL	34	8	42
Number of cases removed from Register during year	-	-	-
Number of cases left on register at end of year	34	8	42

National Assistance Acts, 1948 - 51

Section 47 of the National Assistance Act, 1948, was designed to help persons who, suffering from grave chronic disease, or being aged or physically handicapped, being in insanitary conditions, are unable to devote to themselves and are not receiving from others proper care and attention. Under the original Act, applications were submitted to a Magistrate's Court for the removal of such persons, but the Amendment Act of 1951 introduced an accelerated procedure whereby application can be made to a Justice of the Peace.

No action was taken in Osgoldcross during the year.

COUNTY COUNCIL OF THE WEST RIDING OF YORKSHIRE

HEALTH DIVISION NO. 11

Castleford M.B.
Pontefract M.B.
Featherstone U.D.
Knottingley U.D.
Normanton U.D.
Osgoldcross R.D.

Annual Report of the
DIVISIONAL MEDICAL OFFICER

1972

by

J. F. FRASER

M.B., B.S., M.F.C.M., D.P.H., D.R.C.O.G.

COMMITTEE ON THE STATE OF NEW YORK

REPORT NO. 11

Connelley M.B.
Henderson M.B.
Henderson U.D.
Henderson U.D.
Henderson U.D.
Henderson U.D.
Henderson U.D.

Annual Report of the
DIVISIONAL MEDICAL OFFICER

1975

by

J. F. FRANK

M.D., S.S., M.P.C.M., F.I.M., D.R.O.C.

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Divisional Health Office,
Baghill House,
Walkergate,
Pontefract.
WF8 1QW

During the year the preparative machinery for the reorganisation of the National Health Service came into being. In July, Regional and Area Joint Liaison Committees were set up and Working Groups formed for the compilation of data for the information of the Shadow Authorities when appointed.

It is expected that the appointment of these Authorities will take place in the early Autumn of next year and that the appointment of Senior Officers to them will follow shortly afterwards. At the same time lists of staff for transfer on the appointed day will be prepared by their employing Authorities.

In our own Division we have begun a process of combining staffs from both the Pontefract and Castleford offices in order to produce a single working unit. This will help to ensure a smooth transfer of our activities to the new service.

John A. Fraser.

Divisional Medical Officer

National Health Office
Regional Office
Washington, D.C.
20540

During the year the program was expanded for the
reorganization of the National Health Service and
in July, regional and area health committees were set
up and working groups formed for the completion of data for
the information of the Health Administration.

It is expected that the completion of these activities
will take place in the early autumn of next year and that the
appointment of Senior Officers to them will follow shortly
afterwards. At the same time it is expected that the
in the meantime will be provided by their existing
authorities.

In our new Division we have begun a process of continuing
events from both the Foundation and Government offices in
order to provide a single working unit. This will help to
ensure a smooth transfer of our activities to the new section.

John A. Johnson

National Health Office

Section 1Vital StatisticsPopulation (Registrar General's Estimate)

Castleford	M.B.	37,980
Pontefract	M.B.	31,320
Featherstone	U.D.	15,340
Knottingley	U.D.	17,050
Normanton	U.D.	17,540
Osgoldcross	R.D.	9,320

Total Division 11	128,550
-------------------	---------

Births

Total number of live births registered in the Divisional area.	2,000
--	-------

Crude Birth Rates

Division No. 11	15.6
West Riding Administrative County	15.4
England and Wales	14.8

Deaths

Total number of deaths registered in the Divisional area	1,483
--	-------

Crude Death Rates

Division No. 11	11.5
West Riding Administrative County	12.1
England and Wales	12.1

Infant Mortality

Total number of deaths of infants under 1 year	45
--	----

Infant Mortality Rates

Division No. 11	22.5
West Riding Administrative County	17.6
England and Wales	17.2

Maternal Mortality

Total number of maternal deaths	-
---------------------------------	---

Maternal Mortality Rates

Division No. 11	-
West Riding Administrative County	0.04
England and Wales	0.15

Section 2Care of Mothers and Young ChildrenHealth Centres and Clinics

The following table gives details of the attendance of children at Health Centres and Clinics in the Divisional area during 1972.

Name and Address of Centre	No. of children who attended during the year and who were born in			Total No. of children who attended during the year	No. of attendances during the year made by children who were born in			Total attendances during the year
	1972	1971	1967-1970		1972	1971	1967-1970	
C.W.C. Trinity Street, Pontefract.	287	232	44	563	2843	1228	455	4526
Health Centre, Featherstone.	173	195	46	414	1088	1098	119	2305
Methodist Chapel, Streethouse	32	34	32	98	358	313	54	725
Health Centre, Knottingley	186	207	236	629	1825	1614	488	3927
Methodist Chapel, Ferrybridge.	69	74	43	186	706	544	102	1352
Mobile Clinic	82	89	84	255	609	633	189	1431
C.W.C. Crewe Road, Airedale.	266	215	104	585	2108	1747	473	4328
Health Centre, Welbeck Street, Castleford.	276	296	77	649	2056	1448	186	3690
The Mini Clinic, Lock Lane, Altofts.	46	56	39	141	537	533	164	1234
C.W.C. Church Lane, Normanton.	103	125	45	273	1126	957	134	2217
TOTALS	1520	1523	750	3793	13256	10115	2364	25735

During the year a single-handed General Practitioner asked to transfer his surgery to the Castleford Health Centre and it proved possible to agree to this. There are now three group practices and one single-handed practitioner accommodated there.

The new Health Centre at Victoria Street, Featherstone was completed during the year and the County Council services and the group practice of General Practitioners have operated there since July, 1972.

Mothercraft and Relaxation Clinics

Relaxation classes for expectant mothers were held at various clinics in the Divisional area. The following table gives details of attendances during the year:-

Name and Address of Centre	Number of women who attended during the year			Total number of attendances made during the year		
	Institutionally booked	Domestic- liary booked	Total	Institutionally booked	Domestic- liary booked	Total
Central Clinic, Trinity Street, Pontefract.	90	3	93	411	20	431
Health Centre, Featherstone.	57	15	72	401	11	412
Health Centre, Knottingley	25	1	26	171	6	177
Child Welfare Centre, Church Lane, Normanton.	31	6	37	143	37	180
The Health Centre, Welbeck Street, Castleford.	65	1	66	250	8	258
TOTAL	268	26	294	1376	82	1458

Care of the Premature Baby

During the year 136 babies weighing 5½lbs. or less were born in Hospitals or Maternity Homes to mothers resident in the Division. Fourteen were born at home.

Section 3Health Visiting

The following table gives details of visits carried out by Health Visitors during the year.

TYPE OF CASE		Total number of cases seen (1)	Number of cases included in Column(1) seen at special request of:-	
			Hospital (2)	G.P. (3)
1.	Children born in 1972	1932	2	171
2.	Other children aged under 5	6964	15	557
3.	Persons aged between 5 and 16 seen as part of health visiting, (i.e. excluding those seen as part of school health service.)	1347	43	280
4.	Persons aged between 17 and 64	799	92	304
5.	Persons aged 65 and over	2710	601	505
6.	Households visited on account of tuberculosis.	267	36	4
7.	Households visited on account of other infectious diseases.	478	14	395
8.	Households visited for any other reason.	115	8	35
9.	TOTAL	14612	811	2251
Number of persons included in lines 1-5 above who are:-	10. Mentally handicapped	96	-	10
	11. Mentally ill	22	-	18

HEALTH EDUCATION SESSIONS

Number of health education sessions attended by health visitors:-	12.	At health centres	52
	13.	At G.P. premises(excluding those in health centres)	1
	14.	At maternity and child health centres	93
	15.	At school	80
	16.	In hospital	4
	17.	Elsewhere	4
	18.	TOTAL	234

CASE CONFERENCES

Number of case conferences attended by health visitors with:-	19.	Social Workers	22
	20.	Hospital staff	67
	21.	General Practitioners	163
	22.	Any combination of above	90
	23.	Others (i.e. none of the above present)	201
	24.	TOTAL	543

Diabetic Liaison

The arrangement whereby a Health Visitor attends at the Diabetic clinics held at the Castleford Hightown Hospital and Pontefract General Infirmary continued. She is able to discuss with the Hospital staff every aspect of care required by the patients who attend. Arrangements are made for the patients to be visited subsequently either by a Health Visitor or District Nursing Sister.

Geriatric Liaison

Two Health Visitors attend a case conference each week at Headlands Hospital, Pontefract, where the progress of the patient and his social needs, are discussed, so that arrangements can be made for the provision of any service from my Department to be available when the patient returns home.

The Health Visitors make follow-up visits after the patient returns home.

Section 4Home Nursing Service

All the District Nurses working in the Divisional area are attached to individual medical practices or groups of practices rather than working on an area basis. This system has worked extremely well and the closer co-operation between the doctors and nurses has been more satisfactory both to them and to the patients.

A large number of different items of equipment for loan to patients being nursed at home is available in the Division. These include wheelchairs, walking aids, bed pans, rubber sheets, commodes, beds, mattresses, foam rings, hydraulic hoists, etc. During the year 1,995 issues of such equipment were made.

The tendency to use disposable materials has continued and nowadays disposable catheters, urine bottles and sputum mugs are being used. The issue of disposable paper sheets to incontinent patients has increased considerably. These are a great help to the relatives who would otherwise be faced with large amounts of unpleasant daily washing.

Work undertaken during the year by District Nurses

Place where first treatment during year by the home nurse took place		Number of persons treated during year aged			
		Under 5 (1)	5 - 64 (2)	65 and over (3)	Total (4)
1.	Patient's home	283	2046	2273	4602
2.	Health Centres	61	1333	175	1569
3.	General Practitioners' premises (excluding those in health centres)	151	1872	197	2220
4.	Maternity and child health centres	-	-	-	-
5.	Hospital	-	-	-	-
6.	Residential homes	-	-	14	14
7.	Elsewhere	-	-	-	-
8.	TOTAL	495	5251	2659	8405

During the year the following work was undertaken by District Nursing Sisters in the patient's own homes(completed cases only).

Classification	Number of cases attended by District Nurses during the year	Number of visits paid by District Nurses during the year
(1) Medical	2,363	25,895
(2) Surgical	1,177	11,577
(3) Infectious Diseases	17	54
(4) Tuberculosis	1	3
(5) Maternal Complications	108	852
(6) Other	112	449
Totals:	3,778	38,830
Patients included above who were aged 65 or over at the time of the first visit during the year.	1,661	23,804
Children included above who were under 5 years of age at the time of the first visit during the year.	280	859

Day and Night Nursing Service

A limited service is provided in cases where an emergency arises during the terminal stages of illness to help relatives who have been faced with prolonged periods caring for patients. This enables them to get a few nights sleep without interruption. The staff employed can either be trained nurses or "sitters-in", depending on the needs of the patient.

During the year help was given in 10 cases which received a total of 792 hours help.

Section 5

Midwifery

The proportion of home confinements was about 16% of the total births.

Early discharges from hospitals and maternity homes and the investigation of home circumstances of mothers booked for 48 hour discharge continue to impose a considerable amount of visiting on the midwives. They also attend the Mothercraft and Relaxation classes held at Health Centres and Clinics in the Division.

The following figures relate to the Divisional Area:-

Domiciliary Midwifery

(a) No. of home confinements	323
(b) No. of patients receiving trilene alone	66
(c) No. of patients receiving pethidine alone	55
(d) No. of patients receiving trilene and pethidine	109

Early discharges from hospitals and maternity homes

(i) Discharged within 2 days	219
(ii) Discharged within 3 - 7 days	590
(iii) Discharged at 8 or more days	157
Total	966

Institutional Midwifery

Patients from this Divisional area are admitted to either the Castleford Maternity Home or Southmoor Maternity Unit, Hemsworth. The booking of these patients is carried out by my Department on an agency basis for the Pontefract, Castleford and Goole Hospital Management Committee.

During the year accommodation was provided for all patients having their first baby and for all those with home conditions unsuitable for a home confinement. Of the remaining applicants a high proportion were allotted beds.

Maternity

The proportion of home confinements was about 1% of the total.	
Early discharges from hospitals and maternity homes and the investigation of home circumstances of mothers booked for delivery.	
discharge continues to report a considerable amount of visiting on the mothers. They also attend the Maternity and Obstetrics clinics held at Health Centres and Clinics in the Division.	
The following figures relate to the Maternity Unit:	
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Total	
366	

During the year mentioned above was provided for all patients having their first baby and for all those with home conditions suitable for a home confinement. Of the remaining applicants a high proportion were allotted beds.

The following information was obtained from the records of the Division of Health and Welfare, Department of Health and Human Services, for the period from January 1, 1968, to December 31, 1968.

During the year mentioned above was provided for all patients having their first baby and for all those with home conditions suitable for a home confinement. Of the remaining applicants a high proportion were allotted beds.

Section 6

Chiropody

The County Council's scheme provides free chiropody for the following:-

1. Elderly persons (Males 65 years or over
Females 60 years or over)
2. Expectant Mothers
3. Physically handicapped patients

Patients are usually treated by the chiropodists at County Council Clinics, but when unable to do so on medical grounds, treatment is given at home.

The following table gives details of work undertaken during the years:-

Total No. of Clinic Sessions	1,210
Total No. of Patients treated at Clinics	2,503
Total No. of Attendances at Clinics	9,963
Total No. of Patients treated at home	992
Total No. of treatments given at home	3,901

Orthopedy

The County Council's action provides free orthopedy for the following:-

1. Elderly persons (under 65 years of age)
2. Invalids
3. Physically handicapped patients

Patients are usually treated by the orthopedists at County Council Clinics, but when unable to do so on medical grounds, treatment is given at home.

The following table gives details of work undertaken during the year:-

Total No. of Clinic Sessions	1,230
Total No. of Patients treated at Clinics	1,230
Total No. of Patients treated at Home	1,230
Total No. of Patients treated at Home	1,230
Total No. of Patients given at Home	1,230

Section 7

Health Education

There has been an overall increase in the amount of health education undertaken in the Division despite shortage of staff, particularly of Health Visitors. The new qualified Health Visitors have been given guidance and support, and the older members of staff encouragement to undertake some health education activity.

Developments during 1972 have been:-

1. The increasing use of the exhibitions stocked at Central Office. These were used in clinics and health centres, and the schools encouraged to send children to the clinics to see these exhibitions, followed by a talk from the staff.
2. A start was made on a programme for the children in Infants Schools. The response was encouraging, and it is intended to offer this service to more of these schools in 1973.
3. There was a limited service which provided a programme of talks to Junior Schools. Films and film strips were used. They included 'Personal Hygiene', 'Dentition' and 'Menstruation'. This field was limited by the availability of staff.
4. In the Comprehensive and Senior Schools the Health Visitors carried out detailed programmes of Health Education. These were tailored to fit the requirements of the school. These were needed in some instances for the C.S.E. courses. The talks and demonstrations ranged from mothercraft, home accidents, child development, smoking, drugs, to venereal disease and family planning.

Mothercraft Teaching Classes

5. These continued to function in a very satisfactory way. The syllabus in 1972 included Family Planning - a film and visual aids were used. This was very well received. The evening session was open to expectant fathers, who attended to see the film on the birth of a baby.

Mothers' Clubs

6. During the year more clubs opened in the Division. There is now one in each area. The attendances have varied. The clubs have tended to take time to grow, but once they function supply a very important service to meet the needs of the young mothers in the community. Some of the clubs support voluntary organisations working the field of child care.

Child Welfare Clinics

7. The field in which the majority of health education was carried out was on a person to person basis, although teaching in social informal groups was done. Displays were used throughout the year.
8. Staff undertook talks to both youth and adult groups in the evening. Most interest was in venereal disease, family planning and drugs.
9. Refresher training of staff, films and demonstrations were used in the field.
10. Posters and leaflets issued to factories and public buildings, e.g. libraries.

Section 3

Screening Tests

Cervical Cytology

This service provides for the examination of women, who, although physically well, may suffer from a pre-cancerous condition known as Carcinoma-in-Situ. All that is involved is a simple and painless examination and the taking of a cervical smear.

There has been a steady flow of applications.

During the year 552 smears were taken and 10 patients were found to have positive smears.

Well Woman Clinic

A special clinic session is held at the Castleford Health Centre every Tuesday afternoon at which married ladies are invited by appointment to be examined by one of our Medical Officers. The following tests and examinations are carried out:-

- Cervical Smear test
- Urine examination
- Blood pressure
- Blood test (Haemoglobin)
- Vision
- Hearing
- Weight
- Height

During the year 35 clinics were held and 356 patients examined. It was necessary to refer 1 patient to her General Practitioner.

The results of all the tests are sent to the patient's General Practitioner as a routine.

Ortolani Testing for Congenital Dislocation of the Hip

This test is carried out by midwives, health visitors and clinic doctors on babies coming into their hands for the first time. During the year 3 children were referred to specialists and confirmed as cases of congenital dislocation of hip and splinted. Seventeen other children were referred to specialists but found not to have dislocation of hip or given appointments for further investigation.

Phenylketonuria

Phenylketonuria is an inherited metabolic disease which causes brain damage and mental deterioration, but if diagnosed early there is the possibility of preventing irreversible mental deterioration if special dietary control is taken. Every child has a simple blood test performed at about six days old. This is done either in the maternity home or by the domiciliary midwife.

The tests on all babies in this area during the year proved negative.

Assessment of the Health of Young Children

For the past two years or so all children have had their hearing tested, subject to the agreement of the parents, at certain specified ages, 8 months, 18 months and 3 years of age. In July, 1971, a further scheme was introduced to monitor the health of pre-school children in an effort to isolate defects, take remedial action and keep children with defects under observation.

All children are now seen by Health Visitors, again subject to parental consent, at the ages of 3 months, 6 months, 10 months, 18 months, 3 years, and 4 years of age, to verify that normal development is progressing. Children thought not to be making normal progress are examined by one of the Authority's Medical Officers specially trained in this work. Appropriate action can then be taken. In those cases where a child may suffer from a handicap which will eventually require special education provision, advance warning can be given to the Education Authority on the need for accommodation.

During the year the following work was undertaken:-

1. No. of children assessed by Health Visitors	6,478
2. No. of children referred to Local Health Authority doctor	201
3. No. of children examined by Local Health Authority doctor	155

Section 9

Vaccination and Immunisation

Community immunisation in this country is at present directed to the prevention of Diphtheria, Whooping Cough, Tetanus, Poliomyelitis, Smallpox, Tuberculosis, Measles and German Measles.

A revised schedule of vaccination and immunisation procedures was adopted during 1971. This is as follows:-

<u>Age</u>	<u>Procedures</u>
Six months	Diph/Tet/Pert. and oral polio vaccine (First dose)
Eight months	Diph/Tet/Pert. and oral polio vaccine. (Second dose)
Fourteen months	Diph/Tet/Pert. and oral polio vaccine. (Third dose)
Sixteen months	Measles vaccination.
Five years	Diph/Tet. and oral polio vaccine or Diph/Tet/Polio vaccine.
Eleven to twelve years	B.C.G. vaccine
Fifteen years	Polio vaccine (oral or inactivated) Tetanus Toxoid

Children born on or after 1st April, 1968, have been dealt with under this schedule. All the appointments and follow-up procedures are dealt with by the County Council computer at Wakefield.

Immunisation against German Measles (Rubella) commenced in October, 1970, and this was to be available to all girls between their eleventh and fourteenth birthday. Due to the shortage of vaccine, priority in the first instance was given to those girls in their fourteenth year. As supplies are more freely available all girls between 11 and 14 years of age have been offered vaccination.

The immunity which it gives lasts a considerable time, and through the usual child bearing life. That is the important fact, for although Rubella is usually a mild disease in childhood and adolescence it can cause miscarriages or handicaps in the baby if the disease occurs in the early months of pregnancy. Some of these handicaps (including blindness, deafness and heart disease) are very serious indeed.

The following table shows the number of children in the Divisional area immunised against the various diseases during the year:-

	Year of Birth						
	1972	1971	1970	1969	1968-1965	Others aged under 16	Totals
Diphtheria Primary	38	1,431	469	20	71	31	2,060
Reinforcing	-	5	17	3	1,364	610	1,999
Whooping Cough Primary	38	1,421	457	18	13	1	1,948
Reinforcing	-	5	15	2	41	7	70
Tetanus Primary	38	1,431	469	20	69	34	2,061
Reinforcing	-	5	17	5	1,350	635	2,012
Poliomyelitis Primary	38	1,429	468	20	139	183	2,277
Reinforcing	-	5	17	3	1,577	610	2,212
Measles Primary	-	805	619	34	34	2	1,494
Rubella Primary	-	-	-	-	-	1,336	1,336

B.C.G. Vaccination of School Children in Accordance with
the Provisions of Ministry of Health Circular 19/64

1. No. of medical officers (including Divisional Medical Officer) approved to undertake B.C.G. Vaccination 4

2. Acceptances

(a) No. of children offered tuberculin testing and vaccination if necessary, whether the offer was made during the year or previously	<u>2,329</u>
(b) No. of (a) found to have been vaccinated previously	<u>48</u>
(c) No. of acceptances	<u>1,861</u>
(d) Percentage of acceptances, i.e. (c) to (a) - (b)	<u>81.58%</u>

3. Pre-vaccination Tuberculin Test

(a) No. of children 2(c) tested			<u>1,743</u>
(b) Result of test:	<u>Heaf Test</u>	<u>Mantoux Test</u>	
(i) Positive	<u>168</u>	<u>-</u>	
(ii) Negative	<u>1,443</u>	<u>-</u>	
(iii) Not ascertained	<u>132</u>	<u>-</u>	TOTAL <u>1,743</u>
(c) Percentage positive, i.e. (b) (i) to (b) (i) + (ii)	<u>10.43%</u>	<u>-</u>	TOTAL <u>10.43%</u>

4. Vaccination

No. vaccinated:-

(a) Following negative Heaf Test	<u>1,443</u>
(b) Following negative Mantoux Test	<u>-</u>
	TOTAL <u>1,443</u>

School Health Service

The basis of the School Health Service has traditionally been founded on the routine medical inspection of all pupils at certain stages of their school life. Changing social patterns and the ready availability of medical attention through the National Health Service have induced many authorities to concentrate the efforts of school doctors more on the ascertainment and follow-up of children with special handicaps or about whom nurses, teachers, or parents are concerned.

In September, 1968, it was decided to retain as routine examinations only the first (entrants) and the last (leavers) for all children. In the intervening years the parents are asked to complete a Health Questionnaire and only those children thought to require examination are dealt with. The following tables show the number of examinations carried out and the defects found.

Classification of the Physical Condition of Children
examined at periodic medical inspections

Age Groups inspected (By year of Birth)	No. of pupils who have received a full medical	PHYSICAL CONDITION OF PUPILS INSPECTED		No. of pupils found not to warrant a medical examination	Pupils found to require treatment (excluding dental diseases and infestation with vermin)		
		Satisfactory Number	Unsatisfactory Number		for defective vision (excluding squint)	other condition recorded at Part II	Total individual pupils
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
1968 and later	400	400	-	15	8	85	91
1967	1,240	1,240	-	327	35	210	230
1966	1,135	1,128	7	632	36	191	211
1965	634	624	10	705	22	97	102
1964	364	361	3	647	12	59	62
1963	250	250	-	556	4	34	34
1962	199	198	1	518	3	29	30
1961	120	120	-	321	3	16	19
1960	28	28	-	80	1	3	4
1959	-	-	-	-	-	-	-
1958	-	-	-	-	-	-	-
1957 and earlier	418	416	2	240	13	111	124
TOTAL	4,788	4,765	23	4,041	137	835	907

Col. (3) total as a percentage of Col. (2)

99.52%

Col. (4) total as a

percentage of Col. (2) 0.48%

Defects found by periodic and special Medical
Examinations during the Year

Defect Code Number	Defect or Disease		Periodic Inspections				Special Inspection
			Entrants	Leavers	Others	Total	
4	Skin	T	86	45	14	145	26
		O	66	25	25	116	11
5	Eyes - a. Vision	T	85	13	39	137	21
		O	77	51	63	191	38
	b. Squint	T	48	1	8	57	11
		O	83	12	37	132	27
	c. Other	T	2	-	-	2	1
		O	4	1	8	13	2
6	Ears - a. Hearing	T	139	22	35	196	40
		O	34	2	48	84	9
	b. Otitis Media	T	25	-	18	43	6
		O	70	17	23	110	11
	c. Other	T	10	9	3	22	-
		O	2	1	1	4	3
7	Nose and Throat	T	93	1	23	117	17
		O	188	16	35	239	38
8	Speech	T	39	-	11	50	14
		O	93	3	25	121	23
9	Lymphatic Glands	T	10	-	2	12	3
		O	51	-	3	54	12
10	Heart	T	4	-	-	4	1
		O	26	5	30	61	32
11	Lungs	T	37	2	5	44	11
		O	95	8	42	145	24
12	Developmental a. Hernia	T	6	-	1	7	-
		O	10	-	4	14	2
	b. Other	T	41	20	16	77	25
		O	101	7	41	149	34
13	Orthopaedic a. Posture	T	-	-	-	-	-
		O	13	7	22	42	4
	b. Feet	T	29	5	3	37	11
		O	16	6	10	32	11
	c. Other	T	11	4	1	16	2
		O	52	4	21	77	9

Defect Code Number	Defect or Disease		Periodic Inspections				Special Inspection
			Entrants	Leavers	Others	Total	
14	Nervous System						
	a. Epilepsy	T	2	1	4	7	9
		O	13	4	18	35	3
	b. Other	T	5	5	3	13	2
		O	40	6	11	57	15
15	Psychological						
	a. Development	T	20	-	36	56	8
		O	103	8	133	244	54
	b. Stability	T	3	1	9	13	3
		O	223	9	140	372	45
16	Abdomen	T	12	-	9	21	5
		O	61	1	36	98	1
17	Other	T	29	9	14	52	33
		O	142	5	41	188	34
18	TOTALS	T	736	138	254	1128	249
		O	1563	198	817	2578	442

T = Requiring Treatment

O = For observation only

Cleanliness Inspections

Routine and request inspections were carried out at each school by the school nurses and a total of 46,907 inspections and re-inspections were carried out. Six-hundred and one individual children were reported to be unsatisfactory but 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 to the person appointed by him for that purpose within 48 hours.

Consultant Ear, Nose and Throat Clinics

A special clinic is held at the Central Clinic, Trinity Street, Pontefract, by Mr. K. M. Mayall, each fortnight. Details of these clinics are as follows:-

1. Number of sessions held during the year - 52

	<u>Pre-School Children</u>	<u>School Children</u>
2. Number of individual children seen by consultant including those continuing attendance from previous year.	10	179
3. Number of (2) above referred for operative treatment	5	102
4. Number of children:-		
(a) who obtained operative treatment during the year	5	85
(b) treated at school clinics	-	20
5. Total number of attendances at consultant clinic	20	467

Consultant Paediatric Clinics

Dr. J. D. Pickup holds a clinic at the Health Centre, Welbeck Street, Castleford, as and when required.

Details of the clinics held are as follows:-

1.	Number of sessions held during year -	2	
		<u>Pre-school</u>	<u>School</u>
		<u>Children</u>	<u>Children</u>
2.	Number of individual patients seen:-		
	(a) New cases	1	2
	(b) Cases attending from previous year(s)	-	14
3.	Total number of attendances at clinics.	2	17

Ophthalmic Clinics

These are held at the Health Centre, Welbeck Street, Castleford, and Central Clinic, Trinity Street, Pontefract.

Total number of attendances 1,778

Number of pupils for whom glasses prescribed 507

Child Guidance Clinic

A Child Guidance Clinic is held every Wednesday at the Central Clinic, Trinity Street, Pontefract. Dr. K. N. Maxwell, Psychiatrist, is in charge of the clinic and has the assistance of Mr. P. W. Atkinson, Psychologist, and Mrs. P. Harris, Social Worker in Psychiatry. The following table gives details of work undertaken during the year:-

Number of sessions held during year - 96

	<u>Boys</u>	<u>Girls</u>	<u>Total</u>
Number of cases brought forward from 1971	39	19	58
Number of new cases during year	44	39	83
Total number of cases	83	58	141
Total number of cases discharged or admitted for residential treatment	52	32	84
Number of cases carried forward	31	26	57

Speech Therapy

Special clinics are held in the Division at the Health Centre, Castleford, Child Welfare Clinic, Normanton, Central Clinic, Pontefract, Health Centre, Knottingley, and at the Castle Day Special School for Educationally Subnormal Children.

I give below details of the work undertaken:-

1.	Number of half-day sessions held during the year	...	...	...	270	
2.	(a) Number of children seen for the first time during the year				50	
	(b) Number of children attending for treatment from previous years				94	
	Total number of children treated $[2(a) + 2(b)]$ to agree with Form 8M (iii)F	...	...	...	...	144
3.	Number of children awaiting treatment at end of year	...	...		119	
	(a) Interviewed and placed on waiting list	...	...	...	61	
	(b) Not seen	...	...	...	58	
4.	Children discharged during the year:					
	Total	...	...	...	27	10
	Analysis	...	...	...	-	-
	Speech normal	...	...	...	6	5
	Speech improved	...	...	...	7	2
	Unsuitable for treatment	...	...	...	1	-
	Non co-operation	...	...	...	2	1
	Admitted to special schools	...	...	...	2	-
	Left school	...	...	...	3	1
	Left district	...	...	...	6	-
	Other reasons (private treatment)	...	...	...	-	1
5.	Number of visits made to schools	...	...	...	...	14
6.	Number of home visits	...	...	...	...	3
	<u>Analysis of Children Treated</u>					
					<u>Boys</u>	<u>Girls</u>
1.	Stammerers (Dysrhythmia)	...	...	...	19	4
2.	Defects of Articulation due to:-					
	(a) Cleft palate	...	...	...	6	5
	(b) Cerebral palsy	...	...	...	2	4
	(c) Other structural malformations	...	...	...	1	2
	(d) Other causes, e.g. neurological	...	...	...	6	-
	(e) No specific cause found	...	...	...	35	12
3.	Disorders of Language due to:-					
	(a) Retarded language development(non-specific)	...	...	...	19	1
	(b) Retardation with associated subnormality	...	...	...	17	4
	(c) Retardation associated with deafness	...	...	...	3	1
	(d) Dysphasia	...	...	...	-	-
	(e) Aphasia	...	...	...	-	-
	(f) Other reasons	...	...	...	1	1
4.	Dysphonia	...	...	...	1	-
5.	Other defects	...	...	...	-	-

The regular medical examination of handicapped children continued during the year and where necessary recommendations were made to the Education Authority for the placement of children in special schools.

The regular medical examination of handicapped children continued during the year and where necessary recommendations were made to the Education Authority for the placement of children in special schools.

(26)

TABLE 1

This table shows the results of the analysis of variance for the different factors in the experiment. The results are given in the form of a table of means and standard deviations. The table is divided into two main parts, one for the analysis of variance and one for the results of the experiment.

1.	Number of children in school	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200	200
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Section 11

Miscellaneous Services

Mass Radiography

The Mobile Unit of the Leeds Regional Hospital Board visits the area from time to time. The policy of the Board is to concentrate their efforts on examining work people in industries where there is a greater risk in contracting chest diseases rather than holding sessions for members of the general public.

In 1972 the Unit did not visit the area except to carry out a small survey, by special request, at an old people's home. The number of patients dealt with as follows:-

Total number of persons x-rayed	150
Number of active cases of Tuberculosis found	-
Number of inactive cases of Tuberculosis found	-
Number of non-Tuberculous abnormalities	1

Family Planning

The County Council allows free use of clinic premises and equipment to the Family Planning Association and in addition pays for the cost of medical advice to all patients and for the cost of appliances for patients referred on medical grounds only.

In this area the Association holds weekly sessions at the Castleford Hightown Hospital, Central Clinic, Pontefract, and at the Knottingley Health Centre. Sessions are also held at the Normanton Child Welfare Clinic three times each month.

Battered Babies

Early in 1970, Ministry Circular C.M.O. 2/70 drew attention to the problem of young children who are injured by their parents. It was felt that local discussion should take place amongst all agencies concerned with child care so that a definite course of action should be planned for dealing with this problem.

A Committee was therefore established in the Divisional area involving the Consultant Paediatrician, Consultant Orthopaedic Surgeon, Divisional Medical Officers, Children's Officer, N.S.P.C.C., Nursing Officers and Police. The need for early recognition of the problem was discussed and a policy formulated for dealing with any case or suspected case of the syndrome. Following the original meeting subsequent committee meetings have been called to deal with individual cases. These have proved most helpful and excellent liaison has been established between the Hospital Service, the Local Authority Services and the N.S.P.C.C.

Medical Examination of Staff

During the year the following medical examinations were carried out on behalf of the County Council:-

Entrants to Teacher Training Colleges	186
Entrants to Teaching Profession	8
School Meals Service	46
Superannuation	21

Miscellaneous Services

Mass Radiography

The Mobile Unit of the Los Angeles General Hospital Board visits the area from time to time. The policy of the Board is to concentrate their efforts on examining work people in industries where there is a greater risk in contracting these diseases rather than holding sessions for members of the general public.

In 1973 the Unit did not visit the area except to carry out a small survey, by special request, at an old people's home. The number of patients dealt with as follows:-

Total number of persons x-rayed	130
Number of active cases of Tuberculosis found	-
Number of inactive cases of Tuberculosis found	-
Number of non-Tuberculosis abnormalities	1

Family Planning

The County Council allows free use of clinic premises and equipment to the Family Planning Association and in addition pays for the cost of medical advice to all patients and for the cost of appliances for patients referred on medical grounds only.

In this area the Association holds weekly sessions at the Gardfield Highways Hospital, General Clinic, Forester, and at the Knollys Health Centre. Sessions are also held at the Huntington Child Welfare Clinic three times each month.

Patterned Babies

Early in 1970, Ministry Circular S.M.C. 1370 drew attention to the problem of young children who are injured by their parents. It was felt that local education should take place against all agencies concerned with child care so that a definite course of action should be planned for dealing with this problem.

A Committee was therefore established in the Divisional area involving the Consultant Paediatrician, Consultant Orthopaedic Surgeon, Educational Medical Officer, Children's Officer, S.M.C. Officer, Nursing Officers and Police. The need for early recognition of the problem was discussed and a policy formulated for dealing with any case of suspected case of the syndrome. Following the initial meeting subsequent meetings have been called to deal with individual cases. These have proved most helpful and excellent liaison has been maintained between the Hospital Service, the local Authority Services and the S.M.C.O.

National Examination of Staff

During the year the following medical examinations were carried out on behalf of the County Council:-

Examinations to Teacher Training Colleges	185
Examinations to Teacher Training Colleges	8
Examinations to Health Services	45
Examinations to Health Services	21

Section 12

General Provisions of the Health Services

A. HOSPITALS

Facilities for patients from this area are provided at the following hospitals:-

1. General Hospital Accommodation

Castleford Hightown Hospital
Pontefract General Infirmary
Ackton Hospital, Featherstone

2. Maternity Homes

Castleford Maternity Home
Southmoor Maternity Unit, Hemsworth

3. Chronic Sick

Headlands Hospital, Pontefract
Southmoor Hospital, Hemsworth

4. Mental Hospitals

Stanley Royd Hospital, Wakefield

5. Isolation Hospitals

Burntwood Hospital, Brierley
Seacroft Hospital, Leeds.

B. AMBULANCE SERVICE

The West Riding County Council provide the ambulance service and there is a depot situated in Beacroft Street, Castleford, Telephone Castleford 2281.

C. LABORATORY FACILITIES

The Public Health Laboratory at Wood Street, Wakefield, (under the administration of the Medical Research Council of the Department of Health and Social Services) accepts bacteriological, biological, entomological and chemical investigations from General Practitioners and the Public Health Department.

General Information of the Health Service

4. HOSPITALS

Facilities for patients from this area are provided at the following hospitals:-

1. General Hospital, Southampton

General Hospital, Southampton
 Portsmouth General Infirmary
 Eastern Hospital, Portsmouth

2. Maternity Homes

General Maternity Home
 Southern Maternity Unit, Southampton

3. Chronic Block

Hammond Hospital, Portsmouth
 Portsmouth Hospital, Southampton

4. Mental Hospitals

Stanley Road Hospital, Southampton

5. Infectious Hospitals

Southwood Hospital, Bournemouth
 General Hospital, Leeds

6. Ambulance Services

The West Hants County Council provide the ambulance service and there is a depot situated in Grosvenor Street, Southampton. Telephone Cables 5571.

7. Laboratory Facilities

The Public Health Laboratory at Wood Street, Southampton, under the administration of the Health Research Council of the Department of Health and Social Services) accepts requests for clinical, biological, bacteriological and chemical investigations from General Practitioners and the Public Health Department.

Divisional Staff at 31st December, 1972

Divisional Medical Officer

J. F. Fraser, M.B., B.S., M.F.C.M., D.P.H., D.R.C.O.G.

Senior Departmental Medical Officer and School Medical Officer

Castleford - Vacancy

Pontefract - Vacancy

Medical Officers for Maternity and Child Welfare and School Medical Services

Full-time

Vacancies

Part-time

M. M. Brearley, M.B., Ch.B.
I. Butler, M.R.C.S., L.R.C.P.
D. J. Haiste, M.B., Ch.B., D.P.H.
K. V. Jackson, M.R.C.S., L.R.C.P.
M. Mason Jones, M.B., B.S., D.P.M.
J. L. Mabbott, M.B., B.S.
V. Pearson, M.B., Ch.B., D.C.H., D.R.C.O.G.
F. J. Penrose, M.B., Ch.B.
S. F. Schofield, M.B., Ch.B., D.C.H., D.P.H.
M. M. Scholefield, M.R.C.S., L.R.C.P.
A. Vaux, M.B., B.S.

Leeds Regional Hospital Board - Visiting Staff

Paediatrician

J. D. Pickup, M.D., Ch.B., D.C.H.

Ophthalmologists

K. K. Prasher, M.B., B.S., D.O.

Vacancy

Orthopaedic Surgeon

Vacancy

Oto-Rhino Laryngologist

K. M. Mayall, M.A., M.B., B.Chir., F.R.F.P.S.G., L.R.C.P., D.L.O.

Child Guidance Clinic

Psychiatrist - Dr. K. N. Maxwell

Psychologists - P. W. Atkinson

D. Clark

Social Worker - Mrs. P. Harris

Divisional Nursing Officer

Mrs. M. Craig

Nursing Officers

Health Visiting

Mrs. M. D. Fisher

Mrs. S. A. Izon

Home Nursing

Mrs. M. Berwick

Midwifery

Mrs. P. Green

Health Visitors and School Nurses

Mrs. J. Allsopp

Mrs. M. E. Bedford

Mrs. S. N. Dinsdale

Mrs. G. M. Dixon

Miss A. Elsley

Mrs. M. Faulkner

Mrs. M. Inman

Mrs. V. M. Newby

Miss M. Reading

Miss I. J. Robinson

Mrs. M. P. Sawyer

Miss J. E. Spurr

Mrs. M. B. Toplis

Mrs. E. M. Vipurse

Mrs. M. A. Ward

Mrs. E. M. White

Mrs. L. Whiteley

Miss S. E. Wollaston

Assistant Health Visitors

Mrs. J. M. Brown

Mrs. M. Clarkson

Mrs. A. J. Conway

Mrs. M. E. Davie

Mrs. A. Ellis

Mrs. N. Goalby

Mrs. L. Hudson

Mrs. E. Johnson

Mrs. B. M. Milward

Mrs. J. Steels

Midwives

Mrs. C. Atkinson

Mrs. K. Berry

Miss M. Brazey

Mrs. K. Clarkson

Mrs. M. I. Foley

Mrs. J. R. Pearson

Mrs. A. M. Randall

Mrs. M. Richardson

Mrs. A. Watson

Mrs. S. Whitehead

Mrs. M. Wylie

Home Nurses

Full-time

Miss M. Andrew

Mrs. M. Bennison

Mrs. C. P. Bowler

Mrs. M. Burrows

Mrs. J. E. Busson

Mrs. S. Calvert

Mrs. S. G. Cousins

Mrs. S. Eaton

Mrs. M. L. Etherington

Mrs. K. Frain

Mrs. M. Golding

Mrs. F. Green

Mrs. P. Howes

Miss M. C. Laing

Mrs. V. McVeigh

Mrs. S. Megson

Mrs. A. Pearce

Mrs. J. M. Pycock

Mrs. H. Rowbottom

Mrs. G. E. Shell

Mrs. P. Tinker

Mrs. M. Yates

Part-time

Mrs. P. M. Long

Mrs. M. R. Moore

Speech Therapists

Mrs. N. Hepworth (part-time)
Mrs. S. C. Holmes (part-time)

Administrative and Clerical Staff

Divisional Administrative Officer W. Carver
Deputy Divisional Administrative Officer - C. R. Pickering
Administrative Officer - W. R. Wood
Mrs. A. Ball
Mrs. A. K. Booth
Mrs. M. H. Carver (part-time)
Miss N. Cawthra
Mrs. B. Chapman
Mrs. I. A. D. Cooper
Mrs. J. E. Cresswell
Miss M. R. M. Duker
Miss A. Ellison
Mrs. C. Hardy
Mrs. G. Hutchinson
Mr. B. Morley
Mrs. L. Murgatroyd (part-time)
Mrs. J. Sampson
Mrs. S. A. Smith (part-time)
Mrs. M. Tate
Miss J. M. Wallace
Mrs. B. Whittingham (part-time)
Miss C. A. Wilkinson

THE
RURAL DISTRICT COUNCIL
OF
OSGOLDCROSS

--- oOo ---

ANNUAL REPORT

OF THE
PUBLIC HEALTH INSPECTOR
FOR THE YEAR

1972

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BY

D. E. PARRINGTON, M.I.P.H.E., M.R.S.H., M.A.P.H.I.,

FOOD INSPECTOR
SMOKE INSPECTOR
PUBLIC HEALTH ENGINEER.

Public Health Department,
Tanshelf House,
40, Front Street,
PONTEFRACT,
Yorkshire.

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RURAL DISTRICT COUNCIL OF OSGOLDCROSS

ANNUAL REPORT

OF THE PUBLIC HEALTH INSPECTOR, 1972

TO THE CHAIRMAN AND MEMBERS OF THE COUNCIL,

Mr. Chairman, Lady and Gentlemen,

I am pleased to submit for your consideration, my nineteenth Annual Report on conditions appertaining to Environmental Health in the Rural District. As usual, the report is sub-divided into four principal sections dealing with Environmental Health matters, Housing, Food Hygiene and a special Annex of Particulars required by Government departments.

The report comments on the various activities associated with Environmental Health and the services related thereto and gives facts and figures on the work of the department for the year, 1972.

As only to be expected, the impact of the Local Government Reform Bill overshadowed every other activity undertaken by the Council and has been the predominant factor in all the Council's deliberations throughout the year. Its passage through Parliament was followed with great interest especially by authorities like our own whose district has been split into two County areas.

After anxious months of waiting, it was pleasing to note that almost all the functions now carried out by Environmental Health departments will remain the responsibility of the local District Councils who will continue to be the guardian over such matters which can so vitally affect lives of people living in the locality.

During the year much time and effort has been put into the supplying of information to numerous working parties formed to bring about the changes in local government administration and many hours have been spent in considering and debating these matters and in formulating proposals for the new authorities.

Probably the most publicised piece of legislation passed during the year affecting the work of the department was the Deposit of Poisonous Waste Act, 1972, hurried through Parliament by an outcry of 'Cyaniditis' and designed to protect the environment from further pollution.

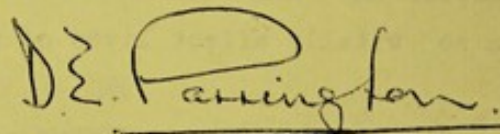
One of the most disquieting events of the last decade has been the ever increasing pollution of the environment. Pollution not only into the atmosphere by smoke and fumes but pollution by deposits on land and into the sea, the use of insecticides and herbicides, the pollution of streams and rivers, the endangering of water supplies and the insidious increase in the day to day ambient noise level by traffic in urban areas but in some rural areas too with the impact of the motorways and juggernaught lorries pounding their way through the village scene.

In this ever changing scene, it is vitally important for the Environmental Health Officer to act as local watch-dog on all these matters and for him to be given the means to carry out these functions.

As a result of present circumstances, there has been even less time this year to carry out the many routine inspections so important for the maintenance of standards and so once again much of this work has had to be left undone.

May I conclude by thanking all in the department for their valuable help and support, the heads and staffs of other departments, Members of the Council both individually and collectively for their help and co-operation during the past year.

Yours respectfully,

A handwritten signature in dark ink, appearing to read 'D.E. Parington', written in a cursive style. The signature is positioned above a horizontal line.

Public Health Inspector.

SECTION A

ENVIRONMENTAL

HYGIENE

SECTION A

SECTION B

SECTION C

12/1/20

WATER SUPPLIES

With the exception of one or two small private boreholes, the whole of the Rural District is supplied with water by the Pontefract, Goole and Selby Water Board and three of their principal sources of supply are situated within the rural district and comprise boreholes at Heck, Hensall and the Roall works at Kellington. Arising from a most comprehensive scheme of improvement carried out by the Board during the last few years to augment supplies and to make distribution more efficient, the few remaining doubtful sources of supply have now been eliminated. The complicated distribution system has enabled duplicate supplies to be available for most of the villages in the Council's area.

Now the whole of the Rural District has not only an adequate but wholesome supply of fresh water.

BACTERIOLOGICAL CLASSIFICATION OF WATER SAMPLES

SOURCE OF RAW WATER	NUMBER OF SAMPLES FALLING INTO EACH CLASS				TOTAL SAMPLES TAKEN
	Class 1	Class 2	Class 3	Class 4	
Pontefract, Goole & Selby Water Board	18	2	-	-	20
Private	3	-	-	4	7
TOTAL	21	2	-	4	27

Class 1 - Highly Satisfactory Class 3 - Suspicious
Class 2 - Satisfactory Class 4 - Unsatisfactory

COMPARISON OF WATERS WITH PRESCRIBED STANDARD

PERCENTAGE OF SAMPLES IN CLASS	PRESCRIBED STANDARD	SOURCES OF SUPPLY	
		PONTEFRAC, GOOLE & SELBY WATER BOARD	PRIVATE
1	Not less than 50%	90%	43%
1 & 2	Not less than 80%	100%	43%
3	Not more than 20%	0%	0%
4	0%	0%	57%

The above table shows that the public supply is very satisfactory and well up to the prescribed bacteriological standard. The results from those private sources of supply do not match up to this high standard but the results are somewhat misleading in so far as the majority of the adverse samples were taken as follow up samples from previous unsatisfactory ones.

After doing a fair amount of investigating and checking these, one has now been eliminated by the premises being connected to a public supply, the other owner is endeavouring to obtain estimates for a similar changeover to a mains supply.

WATER SUPPLIES, continued

TABLE SHOWING THE NUMBER OF DWELLING HOUSES
SUPPLIED FROM

PARISH	TOTAL HOUSES	PUBLIC WATER MAINS		SOURCES OTHER THAN PUBLIC WATER MAINS	
		Piped direct to Houses	By means of Stand Pipes	Piped Direct to Houses	Non- piped supply
BALNE	80	80	-	-	-
BEAL	223	222	-	-	1
BIRKIN	41	41	-	-	-
BROTHERTON	208	208	-	-	-
BYRAM	406	406	-	-	-
BURTON SALMON	95	95	-	-	-
CRIDLING STUBBS	51	48	-	3	-
DARRINGTON	382	382	-	-	-
EAST HARDWICK	71	71	-	-	-
EGGBOROUGH	465	459	-	6	-
FAIRBURN	226	225	-	1	-
HECK	53	53	-	-	-
HENSALL	124	124	-	-	-
HILLAM	136	135	-	1	-
KELLINGTON	238	238	-	-	-
MONK FRYSTON	229	227	-	2	-
STAPLETON	27	17	-	10	-
WHITLEY	138	137	-	1	-
WOMERSLEY	110	108	-	2	-
TOTAL	3303	3276	-	26	1

TABLE SHOWING THE NUMBER OF THE POPULATION
SUPPLIED FROM

PARISH	TOTAL POPULATION	PUBLIC WATER MAINS		SOURCES OTHER THAN PUBLIC WATER MAINS	
		Piped Direct to Houses	By means of Stand Pipes	Piped Direct to Houses	Non- piped Supply
BALNE	220	220	-	-	-
BEAL	653	650	-	-	3
BIRKIN	109	109	-	-	-
BROTHERTON	586	586	-	-	-
BYRAM	1145	1145	-	-	-
BURTON SALMON	250	250	-	-	-
CRIDLING STUBBS	140	131	-	9	-
DARRINGTON	1125	1125	-	-	-
EAST HARDWICK	182	182	-	-	-
EGGBOROUGH	1351	1333	-	18	-
FAIRBURN	637	634	-	3	-
HECK	150	150	-	-	-
HENSALL	349	349	-	-	-
HILLAM	383	380	-	3	-
KELLINGTON	671	671	-	-	-
MONK FRYSTON	600	594	-	6	-
STAPLETON	70	40	-	30	-
WHITLEY	389	386	-	3	-
WOMERSLEY	310	304	-	6	-
TOTAL	9320	9239	-	78	3

WATER SUPPLIES, continued

During the year, the few complaints received were concerned with the colour and sediment in the supply rather than its purity. This nearly always resulted from a drop in mains pressure or a breakdown in supplies.

This source of irritation however could be completely eliminated by a regular system of flushing all troublesome mains.

SANITARY ACCOMMODATION

The improvement and modernisation of old houses together with the construction of new houses, some as replacements for those which are unfit has brought about a reduction in the number of premises without water-borne sanitation. Although the number involved this year is not very great, it all helps towards the goal of eliminating all these primitive units of sanitary accommodation.

With the modernisation of the four cottages at Burton Salmon, the only remaining Council owned properties without water-borne sanitation are the four cottages at Womersley which the Council purchased from British Rail.

A scheme has been prepared for these cottages to be modernised and it is hoped that this will be carried out in the near future at the same time as the installation of the main drainage scheme for Womersley.

The conversion of the remaining primitive units of sanitary accommodation must be a priority requirement and as soon as the outstanding main drainage systems are in operation, this work should be carried out.

As the majority of conversions take place alongside the extensive improvement and modernisation of properties it is not surprising that the number of applications for the old conversion grant remains extremely low. Nevertheless it was felt there was a need to revise the outdated maximum grant of £12.10.0 per conversion, so this has now been increased to £65.

APPLICATIONS FOR CONVERSION GRANT	....	-
GRANTS PAID	.....	-
PENDING COMPLETION OF WORK	.....	2

TABLE SHOWING TOTAL SANITARY ACCOMMODATION FOR ALL PREMISES

Number of Privies with middens or ashpits ..	16
Number of Pail or tub closets	135
Number of waste-water closets	-
Number of pedestal Water Closets	3419
Percentage on water carriage system - 95.8%	3570

ALTERATIONS AND ADDITIONS MADE DURING THE YEAR

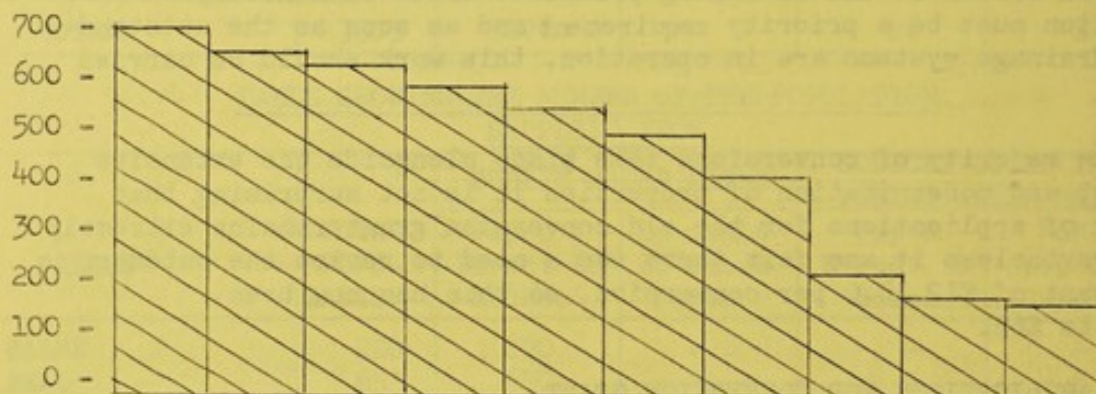
Number of privies reconstructed as W.C's	.....	1
Number of privies reconstructed as pails	.....	-
Number of pails reconstructed as W.C's	.....	2
Number of W.C.'s constructed for new houses	...	56

TABLE SHOWING PAROCHIAL DISPOSITION OF SANITARY ACCOMMODATION

PARISH	PRIVIES	PAILS	W.C's	TOTAL
BALNE	-	16	68	84
BEAL	-	1	282	283
BIRKIN	-	-	41	41
BROTHERTON	-	-	239	239
BYRAM-CUM-SUTTON	-	2	406	408
BURTON SALMON	1	4	100	105
CRIDLING STUBBS	1	1	52	54
DARRINGTON	-	1	397	398
EAST HARDWICK	3	-	75	78
EGGBOROUGH	-	7	530	537
FAIRBURN	5	4	228	237
HECK	-	20	40	60
HENSALL	1	23	109	133
HILLAM	2	10	128	140
KELLINGTON	1	17	224	242
MONK FRYSTON	1	11	230	242
STAPLETON	-	3	24	27
WHITLEY	-	7	137	144
WOMERSLEY	1	8	109	118
TOTAL	16	135	3419	3570

TABLE SHOWING DECLINE IN NUMBER OF PREMISES
HAVING NON-WATER BORNE SANITATION

Units



Year 1963 1964 1965 1966 1967 1968 1969 1970 1971 1972

SEWERAGE AND SEWAGE DISPOSAL

The relaying and re-siting of all the unsatisfactory sewers in the village of Brotherton was completed during the year and another major scheme, the provision of main drainage for the parishes of Heck, Hensall and Kellington is well on the way to completion, leaving only one major scheme outstanding - the one for the parishes of Darrington, Stapleton and Womersley. As it would now seem that Darrington will be joining the new Metropolitan County of West Yorkshire, one can only hope that this scheme will be commenced and well on the way to completion before the 1st April, 1974.

The only villages without main drainage once these major schemes have been completed will be those of Balne and Birkin and instructions have been given to the Council's consultants to assess the situation. Balne is a large scattered area without a real centre and Birkin is smaller and compact.

SEWERAGE AND SEWAGE DISPOSAL, continued

TABLE SHOWING DIFFERENT METHODS OF SEWAGE DISPOSAL COMPARING
LOCAL AUTHORITY HOUSES WITH OTHERS

NUMBER OF HOUSES CONNECTED TO PUBLIC SEWERS		TOTAL
Local Authority Houses at:		
Broad Lane, Beal	4	
Craven Garth, Beal	12	
Gables Close, Beal	10	
Hollygarth Lane, Beal	4	
Riverdale, Beal	19	
Sudforth Lane, Beal	10	
Belmont, Brotherton	20	
Foxcliff, Brotherton	49	
Marsh Croft, Brotherton	22	
Marsh Houses, Brotherton	2	
Beech Grove & Main St, B. Salmon	18	
Railway Cottages, Burton Salmon	4	
Top Stone Close, Burton Salmon	15	
East Acres, Byram-cum-Sutton	40	
Byram Park Road, Byram	52	
West Acres, Byram-cum-Sutton	116	
Woodlea, Byram-cum-Sutton	44	
Croft Lea, Cridling Stubbs	19	
Sotheron Croft, Darrington	28	
Northleigh, East Hardwick	10	
Graysfield, Eggborough	8	
Greenacres, Eggborough	47	
Selby Road, Eggborough	20	
Westfields, Eggborough	138	
Ash Lea, Fairburn	30	
Fairfield, Fairburn	43	
North Road, Fairburn	10	
Top Fold, Fairburn	18	
Ashfield, Hillam	6	
Church Lane, Monk Fryston	8	
Mill Close, Monk Fryston	56	
Cathcart Close, Whitley	23	
Church Row, Whitley	7	
Whitefield Lane, Whitley	10	922
Private Houses	1464	2386 (72.2%)
NUMBER OF HOUSES CONNECTED TO SMALL SEWAGE DISPOSAL PLANTS		
Local Authority Houses at:		
Highgate, Balne	8	
Lowgate, Balne	4	
Roe Lane, Birkin	6	
Dene Close, Eggborough	28	
Barrington Garth, Kellington	8	
Manor Garth, Kellington	112	
Station Road, Womersley	24	190
Private Houses	13	203 (6.1%)
NUMBER OF HOUSES CONNECTED TO CESSPOOLS OR SEPTIC TANKS		
Local Authority Houses at:		
Northfield Lane, Womersley	12	12
Private Houses	568	580 (17.6%)
NUMBER OF HOUSES WITHOUT WATER-BORNE SANITATION		
Local Authority Houses at:		
Station Cottages, Womersley	4	4
Private Houses	130	134 (4.1%)
		3303

SEWERAGE AND SEWAGE DISPOSAL, continued

However, even if these two small schemes are operational, it is not the end of the problem for an examination of the schemes which have been completed during the last decade shows that groups of houses on the outskirts of villages are not served by main drainage. Although many such properties were included in the general schemes, the Ministry cut them out on the grounds that their inclusion would necessitate the construction of so-called unremunerative lengths of sewers. If these omissions are ever corrected, the original cost would seem an absolute bargain at present day prices and the sooner the situation is made good the more economical it will be.

DISPOSAL OF CONTENTS OF CESSPOOLS AND SEPTIC TANKS

The continuing and shocking practice of depositing the contents from the cesspool emptier on to the Council's refuse tip at Beal could present a serious health problem, if any of the leachate found its way into the aquifer. However, with the completion of the Hensall, Heck and Kellington main drainage scheme there will be provision at the new sewerage works at Eggborough for the reception of the contents of this so it will no longer be necessary to continue this most unsavoury practice.

REFUSE COLLECTION

A weekly collection service is operated throughout the rural district apart from a few isolated premises where special arrangements are made. Very few complaints were received during the year and the service proved to be adequate.

Householders too with their active co-operation helped not only to maintain but to improve this service. Perhaps the future will see even better improvements such as dustless loading but the nature of the district with its non-urban characteristics makes it difficult to employ a more sophisticated type of vehicle where dustless loading could be readily achieved.

Once again there was difficulty in maintaining a good labour force and now the extension to the M.62 has commenced in this area, the difficulties experienced a few years ago in this field have returned. If it had not been for the availability of students during the summer months to stand in for the regular workmen on holiday the service would have run into grave difficulties.

The changing character of household refuse continues and the rapid advances in the packaging industry is bringing with it problems of disposal as not only is the amount of refuse increasing but the combustible content rises pro rata.

Some householders do play their part in trying to compress or flatten packets before discharging them into the dustbin but more could be done to help combat this problem.

It has not been practical to extend the paper sack system of refuse storage but where such schemes are in operation, they have been completely justified in the time saved and the improved hygiene associated with this system.

REFUSE COLLECTION, continued

TABLE SHOWING COLLECTIONS MADE FROM EACH PARISH

PARISH	BINS	PAILS	ASHPITS	PRIVIES
BALNE	89	16	-	-
BEAL	253	1	-	-
BIRKIN	55	-	-	-
BROTHERTON	267	-	-	-
BURTON SALMON	106	4	-	1
BYRAM-CUM-SUTTON	459	2	-	-
CRIDLING STUBBS	56	1	1	-
DARRINGTON	477	1	-	-
EAST HARDWICK	85	-	-	3
EGGBOROUGH	499	7	-	-
FAIRBURN	251	4	-	5
HECK	60	20	-	-
HENSALL	136	23	-	1
HILLAM	142	10	-	2
KELLINGTON	247	17	-	1
MONK FRYSTON	256	11	-	1
STAPLETON	30	3	-	-
WHITLEY	161	7	-	-
WOMERSLEY	126	8	-	1
TOTAL	3755	135	1	16

The Council now supply **plastic** dust bins with rubber lids in lieu of the galvanised type and **these** together with the paper sacks help considerably to improve the noise factor during collections, and this is an important factor in these days of ever increasing noisy environments, especially in those precincts occupied by the elderly and often this is overlooked or even forgotten.

The following table gives the sum total number of receptacles dealt with during the year:-

DUSTBINS	195,260
PRIVY MIDDENS	104
ASHPITS	7
PAIL CLOSETS	7,020

LITTER ACT

Once again the number of cars abandoned on the highway was less than the year before but the dumping of rubbish in the countryside has increased despite the fact that anti-litter notices have been erected at strategic points throughout the district - perhaps this increase would have been even greater had not these notices been erected.

Why this despicable practice should continue is difficult to understand especially as most local authorities like the Rural Council are only too pleased to make special arrangements for the removal of bulky or other abnormal items of refuse and although sometimes this service is not completely free it is always performed at a nominal cost. We are not yet litter conscious in this country in spite of all the anti-litter campaigns and until the act of depositing litter is looked upon as a social evil and taught so at a very early age, it will continue.

REFUSE DISPOSAL

There are three refuse disposal points in the district, these are tips situated in disused quarries at Beal, Byram and Stapleton. The tipping space available at both Byram and Beal is very limited and so planning permission was obtained for two new sites one to serve the northern parishes in the Monk Fryston area the other on a site adjacent to the existing tip at Beal. Both planning consents were subject to a number of conditions, however, some of these were considered by the Council to be most unreasonable and so appeals have been lodged but the results have not yet been announced.

<u>TABLE SHOWING NUMBER OF LOADS AT EACH TIP</u>		
<u>TIPS</u>		<u>LOADS</u>
Beal	.....	531
Stapleton	.....	202
Byram	.....	428
		1161

The tip at Byram is very near to a poultry farm and unlike the other two tips, there is a persistent fly problem during the summer months. The control of this is proving to be difficult because the variety of fly on the site is immune to the usual types of pesticide used and an expensive formulation containing a quick knock down element had to be used.

Unfortunately, so much putrescible matter is placed unwrapped in dustbins these days that when the dustbin lid is left off or is illfitting this matter is very attractive to flies and they commence to breed. Therefore, as fast as flies are being destroyed on the tipping area, they are constantly being replaced with every new load of refuse deposited and so very frequent treatment of the tips is necessary and the actual loads on the vehicles are sprayed during the course of collections.

These measures seem to work quite well at the Beal and Stapleton tips but at Byram owing to the type of premises near the tip, there is re-infestation and the problem is very persistent.

REFUSE DISPOSAL, continued

There has been a slight increase in the number of journeys to the tip this year but with the ever increasing bulk set out for collection, there is a limit on what can be done to reduce these journeys.

Refuse these days is mainly comprised of bottles, tins, packaging, plastic canisters, decaying vegetable matter and only a small percentage of ash or similar solid material. Because of this it is very important to blind the surface with suitable hard material which binds together to form a crust.

When the new tips are put into operation it will be necessary to staff them and to have a tracked vehicle on site in regular use to both compact and cover the refuse daily as the strict planning conditions call for these measures - what improvements could be made to the existing tips if these facilities were available now.

REFUSE STORAGE

The table below shows the number and types of receptacles in use by the end of December, 1972.

DUSTBINS	3606
PRIVY MIDDENS	16
DRY ASHPITS	1
PAILS	135
PAPER SACK HOLDERS	149

Unfortunately there has not been any dramatic reduction in the number of ashpits, middens or pails in use as the Heck, Hensall and Kellington sewerage scheme was only just about completed at the end of the year and the expected conversions did not take place.

TRANSPORT

During the year the Council ordered a new S. & D. Freighter with fore and aft tipping arrangements with a 35 cu.yd body. It is expected that the use of this vehicle would increase the payload and result in less running about. But in the meantime the 18/25 cu yd capacity vehicles are giving sterling service.

At the present time it is not possible to employ one of the more sophisticated type of refuse collection vehicles with continuous compression or with rotating blades as with so much liquid refuse collected it is necessary to have a vehicle with watertight rear doors. Once the problem of liquid refuse is overcome, the future employment of this type of vehicle would greatly improve the service.

MOVEABLE DWELLINGS

The table following gives details of the current licensed sites. This shows a decrease in the number of caravans stationed on the one exempted site. The usual infringements of a minor character occur from time to time and are dealt with on an informal basis. One operator allowed an influx of caravans on to his site almost doubling the permitted number. Action had to be taken with the result that he gave an Undertaking to reduce the number of vans on the site

MOVEABLE DWELLINGS, continued

to that permitted by the site licence. The number of occasions when itinerant travellers or gypsies stage on the verges of the highway at certain points in the district have been very few indeed, in fact there has been an almost complete absence of itinerants.

	TOTAL SITES	NO. ON SITES
Permanent sites licensed	2	32
Other individual sites with limited planning permission	7	19

CONTROL OF DIRTY AND VERMINOUS PREMISES

It is pleasing to report that very few houses in the district come within this category and only on one occasion was it necessary to carry out any form of disinfestation.

Premises which deteriorate in such a fashion are almost invariably synonymous with the so called 'problem family'. The same number of these hard core families tend to persist despite all the efforts made on their behalf by the Welfare Services to improve their situations. There seems to be no evidence to suggest that the new Welfare Service has made any greater impact than before re-organisation. It would seem that the position will remain fairly static until a family service unit is available to give sound advice and physical help to those in need.

FACTORIES

The few factories in the district are small, well run and generally do not give cause for any undue concern. The statistics concerning factory inspections are all reproduced at the end of the report.

OFFICES, SHOPS AND RAILWAY PREMISES ACT

This Act administered by local authorities is designed to control the welfare and safety of all inside workers in industry and commerce excluding factories. The Robens report published during the year, seemed to favour a central Inspectorate to deal with these matters but nearly all the premises concerned are part of the general environment and are probably visited by officers of local authorities for some other purpose and such an Inspectorate would mean a duplication of visits, which on the face of it, seems rather illogical.

As far as can be ascertained there is 100% registration of such premises in this district and the overall figure remains fairly constant. Generally those situate in the rural area are the smaller type of premises and they do not present any serious problem. Inspections usually reveal only minor infringements of the Act and these are usually easily remedied by informal action.

ANIMAL BOARDING ESTABLISHMENT

There is only one registered establishment situate in the Rural District and this is always run in a good businesslike manner, conforming to the Council's strict requirements for such premises. The location is somewhat isolated and no complaints whatsoever have been received during the year. The premises are registered for a maximum of 49 dogs and 8 cats.

PESTOLOGY

The total number of premises affected and requiring the services of the department remained approximately the same as last year - the elimination of ants and wasps nests forming the major proportion of the work involved.

A few houses in the Brotherton area seem to be persistently infested by ants and as previously mentioned, these creatures are very difficult to control unless the fullest co-operation of the occupier is forthcoming and even then there is no certainty of success. The table below shows the number of visits made in conjunction with this work.

Bryobia Praetiosa ... (Clover Mite)	4
Lasius Niger (Ants)	88
Musca Domestica (House Flies)	15
Vespa Vulgaris (Wasps)	24
Cononimus Nodifer .. (Plaster Beetle) ..	6
Silver Fish (Thermobia Domestica)	2

INFECTIOUS DISEASES

These days requests for terminal disinfection are almost non-existent, nevertheless, where necessary, cases were visited and advice given on precautions to be taken to prevent the spread of infection.

CONTROL OF NOISE

The quality of life in any community can be seriously affected by any excessive noise source so when considering plans for approval any noise factor should be taken into consideration, whether it be the production of a new source of noise or the placing of development near to an existing source.

It is now generally accepted that traffic noise presents one of the most serious and difficult problems and as the new M.62 motorway now being constructed will eventually traverse the district in a west to east direction, any proposed development contemplated in the vicinity of this road will have to be carefully scrutinised.

A few specific cases of nuisance by noise were reported during the year, these were concerned with the blasting from quarries, the operation of a corn drying plant and of lorry engines being revved up in the car park of a transport cafe. The latter source can be particularly annoying when it occurs in the early hours of the morning. The complaints relating to the quarries were referred to the Mines and Quarries Inspectorate.

The complaint concerning the grass dryer was investigated by the department and ground level readings were taken both inside and outside the houses of the complainants but these showed there was not any infringement of acceptable standards. Nevertheless certain minor alterations were carried out to the plant in an effort to reduce the effect but for these plants to operate it is necessary to have a large capacity fan and it is just not possible to stop the noise caused by air passing through the blades when in operation. Fortunately, this plant is being phased out and is in operation for only two or three weeks during the harvesting season and they only run during reasonable working hours.

CONTROL OF NOISE, continued

The problem of revving up the engines of lorries on transport cafe car parks is one of human behaviour and to a certain extent caused by thoughtlessness on the part of the drivers concerned. This has been pointed out and there has been some improvement in the situation.

With extensive development taking place in the district, the time is rapidly approaching when a noise survey should be carried out throughout the rural area to ascertain the existing ambient noise levels so that some reliable data is available for future use to provide evidence against unacceptable proposals.

RODENT CONTROL

A free service is usually provided for all private dwellings and a contract service is operated by the Council for industrial and agricultural premises either on an annual or single treatment basis. The table below sets out the incidence of infestation and the control measures taken:

SYNOPSIS OF WORK FOR THE YEAR ENDED 31ST DECEMBER, 1972

	TYPE OF PROPERTY	
	NON- AGRICULTURAL	AGRICULTURAL
<u>PROPERTIES OTHER THAN SEWERS</u>		
(1) Number of properties in District	3342	328
(2) (a) Total number of properties (including nearby premises) inspected following notification	713	106
(b) Number infested by:		
(i) Rats	561	90
(ii) Mice	152	16
(3) (a) Total number of properties inspected for rats and/or mice for reasons other than notifications	207	157
(b) Number infested by:		
(i) Rats	43	53
(ii) Mice	4	4
<u>SEWERS</u>		
(4) Sewers infested by rats during the year were treated.		

Owing to the relatively mild winter the normal winter death toll of rodents did not take place and breeding commenced earlier in the year than usual, as a result, an abnormally high number of substantial infestations were reported in the late spring and the demands upon the service were rather extensive for this usually semi-dormant period.

However it is true to say there has been better co-operation on the

RODENT CONTROL, continued

part of the occupiers of premises and in particular by those adjacent to the major infestations, this has helped to mitigate the problem somewhat, as to achieve the best and lasting results it is very necessary for simultaneous treatments to be carried out on any adjoining premises where there is the slightest trace of rodents.

The following places were regularly surveyed or treated during the year:

TIPS

Beal	Stapleton	Byram
------	-----------	-------

SEWAGE WORKS

Beal	Cridling Stubbs	Darrington
Eggborough		Hillam

HOUSING ESTATE WORKS AND ASSOCIATED SEWERAGE SYSTEMS

Birkin (Roe Lane)	Womersley (Station Road)
-------------------	--------------------------

SEWERAGE SYSTEMS

Beal	Cridling Stubbs	Fairburn	Whitley
Brotherton	Darrington	Hillam	
Byram	East Hardwick	Monk Fryston	
Burton Salmon	Eggborough	Wentbridge	

OLD VILLAGE SEWERS

Womersley

OPEN DYKES SITUATE OR NAMED AS FOLLOWS

Balne	-	Highgate
Beal	-	Sudforth Lane: Scholey
		Metcalf: Goddard: Beal Houses:
		Snowden Pond: Baxters: Brears:
		Jacksons: Poskitts: Cunningtons:
Birkin	-	Main dyke
Brotherton	-	Marsh Drain
Byram	-	Sutton Lane: Poole
Burton Salmon	-	Main dyke
Cridling Stubbs	-	Main dyke (part)
Darrington	-	Main dyke
East Hardwick	-	Main dyke
Fairburn	-	New Row
Heck	-	Main dyke
Hensall	-	Britannia: Weeland Road:
Hillam	-	Ben dyke
Kellington	-	Longbottom: Post Office
Monk Fryston	-	Common dyke
Whitley	-	Maltkiln: Croysdale:
		Normanton Cottages: Dixon:
		Huddlestons: Chapel:
		Blenheim: Silver Street:
Womersley	-	Station Road.

RODENT CONTROL, continued

A problem rather peculiar to this rural district is the treatment of the many open dykes which receive untreated and partly treated drainage. This type of work is very time absorbing, is difficult and on occasions dangerous. Fortunately however with the completion of sewerage schemes in the many villages it is diminishing, nevertheless, there are miles of banks still being treated.

As a balancing factor, the use of flouracetamide in the treatment of sewers, has now made this type of work much simpler and the results obtained by the use of this chemical are far more positive than before it was available.

One of the most difficult areas in the field of rodent control is at the refuse tips. On these sites it is almost impossible to obtain 100% kill owing to the continual disturbance of the area itself and the vast amount of alternative food available for the rats. A constant battle is always raging in these environments as unless masses of extremely palatable bait is used to attract the rats there is absolutely no hope of reducing the rat populations to an acceptable level and it is nigh impossible to achieve 100% control.

The number of direct poisons available for this work are very limited, however at the moment there seems no evidence to suggest that the rats in this area are showing resistance to the most commonly used rodenticide, namely the anti-coagulant. Again, there was a number of serious infestations at lay-byes on the side of trunk roads such infestations are rapidly spread to adjoining fields and often do much damage to crops before they are noticed. A little more thought by the travelling public who use these lay-byes could often prevent this kind of thing happening especially if they refrain from scattering litter and scraps of food around these areas.

The infestation of premises by mice is on the increase and this is becoming quite a serious problem throughout the country. Fortunately in this area, the increase is only slight but even so in the hotter months of the year when the use of alphachlorose is ineffective, some infestations are very difficult to eradicate and often many more visits have to be paid to premises than at other times of the year and without obtaining the same degree of success.

It is quite evident that much more attention should be paid to the rodent proofing of buildings, be they houses, stores, warehouses or blocks of flats. Central heating coupled with numerous pipe ducts create mini-paradises for rodents and in these situations, once present, they are extremely difficult to eradicate. The obvious answer is to prevent rodents from gaining access to buildings in the first instance, hence the necessity to obtain the fullest co-operation from architects, surveyors, building inspectors and other people who are concerned with the design and construction of buildings and those who supervise and control their erection.

Once again the Council was represented on the West Riding Pests Control Council run under the auspices of the Ministry of Agriculture, Fisheries and Food. This Council meets once or twice a year and is a forum for the exchange of ideas on pest control and the Ministry officers are able to disseminate information on all the latest developments resulting from the extensive field work they carry out.

RODENT CONTROL, continued

This Ministry also runs courses for the training of operatives and public health staff in the field of rodent and pest control. It also carries out liaison work between local authorities where widespread infestations, transcending the boundaries of local authorities which have to be dealt with.

ATMOSPHERIC POLLUTION

There is negligible pollution from the few modern and well equipped industrial plants in the rural district but this is not so in the case of the Eggborough Power Station and those at Ferrybridge which border the rural area.

Trouble has been experienced from time to time with fall-out especially during adverse weather conditions, albeit the electrostatic precipitators erected in the boiler flues of these power stations are 99% plus efficient, the odd fraction of the 1% which escapes can produce a substantial deposit because of the vast amount of fuel consumed. Also, when these small particles tend to coagulate then they fall out in the vicinity of the station. In addition, choking sulphur fumes often descend under such adverse weather conditions and nearby residents suffer from the effects of this unpleasant form of pollution.

TABLE SHOWING MONTHLY FIGURES OBTAINED FROM
LEAD PEROXIDE INSTRUMENTS RELATING TO
SULPHUR CONTENT OF ATMOSPHERE

MONTH	SO ₂ MG/DAY/100 SQ.CM		
	STATION 2 Glebe- lands	STATION 3 Spring Gardens	STATION 4 Kellington Church Yard
January	0.5	1.0	0.4
February	0.3	0.4	0.4
March	0.7	0.9	1.1
April	0.7	0.8	0.9
May	-	-	-
June	-	-	-
July	-	-	-
August	1.0	1.4	1.4
September	0.8	0.5	1.4
October	0.4	0.8	0.7
November	0.4	0.6	0.8
December	1.2	1.7	1.4

The above table shows the monthly figures obtained from the lead peroxide instruments operated by the Council. These figures show a downward trend in the amount of sulphur present in the atmosphere

ATMOSPHERIC POLLUTION, continued

around the Kellingley Colliery area, one can only hope this trend will continue. Unfortunately, there are no figures for the months of May, June and July as these were spoiled during the analysis stage.

As stated last year the Central Electricity Generating Board have completed their survey in relation to the Eggborough and Ferrybridge Power Stations but are now carrying out a similar survey in connection with the new Power Station at Drax. One of the testing points is at Heck where the sulphur content of the atmosphere is continuously monitored as part of the national survey on atmospheric pollution.

In addition to this, the Chief Chemist at Eggborough Power Station has placed directional deposit gauges on several sites within the Rural District including some on the periphery of the Gale Common ash disposal site. These sites do not form part of the general survey of atmospheric pollution, they are simply for the Board's own record purposes.

H.M. District Inspector of Alkali Works has done sterling work to mitigate this problem and conditions are far better than they were, however, it is impossible to combat the phenomena of nature and when temperature inversion takes place it is almost inevitable that some irritation will occur.

It is pleasing to report that another source of annoyance has been eliminated, namely the deposits caused by the transportation of furnace bottom ash and in some instances P.F. ash by open lorry through a certain village's streets. This is material deposited on the highway, either by spillage or by being carried out of the site on the tyres of the lorries concerned and once dry, it is blown about by gusts of wind. Naturally there has been bitter controversy over this practice and the Central Electricity Generating Board have spent considerable sums of money in installing a vehicle and tyre washing machine, the concreting of roads leading on and off the site and within the site area to combat or eliminate this problem. The benefit of all this work is now being felt by the local residents.

This selfsame problem has occurred in the Eggborough and Whitley areas again due to the transportation by road in open vehicles of ash from the Eggborough Power Station. Although these lorries are now sheeted, there is occasional spillage onto the highway which seems so unnecessary.

If this practice is to continue, strong representations must be made for the enclosed tanker type of vehicle, similar to those used for the carrying of bulk cement to be used. These vehicles would cut out any possible human error of overloading or unsheeting and the problem would be solved overnight.

Considerable progress has been made to eliminate the long standing nuisance caused by floaters (fine particles of silicon) blowing from the ash disposal lagoons used in conjunction with the Ferrybridge Power Stations. The management and staff of the Ferrybridge 'B' Station have been tireless in their efforts to control this problem and now it is only under extreme windy conditions that mishaps occur. One can only hope that when the deposits at Gale Common begin to rise, no similar nuisance will occur.

SECTION B.

HOUSING

The first part of the year was spent in the field, collecting specimens and making observations on the habits of the various birds and mammals. The second part was spent in the laboratory, preparing the specimens and making the necessary measurements and calculations.

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HOUSING GENERAL

The year 1972 has been one of consolidation rather than expansion in the field of new building by the Council. Unfortunately, it was not possible to complete any new dwellings during the year under review but 56 new houses were built in the private sector. However, plans have been laid for the construction of 55 dwellings for the aged in the villages of Balne, Beal, Burton Salmon, Fairburn, Hensall, Whitley and Womersley. It is always difficult, especially in a scattered rural area to decide whether to build a few dwellings for the aged in each parish or to centralise in one or two areas and build a sufficient number of dwellings to justify the services of a warden. The Council compromised by having centralisation at Womersley and possibly utilising part of the existing parish hall as a community centre and in each of the other above-mentioned parishes a few dwellings would be erected.

Unfortunately, at the present time, the Council have not any land available in the Byram area and yet this is probably the one area where there is the greatest need for this type of accommodation. By concentrating building on the smaller type of dwelling, it will help to improve the unbalanced ratio that exists at the present time between these and the number of three bedroomed houses.

The demand for the single bedroomed bungalow or flatlet has been on the increase for the last few years and it seems likely that this trend will continue for some time to come especially if tenants whose families have grown up and left home and therefore underoccupying three or four bedroomed houses, are willing to move into smaller accommodation thus releasing the larger houses for young families on the waiting list. The rent rebate scheme should help in this matter as in the past the higher rents of the latest bungalows has somewhat discouraged this kind of movement taking place.

Once again it has been difficult to let the older type of council house, the young families of today, given the choice, simply do not want the type of house built between the two wars. Modernisation of these houses may be the answer but some environmental improvement is also necessary.

Most of the unfit houses in the district were dealt with and cleared some years ago but houses like other things wear out and sometimes there comes a time when a house falls into grave disrepair, where it is impracticable or uneconomical to modernise it and so there is a continual need for taking action under the Housing Acts for the clearance of such houses.

From the records available there are in the district approximately 150 houses without hot water, 200 houses without a bath and 400 without inside sanitary accommodation, the problem being most acute in the villages of Brotherton, Fairburn, Hensall and Heck.

Experience has shown however, that the impact of the 1971 Housing Act is now being felt. This Act followed on the 1969 Act which permits local authorities to give increased grants for the improvement of older properties and in addition for the first time grants were available for repair work when done in conjunction with improvement work when certain conditions were fulfilled.

HOUSING STATISTICS YEAR 1972

1. HOUSES DEMOLISHED

	No. of Houses Demolished	Displaced during year	
		Persons	Families
<u>IN CLEARANCE AREAS:</u>			
(1) Houses unfit for human habitation	-	-	-
(2) Houses included by reason of bad arrangements, etc.	-	-	-
(3) Houses on land acquired under section 43(2) Housing Act, 1957	-	-	-
<u>NOT IN CLEARANCE AREAS:</u>			
(4) As a result of formal or informal procedure under secs 16 or 17(1) Housing Act, 1957	8	2	1
(5) Local Authority owned houses certified unfit by the Medical Officer of Health	-	-	-
(6) Houses unfit for human habitation where action has been taken under local Acts	-	-	-
(7) Unfit houses included in Unfitness Orders	-	-	-
Number of dwellings included above which were previously reported as Closed	2	-	-

2. UNFIT HOUSES CLOSED

(8) Under secs.16(4),17(1) and 35(1) Housing Act, 1957 and sec 26 Housing Act, 1961	7	11	4
(9) Under secs 17(3) and 26 Housing Act, 1957	-	-	-
(10) Parts of buildings closed under sec.18, Housing Act, 1957	-	-	-

3. UNFIT HOUSES MADE FIT AND HOUSES IN WHICH DEFECTS WERE REMEDIED

	By Owner	By Local Authority
(11) After informal action by local authority	11	-
(12) After formal notice under		
(a) Public Health Acts	-	-
(b) Sections 9 & 16 Housing Act, 1957	-	-
(13) Under sec.24 Housing Act, 1957	-	-
(14) Previously included in a Closing Order or Undertaking which has been or will be determined under Sec.27 Housing Act, 1957	-	-

4. OTHER HOUSES IN WHICH DEFECTS WERE REMEDIED

	By Owner	By Local Authority
(15) After formal notice under		
(a) Public Health Acts	-	-
(b) Sec.9(1A) Housing Act, 1957	-	-
(16) After informal action by local authority	4	-

5. UNFIT HOUSES IN TEMPORARY USE (Housing Act, 1957)

	Number of Houses (1)	Number of Separate dwellings in col.1 (2)
Position at end of year		
(17) Retained for temporary accommodation		
(a) under section 48	-	-
(b) under section 17(2)	-	-
(c) under section 46	-	-
(18) Licensed for temporary occupation under sections 34 or 53	-	-

6. PURCHASE OF HOUSES BY AGREEMENT

	Number of Houses (1)	Number of Occupants of houses in col.1 (2)
(19) Houses in Clearance areas other than those included in confirmed Clearance Orders or Compulsory Purchase Orders purchased in the year	-	-

7. NO. OF FAMILIES REHOUSED DURING THE YEAR INTO COUNCIL OWNED DWELLINGS

(a) Individual Unfit	5
(b) Clearance Areas	-
(c) Overcrowding	15
(d) Other	25

8. HOUSING ACT, 1969: IMPROVEMENT CASES

(a) Number of applications for Qualification Certificates ..	7
(b) Number of Provisional Approvals issued	4
(c) Number of Qualification Certificates issued	4
under Section 46(3)	

9. NEW DWELLINGS

Number of new dwellings completed during the year:

(a) By Local Authority	-
(b) By Private Enterprise	56

10. GRANTS FOR CONVERSION OR IMPROVEMENT OF HOUSING ACCOMMODATION

	Formal Applications received during the year NUMBER OF DWELLINGS	Applications approved during the year NUMBER OF DWELLINGS	No. of dwellings completed during the year
(a) Conversions (the number of dwellings is the number resulting from completion of the work)	-	-	-
(b) Improvements			
(i) Standard	7	5	5
(ii) Discretionary	42	33	8

The Council have always been keen to encourage people to take the fullest advantage of these inducements to improve and prevent the decay of the older type of property, especially in the smaller villages where such properties have a certain amount of character which would be lost for ever should it be necessary to demolish. By way of example a comprehensive scheme for the improvement of all the Council's older type of dwelling has been planned and should commence early next year.

HOUSING GENERAL, continued

In addition to the general improvement of these dwellings, it has been suggested that environmental improvements should take place on some of the older sites.

FITNESS STANDARDS

It is now six years since a revised standard of fitness was suggested in the report 'Our Older Homes; A Call for Action', this standard was very little better than that set out in the 1957 Act and the reason for this was that it would be unrealistic to raise the fitness standard substantially with so many unfit houses remaining to be dealt with.

The position is almost identical at the present time but this should not prevent the standard from being reviewed as a better standard would probably only affect those unfit houses capable of being repaired or improved and not the hard core of houses where demolition is the only solution.

The suggestion in the Report that a house is suitable for habitation without facilities for obtaining hot water on tap to a kitchen sink is just as absurd as saying horse drawn trams are quite suitable for public transport at the present time. Surely if hot water has to be obtained otherwise than on tap and has to be carried to the sink in a container it is asking for accidents to happen in the home. With modern appliances now available it is quite simple to remedy the position and there should be no doubt about the necessity.

REPAIR OF UNFIT HOUSES

Although the spirit may be willing in the field of house repairs, it is most difficult to have repairs carried out due to the lack of tradesmen and the almost complete demise of the old jobbing type of repairer. Unfortunately the larger firms tend to concentrate on the erection of new premises and are often unwilling to carry out repairs of this nature and even if they are willing to carry out this type of work, they are extremely reluctant to give quotations and are generally only willing to be engaged on a day work basis. However, it has been possible to obtain repairs to houses where this was absolutely necessary by informal action, but only with difficulty.

OVERCROWDING

This problem is almost non-existent in the Rural Area and there are no houses in multiple occupation. When a case of overcrowding does come to light, the Council is always ready to give such applicants favourable consideration when vacancies occur.

CLEARANCE OF UNFIT HOUSES

As previously mentioned, the extensive clearance campaign which was completed several years ago, has meant that very few houses remain unfit and suitable for action under the Housing Acts. It is only in extreme cases of decay and when not practicable to modernise or improve that such action is contemplated and only a handful of houses fell into this category. There is no doubt that the increased improvement grant now available has affected this figure but there will always be some instances where the only real answer is to demolish.

SLUM CLEARANCE
UNDER THE PROVISIONS OF THE HOUSING ACT, 1957

TOTAL NUMBER OF PERMANENT HOUSES IN AREA	3303
Number of Unfit houses to be demolished in first five years	261
Number dealt with in 1972	8
Total number dealt with from end of November, 1955 to end of 1972	508
Number scheduled before November, 1955 and subsequently dealt with	77
Number of houses to be retained for temporary accommodation	-

IMPROVEMENT OF EXISTING HOUSES

The Council, like many others, have operated the improvement grant scheme provisions since the first grants were available under the terms of the 1949 Act and having completed a heavy slum clearance programme, the number of houses which could receive the benefit of improvement is somewhat limited. Nevertheless, today the emphasis is very much on the preservation of houses rather than their demolition and it is quite apparent by the increased number of applications for grants that this trend is very much on the increase. A trend which must be encouraged if the whole character of some of our villages is not to be lost.

This is not to say however that this privilege should be abused and with a limited amount of money available the modernisation of second homes, holiday cottages and the like should not be financed in this way.

NEW HOUSES

Unfortunately, the Council's proposals for the building of dwellings for the aged, did not get on the way during the current year as this year the emphasis has been placed on the preparation of schemes for the improvement of the older existing houses; as a result, not one council dwelling was built during the year.

In the private sector however, 56 houses were completed and although this was not as high as the 78 completed in the previous year, this number is well above the average for the few years prior to 1971.

RECOMMENDATIONS, JANUARY 1952

RECOMMENDATIONS

RECOMMENDATIONS OF THE BOARD, 1952

TOTAL NUMBER OF RECOMMENDATIONS MADE IN 1952

Number of units known to be demolished in 1952

Number of units known to be demolished in 1952

Number of units known to be demolished in 1952

RECOMMENDATIONS OF THE BOARD, 1952

Number of units known to be demolished in 1952

Number of units known to be demolished in 1952

RECOMMENDATIONS

Number of units known to be demolished in 1952

Number of units known to be demolished in 1952

RECOMMENDATIONS

Number of units known to be demolished in 1952

SECTION C

FOOD

HYGIENE

SECTION C

TABLE

INDEX

MEAT SUPPLY

Throughout the year only first class animals obtained mainly from local sources were purchased by the owners of the only slaughterhouse in the district, because of this, the animals arrive at the slaughterhouse in excellent condition to ensure the production of prime beef.

SLAUGHTERING FACILITIES

There is just one private slaughterhouse in the rural district, situated at Beal. Periodical visits are made by veterinary officers of the Ministry of Agriculture, Fisheries and Food. The premises are operated in a satisfactory way with good hygiene practices being constantly observed throughout the whole slaughtering operations.

MEAT INSPECTION

TABLE

	Cattle excluding Cows	Cows	Calves	Sheep & Lambs	Pigs
Number killed	108	-	6	188	4
Number inspected	108	-	6	188	4
<u>ALL DISEASES EXCEPT TUBERCULOSIS & CYSTICERCI</u>					
Whole carcasses condemned	1	-	-	-	-
Carcase of which some part or organ was condemned	17	-	-	1	-
PERCENTAGE	16.6%	-	-	.5%	-
<u>TUBERCULOSIS</u>					
Whole carcase condemned	-	-	-	-	-
Carcase of which some part or organ was condemned	-	-	-	-	-
PERCENTAGE	-	-	-	-	-
<u>CYSTICERCOSIS ONLY</u>					
Carcase of which some part or organ was condemned	-	-	-	-	-
Carcase submitted to treat- ment by refrigeration	-	-	-	-	-
Generalised and totally condemned	-	-	-	-	-

The above table shows a complete list of animals where post mortem examinations have been carried out.

With the co-operation of the butcher concerned, even though it was necessary to carry out meat inspection during Bank Holidays and on Sundays, it was not considered necessary to use the powers of the Meat Inspection (Amendment) Regulations to limit the hours of slaughter.

MEAT INSPECTION, continued

As expected with the high class type of animal slaughtered, very little meat was found to be unfit for food and only one animal was affected with a significant condition and even this was an animal sent for emergency slaughter. Unfortunately, the whole carcass and organs had to be rejected.

Once again, what is now becoming a usual feature in returns, the year was completely clear of tuberculosis but in addition, not one case of cysticercus bovis was found. This was quite common a few years ago.

GROUND FOR CONDEMNATION

DISEASE AND CONDITION	WEIGHT IN LBS			
	BEEF	VEAL	MUTTON	PORK
Cirrhosis	91	-	-	-
Haemotogenous Icterus	280	-	-	-
Multiple Abscesses	16	-	-	-
Bruising	14	-	8	-
TOTAL	401	-	8	-

PARTS OR ORGANS AFFECTED

BOVINE

Liver	1
Whole Carcase	1
Part Liver	15
Leg	1

MUTTON

Leg	1
-----------	---

POULTRY INSPECTIONS

There is nothing to report under this heading as there are not any poultry slaughtering establishments within the Rural District.

MILK SUPPLIES

Officers of the Ministry of Agriculture, Fisheries and Food supervise all milk production and raw designated milk is not retailed in the area.

Number of Milk Producers	9
Tuberculin Tested	9
Non-designated	-

The West Riding County Council, as Food and Drugs Authority, is responsible for the issue of licences to retailers and I thank the Chief County Public Health Inspector for supplying the following information:

MILK SUPPLIES, continued

Number of Milk Retailers	17
Designated	17
Non-designated	-

The following details are given of licences issued and samples taken in the district by the officers of the West Riding County Council.

MILK (SPECIAL DESIGNATION) REGULATIONS, 1960

Dealers Licences

Untreated	-
Ultra Heated	-
Pasteurised	8
Sterilised	16

TABLE OF MILK SAMPLES TAKEN

	Satisfactory	Unsatisfactory	Proceedings	Cautions
PASTEURISED	23	-	-	-
STERILISED	1	-	-	-

BRUCELLOSIS

As no raw milk is sold within the Rural area, the problem of brucellosis does not arise.

FOOD SAMPLING

This duty is undertaken by the Weights and Measures Department of the West Riding County Council and I append a table showing the activities of the officers of that department in so far as they relate to the sampling of food and drugs within the rural area.

TABLE OF FOOD SAMPLES

	Satisfactory	Unsatisfactory	Proceedings	Cautions
MILK	1	-	-	-
DRUGS	-	-	-	-
OTHER FOODS	10	-	-	-

ICE CREAM

The appended table shows the results of bacteriological examination of ice cream samples taken in the district. It shows that the standard of ice cream sold in the district is of the highest. There is one ice cream manufacturer within the district and the standard of hygiene at his premises is always good and the resultant product is usually bacteriologically satisfactory.

ICE CREAM, continued

TABLE

SAMPLES				VISITS
GRADE 1	GRADE 2	GRADE 3	GRADE 4	
22	-	-	-	46

FOOD PREMISES

LIST OF FOOD SHOPS AND FOOD PREMISES IN DISTRICT

Butchers	6
Cafes and Road Transport Cafes	4
Fish and Chip Shops	6
Ice Cream Manufacturer	1
Ice Cream Retailers	24
Licensed Premises	29
Mixed Businesses	29
Restaurants	7
Licensed Slaughterhouse	1

The above table lists the different types of premises concerned with the sale of food and drink. Periodical visits are made to these establishments but more frequent visits are desirable if complacency is not to set in and standards maintained.

Most of the premises are well equipped and have the necessary facilities for the appropriate types of business but the human factor is inconsistent and sometimes there is a distinct lack of appreciation of the term food hygiene.

BACTERIOLOGICAL SAMPLING

All the licensed premises and eating establishments in the Rural District were visited and swabs taken from glasses, crockery and eating utensils. Out of the 58 swabs submitted for examination, only four were unsatisfactory. The premises concerned were revisited and certain recommendations were made. Follow up swabs proved satisfactory after the remedial measures suggested had been put into operation.

FOOD HYGIENE

There can be no logical improvement in food hygiene when the law cannot take action to prevent any person setting up a catering establishment in the most unsuitable and hygienically unsound premises and where unhygienic practices are bound to occur.

It is only when such premises are actually in operation that steps can be taken to remedy this position but by the time the correct ritual has been enacted to obtain a successful prosecution, it may be too late to save some unsuspecting persons the agonies of contracting food poisoning, or even worse - perhaps a fatality.

One simple answer to prevent this is by 'prior registration'. If it becomes illegal to start such a trade before the premises are registered and to be registered the premises have to comply with the current Food Hygiene Regulations, most of these risks will disappear as only bona fide persons

FOOD HYGIENE, continued

go to the trouble and expense of putting premises into a satisfactory condition beforehand and take the trouble of knowing how to run them correctly.

Consideration must also be given to ensure that all people who work in food premises coming into contact with food are given a thorough medical check before commencing work and are re-examined periodically. This will not only be a valuable safeguard to the public in itself but will help to impress upon the workers the importance of food hygiene in the food trade and how other people may suffer as a result of their negligence.

There is much work still to be done in the field of food hygiene education and to make sure persons employed in the food trade are aware of their responsibilities. How many people start work without having the remotest idea of good hygienic practices - and, more important - are never told by their superiors what to do and what not to do in matters relating to food hygiene.

In this field, the public can help enormously by being more discriminating in their purchases, by not being reluctant to bring to the attention of the management anything which they think conflicts with good practice and by boycotting those premises which call for improvements.

APPENDIX

STATISTICAL

TABLES

SUMMARY OF INSPECTIONS AND VISITS

<u>HOUSING ACT:</u>	Inspections	293
	Housing Applications investigated	74
<u>PUBLIC HEALTH ACT:</u>	Inspections	82
	At houses	13
	At Other Premises	69
	Water Supplies	48
	Samples of Water taken	27
	Drains or Dykes examined	44
	Visits in Connection with Alterations	
	to Sanitary Accommodation	18
	Premises in course of erection	28
	Refuse Collection, visits in connection with	444
	Refuse Tips	174
	Infectious Diseases	1
	Dirty, Verminous or Pest infested premises	2
	Moveable Dwellings	141
<u>FOOD & DRUGS ACT:</u>	Inspections	353
	Food Preparation Rooms	66
	Ice Cream Premises	26
	Food Shops	83
	Food Vehicles	10
	Slaughterhouses	96
	Unsound Food in Shops	2
	Cafes, Restaurants	25
	Licensed premises	44
<u>FACTORIES ACT:</u>	.....	24
<u>CARAVAN SITES & CONTROL OF DEVELOPMENT ACT:</u>		
	Sites	55
<u>PESTS ACT:</u>	Inspections	240
	Sewers & sewerage dykes	120
	Tips	27
	Business premises	4
	Agricultural premises	28
	Other	61
<u>PETROLEUM REGULATIONS:</u>	.....	1
<u>OFFICES, SHOPS & RAILWAY PREMISES ACT:</u>	.....	83
<u>CLEAN AIR ACT (SMOKE ABATEMENT):</u>	.....	50
<u>WEST RIDING COUNTY COUNCIL (GENERAL POWERS) ACT</u>	.....	1
<u>ANIMAL BOARDING ESTABLISHMENTS:</u>	.....	4
<u>CIVIC AMENITIES ACT, 1967:</u>	.....	96
<u>MISCELLANEOUS ACTS OR REGULATIONS:</u>	.....	24
<u>WELFARE OF ELDERLY:</u>	.....	24
<u>MEALS ON WHEELS:</u>	.....	8
<u>DISEASES OF ANIMALS ACT:</u>	.....	2
<u>OTHER VISITS:</u>	.....	112
	Work in Progress	57
	Council Property	40
	Schools	2
	Noise	13

SUMMARY OF NOTICES SERVED

<u>STATUTORY</u>	<u>SERVED</u>	<u>COMPLIED WITH</u>
Public Health Act, 1936	-	-
Housing Act, 1957:		
Notice of Consideration	8	8
Demolition Orders	4	4
Demolition Orders (from Closing Orders)	24	24
Closing Orders	-	-
Undertakings not to re-let	4	4
Caravan Sites & Control of Development Act, 1960	-	-
Offices, Shops & Railway Premises Act, 1963	-	-

INFORMAL

Public Health Act, 1936	67	67
Housing Act, 1957	10	10
Food & Drugs Act, 1938)		
Food Hygiene Regulations, 1955)	6	6
Factories Act	1	1
Prevention of Damage by Pests Act 1949	-	-
Caravan Sites & Control of Development Act, 1960	1	1
Offices, Shops & Railway Premises Act, 1963	1	1

WORKS OF IMPROVEMENT CARRIED OUT

Conversions to Water Carriage system by Septic Tank	1
Conversions to Water Carriage system by connection to Council's sewers	17
Conversions to Pail closets	-
New drains laid	17
Water Closets provided	17
Baths provided	17
Washbasins and sinks provided	17
New cookers and grates provided	17
Hot water laid on	17
New ashbins provided: Replacement	138
Conversion	-
Food Premises renovated	1

ANNEX

PREScribed PARTICULARS
ON THE ADMINISTRATION
OF THE

FACTORIES ACT, 1961

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH
IN RESPECT OF THE YEAR 1972 FOR THE RURAL DISTRICT
OF OSGOLDCROSS IN THE COUNTY OF YORKSHIRE (WR)

PREScribed PARTICULARS ON THE ADMINISTRATION
OF THE FACTORIES ACT, 1961

PART I OF THE ACT

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

Premises (1)	Number on Register (2)	Inspections (3)	Number of	
			Written Notices (4)	Occupiers Prosecuted (5)
(i) Factories in which secs.1 2,3,4 & 6 are to be enforced by local authority	2	3	-	-
(ii) Factories not included in (i) in which sec.7 is enforced by local authority	18	19	-	-
(iii) Other premises in which sec.7 is enforced by the local authority (excluding outworkers' premises)	1	2	-	-
TOTAL	21	24	-	-

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

Particulars (1)	Number of cases in which defects were found				Number of cases in which prosecutions were instituted (6)
	Found Remedied (2) (3)		Referred		
			to H.M. Inspector (4)	by H.M. Inspector (5)	
Want of Cleanliness (S.1)	-	-	-	-	-
Overcrowding (S.2)	-	-	-	-	-
Unreasonable Temp.(S.3)	-	-	-	-	-
Ineffective Drainage of Floors (S.6)	-	-	-	-	-
Inadequate Ventilation(S.4)	-	-	-	-	-
Sanitary Conveniences(S.7)					
(a) Insufficient	-	-	-	-	-
(b) Unsuitable or defective	1	1	-	1	-
(c) Not separate for sexes	-	-	-	-	-
Other offences against the Act (not including offences relating to outwork).	-	-	-	-	-
TOTAL	1	1	-	1	-

PART VIII OF THE ACT

OUTWORK

(Sections 133 and 134)

Nature of work (1)	Section 133			Section 134		
	No. of outworkers in August list re- quired by S.133(1c) (2)	No. of Cases of default in send- ing lists to Council (3)	No. of prosecu- tions for failure to supply lists (4)	No. of instances of work in un- wholesome premises (5)	Notices served (6)	Prose- cutions (7)
Wearing apparel: making, etc. cleaning & washing	-	-	-	-	-	-
Household linen	-	-	-	-	-	-
Lace, lace cur- tains and nets	-	-	-	-	-	-
Curtains & furn- iture, hangings	-	-	-	-	-	-
Furniture and upholstery	-	-	-	-	-	-
Electro plate	-	-	-	-	-	-
File making	-	-	-	-	-	-
Brass & brass articles	-	-	-	-	-	-
Fur pulling	-	-	-	-	-	-
Iron & steel cables & chains	-	-	-	-	-	-
Iron & steel anchors and grapnels	-	-	-	-	-	-
Cart gear	-	-	-	-	-	-
Locks, latches & keys	-	-	-	-	-	-
Umbrellas, etc	-	-	-	-	-	-
Artificial flowers	-	-	-	-	-	-
Nets, other than wire nets	-	-	-	-	-	-
The making of boxes or other re- ceptacles or parts thereof made wholly of paper	-	-	-	-	-	-

PART VIII OF THE ACT (CONTD.)

CUTWORK
(Sections 133 and 134)

Nature of work (1)	Section 133			Section 134		
	No. of outworkers in August list re- quired by S.133(1c) (2)	No. of cases of default in send- ing lists to Council (3)	No. of prosecu- tions for failure to supply lists (4)	No. of instances of work in un- wholesome premises (5)	Notices served (6)	Prose- cutions (7)
Tents	-	-	-	-	-	-
Sacks	-	-	-	-	-	-
Racquet & tennis balls	-	-	-	-	-	-
Paper bags	-	-	-	-	-	-
Brush making	-	-	-	-	-	-
Pea Picking	-	-	-	-	-	-
Feather sorting	-	-	-	-	-	-
Carding, etc. of buttons, etc	-	-	-	-	-	-
Stuffed toys	1	-	-	-	-	-
Basket Making	-	-	-	-	-	-
Chocolates & sweetmeats	-	-	-	-	-	-
Cosaques, Christ- mas stockings, etc	-	-	-	-	-	-
Textile weaving	-	-	-	-	-	-
Lampshades	-	-	-	-	-	-
TOTAL	1	-	-	-	-	-

PREScribed PARTICULARS ON
THE ADMINISTRATION OF

THE OFFICES, SHOPS &
RAILWAY PREMISES ACT, 1963

PREScribed PARTICULARS REQUIRED UNDER SECTION 60
OF THE OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963
FOR THE YEAR 1972

TABLE A

REGISTRATION AND GENERAL INSPECTIONS

Class of Premises	No. of Premises newly registered during the year	Total No. of Registered Premises at end of year	No. of Registered Premises receiving general inspection during the year.
Offices	-	6	6
Retail Shops	-	7	7
Wholesale Shops, Warehouses	-	-	-
Catering Establishments open to the public, Canteens	-	13	13
Fuel Storage Depots	-	-	-
TOTAL	-	26	26

TABLE B

NUMBER OF VISITS OF ALL KINDS BY INSPECTOR

TO REGISTERED PREMISES 83

TABLE C

ANALYSIS OF PERSONS EMPLOYED IN REGISTERED PREMISES BY WORKPLACE

Class of Workplace	Number of Persons Employed
Offices	48
Retail Shops	14
Wholesale Departments, Warehouses	-
Catering Establishments open to the public	220
Canteens	-
Fuel Storage Depots	-
TOTAL	282
TOTAL MALES	- 123
TOTAL FEMALES	- 159

TABLE D

EXEMPTIONS: under PART I (Space: section 5(2))
 PART II (Temperature: section 6)
 PART III (Sanitary Conveniences: sec. 9)
 PART IV (Washing Facilities: section 10)

	CLASS OF PREMISES				
	Offices	Retail shops	Wholesale shops Warehouses	Catering Est- ablishments open to Public Canteens	Fuel Storage Depots
1. No. of exemptions current at 31st Dec.	-	-	-	-	-
2. No. of exemptions granted or extended during year	-	-	-	-	-
3. No. of applications refused or exemptions withdrawn during year	-	-	-	-	-
4. No. of cases under nos. 2 & 3 where employees opposed application	-	-	-	-	-
5. Appeals to Court against refusal to grant or extend an exemption or against the withdrawal of an exemption:					
(a) No. made	-	-	-	-	-
(b) No. allowed	-	-	-	-	-

TABLE E

PROSECUTIONS: (Prosecutions instituted of which the hearing was completed in the year)

Section of Act or title of Regulation or Order	No. of persons or companies prosecuted	No. of Informations laid	No. of informations leading to a conviction
-	-	-	-

No. of Complaints (or summary applications) made under Section 22 ... -
 No. of Interim Orders granted -

TABLE F

INSPECTORS:

NUMBER OF INSPECTORS APPOINTED UNDER SECTION 52 (1)
 OR (5) OF THE ACT 1
 NUMBER OF OTHER STAFF EMPLOYED FOR MOST OF THEIR TIME ON
 WORK IN CONNECTION WITH THE ACT -



ART

Health

Spectator

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