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SELBY RURAL DISTRICT COUNCIL



ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

AND

SENIOR PUBLIC HEALTH INSPECTOR

1968

SELBY: E. M. RIMMINGTON & CO., 9 FINKLE STREET 1969

SELBY RURAL DISTRICT COUNCIL

Chairman: Councillor H. Stockdale, J.P.

Vice-Chairman: Councillor J. Stoker.

HOUSING, FINANCE AND PUBLIC HEALTH COMMITTEE

Chairman: Councillor G. Dickson, J.P.

Vice-Chairman: Councillor H. Stockdale, J.P.

Medical Officer of Health:

S. KENNAUGH APPLETON
S.B.St.J., M.D., Ch.B., D.P.H., D.T.M.

Deputy Medical Officer of Health:

MURIEL J. LOWE

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

Senior Public Health Inspector:

J. R. BLACKLEDGE

Cert. S.I. Board

Cert. Meat and Food Inspection R.S.I.

Additional Public Health Inspector:

N. A. CURREY M.A.P.H.I.

Clerks: D. TUNE MISS J. DYSON

To The Chairman and Members of the Selby Rural District Council.

Gentlemen.

I have the honour to present to you my twenty-second Annual Report on the health of the Selby Rural District and the work of the Public Health Department during 1968.

188 live births were registered, an increase of 7, giving a Birth Rate of 20.7 per thousand population (Adjusted Birth Rate 24.4). The aggregate rate for W.R. Rural Districts was 17.7 and for England and Wales 16.9. There was one stillbirth. 4 infant deaths occurred, giving an Infant Mortality Rate of 21.3 and a Perinatal Mortality Rate of 26.5.

86 deaths occurred, giving a Crude Death Rate of 9.1 (Adjusted Death Rate 10.6). 33 (26.1%) deaths occurred at the age of 75 years or over, and of these 22 were over 80 years of age and 2 over 90. Births exceeded deaths by 102.

POPULATION.

The estimated population has shown again a surprising increase of 830 for the year 1968. Although estimated population figures may become a little unrealistic seven years after a census, I do not think the estimation of 9,090 is far out. A comparison with the census records is interesting.

Census	1891	 5.873			
	1901	 5,822	Decrease 51		
	1911	 5,923	Increase 101		
	1921	 6,155	Increase 232		
	1931	 5,942	Decrease 213		
	1941	 No census			
	1951	 6,428	Increase 486		
	1961	 6,540	Increase 112		
Estimated	1968	 9,090	Increase 2,550		

INFECTIOUS DISEASES.

164 cases of infectious disease were notified during the year, of which 159 were measles. In anticipation of the expected bi-yearly epidemic of measles in the early winter the Department of Health decided on a crash programme of vaccination by the one injection technique to be completed by the autumn. Vaccine became available in increasing quantity from May onwards. However, during June and July there was a moderate outbreak of measles in the District so that many children fell victims to the disease before they could be protected. Others, having avoided infection, were considered at least by their parents to be immune, so the response to the campaign was sluggish. The expected winter epidemic did not occur. Although vaccination must have contributed to this result the widespread epidemics of measles throughout the County tended to obscure the picture. Writing in 1969, it is pleasing to note that parents looking ahead to the risk of further epidemics of measles are applying for their children to be vaccinated. It is frustrating that at the moment vaccine is in short supply due to the failure of one source of supply.

The protection of children in their fourteenth year against tuberculosis with B.C.G. vaccine has been in operation since 1955. This procedure, in conjunction with the vaccination of susceptible contacts of actual cases, makes a valuable contribution to the control of this disease. During 1968 it was decided that it would be advantageous to protect children at an earlier age. It is now the policy to test and, if necessary, vaccinate children as soon

as possible after entry to senior school, that is, in their twelfth year. I believe that there is a certain amount of undetected tuberculosis amongst elderly persons with chronic coughs, and the finding in an adjacent district of the disease in a school child and in its grandparent emphasises the danger. All persons with chronic coughs owe it to the community and themselves to be X-rayed regularly. To facilitate this the mobile radiography unit stands at the Selby Baths for half-an-hour on the first and third Tuesday mornings in the month. It would be a good thing if all adults, particularly those living or working amongst children, however well they feel, would make use of this service once every two years.

PUBLIC HEALTH (INFECTIOUS DISEASES) REGULATIONS, 1968.

During the year these Regulations came into operation. They consolidate into one document all existing regulations relating to the notification and prevention of infectious disease. Three diseases—leptospirosis, tetanus and yellow fever—have been added to the list, and six diseases—acute primary pneumonia, acute influenzal pneumonia, acute rheumatism, erysipelas, membranous croup and puerperal pyrexia—have been deleted.

The infectious diseases now to be notified to the medical officer of health are:-

Acute encephalitis
Acute meningitis
Acute poliomyelitis
Anthrax
Cholera
Diphtheria
Dysentery
(amoebic or bacillary)
Food poisoning
Infective jaundice
Leprosy
Leptospirosis

Measles
Ophthalmia neonatorum
Paratyphoid fever
Plague
Relapsing fever
Scarlet fever
Smallpox
Tetanus
Tuberculosis
Typhoid fever
Typhus
Whooping cough
Yellow fever

CERVICAL CYTOLOGY.

Malaria

During the year 93 women had the cancer smear test, which brings the overall total to 376. There must still be a lot of women between the ages of 21 and 60 who are at risk and have not been tested. Application forms are available in public health offices and clinics and the waiting time for appointments is not more than a month.

FAMILY PLANNING.

Methods of limiting the size of the family, more or less unreliable, have been practised by many couples for thousands of years. Much improved methods have become available within the last forty years, and the arrival of "the pill' is a great step forward towards the perfect contraceptive. Expert advice about the most suitable method is essential, and over the years the Family Planning Association has opened an increasing number of clinics to meet this need. At the time of writing the Association expects to open weekly evening sessions early in 1970 at the County Clinic in Selby. This service, of course, will be available for family planning and pre-marital advice to residents of the Rural District.

MENTAL HEALTH

The much needed extensions at the Rawcliffe Training Centre, to which I referred in my last report, have actually been started and will become functional in 1970. An additional room has been added to the Snaith Day

Centre and this provides better social and working conditions for those almost recovered from mental illness.

Finally, I must record my thanks for the continued support by the Members and Officers of the Council during 1968.

I remain, Your obedient servant,

S. KENNAUGH APPLETON.

September 1969.

Medical Officer of Health.

VALEDICTION

At the time of writing this 1968 Report I am continuing as your Medical Officer of Health for an extended period of six months. Although I expect to be responsible for your public health services for the whole of 1969 and into 1970, it is reasonable to assume that the next annual report will be written by my successor. This Report, therefore, should be the last one I present, so it gives me an opportunity to look back over a considerable period of close association with the Rural District.

By the time I retire I shall have had the honour and privilege to have served the District for well over 22 years; a record surpassed of course by my immediate predecessor, but one unlikely to be equalled in the uncertain future. I took up my appointment with the four constituent authorities on 3rd November, 1947, with particular responsibility for organising a Divisional Health Service to come into operation on the appointed day, 5th July, 1948. A new era in public health began then, has matured over a generation and might well be coming to an end with proposals for amalgamation and the proposed drastic reorganisation of local government in the not so distant future.

The rapid build-up of existing services and the innovation of new services, particularly in the early years, had to be met by a rapid increase of trained personnel. The Divisional establishment, which has been relatively static for several years, is made up as follows: 1 Divisional M.O.H., 2 Departmental M.O.s, 3 part-time consultants, 26 nurses, 2 mental welfare officers, 8 training centre and 2 day centre staff, and 10 clerical staff.

Clinic services have been centralised in Selby and have progressed from a variety of rented halls, all more or less unsatisfactory, to a fine purpose-built multiple health and dental clinic built in 1961. These services are available to families in the Rural District and are used considerably by families living in parishes adjacent to Selby town, but inadequate or non-existent public transport penalises the more distant parishes. Some mothers from the Carlton area go to the Snaith clinic. Some years ago a subsidiary clinic was opened at the West Bank Settlement, in respone to public demand, but it had to be closed because of lack of support. Again, following public demand, arrangements are in operation for a mobile clinic to visit the Drax caravan site fortnightly, but very little use is made of it.

The Rawcliffe Training Centre, for the training of the severely subnormal, and the Snaith Day Centre, for those convalescing from mental illness, were opened in 1961 and 1964 respectively.

The era will be best remembered for the rapid progress in the control of infectious diseases by immunisation. In 1948 protection was provided only against smallpox and diphtheria; now immunisation against whooping cough, tuberculosis, poliomyelitis, tetanus and measles is readily available. It has been a privilege to have inaugurated the various immunisation campaigns and

to have elicited the public response which is so necessary for success. The parents of the Rural District are to be congratulated on the high degree of protection they have obtained for their children. Although the health record of the District was reasonably good when I came there has been, over the years, general improvement, particularly in child health.

Equally important progress has been made in environmental hygiene. It is pleasing to remind you of the installation of sewerage systems in several villages, the reduction in the number of open sanitary dykes, the extension of piped water supplies, new schools and school extensions, rapidly mushrooming housing estates, and now a power station in course of construction. Although there is still much attractive country and rich agricultural land, the overall appearance of the Rural District has changed considerably in 22 years. Some will regret the replacement of old cottages by modern villas and bungalows which look out of place in rural villages. From a hygiene point of view the "thatched cottage with roses round the door" mostly belongs on a picture postcard. Inside many leave much to be desired. Not unnaturally, much of the success of the Service is due to the loyalty, enthusiasm and devotion to duty of a large number of past and present officers. I hope the strong team spirit which has developed will not be dissipated in any pending reorganisation. Seven of my staff have been with me over twenty years and will take forward into whatever the interesting future may hold a vast accumulation of experience and expertise.

Finally, I must refer to the Rural District Council and its Officers. Mr. J. Blackledge, who preceded me by only six months, has been most obliging and co-operative throughout. My association with the late Mr. J. Townend, Mr. F. Pool, and now Mr. R. L. Ansell, has been most cordial. Over the years I have found the members of the Finance, Housing and Public Health Committee most considerate, interested and helpful, and above all willing to let me get on with the job. It is interesting to note that of the members of the Council for 1947/48, Councillors H. Stockdale and F. Stones continue to serve on the Council. Apart for the good atmosphere, both administrative and meteorological, I have learnt a lot about the problems of rural health and hygiene, and I can say that I have never once regretted accepting the post twenty-two years ago.

I wish the Rural District of Selby, its Council and Officers, every success in the years ahead.

GENERAL STATISTICS, 1968

Area of Rural District			 33,304 acres
Population (mid 1968)			 9,090
Number of Houses			 2,984
Rateable Value (April	1968)		 £213,842
Product of Penny Rate ((Est. 1	969/70)	 £857

VITAL STATISTICS

1921-1965 2021-1961 1951-1965 2021-1961	SELBY R.D.	Aggregate West Riding R.D.s	West Riding Admin. County	England and Wales (Provi- sional)
BIRTH RATE (per 1,000 population)	20.7	17.7	17.6	16.9
CRUDE DEATH RATES (per 1,000 population)	0.50		0681-1	
All causes	9.5	9.9	11.6	11.9
Infective and Parasitic Diseases	0	TV-III	_	_
Respiratory Tuberculosis	0.22	0.04	0.03	0.03
Other forms of Tuberculosis	0	0.01	0.01	0.01
Respiratory Diseases (excluding Tuberculosis)	0.44	1.46	1.66	- I
Malignant Neoplasms	2.09	1.88	2.14	2.32
Heart and Circulatory Diseases	3.14	3.60	4.34	_
Vascular Lesions of Nervous System	1.21	1.46	1.76	<u>*</u>
INFANT MORTALITY (Deaths under one year per 1,000 live births)	21.3	15.5	18.5	18.3
STILLBIRTHS	5.3	14.2	14.3	14.3
PERINATAL MORTALITY	26.5	23.0	25.0	24.7
MATERNAL MORTALITY (Deaths of mothers in child-birth per 1,000 total births)	0	0.11	0.09	0.24

Comparability Factors:

For Births, 1.18. Adjusted Birth Rate, 24.4. For Deaths, 1.25. Adjusted Death Rate, 11.8.

BIRTH AND DEATH RATES, 1968 AND MEAN RATES FOR DICENNIAL PERIODS

33-304-no		RATE = 20.7	null lo se	10A
	(per	,000 population)		
1901-1910	26.0			
1911-1920		1951-196		
1921-1930	19.6	1961-196	55	. 16.8
1931-1940	14.5	5		
		BIRTHS = 5.3		
1001 1010		,000 total births)	-0	20.0
1901-1910	–	1941-195		
1911-1920		1951-196		
1921-1930		1961-196	55	. 11.9
1931-1940	34.5	e de la companya de		
		TE BIRTHS =	74.4	
17.8	(per l	,000 total births)	L'waizalusia	- 000 L
1901-1910	—			
1911-1920	65.0		7.55	
1921-1930	69.8	3 1961-196	65	. 55.8
1931-1940	54.7	7		
	INFANTILE	MORTALITY =	21.3	
	(per	1,000 live births)		
1901-1910	98.3	1941-19	50	. 34.5
1911-1920	83.3	1951-196	60	. 20.1
1921-1930	68.9	1961-196	65	. 15.7
1931-1940	41.8	3		
	NEONATAL	MORTALITY =	21.3	
(1	Deaths in first i	month per 1,000 live	e births)	
1901-1910	—	1941-19	50	. 18.2
1911-1920	44.7	7 1951-196	60	. 13.8
1921-1930	42.7	1961-196	65	. 12.0
1931-1940	22.0)		
	PERINATAL	MORTALITY =	26.5	
(Stillbir	ths and first w	eek deaths per 1,00	0 total birt	hs)
1921-1930		1951-196	60	. 43.5
1931-1940	51.2	1961-19	65	. 23.8
1941-1950	44.0)		
	TOTAL D	EATH RATE =	9.5	
		1,000 population)	Section 1	
1901-1910	15.6		50	. 12.0
1911-1920	13.2			
1921-1930	12.4			
1931-1940	12.			. 10.3

DISEASE OF	HEART AND	CIRCULATIO	N = 3.	.14
1901-1910	1.36	1941-1950		3.18
1911-1920		1951-1960		3.37
1921-1930	1.96	1961-1965		3.20
1931-1940	2.95	LL SISMIS		
VASCULAR DISEAS	SES OF CENTRA	L NERVOUS	SYSTE	M = 1.21
1901-1910	—	1941-1950		1.95
1911-1920	—	1951-1960		1.68
1921-1930	1.25	1961-1965		1.50
1931-1940	0.91			
MAL	IGNANT NEOP	LASMS = 2	.09	
1901-1910	1.16	1941-1950		1.91
1911-1920	1.04			1.78
1921-1930	200 102	1961-1965		2.34
1931-1940	. 70	Tanana i	us none	on annulEM
		EASES = 0.4	14	
1901-1910	1.86	1941-1950		1.32
1911-1920		1951-1960		1.17
1921-1930		1961-1965		1.22
1031 1010	1.28	1701-1705		1.22
	AND PARASITI	C DISEASES	= 0	
1901-1910	1.17	1941-1950		0.05
1911-1920	0.51	1951-1960		0.03
1001 1000	0.28	1961-1965		0.03
1021 1040	0.19	1701-1705		0.03
	RATORY TUBER	CULOSIS =	0.22	
	0.91	1941-1950		0.34
	0.68	1951-1960		
	0.36	1961-1965		0.06
1931-1940	0.24	1701-1703		0.00
	SPIRATORY TU	IRERCLII OSI	S = 0	
				0.14
		1941-1950		
	0.21	1951-1960		
1001 1040	0.16	1961-1965	9.10	0
1931-1940	0.12			
M	ATERNAL MOR		0	
1	(per 1,000 tot			All other I
1901-1910	1.39	1941-1950		1.03
1911-1920	2.17	1951-1960		_
1921-1930	2.56	1961-1965		0
1931-1940	2.28			

BIRTHS, 1968

	Male	Female	Total
Live Births.—Legitimate	86	88	174
Illegitimate	7	7	14
	_	<u>-</u>	100
Total	93	95	188
Stillbirths	0	1 - 10	1

CAUSES OF DEATH, 1968

		Male	Female	Total
Tuberculosis of respiratory system		1	1	2
Malignant neoplasm, lung, bronchus		4	0	4
Malignant neoplasm, breast		0	1	1
Malignant neoplasm, uterus		8-38	2	2
Leukæmia		1	1	2
Other malignant neoplasms		5	5	10
Benign and unspecified neoplasms		1	0	1
Diabetes mellitus		0	1	1
Other diseases of nervous system		0	1	1
Chronic rheumatic heart disease		0	0.1	1
Hypertensive disease		1	0	1
Ischæmic heart disease		15	6	21
Other forms of heart disease		4	1	5
Cerebrovascular disease		5	6	11
Other diseases of circulatory system		1	2	3
Bronchitis and emphysema		3	0	3
Asthma		0	1	1
Cirrhosis of liver		0	1	1
Nephritis and nephrosis		1	0	1
Other diseases genito-urinary system		0	1	1
Congenital anomalies		1	0	1
Other causes of perinatal mortality		2	1	3
III-defined conditions		1	0	1
Motor vehicle accidents		1	2	3
All other accidents		3	1	4
Suicide and self-inflicted injuries		1	0	1
7 2841-1841 T	otal	51	35	86

TUBERCULOSIS

New cases in 1968

				Male	Female	Total
Pulmonary		 	 	1	0	1
Non-Pulmon	ary	 	 	0	1	1
				_	_	_
			Total	1	1	2

Total Cases on Register

			Male	Female	Total
Pulmonary	 	 	7	6	13
Non-Pulmonary	 	 	0	1	1
			_	_	_
		Total	7	7	14

INFANTILE MORTALITY

Three infants died in the first year of life from prematurity and one from a congenital abnormality.

CASES OF INFECTIOUS DISEASE

notified during the year 1968

					Numi	BER O	F CA	SES]	Notif	PIED		
NOTIFIABLE DIS	œ'	According to Age										
El				At all Ages.	Under 1	1 to 4	5 to 14	15 to 24	25 to 44	45 to 64	Over 65	q
Small-pox		late	T									
Food Poisoning												
Diphtheria												
Erysipelas				1							1	1.
Scarlet Fever				1			1					
Paratyphoid Fever B												1
Puerperal Pyrexia												1
Cerebro-spinal Meningitis								330				
Acute Poliomyelitis, para	lytic	***	***									
		tic	***					1555		555	99	1 8
Acute Encephalitis					271		1838					1 3
Ophthalmia Neonatorum			* -						***			
Pulmonary Tuberculosis	***		***	58.0		- 40			***	1444		
Other forms of Tuberculo	oio.		***	"1		***	***	1	***		***	1 .
V 1				10000			82	-		***	***	
Measles				159	2	71	82	**	4			
Primary Pneumonia		***		2			***	19.5		2		
Influenzal Pneumonia	***		***				***	.,,				
Whooping Cough					111		***					
Dysentery				-44					***	***		
Encephalitis Lethargica								***	***		***	
Infective Jaundice												
To	tals			164	2	71	83	1	4	2	1	-

NATIONAL ASSISTANCE ACTS, 1948-51

No cases were dealt with under these Acts during 1968.

WEST RIDING COUNTY DIVISIONAL HEALTH SERVICES IN SELBY RURAL DISTRICT, 1968

The Public Health Nursing Staff in this Division no longer works according to County District boundaries. Most of the figures in the following summaries refer to Selby R.D., but in a few cases the figures are those for the Rural and Urban Districts combined or for Division No. 10 as a whole.

BIRTHS.

Live Birtl	ns	 		 		188
Stillbirths		 4		 	100.0	1
Illegitimat	te	 	MPZ. VO	 		14
Males		 		 		93
Females		 		 		95

2. PREMATURE BIRTHS. Babies weighing 5½ lbs. or less at birth.

(i)	Born at	home	 	 	Alive	0
					Stillborn	0 1
(ii)	Born in	hospital	 	 	Alive	11
					Stillborn	0 1
					Total	_ 11

3. HEALTH VISITING (Division No. 10 as a whole).

					First Visits
					166
					872
and 5					3126
					950
				Total	5114
	 and 5 	and 5	and 5	and 5	and 5

5. SCHOOL HEALTH SERVICE.

Total number attending Paediatric Consultant	 0
Total number attending County Oculist	 109
Number ordered Spectacles	 28
Number attending Speech Therapy	 0
Total number inspected in School by School M.O.	 242
Total number inspected in School by School Nurse	 901
Total number of verminous heads	 32
Tests for subnormality	 0
Re-examinations	 4
Reported to M.D. Authority as ineducable	 1
Reported to M.D.A. for care and guidance	 0
Recommended for special schools	 1
Attending residential schools	 4
Audiometry tests by School Nurse	 174
Audiometry tests by School M.O	 15

The following defects were found at medical inspections:

				Requiring treatment	For ob- servation
Verminous	heads		 	 32	_
Skin			 	 0	3
Vision			 	 28	2
Other eye	condit	ions	 	 0	1
Hearing			 	 2	4
Other ear	defects		 	 1	3
Nose and	throat		 	 1	8
Speech			 	 _	_
Cervical gla	ands		 	 1	6
Heart and	circula	tion	 	 ISIA BIAT	All Tr
Lungs			 	 _	1
Developme	ntal		 	 M 1927200	×3
Orthopaed	ic		 	 ildefm und	2
Nervous sy	/stem		 	 no -ibli	0 -
Psychologic	cal		 	 291.0-101	10 1
Enuresis			 	 2	_
Other con-	ditions		 	 4	1

6. MATERNITY SERVICES.

Confined in Hospital:

Leeds Ma	ternity	Home			 		1
York Ma	ternity	Home			 		98
Goole Bo	orough	Materni	ty Ho	me	 		10
Others					 		21
						Total	130

County Midwives:

There were 37 domiciliary confinements in Selby Rural District.

The following summary of the work of the County Midwives is for Division 10 as a whole:—

Number of Midwives	 	7
Number of cases	 	269
Gas and air analgesia	 	0
Trilene analgesia	 	228

7. HOME NURSING (Division 10 as a whole).

Number	of	Nurses		 7
Number	of	cases co	mpleted	 500
Number	of	visits .		 13272

8. HOME HELPS.

Home Helps were employed for 79,424 hours attending cases in the Division.

The following Selby Rural cases were attended:-

Maternity	/		 	1
Chronic	Sick (O	ver 65)	 	24
Chronic	Sick (Ur	nder 65)	 	0
Others			 	3
			T I	-
			Total	28

9	IMMUNISATION	AGAINST	DIPHTHERIA	during	1968
1.	IIIIIIOI AISA I IOIA	AGAIIASI	DITTILLA	dulling	1700.

Children under 5 year	rs	 			82
Children over 5 years		 			4
					86
Booster doses	••••	 Mulge	0108	1000	147
			ol la	Total	233

Total number of children under 15 years of age who have been immunised up to the 31st December, 1968:

Age—Years	0—1	1-4	5—9	5—9 10—14	
Number	15	374	439	451	1279
Percentage	79		90		87

IMMUNISATION AGAINST WHOOPING COUGH during 1968.

Under 6 months	 		 		12
6 to 12 months	 		 		3
1 to 2 years	 	10V. 10	 ···		63
2 to 3 years	 		 		1
3 to 4 years	 		 		1
				Tatal	
				Total	80

B.C.G. VACCINATION OF SCHOOL CHILDREN (13 years of age).

Number of acceptances in 1968	 45
Pre-vaccination Tuberculin Tests:	
Positive (not requiring vaccination)	 9 (22.5%)
Negative (requiring vaccination)	 31 (77.5%)
	40
Number vaccinated with B.C.G	 31

12. VACCINATION AGAINST POLIOMYELITIS.

Total registered	to 31st	December,	1968	 	3917
Vaccinated		(2010)		 	3862

13. MENTAL HEALTH.

Mental Health Act, 1959.

The number of persons under care and guidance at the end of 1968 was as follows:—

			Male	Female	Total
Psychopathic		 	0	0	0
Mentally ill		 	3	7	10
Subnormal		 	8	7	15
Severely Subnorn	mal	 	1	3	4

Admission to Mental Hospitals by the Mental Welfare Officers during 1968 were as follows:—

	Male	Female	Total
Emergency Admissions	 2	1	3
Admission for Observation	 0	1	1
Admission for Treatment	 0	0	0
Informal Admission	 3	10	13

14. MASS RADIOGRAPHY SURVEY, 1968.

The Unit did not visit during 1968.

PUBLIC HEALTH DIVISION No. 10

The County Districts forming Division No. 10 are:-

Goole Borough (1,267 acres) Selby Urban (3,883 acres) Goole Rural (38,238 acres) Selby Rural (33,304 acres)

Area of the Division 76,692 acres

Population (Estimated mid-1968) ... 47,940

(Census 1961) ... 44,533

DIVISIONAL HEALTH OFFICE AND STAFF 6/7 Belgravia, Goole. Telephone Goole 4216 & 2923.

Divisional Medical Officer and Divisional School Medical Officer: S. KENNAUGH APPLETON, S.B.St.J., M.D., Ch.B., D.P.H., D.T.M.

Senior Assistant County Medical Officer and School Medical Officer: MURIEL J. LOWE, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H., D.C.H.

Assistant County Medical Officer and School Medical Officer: EILEEN M. R. BELL-SYER, M.B., B.S.

School Dental Officer:

P. F. A. ELTOME, L.D.S.

Divisional Nursing Officer:

Miss D. M. E. GOLDTHORPE.

Health Visitors and School Nurses:

Mrs. B. BEAL, Miss D. M. BUTLER, Mrs. M. DODSON, Mrs. O. OGUN-WUMIJU, Mrs. A. M. RAWES, Miss A. RIDSDALE, Miss D. M. ROBINSON, Mrs. A. SUTHERLAND (part-time). Assistants: Mrs. M. D. GARDNER, Mrs. J. JARY, Mrs. E. A. ZAPH.

Home Nursing Sisters:

Mrs. H. B. BEAUMONT, Mrs. S. CLAYBOURN, Mrs. M. LUND, Mrs. W. E. DUFFIN, Mrs. S. E. HERRON, Mrs. B. ROSS (part-time), Mrs. J. M. SAWDON, Mrs. E. H. SCOTT-KING.

Domiciliary Midwives:

Miss I. CAMPBELL, Miss E. CLAYTON, Miss H. ELLIS, Mrs. D. FRANKLIN, Mrs. A. G. HORSFIELD, Miss E. D. LAKING, Miss M. P. SMITH.

Mental Health Officers:

Mr. T. G. FOSTER, Miss M. J. HURLEY.

Rawcliffe Training Centre (Rawcliffe 387):

Supervisor: Miss C. S. LOGAN. Staff: Mrs. A. ALVEY, Mr. J. BEAMSON, Mrs. E. GOODALL, Mr. R. C. HUNT, Mrs. J. ELLIS, Mrs. A. W. JARVILL, Mrs. E. ROSE.

Snaith Day Centre:

Instructors: Mr. G. H. PURCHON, Mrs. R. H. KERSHAW.

Speech Therapy: Vacant.

Welfare Officer: Mr. D. HIRST.

Clerical:

Senior Clerk: Mr. R. TOWELL. Deputy Senior Clerk: Mr. G. N. NOWILL. Mrs. N. ALMOND, Miss S. L. BRAMHAM, Mrs. M. E. BRYARS (part-time), Mr. J. LAWTON, Miss S. H. MILEHAM, Mrs. J. MILES, Mrs. M. READSHAW (part-time), Mrs. J. E. TAYLOR.

REPORT OF PUBLIC HEALTH INSPECTOR FOR 1968.

Water Supply.

The whole district is supplied by the Pontefract, Goole and Selby Water Board, from boreholes in the red sandstone at Brayton Barff, where chlorination is carried out. The Board have a comprehensive scheme for improvement of supplies throughout their area.

In addition to the regular samples which the Board submit for chemical and bacteriological analysis, one sample was submitted for chemical analysis as a result of a complaint from a householder, when a satisfactory report was obtained.

Sewerage.

The villages of Barlow, Brayton, Camblesforth, Carlton and Thorpe Willoughby are provided with main sewerage systems. During the year work on a new pumping station at Thorpe Willoughby was commenced, which will replace the existing overloaded ejector station.

A Scheme for the sewering of Hambleton is still awaiting approval by the Ministry of Housing and Local Government, and consequently pollution of the main watercourse in the village continues to be a cause for concern. The private housing estate at present being developed is served by a temporary sewage treatment plant, provided by the developer, which will be removed when main sewerage is available.

The Scheme for Drax has now been prepared, and when negotiations for purchase of a site for the treatment plant are complete the scheme can be submitted to the Minister for approval. A preliminary survey of Wistow and Cawood is at present being made, after which a joint scheme for the villages can be produced.

Sewage treatment plants are maintained at Carlton, Burn and Thorpe Wiloughby, and after completion of the new scheme for Hambleton a joint treatment plant will be provided for Thorpe Willoughby and Hambleton.

In the parishes where main sewers have been provided, further properties have been connected during the year, but pollution of some watercourses still persists and will continue until all properties in these villages are connected to the sewer.

The remaining villages most in need of main sewerage are Wistow and Burn.

Refuse Collection and Disposal.

House refuse is collected weekly throughout the district by motor vehicles and is disposed of by tipping on three Council owned tips. Every effort is made to adhere to the recommendations of the Ministry of Health on controlled tipping, but owing to the remote situations of the tips and their indiscriminate use by members of the public, control is extremely difficult, and as the tips are now made available to the public for disposal of refuse, under the provisions of the Civic Amenities Act, 1967, this situation is likely to continue.

One abandoned vehicle was removed from the public highway during the year, in accordance with the provisions of the Civic Amenities Act, and at the end of the year notices had been served for removal of one other vehicle.

Housing and Public Health Inspections.

Routine inspection of house property is carried out whenever possible, and complaints are investigated without delay.

It has been usually found possible to effect remedies by an informal notice or personal visit to owners, and it was necessary to issue one statutory notice, which was complied with.

Six houses have been closed by formal action under the Housing Acts, and one tenant has been re-housed. Other tenants will be re-housed as houses become available.

An undertaking from an owner to carry out works to render dwellings fit for human habitation was accepted in respect of two houses.

Applications for 21 Standard Improvement Grants were approved during the year, and 3 grants of £20 each were made under the Public Health Acts for conversions of earth closets to water closets.

Food Inspection.

The standards of cleanliness in food premises is generally satisfactory. Verbal advice on hygiene is usually readily complied with, and only on two occasions was it considered necessary to serve an informal notice.

Of the three private slaughterhouses in the district, only one has been operating regularly during this year. The quality of animals slaughtered is extremely good and only a small amount of offal and carcase meat was condemned. The following numbers of animals have been slaughtered, and all were inspected.

Bullocks and heife	ers	 230
Sheep and Lambs		 899
Cows		 4
Pigs		 252

Rodent Control.

The Council have 91 contracts with farmers in the district. Treatment is free to occupiers of private dwellings, but a charge is made for any work carried out on business premises. Refuse tips are treated regularly, and no infestation of even medium proportions has been discovered during the year.

New Housing.

Numbers of new houses erected within the district are as follows:

By Local Authority ... Nil By Private Developers ... 232

Offices, Shops and Railway Premises Act, 1963.

All premises requiring registration under the above Act are now registered. Minor infringements by the Act have been found in some cases and compliance effected by informal action.

FACTORIES ACT, 1937 to 1959.

Part I.—Inspections.

Premises	No. on Register	Inspec- tions	Written notices	Occupiers prosecuted
Factories in which Secs. 1, 2, 3, 4 and 6 are to be enforced by L.A.s	2	6	0	0
Factories not included above in which Sec. 7 is enforced by L.A.s	53	59	0	0
Other premises in which Sec. 7 is enforced by L.A.s	0	0	0	0
Total	55	65	0	0

Part I.—Defects.

Particulars	Found	Remedied	Referred to HMI	Referred by HMI	Prosecu- tions insti- tuted
Want of cleanlines (S.1)	1	1	0	0	0
Overcrowding (S.2)	0	0	0	0	0
Unreasonable temperature (S.3)	0	0	0	0	0
Inadequate ventilation (S.4)	1	1	0	0	0
Ineffective drainage of floors (S.6)	1	1	0	0	0
Sanitary conveniences insufficient, unsuitable or defective (S.7)	5	5	0	0	0
Other offences	0	0	0	0	0
Total	8	8	0	0	0

Part VIII Outworkers-Nil.



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Part I Inspections

Port L-Defects

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Part VIII Outworkers-NB