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STOCKSBRIDGE URBAN DISTRICT COUNCIL

A N N U A L R E P O R T

of the

MEDICAL OFFICER OF HEALTH

for the

Year 1967



STOCKSBRIDGE URBAN DISTRICT COUNCIL

PUBLIC HEALTH COMMITTEE, 1967

Councillor J. R. REVITT (Chairman)

Miss M. E. SALFOUR, J.P. (Chairman of the Council)

A. A. DAVIES (Vice-Chairman of the Council)

R. CHALLIS (Retired 25.3.67)

STOCKSBRIDGE URBAN DISTRICT COUNCIL

A N N U A L R E P O R T

of the

M E D I C A L O F F I C E R O F H E A L T H

for the

Year 1967

Chief Public Health Inspector and Housing Officer:

Public Health Inspectors:

OFFICIAL ADDRESS OF MEDICAL OFFICER OF HEALTH:

Divisional Health Office,

Mortonley Hall,

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STOCKBRIDGE URBAN DISTRICT COUNCIL

ANNUAL REPORT

of the

MEDICAL OFFICER OF HEALTH

for the

Year 1961

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PUBLIC HEALTH COMMITTEE, 1967

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" R. CHALLIS (Retired 25.5.67)

" R. COULDWELL

" Mrs. V. GRAND (Commenced 25.5.67)

" A. HAWLEY

" A.D. LEATHER

" W. MARSHALL (Commenced 25.5.67)

" A. T. NEEDLE

" L.H. SCHOLEY

" A. SWEENEY, J.P.

" C. WATKINSON

STAFF OF THE HEALTH DEPARTMENT

Medical Officer of Health:

F.C. ARMSTRONG, M.B., Ch.B., D.P.H. (St. Andrews)

Chief Public Health Inspector and Housing Officer:

A.E. KAYE, M.A.P.H.I.

Pupil Public Health Inspector:

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STOCKSBRIDGE URBAN DISTRICT COUNCIL

Annual Report of the Medical Officer of Health
for the year 1967

To the Chairman and Members of the Stocksbridge Urban District Council.

Ladies and Gentlemen,

I have the honour to present my Annual Report upon the Health Services of the Stocksbridge Urban District for the year ended 31st December, 1967. I also include some details of the Part III services provided by the Local Health Authority during the period under review.

The Birth Rate for 1967 is 17.5 per 1,000 of the estimated population; the corrected rate is 17.8. These figures are comparable with the figures for England and Wales and for the West Riding Administrative County. The Death Rate is 10.0 per 1,000 of the estimated population, the corrected rate being 12.5. The Still-birth Rate, at 4.6 per 1,000 live and still births, is markedly lower than the figure for 1966. This is a widely fluctuating figure when one is dealing with the numbers involved in your size of district. The rate represents one still-birth, which was due to congenital abnormalities. The Infantile Mortality Rate in 1967 was 18.4 per 1,000 live births, representing four deaths, the same as for last year. However, these four deaths occurred in larger infant population and show some slight improvement.

As in past years, coronary artery disease is one of the major causes of death. This is not only true of the Stocksbridge District, but is also true in most of the western countries who have reached the same degree of civilization as ourselves. There is as yet no clear indication as to why this particular disease is so prevalent. It is inevitable as people grow old that they must die of something. The reason that so much attention is focused on coronary disease is that it so very often kills relatively young men. You will notice that the total deaths

of vascular disease of the nervous system is also high. The condition is commonly referred to as a "stroke", and is far and away commonest in the elderly. As more and more people live to a greater age, so it is likely the number of deaths from this particular cause will increase.

I am pleased that at the time of writing the Council have decided to take the initial steps towards Clean Air areas in the township. This is a long-term measure, which can only have beneficial results, and will make the lot of those with a tendency to Bronchitis very much easier.

There were five accidental deaths, two of them due to motor-vehicle accidents and three to a variety of other accidents. There were 40 cases of infectious disease notified; 38 of these were cases of Measles. At the time of writing this report Measles immunisation has already begun and, after sufficient time has elapsed to allow the majority of the child population to be immunised, I look forward to the situation when very few cases of Measles are severe enough to be accurately diagnosed and notified.

Also at the time of writing the major Health Centre in the township is well under construction. The practitioners of the area and the Public Health Service will operate from this one building, modern in construction, heating, lighting, etc. and allowing for much easier contact between the general practitioners and the Public Health staff. I think in many ways this is a major step forward and I am sure the public will reap the benefit. The District Council played their part in assisting the erection of this Health Centre by making the land available. Again at the time of writing the new swimming baths are under construction, and although they have no very direct connection with the prevention of disease, anything which provides healthy exercise and outlet to all ages in the community, particularly to youth, contributes to the general well-being of the district. I am particularly pleased that the Council have gone out of their way to make the pool suitable for use by both physically and mentally handicapped.

Mr. Kaye, the Chief Public Health Inspector, has provided the statistics for that part of the report which deals with the Sanitary Circumstances.

At the end of the year there were 4,634 houses in the district, seven houses having been represented for demolition during the year. Of the total, 4,554 were connected to main sewers; 27 had satisfactory private drainage and 53 had earth or pail closets, which is a reduction on the number of 68 in last year's report, and we are still moving towards the situation where all the houses will be on mains sewage disposal.

Of the total number of houses 4,575 are on a mains water supply; 59 have a private supply, which appears to be satisfactory. From time to time these private supplies may be subject to contamination, but we are prepared at any time to assist both with testing and advice on the handling so that they may operate at the highest possible standard.

In concluding this introduction I would like to thank the Chairman and members of the Health Committee for their support during the year. I would also like to thank my colleagues on the Council staff, particularly Mr. Rushforth and Mr. Kaye, for their assistance and co-operation during the year.

I am,

Yours faithfully,

F.C. ARMSTRONG

Medical Officer of Health.

DISTRICT STATISTICS IN BRIEF

The Stocksbridge Urban District covers an area of 4,630 acres. The number of inhabited houses at the end of 1967 was 4,476. The rateable value of the district is £691,893, whilst the product of a penny rate is £2,905 as at 1st April, 1967.

VITAL STATISTICS

POPULATION

The Registrar General has given his estimation of the population as 12,430, an increase of 250 as compared with the 1966 figure.

BIRTHS

There were 217 live births registered in the district during the year. Of these 107 were males and 110 females. There were 7 illegitimate births, 2 male and 5 female.

STILL-BIRTHS

During the year there was 1 still-birth (female).

DEATHS

124 deaths were attributed to the district during 1967, 58 male and 66 female.

Below I give tables of Live Birth Rates, Still-birth Rates and Crude Death Rates, with those rates for other parts of the country.

RATES PER 1,000 TOTAL POPULATION

Year	England and Wales	West Riding Administrative County	Stocksbridge U.D.
LIVE BIRTHS (Rates per 1,000 of the population)			
1967	17.2	18.0	17.5
1966	17.7	18.0	16.9
1965	18.0	18.2	16.6
1964	18.4	18.5	17.7
1963	18.2	18.2	17.7

DISTRICT STATISTICS IN RELATION TO

DEATHS

(Crude Death Rates)

(Rates per 1,000 of the population)

Year	England and Wales	West Riding Administrative County	Stocksbridge U.D.
1967	11.2	11.2	10.0
1966	11.7	12.1	10.3
1965	11.5	11.6	10.8
1964	11.3	11.5	9.1
1963	12.2	12.0	12.2

STILL BIRTHS

(Rates per 1,000 Live and Still Births)

1967	14.8	15.2	4.6
1966	15.4	14.4	23.7
1965	15.7	16.0	19.9
1964	16.3	17.6	4.8
1963	17.3	18.7	4.9

RATES PER 1,000 TOTAL POPULATION

Year	England and Wales	West Riding Administrative County	Stocksbridge U.D.
1967	17.2	18.0	17.5
1966	17.7	18.0	16.9
1965	18.0	18.2	16.6
1964	18.4	18.5	17.7
1963	18.8	18.8	17.7

PRINCIPAL CAUSES OF DEATH

	<u>Male</u>	<u>Female</u>	<u>Total</u>
<u>OTHER INFECTIVE and PARASITIC DISEASE</u> ...	-	1	1
<u>CANCER</u>			
Malignant neoplasm, uterus ...	-	1	1
Malignant neoplasm, breast ...	-	3	3
Malignant neoplasm, stomach ...	3	-	3
Malignant neoplasm, lung and bronchus ...	6	-	6
Other malignant and lymphatic neoplasms, including leukaemia and aleukaemia ...	7	4	11
<u>SYPHILITIC DISEASE</u> ...	-	-	-
<u>DIABETES</u> ...	-	1	1
<u>NERVOUS SYSTEM</u>			
Vascular lesions of nervous system ...	7	12	19
<u>CIRCULATORY SYSTEM</u>			
Coronary disease, engine ...	11	9	20
Hypertension with heart disease ...	1	-	1
Other heart disease ...	5	13	18
Other circulatory diseases ...	6	7	13
<u>DIGESTIVE SYSTEM</u>			
Ulcer of stomach and duodenum ...	2	1	3
Gastritis, enteritis and Diarrhoea ...	-	-	-
<u>RESPIRATORY SYSTEM</u>			
Tuberculosis ...	-	-	-
Pneumonia ...	1	2	3
Bronchitis ...	5	-	5
Influenza ...	-	-	-
Other diseases of Respiratory System ...	1	-	1
<u>GENITO-URINARY SYSTEM</u>			
Nephritis and Nephrosis ...	-	-	-
<u>CONGENITAL MALFORMATIONS</u> ...			
... ..	1	1	2
<u>OTHER DEFINED and ILL-DEFINED DISEASES</u> ...			
... ..	1	5	6
<u>SUICIDE</u> ...			
... ..	-	2	2
<u>ACCIDENTS</u>			
Motor vehicle ...	-	2	2
All other accidents ...	1	2	3
<u>ALL CAUSES</u> ...	58	66	124

AGE DISTRIBUTION OF DEATHS

	<u>Male</u>	<u>Female</u>
Under 1 year	-	4
1 to 2 years	-	-
2 to 5 years	-	-
5 to 15 years	-	-
15 to 25 years	2	1
25 to 45 years	1	2
45 to 65 years	22	11
65 years and over	33	48
	<hr/>	<hr/>
TOTAL	58	66

INFANTILE MORTALITY

There were 4 deaths under 1 year of age (female), equivalent to a rate of 18.4 per 1,000 live births.

DEATHS UNDER 1 YEAR

(Rates per 1,000 Related Live Births)

<u>Year</u>	<u>England and Wales</u>	<u>West Riding Administrative County</u>	<u>Stocksbridge U.D.</u>
1967	18.3	19.2	18.4
1966	19.0	19.8	19.4
1965	19.0	20.7	10.2
1964	20.0	22.2	14.6
1963	20.9	23.0	24.8

TABLE SHOWING AGE DISTRIBUTION OF

INFANTILE DEATHS

Cause of Death	Under 1 week	1 to 2 weeks	2 to 3 weeks	3 to 4 weeks	Total under 4 weeks	1 to 3 months	3 to 6 months	6 to 9 months	9 to 12 months	Total under 1 year
	Prematurity	1	-	-	-	1	-	-	-	-
Bronchopneumonia	-	-	-	-	-	1	-	-	-	1
Anencephaly	1	-	-	-	1	-	-	-	-	1
All Other accidents	-	-	-	-	-	-	1	-	-	1
Total ...	2	-	-	-	2	1	1	-	-	4
1966	2	1	-	-	3	-	-	-	1	4
1965	2	-	-	-	2	-	-	-	-	2
1964	3	-	-	-	3	-	-	-	-	3
1963	4	-	-	-	4	1	-	-	-	5

EPIDEMIC DISEASES

There were no deaths in the Epidemic Diseases (other than Tuberculosis) Group during the year.

MATERNAL MORTALITY

There were no maternal deaths during 1967.

INQUESTS

Inquests were held on 8 occasions, and in 10 cases the cause of death was certified by the Coroner after Post-mortem examination without Inquest.

NATIONAL HEALTH SERVICE ACTS, 1946/57

VITAL STATISTICS

Live Births	...	...	...	...	...	...	...	217
Live Birth Rate per 1,000 population	...	...	...	...	...	...	...	17.5
Illegitimate Live Births per cent of total live births	...	...	...	...	...	...	...	3.2
Still-births	...	...	...	...	...	...	...	1
Still-birth Rate per 1,000 total live and still births	...	...	...	...	...	...	...	4.6
Total Live and Still-births	...	...	...	...	...	...	...	218
Infant Deaths (deaths under 1 year)	...	...	...	...	...	...	...	4

INFANT MORTALITY RATES

Total infant deaths per 1,000 total live births	...	...	...	...	...	...	...	18.4
Legitimate infant deaths per 1,000 legitimate live births	...	...	...	...	...	...	...	19.0
Illegitimate infant deaths per 1,000 illegitimate live births	...	...	...	...	...	...	...	-
Neo-natal Mortality Rate (deaths under 4 weeks per 1,000 total live births)	...	...	...	...	...	...	...	9.2
Early Neo-natal Mortality Rate (deaths under 1 week per 1,000 total live births)	...	...	...	...	...	...	...	9.2
Peri-natal Mortality Rate (still-births and deaths under 1 week combined per 1,000 total live and still-births)	...	...	...	...	...	...	...	13.8

PREVALENCE OF, AND CONTROL OVER,
INFECTIOUS AND OTHER DISEASES

Infectious Diseases other than Tuberculosis.

During the year 40 cases of Infectious Disease were notified. They were distributed as follows:-

	<u>Notifications</u>	<u>After Correction</u>
Measles	38	38
Whooping Cough	1	1
Erysipelas	-	-
Meningococcal Infection	-	-
Dysentery	-	-
Food Poisoning	-	-
Acute Encephalitis	1	1
	<hr/> 40 <hr/>	<hr/> 40 <hr/>

ATTACK RATE OF COMMONER INFECTIOUS DISEASES

Disease	England and Wales	West Riding Adminis- trative County	Stocksbridge U.D.
Erysipelas	0.03	0.04	0.00
Scarlet Fever	0.40	0.65	0.00
Pneumonia	0.12	0.15	0.00
Measles	9.51	7.71	3.05
Whooping Cough	0.69	1.03	0.08
Dysentery	0.46	0.20	0.00
Meningococcal Infection	0.12	0.15	0.00

DISTRIBUTION OF INFECTIOUS DISEASES
BY AGE GROUPS

DISEASE	Age Groups											TOTALS		
	'0 - 1 year	1 - 2 years	2 - 3 years	3 - 4 years	4 - 5 years	5 -10 years	10 -15 years	15 -25 years	25 -35 years	35 -45 years	45 -65 years		65 and over	Age unknown
Measles	1	5	8	3	5	16	-	-	-	-	-	-	-	38
Scarlet Fever	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Whooping Cough	-	-	-	-	1	-	-	-	-	-	-	-	-	1
Erysipelas	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Meningococcal Infection	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Dysentery	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Food Poisoning	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Acute Encephalitis	-	-	-	-	-	-	-	-	1	-	-	-	-	1
TOTALS	1	5	8	3	6	16	-	-	1	-	-	-	40	

SCARLET FEVER

Once again there have been no cases of Scarlet Fever notified in the district. This is a satisfactory situation. In other parts where Scarlet Fever is occurring the disease does not present any major problems, since the preceding infection, i.e. a streptococcal infection, is more easily controlled these days with antibiotics.

DIPHTHERIA

No cases of Diphtheria were notified during 1967. In January of this year Division 22, of which Stocksbridge Urban District Council forms a part, and another Division within the County area began a pilot scheme involving the use of the computer at County Hall for the record keeping of immunisation. The main purpose of this exercise was to be able to discover quickly and easily which children had failed to keep their appointments for immunisation, and to issue through the computer multiple reminders to their parents until either it was clear that the parents did not wish immunisation for their children, or until the programme had been completed. One result of using the computer in this way is that we are no longer able to provide statistics district by district, but can provide them for the Division as a whole, and below are given the divisional figures. We have also, by simple addition, produced the divisional figures of the year 1966. It is clear at once that the figures in 1967 show a marked increase on those for the previous year.

	<u>1967</u>	<u>1966</u>
Primary immunisations ...	1,309	1,143
'Booster' doses	1,075	970

WHOOPING COUGH

One case only was reported during the year; this was a child 4 years old, reported in the third quarter. The fact that only one child presented a clear enough clinical picture to be definitely diagnosed as Whooping Cough is a satisfactory state of affairs, and highlights the advisability of immunisation.

MEASLES

There were 38 cases of Measles notified in 1967, a decrease of 13 on last year's figures. In the first quarter of the year 9 cases were notified, 12 in the second quarter, 5 in the third quarter and 12 in the fourth quarter. Of this total, 3 cases were notified from Deepcar, 29 from Stocksbridge and 6 from Bolsterston. The attack rate was 3.05, compared with 7.71 for the West Riding Administrative County and 9.51 for England and Wales. Once again the biggest single group was in the age range 5 to 10 years. This as always, is because of the close contact children have with each other in the school situation. It is likely that there will be a decision on Measles immunisation in the near future. One can expect a considerable reduction in the severity of the disease if and when immunisation is carried out.

POLIOMYELITIS

There were no cases of Poliomyelitis notified during the year for your district. You will notice from the table on a previous page that there were no cases of Poliomyelitis notified for England and Wales or for the West Riding Administrative County. There can be very little doubt that this is due to the vaccination programme. Like all other vaccination programmes, once begun it is imperative that it continue. I feel that the computer method of recording immunisation will be of assistance in maintaining a high degree of vaccination, because it issues individual invitations to each child known to reside within the area. A table is given overleaf showing the immunisation figures for the Division as a whole

VACCINATION OF PERSONS UNDER AGE 16 COMPLETED DURING 1967

TABLE 1.

Completed Primary Courses - Number of persons under age 16.

Year of birth					Others under age 16	Total
1967	1966	1965	1964	1960-63		
691	709	94	24	37	5	1,560

TABLE 2.

Reinforcing Doses - Number of persons under age 16.

Year of Birth					Others under age 16	Total
1967	1966	1965	1964	1960-63		
-	17	35	11	973	33	1,069

SMALLPOX

There were no cases of Smallpox notified in the area in 1967. A total of 583 persons within the divisional area received primary vaccination, compared with 547 during 1966. As I have said on previous occasions, primary vaccination carries very slight risk with it; unfortunately, the risk increases with age. It is known that the least possible risk is incurred between the ages of 1 and 2 years, therefore it is immediately clear that the proper time to have the procedure carried out is in the second year of life. Revaccination does not carry the risks associated with primary vaccination.

DISEASES OF THE ALIMENTARY TRACT

No cases were notified during the year under review. This is an excellent reflection of the high state of cleanliness in our water supply and in our food in general. Communication of bowel disease from one person to another is very frequently via contaminated hands, foodstuff and then on to the next victim. It is, therefore, important to continue the high standards that have been set.

ACUTE ENCEPHALITIS

One case was reported during the year under consideration; this was a female aged 43 years, from the Deepcar area. Unfortunately, her illness was severe and she was admitted to Lodge Moor Hospital and died there.

TUBERCULOSIS

Three cases of Tuberculosis were notified during 1967; one was a new case, one was a transfer from Maltby and one a transfer from Wortley R.D.C. All were placed under supervision.

The hard work of the hospital staff and our own, in following up contacts of the known disease and examining them for early detection of secondary disease, has continued. The Mass Radiography Service continues, whenever possible, to visit the area, but no member of the public need wait for such an occasion to arrive because the Mass Radiography Centre in the city is permanently available.

B.C.G. VACCINATION

All the children in their first year in the Secondary Modern School were offered vaccination against Tuberculosis. 182 children were skin tested; of these 12 had a positive skin reaction and, therefore, did not require vaccination. 166 were subsequently vaccinated. The remaining 4 were absent, and will receive vaccination next year if they wish. I am glad to say the acceptance rate for this procedure is very high.

CHIROPODY SERVICE

As I have said in past years, I consider that this service is of value, taken in conjunction with all the other supporting services for the handicapped and the elderly. In recent years there has been a steady increase in the number of requests for domiciliary treatment. Although one recognises that more and more people are surviving to a greater age and that the need for domiciliary treatment may well increase, nevertheless it has to be appreciated that only those who are quite incapable of reaching the clinic should qualify.

The figures for the treatments, both at the Clinic and domiciliary, are shown below.

	<u>Clinic</u>	<u>Domiciliary</u>	<u>Total</u>
Treatments	1,494	855	2,349
Number of patients treated	319	182	501

HEALTH EDUCATION

The general Health Education programme during 1967 in this Division in the main, followed the pattern of the West Riding Health Education programme with some variations according to local conditions.

Health Visitors have carried out general Health Education in most clinics to individuals and small groups of mothers. Some clinic premises are small and very unsuitable for even group discussions to be held, although with the excellent displays and posters now available from the Central Office Health Education Department some measure of teaching good health has been made available to even this type of clinic. Group discussions have included home safety, personal hygiene, including care of the hair, teeth, skin, feet and diet to include all age groups.

Health Visitors continue their efforts both in the clinic and during home visits to promote an approach to a good healthy life, and to encourage parents to arrange for their children to be given prophylaxis against certain diseases.

Discussions vary from clinic to clinic and it is not, therefore, possible to estimate correctly the number of attendances over the year.

Schools:

As in previous years our complex programme for Health Education was arranged in co-operation with the Headmaster and staff of Stocksbridge Secondary Modern School. The programme was as shown below.

1. Groups of teenage girls visited the Child Welfare Centre during the year to observe the Health Visitor's role, and work within the clinic, noting the advice and

help on the management of the baby and being made aware of the prophylaxis against certain disease.

2. Two groups of teenage children aged 14 - 15 years have attended Health Education classes during one afternoon per week; programmes arranged were as follows.

1. Role of Health Visitor within the community.
2. Personal hygiene.
3. Diet.
4. Emotional and physical development of children and teenagers.
5. Menstruation.
6. Birth of a baby (with parents permission).
7. Venereal diseases (with parents permission).
8. The citizen, general discussions on living well within the community, including loneliness of aged and help which can be given.

MOTHERCRAFT AND RELAXATION CLASSES.

These classes have been held as far as possible once a fortnight in the Clinic and are, I think, useful in the preparation for delivery and also in the care of the new-born child. The Midwife is assisted occasionally by a talk from the Health Visitor, who explains such things as vaccination and immunisation to the mothers.

NATIONAL ASSISTANCE ACT.

There was no occasion to use the provision of Section 47 of the National Assistance Act, 1948, or the Amendment Act, 1951, during the period under review.

MENTAL HEALTH SERVICE.

The reorganised catchment area, which is now centred solely on Middlewood Hospital, became operative on 2nd January, 1967. One of the chief advantages of the new arrangements, particularly for patients and their relatives, has been the elimination of excessive travelling distances - an outstanding problem under the former system.

The commencement of the Monday afternoon Psychiatric Clinic at the Divisional Health Office, in the early part of the year, has brought multiple advantages. There is now a much closer liaison between the Consultant Psychiatrist for the area, our own Mental Welfare Officers, and local general practitioners. This strengthened three-way link has helped to improve the quality of community care. Transport to and from the clinic is arranged where necessary; a number of patients have expressed their appreciation of these facilities, and of the clinic's informality. A total of 78 patients attended the 40 clinic sessions during the year.

Consultant domiciliary visits are now more easily organised. Particular use has been made of these in connection with the confused and disturbed elderly, a recurrent and growing problem; fortunately, vacancies were invariably acquired for those requiring hospitalization. It is heartening to note that several of these patients were eventually discharged home.

A number of local residents visited the High Green Training Centre and Middlewood Hospital during Mental Health week, which was held between the 4th and 10th June. Unfortunately, these programmes rarely attract large numbers of the public and much work remains to be done in an effort to reduce the fear and misapprehension about mental disorders and psychiatric hospitals.

A growing number of student groups visited the area, in the company of Mental Welfare Officers, during the year. These visits are now an established part of the psychiatric nurse-training at Middlewood Hospital. In addition to student health visitors, members of the clergy now spend a day with our mental health staff to gain some insight into psychiatric problems.

ADMISSIONS AND DISCHARGES TO MENTAL HOSPITALS

During the year there were 4 male and 5 female admissions to Middlewood Hospital, and 9 discharges, of whom 5 male and 4 female asked for after-care.

MENTAL SUBNORMALITY

The Friday morning out-patient clinic for subnormal patients commenced in the Division Health Office on 3rd February, and has proved invaluable in helping to alleviate parental anxieties. A total of 52 juveniles were seen over the 35 sessions.

I am very pleased that the Regional Hospital Board, the two Consultants concerned and ourselves have been able to co-operate to instate these two Psychiatric Clinics in the Division.

Local hospitals, namely Thundercliffe Grange, Middlewood and Dronfield have been sympathetic in requests for short-stay beds, thus enabling relatives to take their holidays or a short rest.

There was a full social calendar at the Training Centre throughout the closed season, which was ably supported by the Parent/Teachers' Association.

SPECIAL CARE UNIT

The continued use of the rota system enabled a maximum number of 14 patients to attend the department several times a week.

The following are the statistics of the mentally subnormal cases in the Stocksbridge Urban District:-

Care and Guidance

<u>Over 16 years</u>	<u>Male</u>	<u>Female</u>
In full employment	3	1
Fully employed and/or supervised at home	-	2
Training Centre	4	3
Refused Training Centre	3	1
Unemployable or cot cases	2	-
Working part-time	1	1
<u>Under 16 years</u>		
Training Centre	5	1
Cot case in Care Unit	2	1
	<u>20</u>	<u>10</u>

GENERAL PROVISION OF THE HEALTH SERVICES

HOSPITALS

Infectious Disease. Cases of infectious disease requiring treatment in hospital are admitted to Lodge Moor Hospital, Sheffield.

Maternity Cases. If hospitalization is required in maternity cases it is provided at the Chapeltown Maternity Home, the Northern General Hospital, Sheffield, the Jessop Hospital for Women, Sheffield.

General Hospitals. General Hospitals in Sheffield are those used by the people in the Stocksbridge Urban District.

CERVICAL CYTOLOGY

During the year we continued the service of taking cervical smears for the detection of early carcinoma of the cervix. We have continued the policy of seeking those women most at risk, i.e. over 35 years of age with 4 or more children, but have also taken in any other married women who were anxious to have the test carried out. We have not sought to publicise this very widely, but have preferred rather to seek the cases through our own nurses and through the general practitioner service, since the number of smears available is still limited, and this relative shortage of smear facilities in the laboratory is the controlling factor in the numbers we try to encourage to the clinic. The number of positive tests have been very small indeed, but we sincerely hope, as a result of having discovered these positives, that the ladies concerned will enjoy a normal life span.

LABORATORY SERVICES.

The Public Health Laboratories at Wakefield and Sheffield are available to provide all the necessary investigations we may require in the epidemiological field. The respective Medical Directors are most willing to help and advise, and I am grateful to them.

AMBULANCE SERVICE

The West Riding County Council provide ambulance facilities in accordance with the requirements of section 27 of the National Health Service Act, 1946.

During the year no difficulty was experienced regarding staffing, and the full complement of staff of 36, plus one Station Officer, worked a three-shift system from the main operational depot at Hoyland, with an alternating shift at the new Penistone Depot, which was officially opened during 1966. There are six vehicles at Hoyland and three at Penistone. The additional vehicle at Penistone is an ambulance car.

Liaison with all hospitals continues at a high level, and the Authority continues to work most amicably with neighbouring County Boroughs.

Ambulance calls from doctors, hospitals, institutions and members of the public, in emergencies, are received at the Station Control Room, and are competently dealt with by the efficient use of a radio communication system, ensuring speed and economical use of the vehicles, and at the same time reducing mileage to the minimum.

The majority of the ambulance personnel are competent to render first aid, and staff are encouraged to train and obtain current certificates, the County Council giving monetary recognition by way of extra pay as an incentive to qualification.

C L I N I C S.

CHILD WELFARE.

The Clinics held in Stocksbridge area are listed below, together with the number of attendances during the year 1967.

CHILD WELFARE CENTRES

Name and Address of Centre Name of Doctor and Health Visitor in attendance.	Day and Time of Sessions.	Total number of attendances during the year.	
		Number who attended for first time during 1967	Children up to 5 years
<u>STOCKSBRIDGE</u> Johnson Street. Dr. M. Bannon. Dr. G. Brennan. Dr. R. Patel. Miss J. Incles. Mrs. M.A. Laycock (Asst.) Mrs. L.M. Sellers.	Thursday p.m.	505	3,124

HEALTH VISITING.

The Health Visiting staff remained stable throughout the year, no change taking place. Routine home visits to newly-born babies, to toddlers, and duties within the School Health Service were carried out. In addition, during the past year the staff have been provided with a new outlook owing to the computer scheme being arranged for immunisation and vaccination, the Health Visitors being asked to participate in a pilot scheme. The Health Visitors have responded very well, and it would appear that the effort is worth while.

The duties of the Health Visitor include deaf screening tests on all children, tests for early detection of hip deformity and phenylketonuria, and attending screening sessions for early detection of cancer in women. Mothers have responded well to the

immunisation and vaccination invitations, although tending, however, to be somewhat hesitant to attend deaf screening sessions held in clinics, in spite of repeated invitations. No doubt with time and patience the families will realise the importance of detecting deafness in children at any early age.

The number of visits carried out by the Health Visitors in 1967 was 5,447.

HEALTH VISITING STAFF (1967)

<u>Name</u>	<u>Address</u>	<u>Telephone No.</u>
Mrs. R. Chambers. (Assistant)	76 Fir Tree Estate, Thurgoland.	Stocksbridge 3370
Miss J. Incles.	231 Tower Drive, Norfolk Park, Sheffield, 2.	
Mrs. M.A. Laycock. (Assistant)	23 Park Drive, Stocksbridge.	
Mrs. L.M. Sellars.	Handbank Farm, Midhope, Stocksbridge.	Penistone 3387
Miss J.M. Walker.	303 Haggstones Road, Worrall.	Oughtibridge 2174

HOME NURSING

Mrs. Fox was transferred from the Penistone district to take over Home Nursing duties in the Deepcar area.

The Home Nurse carries out nursing duties within the patient's own home, cases being referred from general practitioners working within the area, and hospital authorities. Nursing aids, including incontinent sheets and pads and equipment, are made readily available under the County Loan Scheme.

The Nurses attended 217 new cases during 1967, and the total number of visits made was 6,386.

HOME NURSING STAFF (1967)

<u>Name</u>	<u>Address</u>	<u>Telephone No.</u>
Mrs. A.M. Armitage	88 Fox Glen Road, Deepcar.	Stocksbridge 2294.
Mrs. E.M. Fox	7 Willow Road, Stocksbridge.	Stocksbridge 3505.

MIDWIFERY SERVICE

During the year the Midwifery staff remained the same. This means a very settled working relationship with the general practitioners within the area.

The Midwives attend the Johnson Street ante-natal Clinic weekly; this close co-operation proves to be of benefit to the patients concerned, the general practitioners and Midwife.

Ante-natal and Relaxation Classes are held fortnightly. During these discussions with visual aids and the films available, the Midwife is able to prepare the mother for her confinement with confidence and dispel any untoward fear.

The Midwives attended a total of 72 cases during the year.

MIDWIFERY STAFF (1967)

<u>Name</u>	<u>Address</u>	<u>Telephone No.</u>
Miss R. Crossley	"Walderscroft", Hollin Busk Road, Deepcar.	Stocksbridge 3135
Mrs. J.F. George	330 Middlewood Road North, Oughtibridge.	Sheffield 348130

NURSING STAFF AS AT 1ST JULY, 1968

HEALTH VISITORS

<u>Name</u>	<u>Address</u>	<u>Telephone No.</u>
Mrs. R. Chambers (Assistant)	76 Fir Tree Estate, Thurgoland.	Stocksbridge 3370
Miss J. Incles.	231 Tower Drive, Norfolk Park, Sheffield, 2.	
Mrs. M.A. Laycock (Assistant)	23 Park Drive, Stocksbridge.	
Mrs. L.M. Sellers.	Handbank Farm, Midhope, Stocksbridge.	Penistone 3387
Miss J.M. Walker	303 Haggstones Road, Worrell.	Oughtibridge 2174

HOME NURSES

Mrs. A.M. Armitage	88 Fox Glen Road, Deepcar.	Stocksbridge 2294
Mrs. E.M. Fox	7 Willow Road, Stocksbridge.	Stocksbridge 3505

MIDWIVES

Miss R. Crossley	"Walderscroft", Hollin Busk Road, Deepcar	Stocksbridge 3135
Mrs. J.F. George	330 Middlewood Road North, Oughtibridge.	Sheffield 348130

DOMESTIC HELP SERVICE

During 1967 a total of 22,697 Domestic Help hours were provided in the Stocksbridge Urban District. There were 29 Domestic Helps employed, attending a total of 119 cases. Of this total, 78 cases were continued from 1966, the remaining 41 being new cases. The types of cases where domestic help was made available are as follows:-

Maternity cases	10
General cases over 65 years	93
General cases under 65 years	5
Other cases	11
	<hr/>
	119
	<hr/>

HEALTH VISITORS

As I have said to you before, this service is one of a number which enables elderly people to remain in their own homes, or in specially built housing which is, of course, equally their own home. Not only is it more economic for the elderly to remain at home, it is also, in the vast majority of cases, what they, themselves, wish.

I think it is right at this point to commend the ladies in the Home Help Service, who work with considerable devotion to make the service a successful one. Other services which assist the elderly in particular are the Meals-on-Wheels Service and the Warden Service. I think both these services are now sufficiently well established to be taken as part of the standard care of the elderly, and both, in my opinion, work to very good effect. It has only recently come to my notice the extent of the activities of the Women's Royal Voluntary Service in Stocksbridge. They have helped many families in the area and have assisted my staff in practical ways on more than one occasion.

Mrs. J. W. George
550 Middlewood Road North,
Sheffield
S4 8JQ

DOMESTIC HELP SERVICE

During 1967 a total of 28,697 Domestic Help hours were provided in the Stocksbridge Urban District. There were 29 Domestic helps employed, attending a total of 119 cases. Of this total, 75 cases were continued from 1966, the remaining 44 being new cases. The types of cases where domestic help was

made available are as follows:-

10	Maternity cases
97	General cases over 65 years
5	General cases under 65 years
11	Other cases
113	

DISTRIBUTION OF WELFARE FOODS

The amount of Welfare Foods issued in Stocksbridge Urban District during 1967 was as follows:-

National Dried Milk	990	tins
Cod Liver Oil	238	bottles
Vitamin A and D tablets	204	(packets of 45)
Orange Juice	3,554	bottles

These foods are issued at the following Centres throughout the Division on the days and times stated:-

<u>Address of Premises</u>	<u>Days</u>	<u>Times</u>
<u>STOCKSBRIDGE URBAN DISTRICT</u>		
Child Welfare Centre, Johnson Street, Stocksbridge.	Thursday	2.00 - 4.00 p.m.
Stocksbridge Co-op. Society. Deepcar Branch, Manchester Road, Deepcar.	During shop hours	
<u>PENISTONE URBAN DISTRICT</u>		
Child Welfare Centre, Shrewsbury Road, Penistone.	Monday	2.00 - 4.00 p.m.
<u>PENISTONE RURAL DISTRICT</u>		
Child Welfare Centre, Golf Club, Cawthorne.	Alternate Wednesdays	1.30 - 3.30 p.m.
P. & C. Sinclair, The Stores, Halifax Road, Thurgoland.	During Shop hours	
<u>HOYLAND NETHER URBAN DISTRICT</u>		
Child Welfare Centre, Rockingham Youth Club, Sheffield Road, Hoyland Common.	Thursday	2.00 - 4.00 p.m.
Child Welfare Centre, Leisure Centre, King Street, Hoyland.	Tuesday	11.00 - 12.00 a.m. 2.00 - 4.00 p.m.

<u>Address of Premises</u>	<u>Days</u>	<u>Times</u>
<u>WORTLEY RURAL DISTRICT</u>		
Clinic, Zion Congregational Church, Langsett Road South, Oughtibridge.	Thursday	2.00 - 4.00 p.m.
Clinic, Memorial Hall, Worrall.	Alternate Tuesdays	2.00 - 4.00 p.m.
Child Welfare Centre, Greenhead Wesleyan Reform Chapel, Greenhead Lane, Chapelton.	Wednesday	11.00 - 12.00 e.m. 2.00 - 4.00 p.m.
Clinic, Methodist Chapel, High Green.	Tuesday	2.00 - 4.00 p.m.
Colley Estate Clinic, Wheats Place, Sheffield, 5.	Monday	2.00 - 4.00 p.m.
Clinic, Community Hall, Main Street, Grenoside.	Thursday	2.00 - 4.00 p.m.
Child Welfare Centre, Wharnccliffe Silkstone Welfare Hall, Pilley, Nr. Barnsley.	Alternate Mondays	2.00 - 4.00 p.m.
Child Welfare Centre, Knowle Top, Stannington.	Wednesday	2.00 - 4.00 p.m.
Child Welfare Centre, Congregational Church, Loxley.	Alternate Tuesdays	1.30 - 3.30 p.m.
Mrs. D. Harper, The Shop, Main Road, Dungworth.	During shop hours.	

SANITARY CIRCUMSTANCES - 1967

(Prepared by Mr. A. E. Kaye)

Nuisances

Table showing the number and type of nuisance found and action taken during the year.

Blocked or defective drains	22
Blocked or defective sink wastes	1
Blocked or defective W.C.'s	6
Defective dustbins	45
Defective roofs, eaves gutters and fallpipes	9
Dampness - various causes	4
Miscellaneous	7
	<hr/>
	94
Nuisances brought forward from 1966	-
Total needing abatement	<hr/>
	94
Abated during 1967	94
	<hr/>
Outstanding December 1967	---
	<hr/>
Informal notices served	38
Informal notices complied with	38

Closet Accommodation

Closet accommodation at the end of the year consisted of:-

52 Privies and 5,217 Water Closets.

The remaining privies are in the rural areas where no sewers are available.

Refuse Collection

Household refuse is collected from 4,585 dustbins, 52 Privies and 5 dry ashpits.

A weekly collection of household and trade refuse has been maintained throughout the year. The tip at Townend has continued in use for the disposal of refuse.

Ice Cream

1 application for registration was received during the year. 50 premises are registered for the sale only of Ice Cream.

Inspections

62 inspections were made of registered food premises during the year.

Meat Inspection

One licensed Slaughterhouse, which caters for 3 local butchers, is in operation in the district. During the year 603 Beasts and 1,166 Sheep were inspected.

Meat Inspection (continued)

The following organs found to be diseased were surrendered and disposed of:-

DISEASE	ANIMAL	Parts Surrendered	
			LIVER
/ Abscesses	Beast		1
Fluke	Sheep		2
Fluke	Beast		8
Parasites	Beast		4
Parasites	Sheep		6

Other Foods

The following other foodstuffs were surrendered and disposed of:-

Canned Meats	-	9 lbs.
Canned Fruit	-	109 lbs.
Canned Vegetables	-	60 lbs.
Canned Milk	-	--
Meat	-	--
Canned Fish	-	11 lbs.
<u>Frozen Food</u>		
Meat	-	14 lbs.
Vegetables	-	54 lbs.
Fish	-	36 lbs.

Food Premises

The number of food premises in the area are made up as follows:-

Butchers	-	14
Bakers	-	2
Canteens	-	10
Fish Shops	-	9
Grocers	-	44
Sweets	-	16

Water Supply

A main supply is available to 4,556 houses out of a total of 4,634 houses in the area.

Offices, Shops & Railway Premises

101 premises are registered under the Offices, Shops & Railway Premises Act 1963. 47 visits were made during the year to ensure compliance with the Act.

Clearance Areas

17 families comprising 54 persons were rehoused from clearance areas during the year. 7 houses have been represented for clearance during the year.

Rodent and Insect Control

Minor infestations of rats were found in private property some of these were dealt with by the department and others were treated by the owners with the help of the department.

The Refuse Tip and Sewage Works are reasonably free from rats due to periodic inspection and treatment.

Housing

New Houses completed

(a) By Local Authority	..	125
(b) Private Enterprise	..	101
		<hr/>
Total	..	226
		<hr/>

Discretionary Grants

17 applications were granted for improvement of properties, these were owner occupied houses and the value of the grants was £2,432.

Standard Grants

11 applications were received and approved during the year and £767 was paid out against Standard Grants.

NEW BUILDINGS AND DEVELOPMENT 1967

<u>Proposals submitted for approval</u>	<u>Approved</u>	<u>Disapproved</u>	<u>Total</u>
Garages	104	1	105
Garage Sites	2	-	2
Garden Sheds, Porches etc.,	39	1	40
Bathrooms	33	1	34
W.C.'s	10	-	10
New Houses	4	-	4
Bungalows	20	-	20
Flats	-	-	-
Residential Development Plans	8	-	8
Outline Residential Development Plans	10	1	11
Housing alteration or extension	13	-	13
Shop Development	7	-	7
Office	1	-	1
Works Development Plans	16	-	16
Outline Garage and Workshop	-	1	1
Workshop	-	1	1
Petrol Filling Stations	2	-	2
Youth Centre	2	-	2
Library	1	-	1
Telephone Exchange	1	-	1
Market	1	-	1
Civic Hall	1	-	2
Primary School	1	-	1
Signs	10	-	10
Electrical Substations	8	-	8
Car Parks	7	-	7
Pigeon Loft	1	-	1
Change of use	6	-	6
Total	308	7	315

Standard Grants

If applications were received and approved during the year and 1967 was paid out against Standard Grants was £2,452. See also the Standard Grants

