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RURAL DISTRICT OF WAKEFIELD




ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

AND THE PUBLIC HEALTH INSPECTOR

FOR THE YEAR 1959



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RURAL DISTRICT OF WAKEFIELD

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

AND THE PUBLIC HEALTH INSPECTOR

FOR THE YEAR 1959

Butterworth & Pilkington, Morley

WAKEFIELD RURAL DISTRICT

MEMBERS OF THE PUBLIC HEALTH COMMITTEE

1959—60

Chairman:

Councillor W. B. Spurr

Vice-Chairman:

Councillor J. T. Foley, J.P.

Councillors

R. Darwell
J. H. Milne
Mrs. A. P. Wightman
B. A. Hardcastle
H. E. Elsley
H. Howarth
J. Chalkley

F. W. Middleton
W. Sandham
W. Howley
B. Hall
J. Crowther
E. Crossley

PUBLIC HEALTH STAFF.

WAKEFIELD RURAL DISTRICT.

Medical Officer of Health.

Joseph Lyons, M.B., Ch.B., M.R.C.S., L.R.C.P.,
D.P.H.

Deputy Medical Officer of Health.

Barbara Briggs, M.B., Ch.B., D.P.H.

Chief Public Health Inspector.

E. Heald, M.R.S.H.

Additional Public Health Inspector.

C. Cannon, A.R.S.H.

Public Health Inspector's Clerk.

Miss M. Lloyd.

WEST RIDING COUNTY COUNCIL.

Preventive Medical Services: Health Division 13.

Divisional Medical Officer.

As above (M.O.H.).

Senior Assistant County Medical Officer and School Medical Officer

Barbara Briggs, M.B., Ch.B., D.P.H.

Assistant County Medical Officers and School Medical Officers

Irene Hargreaves, M.B., Ch.B.
George Firth, M.B., Ch.B., D.P.H.

Divisional Nursing Officer.

Miss A. Seelig, S.R.N., S.C.M., H.V. Certificate,
Q.N. (Appointed 1.9.59).

Health Visitors.

Mrs. M. A. Ward, S.R.N., S.C.M., H.V. Certificate.
 Mrs. E. Driver, S.R.N., S.C.M., H.V. Certificate.
 Mrs. A. Holder, S.R.N., S.C.M., H.V. Certificate.
 Miss J. Hough, S.R.N., S.C.M., H.V. Certificate.

Midwives.

Miss M. Campbell, S.R.N., S.C.M.
 Mrs. J. Renshaw, S.R.N., S.C.M.
 Miss B. B. Fearon, S.R.N., S.C.M.
 *Miss O. Gardner, S.R.N., S.C.M., Queen's Nurse.
 *Miss M. E. Rhodes, S.R.N., S.C.M., Queen's Nurse.

Home Nurses.

Miss F. E. Ellis, S.R.N., R.F.N., A.R.R.C.
 Mrs. L. Jackson, S.R.N., S.C.M.
 Mrs. A. G. M. Wagstaff, S.R.N., Queen's Nurse.
 Mrs. T. Pickersgill (Relief Nurse), S.R.N., Queen's Nurse
 *Miss O. Gardner, S.R.N., S.C.M., Queen's Nurse.
 *Miss M. E. Rhodes, S.R.N., S.C.M., Queen's Nurse.
 *Combined appointment—Home Nurse/Midwife.

Mental Health Social Worker.

Mrs. A. Stell.

Mental Health Home Teacher.

Mrs. M. E. Towell. (Resigned 23.10.59).

Occupation Centre.

Mrs. G. Moorhouse, N.A.M.H. (Diploma) (Supervisor).
 Mrs. A. Ellis.
 Miss J. Blackburn.

Speech Therapist.

Miss G. Teare, L.C.S.T. (Resigned 30.10.59).
 Miss P. Bentley, L.C.S.T. (Appointed 21.9.59).

Joint Clerical Staff

Engaged in all constituent districts of the Division viz.,
Morley, Ossett, Horbury and Wakefield R.D.

A. Wright, D.M.A., D.P.A. (Senior Clerk).

K. Schofield, D.P.A.

D. Leach.

C. C. Roberts.

P. M. Sheard (Appointed 13.4.59).

Miss M. Halloran.

Miss C. Brennan.

Mrs. M. Kilburn.

Mrs. M. Thornburn.

Mrs. J. Mell.

Miss J. Hollings (Resigned 19.4.59).

Miss K. Edmondson (Appointed 8.6.59).

Miss E. Asquith (Resigned 31.8.59).

Miss P. Crosby (Resigned 3.3.59).

Miss M. G. Shackleton (Appointed 10.8.59).

LEEDS REGIONAL HOSPITAL BOARD.

Consultant Staff.

Ear, Nose and Throat Surgeon.

T. B. Hutton, F.R.C.S.

Chest Physician.

J. K. Scott, M.B., Ch.B., M.R.C.P., D.P.H.

School Ophthalmologist.

J. V. Kirkwood, M.B., Ch.B.

Pædiatrician.

J. D. Pickup, M.D., D.P.H.

A. P. Roberts, M.B., B.S., M.R.C.P.
M.R.C.S., D.C.H.

Orthopædic Surgeon.

Miss M A. Pearson, F.R.C.S.

Windsor House,
Queen Street,
Morley.

July, 1960

To the Chairman and Members of the Wakefield Rural
District Council.

Mr. Chairman and Members,

I have pleasure in presenting to you my fourth and last
Annual Report, covering the year ended December 31st, 1959.

Under the scheme of Divisional Health Administration introduced twelve years ago your Medical Officer of Health is also the Divisional Medical Officer for the West Riding County Council's local health services, and has similar functions in the Borough of Ossett, Borough of Morley, and the Urban District of Horbury. The scheme has integrated local health and sanitary services at executive level. There has been an automatic improvement of co-ordination and co-operation between sanitary district and county, and more economic and effective use has been made of professional staff. Examples of the easy interchange where necessary, of staff are the use of

County Council health visitors in epidemiological and housing investigations (local sanitary functions) and the assistance given by local public health inspectors in the supervision of problem families (primarily a County Council responsibility).

The Divisional Health Department has indeed been moulded into a compact and efficient unit for the promotion and preservation of the health of a community of over 80,000 people.

The sectionalisation and excessive specialisation so evident in some larger units of local government is absent here. The department works as a team under a single leader, the Divisional Medical Officer of Health, who personally guides every branch of the service and ensures co-ordination. The unit is large enough for the effective organisation of community health services and small enough to ensure the 'personal touch.' Some administrative control of the County Council services, especially in relation to planning policy and finance, must of course be exercised from County Hall but the Divisional Medical Officer is allowed sufficient autonomy and discretion in his day-to-day handling of the services to ensure the absence of any of the disadvantages of remote control. He also benefits, whether acting as Divisional Medical Officer or as local Medical Officer of Health, from the ready availability of advice from the specialist and other highly-experienced professional and administrative staff which only a large authority like the County Council can afford to employ. The West Riding div-

isional scheme of administration of health services has an extraordinarily high reputation throughout the country and I personally am proud to have played a part, however small, in its development.

The statistical sections of my report give details of the continued progress in all fields. Some of the work is singularly unspectacular. Services such as slum clearance, re-housing, immunisation, control of food, water and sanitation are now taken for granted. It is only when they fail or falter that news is made.

Serious forms of infectious disease have almost been eliminated but not necessarily for all time. Any relaxation in our standards could have dire results. The effect of one dry summer on the public water-supply of a part of this divisional area was a gentle reminder to local councils of the perils of complacency. Perhaps it demonstrated too that in the running of vital public services failure to spend can prove shockingly extravagant!

The vital statistics of the district in 1959 — as of the division as a whole — give an overall picture of a healthy and prosperous community. They do not however reveal certain weaknesses so obvious to every worker in the fields of health and welfare. I refer, of course, to the two underprivileged classes of modern society, the aged and the mentally ill. With regard to the former the public conscience has at last been

aroused and almost every local authority is spending more on preventive health services designed to assist elderly persons to live actively, healthily and happily in their own homes. The domiciliary health services — home nursing, domestic help, health visiting, warden schemes, chiropody, recuperative home treatment, etc. — are all being developed, expanded, or utilised more freely for the aged of the community. It is not always realised however that perhaps the most important health service for the aged is the provision of suitable housing.

Much more of the resources of our affluent society will have to be devoted to this end. The public will have to be persuaded to devote slightly less to the luxuries of current living in order to invest more in their own old age. The cost will not be insignificant — except by comparison with the thousands of millions of pounds annually sacrificed on the altars of alcohol, tobacco, television and transport! History will assess our civilisation from our sense of values, not our taste for gadgets.

Similarly, the proper care of the mentally ill is dependent on the replacement of apathy, ignorance, superstition and prejudice, by sympathy, enlightenment, tolerance and genuine goodwill. The new mental Health Act enables local health authorities to provide services for the care, within the community, of those suffering or recovering from mental disorder. Much is being planned in the way of training centres, hostels, intensified social work, closer liaison with hospitals and general practition-

ers, etc., but the success of these ventures will in the long run rest more on the public attitude towards the mentally afflicted than on the provisions of the Act.

As indicated in my opening paragraph my term of office with your authority is at an end though, as Deputy County Medical Officer my interest in your health will continue. My last and very pleasant function as your Medical Officer of Health is to thank you, members and officials alike, for the consistency of your support and the cordiality and warmth of your fellowship.

May I, in conclusion, also thank my hard-worked divisional staff for their devotion and loyalty, and the general practitioners of the division for their active co-operation, good-will and tolerance.

Yours sincerely,

JOSEPH LYONS,

Medical Officer of Health.

SECTION I.

VITAL STATISTICS

Statistics.

Area	21,335 acres
Population—Census 1951	19,199
Registrar General's estimate of Resident Population mid-1959	20,170
No. of dwelling houses	6,438
Rateable Value	£203,384
Product of a penny rate	£766 3s. 0d.

Summary of Vital Statistics

	Total	M.	F.	
Live Births:				Birth-rate per 1,000 of the estimated resident population 17.3
Legitimate	338	156	182	
Illegitimate	11	7	4	
Still-Births:				Rate per 1,000 (live and still-births) 22.4
Legitimate	8	4	4	
Illegitimate	—	—	—	
Total Births:				
Legitimate	346	160	186	
Illegitimate	11	7	4	
Deaths	198	124	74	Death-rate per 1,000 of the estimated resident population 9.8

Maternal Mortality.

There were no maternal deaths.

Infantile Mortality.

Eight infants under the age of twelve months died during 1959, giving an infantile mortality rate of 22.9 per 1,000 births.

The following table gives the cause of death of these infants:—

Cause of Death	No. of infants dying in				
	1st week	2nd wk.	3rd wk.	4th wk.	5-52 weeks
Prematurity	2	1	—	—	—
Congen. abnormalities	1	—	—	—	—
Cerebral haemorrhage ...	1	—	—	—	—
Asphyxia	1	—	—	—	—
Broncho-Pneumonia ...	—	—	—	—	2

CAUSES OF DEATH—WAKEFIELD R.D.

Cause of Death	1957			1958			1959		
	M	F	Total	M	F	Total	M	F	Total
1. Tuberculosis of respiratory tract	3	—	3	—	—	—	—	—	—
2. Other forms of Tuberculosis	—	—	—	—	—	—	—	—	—
3. Syphilitic Diseases	—	—	—	—	—	—	—	—	—
4. Diphtheria	—	—	—	—	—	—	—	—	—
5. Whooping Cough	—	—	—	—	—	—	—	—	—
6. Meningococcal Infections	—	—	—	—	—	—	—	—	—
7. Acute Poliomyelitis	—	—	—	—	—	—	—	—	—
8. Measles	—	—	—	—	—	—	—	—	—
9. Other Infective and Parasitic diseases	—	1	1	—	—	—	—	—	—
10. Malignant Neoplasm—Stomach	3	3	6	3	2	5	4	3	7
11. Malignant Neoplasm—lung and bronchus	4	1	5	4	1	5	6	—	6
12. Malignant Neoplasm—Breast	—	1	1	—	2	2	—	3	3
13. Malignant Neoplasm: Uterus	—	—	—	—	2	2	—	2	2
14. Other Malignant and Lymphatic Neoplasms	12	4	16	7	10	17	15	3	18
15. Leukaemia and aleukaemia	1	—	1	—	—	—	—	—	—
16. Diabetes	—	—	—	2	—	2	—	—	—
17. Vascular lesions of nervous system	15	13	28	12	13	25	13	7	20
18. Coronary disease: Angina	22	6	28	24	17	41	20	9	29
19. Hypertension with heart disease	3	3	6	2	5	7	2	4	6
20. Other Heart Disease	10	14	24	10	9	19	13	9	22
21. Other Circulatory Disease...	3	8	11	3	2	5	6	6	12

Cause of Death	1957			1958			1959		
	M	F	Total	M	F	Total	M	F	Total
22. Influenza	3	1	4	2	—	2	3	4	7
23. Pneumonia	2	2	4	9	3	12	8	7	15
24. Bronchitis	14	4	18	13	4	17	7	2	9
25. Other diseases of respiratory system	2	—	2	—	—	—	5	1	6
26. Ulcer of stomach and duodenum	2	—	2	1	1	2	1	—	1
27. Gastritis, Enteritis and diarrhoea	—	—	—	—	—	—	—	—	—
28. Nephritis and nephrosis ...	1	—	1	—	2	2	—	—	—
29. Hyperplasia of prostate ...	—	—	—	3	—	3	2	—	2
30. Pregnancy, childbirth and abortion	—	—	—	—	—	—	—	—	—
31. Congenital malformations ...	1	—	1	1	2	3	1	2	3
32. Other defined and ill- defined diseases	13	6	19	9	6	15	7	8	15
33. Motor vehicle accidents ...	3	1	4	4	—	4	3	—	3
34. All other accidents	3	4	7	5	4	9	6	4	10
35. Suicide	2	—	2	1	4	5	2	—	2
36. Homicide & operations of war	—	—	—	—	—	—	—	—	—
Total all Causes	122	72	194	115	89	204	124	74	198

**PRINCIPAL VITAL STATISTICS for the YEAR 1959, based on the Registrar-General's figures.
COMPARISON WITH OTHER AREAS.**

	Wake- field R.D.	Morley M.B.	Ossett M.B.	Horbury U.D.	Aggregate West Riding Rural Dis.	West Riding Admin. County	England and Wales (Prov- isional Figs.)
Birth Rate (per 1,000 estimated population)	17.3	15.9	17.2	16.1	17.6	16.5	16.5
Still Birth Rate (per 1000 live and still births) ...	22.4	15.5	30.8	21.6	21.9	20.4	20.7
Death Rates (all per 1000 estimated home popula- tion). All causes	9.8	11.8	13.4	11.7	9.4	11.6	11.6
Infective & Parasitic Diseases	0.00	0.08	0.27	0.00	0.04	0.04	*
Tuberculosis of respiratory system	0.00	0.05	0.21	0.12	0.06	0.07	0.08
Other forms of tuberculosis	0.00	0.00	0.00	0.00	0.02	0.01	0.01
Cancer	1.78	2.28	2.53	1.18	1.65	1.99	2.14
Vascular Lesions of ner- vous system	0.99	1.78	2.12	1.90	1.43	1.81	*
Heart & Circ. Diseases...	3.42	4.41	4.85	4.98	3.35	4.31	*
Respiratory disease (excl- uding tuberculosis of respiratory system) ...	1.83	1.43	1.64	1.30	1.15	1.44	*
Infant Mortality (deaths of infants under 1 year per 1,000 live births)	22.9	23.6	23.8	14.7	24.0	24.0	22.0
Maternal Mortality (deaths of mothers due to pregnancy or child birth per 1,000 live and still births)	0.0	0.0	0.0	0.0	0.24	0.36	0.38

* Figures not available.

VITAL STATISTICS OVER THE TEN YEARS 1950—1959

Year	Birth Rate	Death Rate	Infant-ile Mortal-ity Rate	Maternal Mortal-ity Rate	Cancer Death Rate	T.B. Death Rate		No. of cases of			No. of Deaths	
						Pul-monary	Non-Pul-monary	Scarlet Fever	Diph-theria	Polio-myelitis	T.B. All forms	Cancer of lung and bron-chus
1950	16.4	9.7	39.0	0.00	1.33	0.21	0.00	33	1	1	4	4
1951	17.0	10.1	15.3	3.01	1.51	0.26	0.00	18	0	1	5	4
1952	15.8	9.6	19.7	0.00	2.08	0.10	0.00	14	0	3	2	7
1953	18.0	9.0	26.2	0.00	1.78	0.10	0.00	38	0	3	2	2
1954	16.2	9.8	22.4	0.00	1.77	0.05	0.00	9	0	1	1	0
1955	16.0	9.9	22.7	3.15	1.56	0.21	0.00	9	0	5	4	5
1956	18.6	9.1	22.8	0.00	1.70	0.10	0.00	9	0	0	2	4
1957	17.5	9.8	34.5	0.00	1.46	0.15	0.00	17	0	2	3	5
1958	17.8	10.2	28.0	0.00	1.54	0.00	0.00	14	0	4	0	5
1959	17.3	9.8	22.9	0.00	1.78	0.00	0.00	13	0	0	0	6

SECTION II.

GENERAL PROVISION OF HEALTH SERVICES.**A. HOSPITALS.****General Hospital Accommodation.**

There are no hospitals within the Rural District, but reasonably adequate facilities are available in Wakefield, Dewsbury, and Leeds, under the administration of the Leeds Regional Hospital Board.

Isolation Hospitals.

Patients with infectious disease may be admitted to Snapethorpe Isolation Hospital, Wakefield, Kendray Isolation Hospital, Barnsley, or to Seacroft Hospital at Leeds. The latter hospital admits all cases of acute poliomyelitis from this area.

Maternity Hospitals and Maternity Homes.

Maternity hospital facilities are available at centres in Wakefield and there is a maternity home in the district of Walton. Priority is given to abnormal cases and to mothers living in conditions unsuitable for domiciliary confinement. Many expectant mothers requiring hospital confinement are booked through the Divisional Health Office, this department being in a position to advise on social circumstances.

B. AMBULANCE SERVICE.

The local ambulance service is provided by the West Riding County Council. There is no local depot, the nearest available depot for the district being Stanley Road, Wakefield. Tele.: Wakefield 3731.

C. LABORATORY FACILITIES.

The Public Health Laboratory at Wood Street, Wakefield (under the administration of the Medical Research Council of the Ministry of Health) accepts specimens for bacteriological, virological, entomological and chemical investigations from general practitioners and Public Health Department Staff.

SECTION III.

INFECTIOUS DISEASES.

Summary of Notifications received during 1959:—

Disease	Total Cases notified (corrected)
Scarlet Fever	13
Whooping Cough	22
Acute Poliomyelitis	—
Measles	270
Diphtheria	—
Dysentery	40
Meningococcal Infection	1
Acute Pneumonia	15
Smallpox	—
Acute Encephalitis	—
Enteric or Typhoid Fever	—
Paratyphoid Fever	—
Erysipelas	1
Food Poisoning	2
Puerperal Pyrexia	4
Ophthalmia Neonatorum	—
Pulmonary Tuberculosis	8
Other forms of Tuberculosis	1

Tuberculosis Services.

A clinic is held at Pinderfields Hospital, Wakefield. Regular home supervision is carried out by the Health Visitors. Free milk, bedding, shelters, etc., are provided by the County Council at the discretion of the Divisional Medical Officer if recommended by the Consultant Chest Physician in charge of the Clinic.

The following table gives at a glance the position regarding tuberculosis in Wakefield Rural District in 1959:—

	Respiratory			Non-Respiratory			Totals
	M	F	Total	M	F	Total	
No. on register on 1st January, 1959	37	42	79	3	6	9	88
No. first notified during 1959 ...	4	4	8	—	1	1	9
No. of cases restored to register	—	—	—	—	—	—	—
No. of cases entered in register otherwise than by notification	—	—	—	—	—	—	—
No. removed from register during 1959:—							
(a) died	—	2	2	—	—	—	2
(b) removed from district	—	2	2	—	—	—	2
(c) recovered ...	4	8	12	—	2	2	14
No. remaining on register at 31st December, 1959	37	34	71	3	5	8	79

The number of new cases and the number of deaths of notified cases during 1959 are given in detail in the following table:—

Age Period	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	1	3	—	1	—	—	—	—
45-64	3	—	—	—	—	—	—	—
65 and over	—	1	—	—	—	2	—	—
Totals	4	4	—	1	—	2	—	—

SECTION IV.

W.R.C.C. PREVENTIVE HEALTH SERVICES.**A. CLINICS AND TREATMENT CENTRES.****Infant Welfare.**

Mission Hall, Crofton—*Monday, 2-0 to 4-0 p.m.

St. Luke's Hall, Sharlston—*Tuesday, 2-0 to 4-0 p.m.

Church School, Middlestown—*Tuesday, 2-0 to 4-0 p.m.

Village Institute, Crigglesstone—*Wednesday, 2-0 to 4-0 p.m.

* Combined with a School Clinic Session.

Combined Ante and Post Natal sessions are held at the same places and on the same days as the Infant Welfare Sessions, but the commencing time in all cases is 1-30 p.m.

Ante Natal Relaxation Classes for Expectant Mothers.

Mission Hall, Crofton—Tuesday, 2-0—4-0 p.m.

Church School, Middlestown—Monday, 2-0—4-0 p.m.

Village Institute, Crigglesstone—Monday 2-0—4-0 p.m.

School Clinics (see also under Section H)

Secondary Modern School, Crofton—Minor Ailment. Monday and Thursdays 9-0 to 11-0 a.m.

Junior Mixed School, Sharlston—Minor Ailment, Tuesday and Friday 9-0 to 11-0 a.m.

County Primary School, Walton—Minor Ailment, Tuesday 9-0 to 10-0 a.m.

County Primary School, Middlestown—Minor Ailment, Wednesday 9-0—10-0 a.m.

County Primary School, Netherton—Minor Ailment, Wednesday 10-0—11-0 a.m.

Village Institute, Crigglesstone—Minor Ailment, Wednesday 9-0—11-0 a.m.

Smallpox Vaccination, Diphtheria Immunisation, Whooping Cough Vaccination and Tetanus Immunisation.

All Infant Welfare Centres—as required by arrangement

B.C.G. Vaccination against Tuberculosis

(by arrangement with the Divisional Health Office, Windsor House, Morley).

Vaccinations against Poliomyelitis

(by arrangement with the Divisional Health Office, Windsor House, Morley).

B. CARE OF MOTHERS AND YOUNG CHILDREN.

Ante Natal Services

Clinic	Total No. of women who attended	Total Attendances
Crofton	21	66
Sharlston	19	67
Middlestown	—	—
Crigglestone	17	52
Total ...	57	185

Child Welfare Clinics.

Clinic	Sessions per month	No. of children who attended		Attendances made by children		Average attendance per session
		Under 1 year of age	2-5 years of age	Under 1 year of age	2-5 years of age	
Crofton	4	62	71	1140	300	30.0
Sharlston ...	4	67	43	1336	440	34.9
Middlestown	4	56	96	909	840	36.4
Crigglestone	4	101	149	1817	513	48.5
Total	16	286	359	5202	2093	38.0

Home Visiting by Health Visitors.

No. of Ante-natal Visits:—	
First Visits	91
Subsequent Visits	111
No. of Visits to Children under 1 year:—	
First Visits	379
Subsequent Visits	1700
No. of Visits to Children 1-5 years	1975
Special Visits	2871
Total Home Visits	7127

The Care of Premature Infants.

Weight at Birth	No. of Premature Babies		No. Dying	No. Surviving 28 days
	Born Alive	Born Dead		
Not Weighed	—	—	—	—
Under 2½ lbs.	1	1	1	—
2½-3 lbs.	—	—	—	—
3-3½ lbs.	—	—	—	—
3½-4 lbs.	3	1	1	2
4-4½ lbs.	1	2	—	1
4½-5 lbs.	6	—	—	6
5-5½ lbs.	6	—	1	5
Total	17	4	3	14

Special equipment and nursing staff is available for use in the home in cases requiring them.

The Care of Illegitimate Children.

Every effort is made to find a suitable home for the baby either with the mother or with the grandparents.

Special advice about legal adoption is given if this is desired.

These cases are seen in the home by the Health Visitor and encouraged to attend the Infant Welfare Clinic regularly.

Provision of Welfare Foods, etc.

Most proprietary brands of milk and other infant foods are sold at the Child Welfare Clinics for the convenience of mothers, and special brands of milk are ordered when necessary.

Welfare cod liver oil, orange juice, vitamin A and D tablets, and National Dried Milk, are also distributed at the Child Welfare Clinics.

Provision of Maternity Outfits.

These are provided free to mothers preparing for confinement in their own homes.

C. PROFESSIONAL NURSING IN THE HOME.

Home Nursing.

Three whole-time nurses and two nurses having a combined post as district nurse-midwife serve the Wakefield Rural area.

Cases attended	No. of individual patients	Total number of visits made
Medical Conditions	420	9579
Surgical Conditions	161	2923
Tuberculosis	4	155
Maternity	2	35
Infectious Disease	4	28
Total	591	12720

Midwifery.

Five midwives (resident in their own homes) were employed by the County Council to serve the Rural District of Wakefield during 1959. Three of these midwives are whole-time and two have combined posts as district nurse-midwife.

The following table shows the number of women confined in hospital, private nursing homes, or delivered by midwives and private practitioners.

	No.	%
No. delivered in hospital	156	43.6 %
No. delivered in private nursing homes	6	1.8 %
No. delivered by midwives	195	54.6 %
No. delivered by doctors (including the difficult cases met with by midwives in their practice where a doctor had to be called to effect delivery)	—	—
Total (including stillbirths)	357	100.0 %

During 1959 the practising midwives summoned medical assistance to 30 mothers and babies. Medical aid was sent for on account of the following conditions:—

Cause	No.
Premature Labour	1
Retained Placenta	1
Ruptured Perineum	8
Prolonged Labour	3
Complete Abortion	6
Cyanosis	1
Malformation	2
Threatened Abortion	2
Other Conditions	6
Total	30

Emergency Obstetric Unit.

The 'flying squad' attached to the General Hospital, Wakefield is available for obstetric emergencies occurring within the area.

Analgesia.

All midwives are trained in the administration of gas and air analgesia and provided with the necessary equipment. Analgesia is available to all mothers desiring it, subject to satisfactory medical examination by a doctor. 151 women received gas and air analgesia during 1959.

D. HEALTH VISITING.

The duties of the Health Visitor are combined with those of School Nurse. In pursuance of the National Health Service Act the scope of this service includes home visiting for the purpose of giving advice as to the care of children, and persons (including adults) suffering from illness, and of expectant and nursing mothers. The Health Visitor also gives advice in the home as to measures necessary to prevent the spread of infection.

E. HOME HELPS.

In accordance with the National Health Service Act, the County Council provide domestic help for households "where such help is required owing to the presence of any person who is ill, lying-in, an expectant mother, mentally defective, aged, or a child not over compulsory school age."

During 1959, 128 cases were attended by Home Helps, as compared with 125 in the previous year, and the total number of hours worked was 20,487.

Of the cases attended in 1959, Home Helps were provided for the following reasons:—

	Cases	Hours
Maternity	6	478
Tuberculosis	2	42
Chronic Sickness	115	19767
Others	5	200
	<hr/> 128	<hr/> 20487

F. CARE AND AFTER CARE.

Special provisions are in operation for the care and after-care of patients suffering from tuberculosis, mental illness or defect, venereal disease and other illnesses.

G. MENTAL HEALTH.

Wakefield Rural District has the part-time services of the Divisional Mental Health Social Worker, who is largely concerned with the care of mentally defective patients under Statutory Supervision and Guardianship, and those patients who, having been discharged from Detention Order in Institution, have elected to receive voluntary supervision at home. She also undertakes pre-care and after-care of patients suffering from mental illness.

The Mental Health Social Worker carries out her duties in close liaison with the Mental Hospitals, and Mental Deficiency Institutions, and with those statutory and voluntary bodies concerned with social welfare generally.

Every effort is made to rehabilitate the higher-grade defective and to secure suitable employment for them in local industry.

**Summary of Cases at present under Supervision under the
Mental Deficiency Acts as at 31st December, 1959.**

	Under 16 years Male	Female	Over 16 years Male	Female	Total
Under Statutory Supervision	6	4	32	13	55
Under Voluntary Supervision	—	—	8	2	10
Total...	6	4	40	15	65
Attending Occupation Centre	6	4	3	2	15
Awaiting Occupation Centre	—	—	—	1	1
Gainfully employed ...	—	—	26	4	30
Usefully employed at home	—	—	10	8	18
Too handicapped mentally and physically to undertake any form of training or employment	—	—	1	—	1
Total...	6	4	40	15	65
Married mental defectives under Supervision	—	—	—	2	2

	Male	Female	
Cases in Institution	13	13	26
Awaiting admission to Institution ...	—	—	—
On licence from Institution	—	—	—

After-care of Mental Patients

Male	Female
2	1

H. SCHOOL HEALTH SERVICE.

Number of school departments in district	19
Number of children in attendance at school at the end of 1959	2603
Number of children examined during 1959	1075
(This figure being made up as follows) —	

Entrants	331
7-8 years group	—
Last year primary	167
Leavers	139
Re-examinations	146
Specials	292

Physical Condition of Pupils Examined

	Satisfactory	Unsatisfactory
Entrants	331	—
7-8 years group	—	—
Last year primary	167	—
Leavers	139	—
No. of defects found to require treatment		176
No. of defects requiring to be kept under observation		226

Cleanliness Inspections.

The Health Visitor attends every school department at frequent intervals throughout the year to examine the children for unclean and verminous conditions. Where such conditions exist, parents are informed and are instructed in the application of an effective remedy. Warnings are issued in cases of non-compliance and statutory action taken where there is persistent default.

No. of examinations carried out during the year	6450
No. of cases of uncleanliness found	188
Percentage of infestation	2.9%
No. of children excluded from school	32
No. of cleansing notices issued	1
No. of cleansing orders issued	—
No. of children cleansed (under statutory notice)	—

Minor Ailment Clinics.

4,147 attendances were made at the minor ailments clinics during the year.

Ophthalmic Clinics.

Sessions held.	No. of refractions.	Prescribed spectacles.
27	288	137

Orthopaedic Clinic.

3 children made 5 attendances during the year. These children attended the clinic held at the Pinderfields Hospital, Wakefield.

I. Immunisation and Vaccination.

In accordance with the National Health Service Act, immunisation against diphtheria, and vaccination against smallpox may be done either at the clinics or by the family doctor.

Diphtheria Immunisation.

Number of children in Wakefield Rural who completed a full course of diphtheria Immunisation in 1959.

Age	Under 1	1-4	5-14
Began and Completed injections, 1959	232	57	65
Total =			354
Immunised in previous years, re-treated in 1959	—	—	248
Total =			248

Whooping Cough Vaccination.

The Local Health Authority's Scheme operates in this area and treatments under the scheme have been carried out as in previous years from 1952. Vaccination against whooping cough is available under the County Council's Scheme only to infants and children up to the age of four years.

Number of children in Wakefield Rural District who completed a full course of whooping cough vaccination during 1959

Age at final Injection	Under 6 months	6 months to 1 year	1-2 years	2-3 years	3-4 years	Total
No. vaccinated	117	113	21	4	4	259

During the year there were 22 notified cases of whooping cough of which one child had completed a full course of vaccination.

Vaccination against Smallpox.

During the year 83 people were vaccinated against smallpox, 69 of whom were under 1 year of age.

Additionally 14 people were re-vaccinated.

B.C.G. Vaccination against Tuberculosis.

In 1953 the County Council put into operation a scheme to provide protective vaccination against tuberculosis for a selected group of schoolchildren.

This scheme was approved by the Ministry of Health. The immunising vaccine to be used was B.C.G. and the selected age-group was that of children in their fourteenth year. This group was chosen for certain approved reasons, one being the further year in school during which observation and supervision could be kept over the child, and also the desirability of affording protection to adolescents in the early years of their employment in industry and elsewhere.

Vaccination was offered to all children in this age-group in the period under review, acceptance being voluntary.

The following table is a summary of the work carried out in the year:—

School	No. of children offered B.C.G. vaccination	No. of children whose parents consented	No. of children Mantoux Tested	No. with positive reaction	No. with negative reaction	No. vaccinated
Crofton Secondary Modern	108	55	52	16	30	30
Crigglestone Secondary Modern	79	45	45	16	27	27
Totals ...	187	100	97	32	57	57

B.C.G. Vaccination is also available (at the Hospital Chest Clinics) for ascertained contacts of cases of tuberculosis.

Immunisation against Tetanus.

Number of children in the Rural District who completed a full course of immunisation against Tetanus during 1959 —

Age at date of injection	Under 1	1-2 years	2-3 years	3-4 years	4-5 years	5-10 years	10-15 years
No. immunised	219	23	16	10	8	222	90

Vaccination against Poliomyelitis.

Early in January of this year, the Minister of Health announced the extension of the above scheme to include all persons born on or after the 1st January, 1933 and a number of priority groups. With the obvious probability that the majority of this new group would be in full daytime employment, the West Riding County Council agreed to the arranging of evening sessions at convenient centres in this Division and the local Clinics was chosen to meet the needs of the area. In addition an approach was made to a number of factories in the area and the response was such that it was considered advisable to arrange special sessions at some of these factories.

Number of persons receiving injections 2566
 Number of persons receiving a boosting dose 3105

SECTION V.

SANITARY CIRCUMSTANCES OF THE AREA.**Water Supply.**

Water is obtained from the Wakefield Corporation, Barnsley Corporation, Dewsbury Corporation, Darton, Kirkburton and Royston Urban Districts and Hemsworth Rural District. The supply of water has been, in general, satisfactory both in quality and quantity. Eight chemical and bacteriological examinations were made during the year with satisfactory results.

Improvements were made to the water supply at Bretton and supply was extended to Woolley Edge.

Drainage and Sewerage.

The sewage disposal plants at Great Cliffe, Crigglestone, and at Coxley Lane and Carr Lane, Middlestown, have been completed. The sewer at Woolley Moor has also been completed.

Housing.

There are a total of 6,438 dwelling houses in the district, including 106 back to back houses.

123 new houses were completed in the Wakefield Rural Area in 1959, 58 being provided by the Council and 65 by private enterprise.

48 houses were included in official representations made during the year with regard to Clearance Areas and 34 individual unfit houses were also dealt with. During 1959 37 houses in Clearance Areas were demolished in addition to one individual unfit house mentioned above. 16 individual houses were closed.

Rent Act 1957.

2 certificates of disrepair were granted and 1 undertaking to execute repairs was given by owners to the local authority. No certificate was cancelled.

Grants for Conversion or Improvement of Housing Accommodation.

During 1959, 48 applications for grants in respect of improvements were received. All of these were approved and by the end of the year improvements in respect of 106 of the dwellings were completed.

Nuisance Inspections.

6 informal notices were issued and all nuisances were abated by the end of the year.

Closet Accommodation.

Houses (percentage of total) provided with water closets	97%
Houses (percentage of total) provided with waste water or trough closets	0.0%
Houses (percentage of total) provided with chemical closets	0.4%
Houses (percentage of total) provided with earth or pail closets	2.96%
No. of earth closets, etc. converted to water closets	80
No. of houses served with earth closets, etc. due to lack of sewer or water facilities	201

During the year notices were served under Section 47 of the Public Health Act 1936 to secure conversion of earth closets, etc. Grants were made as required.

Public Cleansing.

This is in operation throughout the whole of the district. Bins and pails are emptied weekly as far as possible. Privies are emptied weekly or fortnightly depending on local circumstances.

Disposal of Refuse.

All refuse in this area is disposed of by controlled tipping.

MILK SUPPLY.

There are 22 registered milk sellers in the district. Under the Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949-53, licences are in force for 16 dealers in pasteurised milk and 13 dealers in sterilised milk. Under the Milk (Special Designation) (Raw Milk) Regulations, 1949 and 1950, licences are in force for 18 dealers in Tuberculin Tested Milk.

There are 10 dairies registered under the Milk and Dairies Regulations, 1949-1954.

ICE CREAM.

Under section 16 of the Food and Drugs Act, 1955, 39 retailers are registered for the sale of ice cream and a total of 70 inspections were made during the year. With regard to the Ice Cream (Heat Treatment etc.) Regulations, 1947-1952, there are no manufacturers of ice cream in the district.

SHOPS ACT, 1950.

Under Section 38 of the above Act 45 visits were made and no unsatisfactory conditions were found.

SMOKE ABATEMENT.

There are ten colliery spoil banks in the district. One of which has again been on fire during the year. Arrangements have been made for new tipping techniques to obviate the nuisance.

TENTS, VANS AND SHEDS.

There are 11 licensed sites in the district for the erection of tents, vans and sheds for human habitation. 3 sites are licensed for more than 2 caravans. The Council has not made any bye-laws under Section 268 (4) of the Public Health Act, 1936.

SWIMMING BATHS AND BATHING POOLS.

There are no swimming baths or bathing pools in the area.

PREVENTION OF DAMAGE BY PESTS.

Under the Prevention of Damage by Pests Act, 1949, a total of 520 inspections were made and 54 cases of infestation were dealt with during the year.

FOOD.

There are, in the district, 51 grocers' shops, 18 fish and chip shops and 11 butchers' shops. Of these, 8 of the butchers' shops are registered in accordance with the provisions of Section 16 of the Food and Drugs Act, 1955. A total of 182 inspections were carried out on registered food premises throughout the year. Any food which is found to be unsuitable for sale for consumption is condemned, and after being dyed, it is disposed of either by collection by the manufacturers of fertilizer or buried on the refuse tip.

Work is still in progress with regard to action requiring to be taken under the Food Hygiene Regulations, 1955-56.

MEAT INSPECTION.

Ante and post-mortem inspection of all food animals is carried out. The following table gives details of the carcasses and offal inspected and condemned in whole or in part.

	Cattle, excl. Cows	Cows	Calves	Sheep and Lambs	Pigs	Horses
Number killed	659	172	23	2791	1082	0
Number inspected	659	172	23	2791	1082	0
All diseases except Tuberculosis and Cysticerci						
Whole carcasses condemned	Nil	Nil	1	Nil	Nil	Nil
Carcasses of which some part or organ was condemned	20	39	Nil	Nil	92	Nil
Percentage of the number inspected affected with disease other than tuberculosis & cysticerci	3 %	20 %	4.6 %	0 %	9 %	0 %
Tuberculosis only						
Whole carcasses condemned	Nil	Nil	Nil	Nil	Nil	Nil
Carcasses of which some organ or part condemned	33	20	Nil	Nil	21	Nil
Percentage of the number inspected affected with tuberculosis ...	5 %	11 %	0 %	0 %	2 %	0 %
Cysticercosis						
Carcasses of which some part or organ was condemned	Nil	Nil	Nil	Nil	Nil	Nil
Carcasses submitted to treatment by refrigeration	Nil	Nil	Nil	Nil	Nil	Nil
Gen. disease & totally condemned	Nil	Nil	Nil	Nil	Nil	Nil

**Prescribed Particulars of the Administration of the
Factories Act, 1937**

PART 1 OF THE ACT

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

Premises (1)	Number on Register (2)	Number of		
		Inspection (3)	Written notices (4)	Occupiers prose- cuted (5)
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	26	29	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority.	39	51	—	—
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	28	28	—	—
Total ...	93	108	—	—

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 (2)	Remedied (3)	Referred		
			To H.M. Inspector (4)	By H.M. Inspector (5)	
Want of cleanliness (S.1)	—	—	—	—	—
Overcrowding (S.2)	—	—	—	—	—
Unreasonable temperature (S.3)	—	—	—	—	—
Inadequate ventilation (S.4)	—	—	—	—	—
Ineffective drainage of floors (S.6) ...	—	—	—	—	—
Sanitary Conveniences (S.7)					
(a) Insufficient	—	1	—	1	—
(b) Unsuitable or defective	—	—	—	—	—
(c) Not separate for sexes ...	—	—	—	—	—
Other offences against the Act (not including offences relating to Out-work) ...	—	—	—	—	—
Total ...	—	1	—	1	—

PART VIII OF THE ACT
OUTWORK

(Sections 110 and 111)

There are no Outworkers in the area.

