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**THE  
HEALTH OF  
WORSBROUGH**

**1970**



WORSBROUGH URBAN DISTRICT COUNCIL (YORKS.)

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

AND

CHIEF PUBLIC HEALTH INSPECTOR

FOR THE YEAR

1970

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WORSBROUGH URBAN DISTRICT COUNCIL

HEALTH COMMITTEE - 1970

Chairman of the Council:

Councillor A. O. Elmhirst.

Chairman of the Health Committee

Councillor R. Atkinson B.E.M., J.P.

Committee

Councillors J. Bland, E. Denton, A. O. Elmhirst,  
J. H. Gaunt, F. Hague, M. G. Manley,  
F. G. Palfreyman, F. Scothorn, L. Shepherd,  
W. Smith J.P., C. Sutton J.P.

STAFF OF THE PUBLIC HEALTH DEPARTMENT

Medical Officer of Health

C. G. ODDY, M.B., Ch.B., D.P.H.  
(Appointed 1966)

Deputy Medical Officer of Health


Post vacant since 1966

Chief Public Health Inspector

L. DOVE, Cert S.I.B., M.A.P.H.I.,  
Certificated Inspector of Meat and  
Other Foods.

Additional Public Health Inspector

G. W. AMES, Cert. S.I.B., M.A.P.H.I.,  
M.R.S.H., M.R.I.P.H.H.,  
Certificated Inspector of Meat and  
Other Foods.  
Diploma for Smoke Inspectors, R.S.H.



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WORSBROUGH URBAN DISTRICT COUNCIL

Divisional Health Office,  
33 Queens Road,  
BARNSELY.

September, 1971.

ANNUAL REPORT  
for the year ended 31st December, 1970

To the Chairman and Members of the  
WORSBROUGH URBAN DISTRICT COUNCIL

Mr. Chairman, Gentlemen,

I have the honour to present to you my fifth Annual Report on the health and social conditions of your district for the year ended 31st December, 1970.

The population of your district, once again, according to the Registrar General's estimate, showed a slight fall during the year and the adjusted birth rate increased slightly and remained in excess of the comparable National figure. The adjusted death rate for the district also showed a slight increase and, once again, the main causes of death were diseases of the heart and circulatory system, cancer and respiratory disease. Included in the deaths from respiratory disease were the deaths of two infants under one year of age. Deaths from this cause are to some extent preventable in the sense that atmospheric pollution is known to aggravate existing chest disease, not only in the adult population, but also in early infancy. Once again, I would ask the Council to pursue a policy of domestic smoke control for the whole district with the minimum of delay.

The remaining vital statistics for your area were satisfactory. The peri-natal mortality rate fell to a level below that of the Administrative County.

The incidence of notifiable infectious disease was higher than in the previous year due to an increase in notification of Measles. It is pleasing to record no notification in respect of food poisoning or dysentery.



At the request of the Chairman of the Council, I have included at the end of the report a short paper entitled "Mortality in the Urban District of Worsbrough for the Year 1881"; The Paper shows clearly the alteration in pattern of mortality during the past century and in particular illustrates the great improvement in infant and childhood mortality.

Once again, I would like to express my sincere thanks to the Chairman and Members of the Health Committee for their encouragement and help at all times during what has been a rather difficult year in the sense that I have worked singlehanded with no deputy to render assistance. I am indebted to your Chief Public Health Inspector, Mr. L. Dove, for his wonderful co-operation during the year and I have also had excellent support from your Clerk, Mr. H. Hand, your Housing Manager, Mr. S. Swallow, and the other officials of the Council.

In conclusion, I would like to express my thanks to the Divisional Administrative Officer, Mr. L. S. Wrigg, and the staff of the Divisional Health Office for their loyal support and help given to me during the year.

I am,

Your obedient servant,

C. G. ODDY

Medical Officer of Health.

## URBAN DISTRICT OF WORSBROUGH

### SECTION I

#### Statistics and Social Conditions

Area .. .. .	3,420 acres
Population (Census 1961) .. .. .	14,950
Registrar General's estimate of population 1970 .. .. .	16,130
No. of inhabited houses according to rate book at 31st December, 1970 ..	5,182
Rateable value at 1st April, 1970	£403,579
Nett product of a Penny Rate ..	£1614.203

The coal industry is the largest employer of male labour in the district. In addition, a chemical works for the manufacture of gas, hard coke and chemical by-products operates in the district. The textile industry is the chief source of female labour in the district. There is also a factory concerned with the manufacture of lead storage batteries.

The principal employers of female labour, Messrs. N. Corah (St. Margaret), Ltd., are engaged in the manufacture of knitwear. In addition, a small factory engaged in the manufacture of and the wrapping of towels provides a small contribution to the industrial life of the district.

#### VITAL STATISTICS

##### Population

The Registrar General's estimated population at mid 1970 was 16,130, as compared with 16,310 at mid 1969. The excess of births over deaths or the natural increase of population was 89, compared with 82 in the previous year.

## Live Births

	<u>Males</u>	<u>Females</u>	<u>TOTAL</u>
Legitimate	132	125	257
Illegitimate	10	17	27
	-----	-----	-----
TOTALS	142	142	284
	-----	-----	-----

The number of live births registered was 37 more than in 1969. The Registrar General has again supplied a comparability factor for the year, which relates the proportion of women of child-bearing age in the district with the proportion in a standard population. The adjusted birth rate for your district last year was 16.4 per 1,000 estimated population as compared with 14.1 in 1969 and with 16.0 per 1,000 estimated population for England and Wales.

Illegitimate births represented 9.4% as compared with 7.4% in the previous year.

## Stillbirths

4 stillbirths occurred in Worsbrough during the year, 5 less than in the previous year. This represents a stillbirth rate of 13.9 per 1,000 total births as compared with 35.2 in 1969, and with 13.0 per 1,000 total births for England and Wales.

## Deaths

The adjusted death rate, which is the crude death rate multiplied by the comparability factor, was 15.0 per 1,000 estimated population, as compared with 12.3 per 1,000 last year. There were 195 deaths among the inhabitants of your district, 30 less than in the previous year. The principal causes of death in order of numerical importance were: heart and circulatory disease, cancer and respiratory diseases.

Statistics relating to death rates and the causes and ages at death are given in tabular form at the end of the section on vital statistics.

## Infant Mortality and Peri-natal Mortality

There were 6 infant deaths during the year, compared with 5 in the previous year. 3 deaths occurred in the neo-natal period.

The total infant mortality rate for 1970 was 21.1 per 1,000, compared with 20.2 per 1,000 for the previous year and with 18.2 per 1,000 for England and Wales.

There were no deaths of illegitimate infants during the year.

The peri-natal mortality rate for your district takes into account the stillbirth figures and those deaths occurring in the first week of life, and in 1970 this figure was 20.8, compared with 46.9 in the previous year and with 24.4 for the Administrative County. The comparable figure for England and Wales for the year was 23.5.

I give below the record for your district in respect of peri-natal mortality for the past ten years.

Year	Live Births	Still-Births	Deaths in first week of life	Peri-natal Mortality
1961	254	7	2	34.5
1962	274	7	3	35.6
1963	260	2	4	22.0
1964	271	7	4	39.6
1965	314	5	4	28.2
1966	290	5	5	33.9
1967	308	6	8	44.6
1968	243	2	2	16.3
1969	247	9	3	46.9
1970	284	4	2	20.8

### Infant Mortality

The analysis of the deaths of infants under one year of age in your district is given below.

Birth Weight	Sex	Age	Cause of Death	Place of Death
7 lbs. 3 ozs	M	2 mths	Broncho-pneumonia Gastro-enteritis	Beckett Hospital, Barnsley.
4 lbs. 9 ozs	F	1 wk.	Tracheo- oesophageal fistula	Children's Hospital, Sheffield
8 lbs.	F	2 mths	Liver failure	Northern General Hospital, Sneffield
2 lbs. 9 ozs	M	4 hrs.	Extreme prematurity Cerebral haemorrhage	Barnsley District General Hospital
6 lbs. 9 ozs	F	2 days	Hydrocephalus myelo- meningocele	Children's Hospital Sheffield
7 lbs. 10 ozs	M	2 mths	Tracheo- bronchitis Gastro- enteritis	Home

### Maternal Mortality

I am happy to report that no deaths occurred from this cause during the year.

CAUSES OF DEATHS IN AGE GROUPS

Cause of Death	Under 1 yr.	1-	5-	15-	25-	35-	45-	55-	65-	75+	TOTAL	
											M	F
Enteritis and other diarrhoeal diseases		2									2	-
Meningococcal infection		1									-	1
Other infective and parasitic diseases						1					1	-
Malignant neoplasm - oesophagus									1		-	1
Malignant neoplasm - stomach								6	1	3	4	6
Malignant neoplasm - intestine								2	2	3	1	6
Malignant neoplasm - lung, bronchus							2		3		5	-
Malignant neoplasm - breast								1			-	1
Malignant neoplasm - uterus								2	1	1	-	4
Malignant neoplasm - prostate									2		2	-
Leukaemia		1								1	-	2
Other malignant neoplasms, etc.				1			1	2	2	1	3	4
Benign and un-specified neoplasms						1					-	1
Diabetes Mellitus								1			1	-

CAUSES OF DEATHS IN AGE GROUPS

Cause of Death	Under 1 yr.	1-	5-	15-	25-	35-	45-	55-	65-	75+	TOTAL	
											M	F
Anaemias									1		-	1
Other diseases of nervous system							1				-	1
Hypertensive disease							1		1	3	2	3
Ischaemic heart disease							1	6	13	13	18	15
Other forms of heart disease						1		3	4	15	6	17
Cerebrovascular disease								4	6	12	5	17
Other diseases of circulatory system							1	1	1	10	4	9
Influenza										1	-	1
Pneumonia	1								3	5	5	4
Bronchitis and emphysema	1							1	10	5	15	2
Other diseases of respiratory system								1			-	1
Peptic Ulcer							1		1		1	1
Intestinal obstruction and hernia									2		1	1
Other diseases of digestive system	2										-	2

CAUSES OF DEATH IN AGE GROUPS

Cause of Death	Under 1 yr.	1-	5-	15-	25-	35-	45-	55-	65-	75+	TOTAL	
											M	F
Nephritis and Nephrosis								1			-	1
Hyperplasia of prostate									1	2	3	-
Congenital anomalies	1										-	1
Birth injury, difficult labour etc.	1										1	-
Symptoms and ill- defined conditions										4	3	1
Motor vehicle accidents					1			1			1	1
All other accidents									1	5	3	3
TOTALS	6	4	-	1	1	3	8	32	56	84	38	107



PRINCIPAL VITAL STATISTICS FOR THE YEAR 1970

	Worsbrough Urban District	West Riding Urban Districts	West Riding Admin County	England and Wales (provisi- onal figures
Birth Rate per 1,000 estimated population:				
Crude .. .. .	17.6	17.2	17.3	16.0
Adjusted .. .. .	16.4	17.6	17.5	
Death Rate per 1,000 estimated population:				
Crude .. .. .	12.1	12.5	11.7	11.7
Adjusted .. .. .	15.0	13.0	12.7	
Tuberculosis:				
Respiratory .. .. .	-	0.02	0.02	0.02
Other .. .. .	-	0.01	0.01	0.01
All forms .. .. .	-	0.03	0.03	0.03
Cancer of Lung and Bronchus	0.31	0.52	0.50	0.62
Cancer of Uterus .. ..	0.25	0.11	0.09	not available
Cancer - all forms ..	2.42	2.29	2.14	2.39
Cerebro-vascular disease	1.36	1.89	1.75	not available
Circulatory disease excluding cerebro-vascular disease	4.59	4.76	4.44	not available
Respiratory disease ..	1.74	1.82	1.69	not available
Maternal Mortality .. ..	-	1.36	0.29	0.18
Infant Mortality .. ..	21.1	19.5	19.8	18.2
Stillbirths .. .. .	13.9	13.3	13.6	13.0
Peri-natal Mortality ..	20.8	24.1	24.4	23.5

## SECTION II

### GENERAL PROVISION OF THE HEALTH SERVICES IN THE AREA

#### Staff

The Medical Officer of Health is a part-time officer of the Council, but is engaged on whole-time Public Health work, being also Medical Officer of Health for the surrounding districts and the Divisional Medical Officer for Division No. 25 of the West Riding County Council. The Chief Public Health Inspector and one additional inspector are employed by the Council.

#### General Hospitals

The general hospitals serving your district and administered through the Sheffield Regional Hospital Board are given below:

The United Group Hospitals, Sheffield.  
The Barnsley District General Hospital,  
Barnsley.  
The Beckett Hospital, Barnsley.  
The Mount Vernon Hospital, Barnsley,  
(Geriatric).

#### Infectious Diseases Hospital

All infectious diseases requiring hospital admission were admitted to the Kendray Hospital, Barnsley. The ambulance arrangements were the same as for the previous year with the hospital retaining its own ambulance for this service.

#### Maternity Hospitals

Maternity cases were usually admitted to the following hospitals:

The Barnsley District General Hospital,  
Barnsley.  
Chapelton Maternity Home, Chapelton.  
Pindar Oaks Maternity Home, Barnsley.

The services of the Jessop Hospital, Sheffield, were also available for abnormal obstetric cases.

## Tuberculosis

Most patients suffering from the disease are admitted to the Wath Wood Sanatorium and co-operation is maintained with the Chest Physician. Out-patients' sessions were held at the Chest Clinic, Church Street, Barnsley.

## Venereal Diseases

The nearest centre for Worsbrough patients for the diagnosis and treatment of these diseases is in Barnsley -

Address: Special Treatment Centre, Queens Road, Barnsley.

Other centres are situate at Sheffield, Doncaster and Rotherham, and a patient suffering from Venereal Disease is at liberty to attend at the centre of his choice. Treatment is completely confidential.

## Clinic Facilities

A County Infant Welfare Clinic is held at the Clinic, Oakdale, Worsbrough Bridge, on Monday afternoons and at Birdwell on Tuesday afternoons and on Thursday afternoons at Blacker Hill. A doctor is in attendance at all clinics.

General practitioner child welfare and ante-natal clinics are held weekly at the Worsbrough Clinic in Oakdale. The domiciliary midwives attend the ante-natal clinics and see cases in conjunction with the practitioner. A Health Visitor is in attendance at each of the general practitioner child welfare clinic sessions. Food sales are held on Thursday afternoons at the Oakdale Clinic.

## Laboratory Service

The laboratory service was provided by the Public Health Laboratory in Wakefield. The laboratory is equipped to deal with all bacteriological and pathological examinations, and a complete investigation is undertaken and report furnished for every specimen sent for examination.

Samples of milk taken under the Food and Drugs Act for chemical analysis were examined by the Public Analyst at the expense of the County Council.

Ambulance Service

The ambulance service is operated by the West Riding County Council, the depot for your area being at Hoyland, Telephone No. Barnsley 742112.



### SECTION III

#### PREVALENCE AND CONTROL OF INFECTIOUS DISEASES

96 cases of infectious diseases occurred during 1970, compared with 68 in the previous year.

Notifiable diseases (other than Tuberculosis) during the year 1970

	<u>Total cases notified</u>
Scarlet Fever .. .. .	4
Measles (excluding German Measles)	88
Whooping Cough .. .. .	3
Meningitis .. .. .	1
	—
TOTAL	96
	—

Notifications received in respect of the notifiable infectious diseases were considerably more than in the previous year, this being principally due to the increase in the number of cases of Measles in the district. In fact, 88 cases were notified compared with 53 in the previous year.

#### Smallpox

No case of Smallpox occurred during the year.

#### Diphtheria, Whooping Cough and Tetanus

No case of diphtheria occurred during the year, but notifications were received in respect of 3 cases of whooping cough, compared with 6 in the previous year.

#### Infectious Jaundice

During the year no notifications of the disease were reported.

#### Poliomyelitis

No case of poliomyelitis was reported during the year.

## Tuberculosis

2 new cases of Pulmonary Tuberculosis and one new case of Non-Pulmonary Tuberculosis were notified during the year. No deaths from the disease were reported. The pulmonary cases were a male, aged 49 years and a female, aged 8 years. The non-pulmonary case was a female, aged 25 years.

Thorough follow-up and examination of contacts was performed to eliminate any possible spread of infection. Free vaccination of all susceptible children entering the High School with B.C.G. vaccine is offered during the Spring of each year and I would ask all parents to take advantage of the scheme whereby the children are given good protection against this serious disease. Information showing the record of cases and the mortality from Tuberculosis is given in the following table.

### TUBERCULOSIS - Record of Cases during 1970

	Pulmonary		Non-Pulmonary	
	M	F	M	F
No. of cases on Register at 1st January, 1970	29	21	1	3
No. of cases notified for the first time during the year	1	1	-	1
No. of cases restored to Register otherwise than by notification	-	-	-	1
No. removed to other districts	-	-	-	-
No. cured or otherwise removed from Register	-	-	-	-
No. died from Tuberculosis	-	-	-	-
No. died from other causes	1	1	-	-
TOTALS AT END OF 1970	29	21	1	5

TUBERCULOSIS - New Cases and Mortality in 1970

Age Periods	NEW CASES				DEATHS			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M	F	M	F	M	F	M	F
0 - 1 year	-	-	-	-	-	-	-	-
1 - 5 years	-	-	-	-	-	-	-	-
5 - 10 years	-	1	-	-	-	-	-	-
10 - 15 years	-	-	-	-	-	-	-	-
15 - 20 years	-	-	-	-	-	-	-	-
20 - 25 years	-	-	-	-	-	-	-	-
25 - 35 years	-	-	-	1	-	-	-	-
35 - 45 years	-	-	-	-	-	-	-	-
45 - 55 years	1	-	-	-	-	-	-	-
55 - 65 years	-	-	-	-	-	-	-	-
Over 65 years	-	-	-	-	-	-	-	-
TOTALS	1	1	-	1	-	-	-	-





SECTION IV

ANNUAL REPORT OF CHIEF PUBLIC HEALTH INSPECTOR

Mr. Chairman and Gentlemen,

I beg to present my twenty-seventh contribution to the annual report on the health of Worsbrough.

The year has been one again of mainly routine matters.

I cannot record any major schemes of unfit house procedure because these have all long since been dealt with and all we need to deal with are the occasional ones which fall into disrepair, and in fact, sixteen houses were dealt with during the year as will be seen in the housing section of my report.

No action was taken by the Council on the declaration of smoke control areas during the year.

I am pleased to record my appreciation to Councillor Atkinson, the Chairman of the Public Health Committee, and also to the members of the Council for their understanding, and support during the year.

I must particularly express my appreciation also to Dr. Oddy, the Medical Officer of Health, for his co-operation and support during the year; the relationship could not be better.

I am,

Your obedient servant,

LYNDON DOVE,

Chief Public Health Inspector.

## WATER SUPPLY

The town's water supply is provided by Barnsley Corporation under the terms of the Barnsley Water Order 1961.

The supply has been plentiful and wholesome during the year.

There are no houses in the area without a piped supply.

The following is a typical result of a chemical analysis of the water made during the year.

### Physical characteristics

Colour	Less than 5 H.U.
Turbidity	Nil

### Chemical examination

### Parts per million

pH value	7.8
Free carbon dioxide	Nil
Total hardness	48.0 mg/l CaCO <sub>3</sub>
Permanent hardness	28.0 mg/l CaCO <sub>3</sub>
Total residual chlorine	0.14 mg/l
Free residual chlorine	0.10 mg/l
Oxygen absorbed in 4 hours at 80°F	0.8 mg/l

## CLOSET ACCOMMODATION

There were no conversions to water closets during the year.

The approximate number of sanitary conveniences in the district is as follows:-

Water closets	5,333
Waste water closets	10
Privies	11

## PUBLIC CLEANSING

Street sweeping, snow removal, street gully emptying and maintenance of public conveniences are the responsibility of the Engineer and Surveyor.

The one remaining item of public cleansing, that is the collection and disposal of house refuse, is my responsibility.

Two collection vehicles are used for this purpose. One is a 14 cu. yd. S & D fore and aft tipper (January 1963) and the other an 18 cu. yd. Karrier Gamecock dual tipper (March 1968.)

The year started off badly enough with a bout of influenza which laid low seven men out of the eleven employed. Normally, we can rely on the Surveyor helping us out when we are in difficulty but he has his troubles too and he could not help us out straightaway. Eventually we were fully manned and by the end of January I was able to report to the Council that the tremendous backlog of refuse which had occurred since Christmas because of illness had been cleared, and we were back on our normal weekly schedule.

We also had our domestic troubles. One of these, a carry-over from last year, was the claim for an additional £1 per man, per week for removing the extra amount of paper which had arisen at premises since the original bin bonus was fixed.

I had recommended that they be paid an extra 3/4d per week which was equal to an additional 200 bins per week. This they had accepted under protest but the matter again flared up and they threatened to stop collecting this refuse by the end of the week. In return, I said I should stop paying their bin bonus, which I was entitled to do.

The Regional Organiser of their Union met me on the matter and they eventually settled for 6/8d per week per man.

On 19th October we had the national strike of refuse collectors in support of the local authority manual workers' claim for an extra 55/- per week which went on until 9th November when they recommenced work with an increase of 50/- per week.

During the three weeks' strike the Council issued paper sacks free of charge to all who came for them and this undoubtedly reduced the inconvenience to the public as far as we were able.

It should be recorded that the workmen came and offered to maintain the service to the Mount Vernon Hospital and "Oaklands" Aged Persons' Home to which I agreed, and they gave their pay for this work to charity.

Once the strike was settled, came the bargaining for recompense for clearing up the terrific backlog and we settled for £16 10s. 0d. per man providing the district was clear in three weeks. It was.

We discontinued the issue of galvanised bins to Council houses and for sale to private houses three years ago and are using plastic. The number of these at the year end represented just over 11% of the total number of bins in use which I think is pretty good going in three years when it is borne in mind that they increase mainly by replacing worn-out galvanised bins. The saving in physical effort by the collectors is also considerable when one remembers that a plastic bin weighs 7 lbs and a galvanised one 28 lbs.

#### HOUSE REFUSE DISPOSAL

The whole of the town's refuse is tipped at Swaithe, Worsbrough Dale.

It is not as central and convenient as the former tipping site at Haverlands Lane which we had used for such a good number of years, but it does have the virtue of being far removed from any dwelling houses.

The main disadvantage of the tip is that, being the site of old brick kilns, there is no top soil and we are mainly dependent on such suitable material as may be brought for disposal.

Tip control is maintained by one man using a small Bristol tracked vehicle and with this we manage to keep the tip in a reasonably good condition.

This machine was bought in 1965 and was second-hand at the time. It only cost £1000 and as we were able to dispense with a man on tip control, (and do a better job) there is no doubt that it was a sound investment.

Towards the end of the year it became clear that this Bristol tractor was fast approaching the end of its 'life' and the Council agreed to replace it.

It was decided to replace it with a machine which would be able to do more than work on the refuse tip, and so in conjunction with the Surveyor we had various, more elaborate, equipment on demonstration.

An International Harvester Hough H30, complete with Drott 4 in 1 bucket was ordered in December at a cost of £5,815 and I look forward to 1971 feeling that we shall be able to do a better job in half the time.

Reference has been made in the last two Annual Reports to the meetings of officers in the Barnsley and District Joint Committee on Refuse Disposal who are considering the question of a joint system of refuse disposal for the eight districts concerned. In December of last year a progress report was submitted to all the members of the constituent authorities and in February of this year the first meeting was held at which Councillors themselves were present, where the progress report was accepted including the recommendation to build an incinerator.

In May, the Joint Committee met Mr. J. Sumner of the Ministry of Housing and Local Government to informally discuss the question of a joint incineration plant to meet the needs of the authorities involved and to try and learn what the reaction of the Ministry would be to any scheme which we should eventually put forward.

He told us that the Ministry were in favour of local authorities joining together for this purpose and although they favoured controlled tipping, if tipping space was hard to come by, then other systems would have to be considered. He encouraged us to go on with our deliberations and we all felt that our scheme had every chance of being accepted in due time.

The Committee made two visits to see incineration plants, one at Derby and the other at Lichfield and we were all satisfied that incineration was the system best suited to our needs.

Further meetings of the Committee will still need to be held in 1971 but by the end of that year we should have some concrete ideas and prices which will allow the authorities concerned to make a firm decision whether to proceed with the scheme or not.

#### CARAVANS

There are no sites in the area which are licensed under the provisions of the Caravan Sites and Control of Development Act 1960.

## CLEAN AIR

The Council have still not declared any part of the district to be a smoke control area and we are one of the few authorities in a black area not to have done so.

In February of the year I was instructed to go into the question of installing recording apparatus at Blacker Hill for the purpose of measuring air pollution in that village.

Blacker Hill is a part of the district where there is one of the few privately owned coking plants in the country and there is also a large bus body dismantling firm there who are undoubtedly burning these bus bodies during the night.

The village has long had a reputation (by people living outside of it) of having a dirty atmosphere, although the villagers themselves do not hold that view, and I predicted that we should perhaps be surprised when proper measurements of pollution were taken. My reason for this belief was fairly simple; it needs a north west wind to blow over Blacker Hill and we do not have a lot of these in a year. The prevailing wind is south west which means that pollution from the Coking Plant, and there is some, blows over open country over what is known locally as the "smoothing iron."

I contacted Mr. Greenwood, the County Public Health Inspector and he agreed to loan me a portable volumetric air recording unit for a trial period. We met on the site and Mr. Greenwood was not completely happy with the site I was suggesting. He thought it was too near the Coking Plant and would not give a true and fair recording of the pollution in the village itself and we decided to install it for three months there and then find another place at the other end of the village.

The first lot of figures became duly available and, to summarise them, we found that the pollution at Blacker Hill was lower than at Worsbrough Bridge! but of course as I reported to the Public Health Committee one month's recording could not give more than that month's indication of the pollution levels at Blacker Hill and Worsbrough Bridge and we should have to await the full six month's figures for the complete picture.

The apparatus was transferred at the end of three months from one end of Blacker Hill to the other but the further results were not received until 1971.

At the beginning of the year I displayed in the Council Chamber the smoke filter papers for October 1969 to show members the amount of smoke present in the air we are breathing in Worsbrough. At the same time, I gave them the readings of some of our neighbours, and to show what clean air really is, the readings for Bournemouth!

I append the table itself and it will be seen that we can stand comparison with neighbouring authorities.

Investigation of Air Pollution - National Survey  
Annual Summary for the year ended March 1968.

Site Name	Smoke - Microgrammes per cubic metre		
	Mean Summer	Mean Winter	Year
WORSBROUGH BRIDGE 1	85	170	127
Barnsley 8	126	319	225
Barnsley 10	75	180	129
Bournemouth 5	16	42	29
Rawmarsh 2	142	352	244
Wombwell 1	124	292	207
Sheffield 40	78	215	145
Sheffield 60	23	43	33

It will be known from previous reports that we have a private coking plant in the area, that belonging to the Barnsley District Coking Co. Ltd. the manufacturers of "BurnBrite".



As often happens, these sort of premises which are helping to make other areas free from smoke, foul their own nest from time to time and it is necessary to call on the Alkali Inspectorate (under whose jurisdiction they come, not ours.)

This happened in May but in addition to calling in the District Alkali Inspector, I recommended the Council to make a formal complaint to the Company and this was done.

Early in September I accompanied the District Alkali Inspector to inspect the plant.

We found that the cause of the excessive smoke emission was large cracks in the oven walls occasioned by a shortage of fuel which had occurred recently. This meant that they had not been able to fully charge the ovens and this was the resultant damage.

The Company were endeavouring to rectify this by blowing a silica compound into the ovens as they became empty but this was not going to be a quick process nor did the Alkali Inspector think it would be a very effective one.

This local coking plant was then taken over by the National Carbonising Company Ltd. in November and the District Alkali Inspector and I both renewed our efforts to try and secure the re-building of some of the ovens at least.

### Bus burning

There is a large bus body dismantling business flourishing at Blacker Hill. This is secondary to the main operation which is the recovery and reconditioning of large diesel engines for export mainly to the Far East.

For years we have had complaints from one or two residents in that part of the district of a nuisance from the burning of the wooden carcasses of the buses and to which I have referred to in these Annual Reports in the past.

On 1st October 1969 Section 1 of the Clean Air Act 1969 came into force which deals with dark smoke emitted from industrial or trade premises other than from a chimney.

I both wrote and spoke to the man who runs the body dismantling side of the business and told him exactly what his obligations were.

Since that date I have had two reports that he had been burning buses on the previous nights but of course we must see this for ourselves and, furthermore, if he is burning during the hours of darkness, how do we prove it to be 'dark' smoke?

#### Incinerator complaint

In October I received a rather novel complaint.

It was from a householder on a residential private development estate and was that a neighbour had erected a large incinerator in his garden and according to both the national and provincial press he was prepared to burn all the house refuse which his neighbours cared to bring along. This was during the national strike by refuse collectors referred to elsewhere.

I found that this would-be public benefactor was a heating engineer and that the incinerator was of his own design.

The complainants agreed that he had not given rise to any nuisance and that their objection was that it was an eyesore.

The matter was quickly resolved by reference to the Area Planning Officer and there was also a restrictive covenant in the Deeds of all properties on the estate which did not allow this type of thing to take place.

#### COLLIERY SPOILBANK

Burning colliery spoilbanks are a nuisance within the meaning of the Clean Air Act.

The one such spoilbank in the area is kept under excellent control by the National Coal Board and has been so kept for many many years.

#### NOISE ABATEMENT ACT 1960

No complaints were received during the year.

## OFFICES, SHOPS & RAILWAY PREMISES ACT 1963

At the end of the year there were 58 premises registered.

421 visits were made to registered premises for the purpose of carrying out a 'general' inspection.

15 notices were served in respect of minor infringements of the Act.

One accident was reported during the year when a 49 years old woman injured her nose whilst removing a fluorescent light tube.

Table A

### Registration and General Inspections

Class of Premises	Number of premises newly registered during the year	Total number of registered premises at end of year	Number of registered premises receiving one or more general inspections during the year
Office	-	9	9
Retail shops	2	35	35
Wholesale shops, warehouses	-	1	1
Catering establishments open to the public, canteens	2	13	13
Fuel storage depots	-	-	-
TOTALS	4	58	58

Table B

Number of visits of all kinds by Inspectors to registered premises 421.

Table C

Analysis of persons employed in registered premises by workplace.

<u>Class of workplace</u>	<u>Number of persons employed</u>
Offices	31
Retail shops	91
Wholesale departments, warehouses	1
Catering establishments open to the public	51
Canteens	2
Fuel storage depots	-
TOTAL	176
Total males	50
Total females	126

ERADICATION OF BEDBUGS

One house was sprayed against bedbugs during the year with pybuthrin/DDT.

OTHER PESTS

Forty seven other complaints regarding other insect pests were received and assistance or advice for dealing with them given.

They were:

Cockroaches	16
Silverfish	11
Wasps' nests	3
Ants	5
Spider mite	8
Merchant grain beetle	2
Woodlice	1
Earwigs	1
Garden weevil	1
Total	<u>47</u>

SCRAP METAL DEALERS' ACT 1964

There were ten persons registered under the Act.

## PET ANIMALS ACT 1951

There is only one person licensed to keep a pet shop in the area and that is in High Street, Worsbrough Dale.

## ANIMAL BOARDING ESTABLISHMENTS ACT 1963

One application for a licence to keep a boarding establishment under the Act was received from a person in Sheffield Road, Birdwell.

The proposal was to use a former stable building and after a joint inspection with the local R.S.P.C.A. Inspector, the applicant agreed to carry out all alterations necessary to provide proper facilities and the necessary licence was granted.

## INSECTION AND SUPERVISION OF FOOD

### Milk

The main retailers of milk in the area are the Barnsley British Co-operative Society Ltd., and Express Dairies Ltd.

There are also two producers of farm bottled 'untreated' milk in the urban district.

One of them, has a large pedigree herd, which has been 'closed' since 1939, and he bottles his milk on the farm and then sells it direct to the Barnsley Co-op.

The other has a small 'flying' herd who cartons some of his milk which he retails direct to his customers and sells the rest direct to the dairy for bottling.

Regular sampling of these two milks is carried out and twenty seven samples were submitted to the Public Health Laboratory at Wakefield for examination.

One of these gave a 'positive' cream culture result and a Heat Treatment Notice was served on the producer by the Medical Officer of Health.

This was followed up by taking 21 individual samples none of which gave a positive result. The Heat Treatment Notice was withdrawn and close attention to sampling of this milk gave no further positive results.

I only take the occasional sample of heat treated milks as I do not consider it necessary to do otherwise. These milks are being regularly sampled in the area where the plant is situated both by the dairy itself and the Public Health Department and it seems to me an unnecessary duplication of effort to take a large number of samples. In point of fact I took 6 samples of pasteurised milk and 1 of U.H.T and all were found to be satisfactory.

### Ice cream

There are 56 premises registered under the provisions of the Food & Drugs Act 1955 for the sale of ice cream.

Regular sampling is carried out, but again, as in pasteurised milk sampling, the number of samples has not been large. It seems to me a waste of the Public Health Laboratory's time if every local authority is sending in the same national product for examination, especially when it is a fact that the firms themselves have their own laboratories and enforce strict quality control.

Twenty five samples of four manufacturers' ice cream were taken and all were placed in Grade 1 of the Ministry of Health's provisional grading table.

### Meat

There are no slaughterhouses in the district, the Council having taken advantage of Section 4 of the Slaughterhouses Act 1954 and closed them by resolution under that Act at that time.

There are excellent facilities available at the adjoining Barnsley Abattoir where most of our meat is killed.

### Food hygiene

1,152 inspections of food premises have been carried out during the year and the standard on the whole is very good.

It was necessary to serve 3 notices requiring various matters to be put right under the Food Hygiene Regulations ranging from the restocking of a first aid kit, the cleaning of floors and the redecorating of a preparation room.

No legal action was necessary.

### Food poisoning

As mentioned in the Medical Officer's Report no cases of food poisoning occurred during the year.

I was informed by a colleague in a neighbouring area that a consignment of corned beef received into a large wholesale warehouse there, had been the subject of advice to him from the Ministry that it had not to be sold until further notice.

Only one shop in the district had received any of this meat and the shopkeeper immediately agreed not to put it on sale until I authorised him to do so. The wholesalers themselves then called in the meat and the incident was closed so far as we were concerned.

### Food complaints

There were no complaints made to the Department during the year regarding the quality etc. of food.

### Condemned food

The following foodstuffs were condemned as unfit for various reasons.

- 2 x 4 lb tins of chopped pork.
- 385 packets of assorted frozen foods.
- 1 x 12 lb tin of cooked ham.
- 1 x 6 lb 8 oz tin of processed peas.
- 3 lb 15 ozs of shin beef.
- 1 x 2 lb 7 oz jar of gooseberries.
- 68 lbs of smoked bacon.
- 1 x 4 lb 15 oz jar of gooseberries.
- 1 x 14 oz tin of tomato puree.
- 110 lb barrel of salted herrings.
- 2 x 13 oz tins of tomato puree.

## HOUSING

### New houses

18 houses were completed by the Council's direct labour force during the year.

The number of houses completed in the preceding five years was as follows:-

1965	-	35 dwellings
1966	-	28 dwellings
1967	-	10 dwellings
1968	-	40 dwellings
1969	-	20 dwellings

In addition, the number of houses built by private enterprise was 7.

Unfit houses

(a) Clearance Areas

The Ministry of Housing & Local Government asked all local authorities to supply him with the number of unfit houses they intend to deal with in the four years 1970, 1971, 1972 and 1973.

The number of houses to be dealt with in Worsbrough is very low, apart from the redevelopment of 'New England', and the following information was submitted.

	1970	1971	1972	1973
Houses in areas to be declared	24	4	-	-
Houses to be cleared	-	14	14	-
Houses likely to be subject to demolition or closing orders	-	2	1	-

In November the Medical Officer of Health made his "Official representation" in respect of Nos. 1 to 14 Hammertons Buildings, Worsbrough Dale but the Ministry Inquiry was not held until 1971.

(b) Individual unfit

Three houses were closed by agreement with the owners during the year.

The first of these was No.3 High Street, Worsbrough Dale which belonged to the Diocesan Trust, Sheffield, who agreed to close it and further agreed to close No.1 High Street when the tenant became rehoused (which did not take place during the year under review.)



The other two were Nos. 23 & 24 Watson's Yard, Blacker Hill. No. 24 had been vacant for a long time and when the owner, who lived in No. 23, went to live outside the district I saw him and he agreed to sign an undertaking not to re-let.

#### Certificates of Disrepair

No applications for a Certificate of Disrepair were received during the year.

#### Improvement Grants

Fifty-six applications for Improvement Grants were received during the year.

The number of applications received during the past five years are as follows:-

1965	-	52
1966	-	61
1967	-	39
1968	-	48
1969	-	47

#### House loans

Twenty-nine advances were made by the Council during the year to persons wishing to buy or build their own houses.

### FACTORIES

Prescribed particulars on the administration of the Factories Act, 1961.

#### Part 1 of the Act

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

Premises	No. on Register	Inspections	Number of Written Notices	Occupiers Prosecuted
1. Factories in which Sections 1, 2, 3, 4, and 6 are to be enforced by Local Authority	1	6	-	-
2. Factories not included in 1. in which Section 7 is enforced by the Local Authority	20	114	-	-
3. Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	-	-	-	-
TOTAL	21	120	-	-

2. There were no defects found.

Part VII of the Act - Outwork (Sections 133 and 134)

There are 10 out-workers registered under the above Act.



SECTION V

DIVISIONAL STAFF

(as at 31st December, 1970)

Divisional Medical Officer

C. G. Oddy, M.B., Ch.B., D.P.H.

Senior Departmental Medical Officer  
(Clinical) Half-time

C. H. Merry, M.R.C.S., L.R.C.P.

Departmental Medical Officer  
Half-time

C. B. Ball, L.M.S.S.A.

Clinic Medical Officers

Dr. L. Burke	Dr. S. S. Mahatme
Dr. J. D. Byrne	Dr. K. Mathers
Dr. G. C. Curtis	Dr. M. S. Scott
Dr. D. J. Fairclough	Dr. M. E. Tapissier
Dr. H. W. Gothard	Dr. L. Taylor
Dr. G. L. Herbert	

Divisional Nursing Officer

Miss. M. E. Pilling

Health Visitors

Miss. A. Baxendale	Mrs. B. McDonald
Mrs. D. Dyson	Mrs. D. M. Parry
Mrs. I. Grazier	Mrs. K. Rowe.
Mrs. A. M. Harston	Mrs. A. T. Saunders
Miss. B. Hey	Miss. D. Westerman
Miss. M. E. Lee	Mrs. A. M. Widdison

Clinic Nurses

Mrs. E. Allen	Mrs. D. Hodgson
Mrs. E. C. Evans	Mrs. J. Masters
Mrs. J. C. Greensmith	Mrs. F. M. West

Midwives

Mrs. B. Burns	Mrs. I. L. Jones
Mrs. R. Dennison	Miss. M. T. Rochford
Mrs. B. Fitzpatrick	Miss. A. C. Senior
Miss J. Hampton	Mrs. M. Walters
Mrs. E. Harper	Mrs. A. Williams
Mrs. B. Horsfield	

Home Nurses

Mrs. M. Bexon	Mrs. R. Hamshaw
Mrs. M. Buckley	Mrs. M. Jarvis
Mrs. J. M. Burton	Mrs. M. McConnell
Miss. B. Chapman	Mrs. S. D. Newton
Miss. N. C. Crofton	Mrs. D. Palmer
Mrs. E. Cross	Mrs. B. Parker
Mrs. S. P. Gregory	Mrs. J. B. Scales
Mrs. P. E. Hall	

Home Help Organiser

Mrs. I. Evans

Mental Welfare Officers

Mr. J. Armitage	Mr. T. Johnson
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Speech Therapist (Part-time)

Mrs. J. M. Pearson

Divisional Administrative Officer

Mr. L. S. Wrigg

## DIVISIONAL REPORT

### Vital Statistics

A table of comparable vital statistics is shown for each of the County districts in the Division. This may be of interest to each authority in assessing how each stands in relation to each other and in relation to the County and National statistics.

### Population

The Registrar General's estimate of the population in the Division at mid 1970 was 79,610, compared with 79,890 in the previous year. The natural increase in population showing the number of births over deaths was 435 in 1970, compared with 379 in the previous year.

### Births

The number of live births registered in the Division in 1970 was 1,337, compared with 1,305 in 1969. This is equivalent to a crude birth rate of 16.8 per 1,000, compared with 16.3 per 1,000 in the previous year. The number of illegitimate births was 95 in 1970. This represents 7.0% of the total births, compared with 6.5% in 1969 and 5.8% in 1968.

### Stillbirths

There were 17 stillbirths during the year, compared with 22 during 1969. This gives a still-birth rate of 12.6, compared with 16.6 in 1969 and with 13.0 for England and Wales.

### Deaths

The deaths assigned to the Division after the addition and subtraction of inward and outward transfers was 902, which was 24 less than in the previous year. This gives a crude death rate for the Division of 11.3, as compared with 11.6 in 1969.

### Maternal Mortality

I am happy to report that there was no death from this cause during the year. The maternal mortality rate for the Division was nil, compared with 0.29 for the administrative County and with 0.18 for England and Wales.

VITAL STATISTICS

District	Acres	Registrar General's estimate of population mid 1970	Adjusted Birth Rate per 1,000 pop.	Adjusted Death Rate per 1,000 pop.	Still-Birth Rate	Infant Death Rate	Peri-natal Mortality Rate
CUDWORTH	1,746	9,090	14.2	15.9	21.1	14.4	28.2
DARFIELD	2,018	7,260	20.5	12.2	12.2	18.5	18.3
DARTON	4,718	15,340	14.8	13.1	17.1	8.7	21.4
DODWORTH	1,857	4,110	18.9	13.0	11.4	11.5	11.4
ROYSTON	1,452	8,510	14.9	13.4	7.1	7.2	14.3
WOMBWELL	3,850	18,870	16.0	15.1	6.7	10.1	10.1
WORSBROUGH	3,420	16,130	16.4	15.0	13.9	21.1	20.8
DIVISION NO. 25.	19,061	79,610	16.8 (crude)	11.3 (crude)	12.6 (crude)	13.5	17.7
ADMINISTRATIVE COUNTY		1,794,020	17.5	12.7	13.6	19.8	24.4
ENGLAND AND WALES		Not available	16.0	11.7	13.0	18.2	23.5

TABLE SHOWING CAUSES OF INFANT DEATHS IN THE DIVISION

	Under 1 wk.	1-2 wks.	2-3 wks.	3-4 wks.	Under 4 wks.	1-3 mths.	3-6 mths.	6-9 mths.	9-12 mths.	TOTAL
Congenital defects	4	-	-	-	4	-	1	-	-	5
Extreme prematurity	4	-	-	-	4	-	-	-	-	4
Gastro-enteritis	-	-	-	-	-	1	-	-	-	1
Liver failure	-	-	-	-	-	1	-	-	-	1
Gastro-enteritis and broncho-pneumonia	-	-	-	-	-	2	-	-	-	2
Cancer (including leukaemia)	-	-	-	-	-	-	1	1	-	2
Burns	-	-	-	-	-	-	-	-	1	1
Broncho-pneumonia	-	-	-	-	-	-	-	1	-	1
Meningitis	-	-	-	1	1	-	-	-	-	1
TOTALS	8	-	-	1	9	4	2	2	1	18



## Infant Deaths and Peri-natal Mortality Rates

There were 18 infant deaths in the division in the year, of which 8 occurred in the neo-natal period. This compares with 20 and 13 respectively in the previous year. These figures represent an infant mortality rate for the division of 13.5, compared with 15.3 for the previous year and with 18.2 for England and Wales.

I would like to draw attention to the fact that of the 8 infant deaths occurring within the first week of life, 4 of them were so premature as to be below the age of viability. This means that had they not breathed they would not have been regarded as stillbirths, but rather as miscarriages, and as such would never have entered the official statistics at all. This demonstrates the importance of this factor as a contributory cause of death in early infancy. Of the 18 babies who died under one year of age, 13 were born in hospital and 5 at home. It is also of interest to note that numerically the commonest causes of death in the first week of life were extreme prematurity and congenital defects, which at the present moment we are unable to prevent to any great extent. These deaths accounted for almost one half of the recorded infant deaths in the division. The illegitimate infant deaths per 1,000 illegitimate live births = 21.0 for the division.

## Diphtheria, Tetanus, Whooping Cough and Poliomyelitis Immunisation

Pre-school children. On the 1st January, 1968, the West Riding County Council introduced a computer scheme of immunisation into the Division following successful pilot schemes in the High Green and Keighley Divisions. The effect of the scheme has been to centralise records of immunisation procedures from the whole county area and, therefore, records of immunisation performed in the Division are now recorded on magnetic tape in Wakefield. Local records are no longer available and it is now impossible to present local district statistics as was usual in the past. The scheme on the whole has progressed quite smoothly and immunisation against these diseases has been maintained at a satisfactory high level. Evidence from other areas shows that the introduction of a computer scheme of this nature will increase the overall immunisation rate for a district by approximately ten per cent.

This is probably due to the fact that appointments for immunisation are made automatically at the appropriate time to every child in the area where consent for immunisation has been given by the parent of the child. Parents are also allowed the choice of local clinic or family doctor.

#### Smallpox Vaccination

Some 756 persons under 16 years of age were vaccinated against smallpox during the year, including 28 re-vaccinations, which represents an increase of 17, compared with 1969. Every effort is made to encourage parents to have their children vaccinated against smallpox during the second year of life. This is the optimum time to perform primary vaccination and reactions tend to be minimal. As in the case of immunisation against diphtheria, tetanus, whooping cough and poliomyelitis, this procedure in infancy is now computerised.

#### Measles Immunisation

The scheme for routine immunisation of susceptible children against measles at the age of sixteen months, using a Schwartz type of strain of vaccine of proven efficacy and safety, was computerised in the early part of the year. The procedure was well accepted and the table below shows that 1,129 children received measles vaccine during 1970, compared with 404 during 1969.

#### Measles Immunisation 1970

	Year of Birth					Others under 16 years	TOTAL
	1970	1969	1968	1967	1963-66		
Number Immunised	-	391	473	123	138	4	1,129

### Tetanus Immunisation

Schoolchildren- Immunisation against tetanus continued during 1970. Rather more children were immunised with primary doses but considerably fewer booster doses of tetanus vaccine were given in 1970 than in the previous year. Every effort is made to encourage the administration of active tetanus immunisation in children, in order to avoid the use of anti-tetanus serum in case of injury.

### Tetanus Immunisation

	Primary	Booster
No. immunised during 1970	1,031	1,034
No. immunised during 1969	825	2,172

### Poliomyelitis

During the year 1,035 children were vaccinated with three doses of oral vaccine, 95 more than were vaccinated during 1969, and 724 booster doses were given. I am pleased to report that no cases of this disease were notified during the year.

### Poliomyelitis Immunisation

	Year of Birth					Others under 16 years	TOTAL
	1970	1969	1968	1967	1963-66		
Primary Course of Oral (3 doses)	29	771	232	-	3	-	1,035
Booster (4th dose)	All age groups eligible						724

## SCHOOL HEALTH SERVICE

The number of children examined at routine medical inspection fell during the year to a total of 1,662. The method of "selective" medical inspection continued in the case of children attending junior and senior schools in the Division. This scheme is intended to replace the old system of routine inspection whereby every child was submitted for medical inspection by the school doctor. Essentially, the children are selected for examination by questionnaire and teacher referral. At present the scheme is working well and helps to save doctor's time and allows a more detailed study of the children who are selected for examination.

During the year it proved impossible, once again, to recruit a full-time Deputy Medical Officer of Health or Departmental Medical Officer. This has had the effect of placing the full responsibility for medical administrative duties and all Medical Officer of Health duties for the constituent District Councils in the Division on the shoulders of the Divisional Medical Officer. This was not really a satisfactory state of affairs from the long term point of view as it was necessary in these circumstances to "streamline" duties in order to ensure that important and essential matters receive a reasonable amount of attention. It has at times proved to be impossible to attend to all matters of a routine or non-essential nature. I cannot praise too highly the assistance and co-operation I have received from the administrative staff of the Divisional Health Office and the Public Health Inspectors and other Officials of the District Councils during what has proved to be a trying and difficult year. I regret to say that the outlook as regards medical staffing of the department seems even more gloomy than in the past.

### SUMMARY OF DEFECTS FOUND TO REQUIRE TREATMENT

Defect	Periodic Inspections	Special Inspections
Eye	43	6
Ear, Nose and Throat	64	8

SUMMARY OF DEFECTS FOUND TO REQUIRE TREATMENT ctd

Defect	Periodic Inspections	Special Inspections
Heart	3	-
Lungs	-	-
Orthopaedic	6	1
Other	28	21

SCHOOL DOCTORS' AND SPECIALIST CLINIC ATTENDANCES

District	Ophthalmic	Ear, Nose and Throat	Orthopaedic	Child Guidance
Cudworth	105	-	61	13
Darfield	61	-	6	3
Darton	127	-	99	50
Dedworth	49	-	4	2
Royston	119	-	10	53
Wombwell	190	-	6	6
Worsbrough	153	-	59	27
Other areas	10	-	33	35
TOTALS	814	Nil	278	189

### B.C.G. Vaccination

Routine Mantoux testing and B.C.G. vaccination continued during 1970. A total of 701 children entering senior schools in the division were vaccinated against Tuberculosis. A table showing the results of the vaccination scheme is shown below.

### B.C.G. Vaccination 1970

	Number Skin Tested	Number Positive	% Positive	Number found to be negative	Number vaccinated
Senior schools in Division	911	37	4.1	742	701
Tuberculosis contact scheme	42	--	--	42	135

### Rubella Immunisation

Towards the end of the year a scheme of Rubella immunisation was introduced into the senior schools in the Division. Protection against rubella in susceptible girls in their fourteenth year of life was initiated and parents were allowed the choice of having the procedure carried out at either school or the family doctor's surgery. The majority of parents took advantage of the scheme which is aimed to prevent the development of congenital defects as a result of rubella infection during subsequent early pregnancy.

### Speech Therapy

After a long period during which it proved impossible to recruit a speech therapist, we were fortunate to engage Mrs. J. M. Pearson as part-time speech therapist in May, 1970. It was only possible to deal with severe cases of speech handicap in view of the fact that Mrs. Pearson was only able to work for two sessions per week.

## MIDWIFERY AND MATERNITY SERVICES

Towards the end of the year, phase I of the Barnsley District General Hospital was opened to patients. Phase I of the development included beds for maternity and psychiatric cases and the maternity unit included a "general practitioner unit" for the use of general practitioners and domiciliary midwives. It is anticipated that this unit will be opened during the early part of 1971. This development could have a significant effect on the proportion of maternity cases delivered in maternity institutions in future years.

The number of cases attended by domiciliary midwives rose to 368, compared with 337 in the previous year. There were 982 institutional confinements, compared with 990 in 1969. The proportion of patients delivered in hospitals and maternity homes fell from 74.4% to 72.5% in 1970.

The proportion of domiciliary patients receiving some form of analgesia was 77.4%

	<u>No. of cases</u>
Pethidine .. .. .	84
Trilene alone .. .. .	89
Trilene and Pethidine ..	112
	<hr/>
TOTAL	285
	<hr/>

### Ante-Natal Clinics

There was an increase in the number of women attending West Riding Ante-Natal Clinics but the number of attendances fell. The trend towards general practitioners running their own ante-natal clinics, either in their own premises or at West Riding Clinics continued and this accounts for the decline in attendances at the official West Riding Clinics, because such attendances are not reflected in our statistics. Attendances at relaxation and mothercraft classes fell by 23%. Staffing difficulties in the early part of the year may in part have accounted for this reduction due to the fact that available staff had to devote most of their time to ante-natal clinics, confinements and post-natal care of the patients under their care.

ATTENDANCES AT ANTE-NATAL CLINICS AND RELAXATION CLASSES

	NUMBER OF WOMEN ATTENDING ANTE-NATAL CLINICS		TOTAL NUMBER OF ATTENDANCES AT ANTE-NATAL CLINICS		ATTENDANCES AT RELAXATION AND MOTHERCRAFT CLASSES	
	Ante-Natal	Post-Natal	Ante-Natal	Post-Natal	By Hospital Booked Patients	By Domiciliary Booked Patients
CUDWORTH	116	59	728	40	-	-
DARFIELD	-	-	-	-	123	45
DARTON	-	-	-	-	180	37
ROYSTON	89	48	649	50	102	128
WOMBWELL	-	-	-	-	237	70
WORSBROUGH	-	-	-	-	232	22
TOTALS	205	87	1,377	90	874	302



## Infant Welfare Clinics

Attendances at Infant Welfare Clinics in the Division showed a slight decrease. During 1970, 36,317 attendances were made showing a decrease of approximately 1.4% over the previous year. The attendances, however, clearly indicate that good use is being made of the clinic facilities available in the area. The tendency continued during the year for general practitioners to conduct their own Child Welfare Clinics in either County clinics or their own premises. Attached nursing staff were made available to help with this work. At Worsbrough the general practitioners continued to conduct their own Child Welfare sessions at the County clinic, the official County clinic being held on one half-day only. An attempt was made to concentrate on more specialised work at this clinic in the form of routine developmental assessments of pre-school children. This change in child welfare clinic organisation could explain the apparent fall in attendances mentioned earlier at the official County sessions.

TABLE SHOWING INFANT WELFARE CLINIC ATTENDANCES DURING 1970

District	Total number of children attending	Number of attendances
Cudworth	593	3,548
Darfield	303	3,300
Darton	471	4,230
Staincross	318	2,399
Gawber	36	942
Dodworth	338	3,143
Royston	566	5,735
Wombwell	618	7,338

TABLE SHOWING INFANT WELFARE CLINIC ATTENDANCES DURING 1970 ctd.

District	Total number of children attending	Number of attendances
Jump	135	1,598
Worsbrough	92	425
Birdwell	214	2,056
Blacker Hill	217	1,603
TOTALS	3,901	36,317

#### Screening Techniques

In April the Guthrie test for phenylketonuria replaced the phenistix test on urine for detection of this rare metabolic disease. The Guthrie test has been shown to be more reliable than the previously used urine test but requires a small sample of blood from the infant's heel. The domiciliary midwives received instruction from the Divisional Medical Officer on how to perform the test and take the necessary blood samples. During the year no case of phenylketonuria was detected by this method.

Ortolani tests were carried out on all babies born in the Division to discover cases of congenital dislocation of the hip. If such cases are discovered early the treatment is of much shorter duration and the results enormously improved. As a result of this screening technique no less than 22 cases were referred to the Orthopaedic Surgeon and confirmed as dislocation; thereby qualifying for early treatment of the condition.

#### Routine Hearing Tests in Infants

A computer scheme which was introduced into the Division in March, 1968, continued during 1970. The scheme enabled the Health Visiting staff to perform simple routine hearing tests on all young babies between the ages of six and nine months.

The purpose of the scheme is to detect serious loss of hearing as soon as possible, preferably before speech has been acquired. Appointments are made automatically by the computer and the information provided by the tests is recorded centrally. Follow-up appointments when indicated are also arranged.

### Women's Screening Clinic

The screening clinic which commenced early in 1968, continued during the year, and 963 women attended, compared with 965 women in 1969. Sessions were held twice weekly on Tuesday and Wednesday mornings by appointment. The results of the screening clinic for 1970 are shown on the following table.

### Women's Screening Clinic 1970

Total attendances	..	..	..	1,138
Patients seen	..	..	..	963
Re-calls	..	..	..	175

#### Abnormalities detected

##### a. malignant disease:

cancer of the uterine cervix	5
breast abnormalities (suspected malignant)	4

##### b. disease of the uterine cervix:

erosion	34
polyp	16
friability of cervix	1
cervical discharge	1

##### c. diseases of the uterus:

bulky uterus	9
fibroids	10
prolapse	4
metrorrhagic	6
retroverted	6

##### d. genital infections:

trichomonas	5
monilia	3
pruritis vulvae	9

e. other diseases and abnormalities:

hypertension BP	<u>150</u> 90	66
obesity		19
anaemia		5
depression		2
rectal bleeding		1
gall-bladder disease		1
myxoedema		2
varicose veins (severe)		1
thyroid cyst		1
urinary tract infection		2

The clinic proved to be very popular with the women and the results show the undoubted value of screening procedures in women. No less than five cases of early cancer of the uterus were detected during the year and the patients were referred to the Consultant Gynaecologist for treatment, with the co-operation of the general practitioner. This technique is proving to be an important preventive measure in the reduction of cancer mortality from malignant disease of the uterus.

Health Visiting

The table below shows the number of first visits made by the Health Visitors in 1970. Other visits made are no longer recorded and the information is, therefore, no longer available for statistical purposes.

HEALTH VISITING CARRIED OUT IN 1970

	First Visits
Visits to children born in 1970	1,292
Visits to children born in 1969	1,212
Visits to children born in 1965-1968	2,235
TOTAL visits to children under 5 years	4,739
Geriatric visits other than for domestic help	284

HEALTH VISITING CARRIED OUT IN 1970 ctd

	First Visits
Other visits including Tuberculosis	2,163
TOTAL VISITS	7,186

Health Visiting and Home Nursing Attachment Scheme

The scheme of attachment of Health Visitors and Home Nurses to general practitioners was continued during the year. In principle the scheme allows the attached nurse to work with a general practitioner as a "team" in a practice rather than a geographical area as in the past. The scheme has been well accepted by the general practitioners and the attached staff. On the health visiting side, difficulty in recruitment of qualified Health Visitors has caused some administrative problems in running the scheme, but it is evident already that liaison and co-operation with the general practitioners has improved in all areas.

Home Nursing Service

There was a decrease in the number of visits carried out by the Home Nursing Service during the year. 50,211 visits were made, compared with 51,670 in the previous year, but the number of cases attended by the home nurses showed a rise of 7%. These were in the main geriatric cases. Attachment of nursing staff to general practitioners means that it is no longer possible to breakdown work into areas. Analysis of work is still possible in clinical varieties and is shown below.

Home Nursing carried out during 1970

<u>CASES</u> - Total number	1,745
No. of cases who were over 65 years of age	974
<u>VISITS MADE</u> - Medical	40,603
Surgical	8,248
Infectious disease	149

<u>VISITS MADE</u> - Tuberculosis	136
Maternal complications	344
Other cases	731
	<hr/>
TOTAL	50,211
	<hr/>

### Geriatric Services

Excellent liaison was maintained with the Consultant Geriatrician in the form of weekly meetings at the Mount Vernon Hospital attended by the Divisional Medical Officer, Divisional Nursing Officer and a member of the staff of the West Riding Welfare Department, together with the Consultant Geriatrician, Dr. P. K. Ramaswami, and the hospital social worker. Discussions took place both with regard to the admission and discharge of geriatric patients with mutual benefit.

### Day and Night Nursing Service

This service was taken over by the County Council from the Marie Curie Trust. No cases required help during 1970.

### Chiropody

The number of patients treated last year showed an increase of 4.5%. I feel that it is important that we should encourage patients to make every effort to visit the chiropodist at his clinic or surgery rather than rely on domiciliary treatment, not only is domiciliary treatment much more expensive to provide but it is felt that old people would generally benefit by the social contacts made whilst attending the clinic. There was a decrease of almost 10% in the number receiving domiciliary treatment.

### Domiciliary Chiropody

District	No. of patients	
	1969	1970
Cudworth	52	50

Domiciliary Chiropody ctd.

District	No. of patients	
	1969	1970
Darfield	77	63
Darton	231	169
Dodworth	51	51
Royston	106	105
Wombwell	143	134
Worsbrough	253	251
TOTALS	913	823

Loan of Equipment

This service was continued and issues made as indicated below:

	<u>No. of issues</u>
Bedding - blankets	18
pillows	16
pillow-cases	14
sheets	48
Bed cradles	57
Bed pans	259
Bed rests	94
Bedsteads with poles	23
Bedsteads other	11
Commodes	64
Cushions Dunlopillo	7
Mattresses	42
Rubber sheets	307
Walking aids inc. crutches	117
Wheel chairs - adult	43
junior	-

## Loan of Equipment ctd

	<u>No. of issues</u>
Adult cot	1
Fracture boards	8
Electric suction pump	1
Hydraulic hoists	2
Sleepskin or similar	14

There was once again a trend during the year to receive requests for more sophisticated types of equipment than was the case in the past.

## Home Help Service

The Home Help Service was again provided mainly for the elderly. In September, Mrs. I. Evans was appointed as Divisional Home Help Organiser. The number of households assisted during the year increased to 1,148, while the number of hours expended increased very slightly (0.04%). An increased demand for the service is inevitable in view of the fact that the proportion of elderly infirm in the general population increases slightly year by year. Increasing family mobility can result in the elderly having no relatives who live nearby to help them and indeed, in some cases, relatives who do live in close proximity are unwilling to help their elderly parents. These latter cases are always the more distressing and produce an increasing demand on the service. Working in heavy industries and in particular mining, seems to produce early invalidation and infirmity in the retired male age group, this in turn can produce a demand for the service. Recently there has been a welcome tendency to rehabilitation and early discharge in the case of geriatric patients. Cases of this nature on discharge often require substantial assistance in the form of domestic help.



CHIROPOLY SERVICE

Area	No. of sessions held	NO. OF PATIENTS TREATED IN CLINIC OR SURGERY			NO. OF TREATMENTS CARRIED OUT IN CLINIC OR SURGERY			NO. OF PATIENTS TREATED AT HOME		NO. OF TREATMENTS CARRIED OUT AT HOME	
		Pen-sioners	Physically Handicapped	E.M.	Pen-sioners	Physically Handicapped	E.M.	Pen-sioners	Physically Handicapped	Pen-sioners	Physically Handicapped
Cudworth	59	142	1	-	468	3	-	48	2	163	7
Darfield	74	221	8	-	558	10	-	57	6	152	12
Darton	139	215	2	1	1,083	2	1	169	-	820	-
Dodworth	97	202	3	-	775	9	-	51	-	254	-
Royston	124	224	3	1	992	3	3	102	3	713	15
Wombwell	194	462	17	3	1,483	58	3	134	-	569	-
Worsbrough	262	396	10	5	2,032	21	5	245	6	1,097	27
<b>DIVISIONAL TOTALS</b>	<b>949</b>	<b>1,862</b>	<b>44</b>	<b>10</b>	<b>7,391</b>	<b>106</b>	<b>12</b>	<b>806</b>	<b>17</b>	<b>3,768</b>	<b>61</b>

Category	Number of Cases			Hours employed
	From previous year	New Cases	TOTAL	
Over 65 years	828	231	1,059	145,465
Under 65 years:				
Chronic sick	62	13	75	12,863
Mentally disordered	1	-	1	230
Maternity	-	3	3	59
Others	7	3	10	1,738
TOTALS	898	250	1,148	160,355

### Health Education

The year has seen a more informal approach to health education, both in the clinics and in the schools. This has resulted in a greater participation by the classes, especially the older school children, and has been greatly appreciated by them. Discussion between health visiting staff and school teachers has resulted in new programmes being drawn up, the full fruits of which should be seen next year. The midwifery service continues to show an increase in the number of women attending the relaxation classes. Many of the women expressed to their midwives how helpful the classes had been during delivery and afterwards. Another evening class has commenced, taken by a midwife who teaches first aid and accident prevention to a group of adolescents. I would like to take this opportunity to express my gratitude to all members of staff participating in the health education programme.

### Nurseries and Child Miners' Regulation Act, 1948 Amended by the Health Services and Public Health Act, 1968. Section 60

The above legislation was introduced early in 1969. It was necessary to register all child minders in the area and registration was also required for sessional-day care and full-day care.

Details of registration were as follows:

(a) Number of child minders registered during 1970	3
(b) Number of sessional-day care premises registered during 1970	2
(c) Number of full-day care premises registered during 1970	1
Number refused registration under (a), (b) and (c)	Nil

MENTAL HEALTH SERVICE

A. Mental Sub-Normality

Distribution of Mentally Handicapped

	FEMALES		MALES		TOTAL
	Over 16 yrs	Under 16 yrs	Over 16 yrs	Under 16 y	
Cases on register at 1st December, 1970	118	16	134	35	303
No. attending training centre	27	14	33	28	102
No. resident in hostels	-	1	-	1	2
No. working or assisting in the home	81	-	96	-	177
No. refused training centre place	10	1	5	-	16
During the year 11 sub-normal cases were admitted for short-stay care					

## Training Facilities for Mentally Sub-Normal Patients

Training facilities continued at the Wombwell Comprehensive Training Centre at Wombwell. The essential basic training in the Junior Wing continued under Mrs. E. Large, the Centre Supervisor, and the policy of taking children under the age of five years continued to be successful. Contract work continued for County Supplies Department in the Adult Wing and during the year a gradual expansion of work and variety of jobs occurred.

The Special Care Unit situated in the grounds of the Centre continued to provide facilities to cater for up to twelve severely handicapped patients who are unable to attend the Training Centre. The Parent-Teachers' Association continued to do valuable work. Fund raising activities were successful and social events, outings and games were organised. The members of the Association are to be congratulated for the help they gave in making the social events such a success. Various gifts which were given to the association by voluntary bodies during the year were very much appreciated.

### B. Psychiatric Service

Throughout the year good liaison was maintained between the Mental Welfare Officers, the general practitioners in the Division and the Hospital Psychiatric Out-Patient Department.

The Psychiatric Department of the new Barnsley District General Hospital opened in October, 1970 providing both in-patient and out-patient facilities for psychiatric cases.



MORTALITY IN THE  
URBAN DISTRICT OF WORSBROUGH (YORKSHIRE)  
FOR THE YEAR  
1881

C. G. ODDY, M.B., Ch.B., D.P.H.,  
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33 Queens Road,  
BARNSELY

February, 1971.



MORTALITY IN THE URBAN DISTRICT OF WORSBROUGH  
(YORKSHIRE) FOR THE YEAR 1881

Introduction

The Births and Deaths Registration Act\* of 1874 prescribed the issue of death certificates to the informant by a Registered Medical Practitioner, who was in attendance at the time of death. The certificates of deaths for the period 1st January, 1881, to 31st December, 1881, were provided by Mr. A. O. Elmhirst, and were found quite recently by Mr. P. Howarth in the attic of the house+ in the Worsbrough Bridge area of the district, which was at one time the residence of the local undertaker. The certificates were easy to read and interpret, due to the fact that they were written in copper-plate style handwriting and that there had been little fading of the ink over the years.

The certified causes of deaths for the year are classified in various age groups and set out over-leaf.

\*Compulsory registration of births, marriages and deaths began in 1836 (Births, Marriages and Deaths Registration Act.) In 1847 this Act was amended by Chadwick to include the cause of death on the certificate.

+A property now known as 10 Blackburn Lane, Worsbrough Bridge, formerly more colourfully known as "Wappin Nick".



SUMMARY OF CAUSES OF DEATHS IN AGE GROUPS

Cause of Death	Under 1 yr.		1 - 5 years		5 - 15 years		15 - 25 years		25 - 45 years		45 + years		TOTAL	
	M	F	M	F	M	F	M	F	M	F	M	F	Males	Females
Abscess			1					2					1	2
Aneurism										1				1
Ascaris			1										1	
Bright's Disease											1		1	
Broncho-pneumonia			1	1				1	1	1	1		3	3
Bronchitis	8	6	2	3		1					2		12	10
Cancer (uterus)										1				1
Other cancers												2		2
Convulsions	2	1		3									2	4
Croup				1									--	1
Cholera												1	-	1
Cerebro-spinal disease									1				1	-
Childbirth	1									2			1	2
Apoplexy											3	4	3	4
Diarrhoea	2	1		1									2	2
Enteric				1		1								2

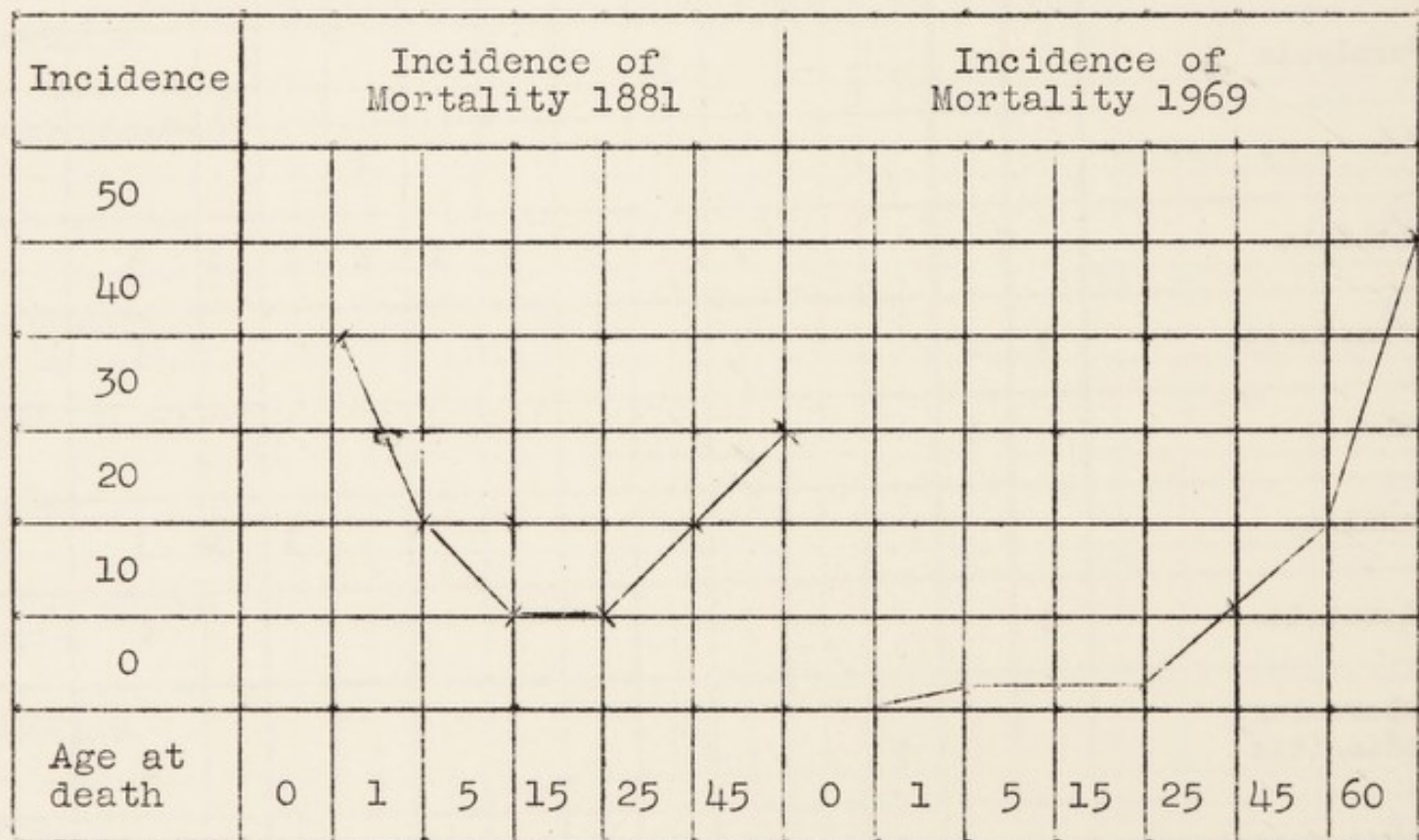
SUMMARY OF CAUSES OF DEATHS IN AGE GROUPS

Cause of Death	Under 1 yr.		1 - 5 years		5 - 15 years		15 - 25 years		25 - 45 years		45 + years		TOTAL	
	M	F	M	F	M	F	M	F	M	F	M	F	Males	Females
Emphysema												1		1
Heart Disease							1	1			1	2	2	3
Fever									1				1	-
Marasmus, Inanition, etc.	9	2											9	2
Meningitis	1	1			1								2	1
Pertussis		1	1										1	1
Paralysis						1								1
Inf. Acute Colons										1				1
Phthisis					2	1	1	3	1	3	1	1	5	8
Prematurity	1	3											1	3
Rubella		1												1
Senility											3	3	3	3
Stomatitis	2												2	
Tubercular Meningitis			2										2	
Tabes mesenterica			1		1								2	
<b>TOTAL ALL CAUSES</b>	<b>26</b>	<b>16</b>	<b>9</b>	<b>10</b>	<b>4</b>	<b>4</b>	<b>2</b>	<b>7</b>	<b>4</b>	<b>9</b>	<b>12</b>	<b>14</b>	<b>57</b>	<b>60</b>

GENERAL COMMENT

The population of the Worsbrough Urban District in 1881 was approximately 10,200. 127 deaths were recorded during the year, giving a crude death rate of 12.4 per thousand. There were no less than 42 deaths occurring in infants under one year of age, and in this age group chest disease (bronchitis) and marasmus were the principal causes of death. It is interesting to note the importance of phthisis (pulmonary tuberculosis) as an important cause of death in all age groups from five years onwards. Apoplexy (stroke) was evidently a common occurrence in those days, but cancer on the other hand was recorded very infrequently. Fashions in diagnosis do undoubtedly occur in medicine and in this century there have been considerable changes in the nomenclature of disease. The glossary at the end of the paper gives the modern interpretation of states of disease recorded on the death certificates.

WORSBROUGH URBAN DISTRICT



The graphs are intended to illustrate the comparison in the incidence of mortality at various age groups for the year 1881 and 1969.

GLOSSARY OF TERMS

- Ascaris - roundworm
- Bright's disease - nephritis
- Cerebro-spinal disease - ? encephalitis or meningitis
- Apoplexy - stroke or seizure
- Enteric - typhoid and para-typhoid fevers  
(generic term)
- Marasmus ) old medical terms referring to a  
Inanition ) general wasting disease or failure  
to thrive in infancy.
- Pertussis - whooping cough
- Paralysis - ?poliomyelitis or infantile paralysis
- Phlegmasia Dolens - "white leg" or thrombo phlebitis  
of the leg associated with  
childbirth
- Phthisis - pulmonary tuberculosis
- Stomatitis - inflammation of the mouth cavity -  
? thrush
- Tabes mesenterica - tuberculosis of the abdominal  
cavity





