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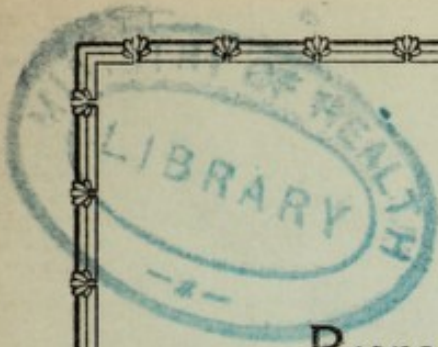
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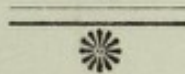


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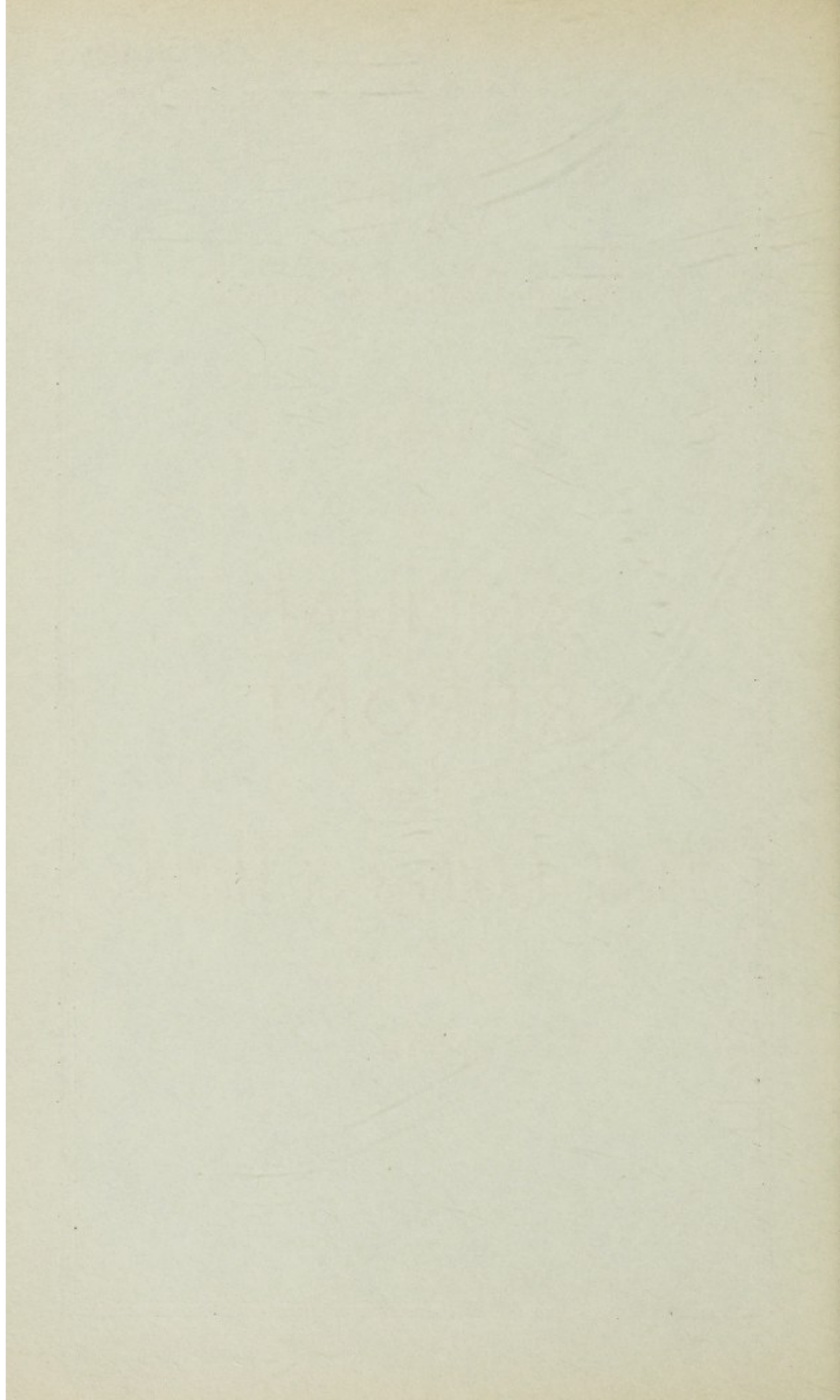
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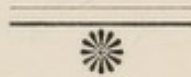
Medical Officer of Health

for the Year

1948.



Wortley
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1948

WORTLEY RURAL DISTRICT COUNCIL.

PUBLIC HEALTH AND HOSPITAL COMMITTEE, 1948.

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- „ Mrs. I. PANTON (Vice-Chairman).
 „ F. CHAMBERS, J.P. (Chairman of the Council).
 „ H. E. WRIGHT (Vice-Chairman of the Council).
 „ R. F. E. BRUCE.
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 „ A. CROFT.
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-

STAFF OF THE HEALTH DEPARTMENT.

Medical Officer of Health :

J. MAIN RUSSELL, M.B., Ch.B. (Edin.), B.Hy., D.P.H.

Deputy Medical Officer of Health :

W. FERGUSON, M.B., Ch.B. (Glas.), D.P.H.

Sanitary Inspectors :

L. VICKERS, M.S.I.A., Cert. M. & F. I.


G. BENNETT, M.S.I.A., Cert. M. & F. I.

E. FROST, M.S.I.A.

Clerical Staff :

Miss P. GREENWOOD
 (Resigned 21/2/48).

Miss A. TURNER
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WORTLEY RURAL DISTRICT COUNCIL.

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH FOR 1948.

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

Ladies and Gentlemen,

I have the honour to submit my Annual Report on the Health Services for the Wortley Rural District for the year ending 31st December, 1948.

The Ministry of Health, in a circular dated 17th January, 1949, has asked that the Report for 1948 should be on more or less similar lines to those of previous years. At the same time, the Ministry asked that certain detailed information should be given concerning such matters as water supplies, drainage and sewerage, inspection of meats and other foods, and the administration of the Factories Act, 1937. In this Report I have had included the latest position with regard to drainage and sewerage, and as I mentioned in my Report for 1947, so far as this district is concerned, we are in a very satisfactory position as regards water supplies, drainage and sewerage. There are still one or two small circumscribed areas that have to be dealt with, and schemes are being prepared whereby a satisfactory supply of wholesome water shall be provided to all areas, and that efficient drainage from those areas shall be available.

In the same circular the Ministry has asked Medical Officers of Health for areas which constitute Local Health Authority areas to submit a short review of the working of Part III of the National Health Service Act, 1946, in their respective areas. The West Riding County Council is the Local Health Authority and the County Medical Officer will prepare the required review. I still feel that County District Councils should have some information as to how their respective districts are affected or served, and as Divisional Medical Officer in this Division of the West Riding Preventive Health Services Scheme, I propose to include in this Report some such statistics. It is well-nigh impossible to give statistics exclusive to each separate County District in the Division, as there is bound to be some overlapping of services such as Midwifery, Home Nursing, Health Visiting, Clinics, etc. I have, however, tried to indicate as often as possible the statistics particular to your district.

The Vital Statistics for the year under review are very favourable. An improvement experienced in 1947 has been more than maintained in 1948. The Birth Rate has decreased a little since last year but it is a higher rate than that for England and Wales. The Crude Death Rate is the lowest on record for Wortley Rural District, and compares favourably with that for the country generally. The General Death Rate for the country is the lowest ever recorded. At 10·8 per 1,000 total population it is 1·4 per 1,000 less than last year. The Infantile Mortality Rate in your district is nearly half what it was in 1947. At 28 per 1,000 Live Births it is the lowest in this district since 1941, when the figure of 19 was the lowest on record for this district. The 1948 Rate is the next lowest on record. It compares very favourably with that for the country generally, which at 34 per 1,000 Live Births (related) is the lowest ever recorded. In fact this is the first occasion the country has had a rate below 40. I have always believed that the Infantile Mortality Rate is the most delicate index of the health of the country. If this is true, then I can only point to the figures for your district as comment. But surely the years of effort to improve Ante-natal services, Midwifery services, Health Visiting, care of the Premature Baby services besides many other social schemes must get results. The results are there to be seen and in all the rejoicings the Preventive Medicine and Social Medicine Practitioners must take some praise. The Still Birth Rate has fallen slightly in your district and is favourably comparable with the country's figure.

Before I conclude my introduction, I would like to record my thanks for the loyal help afforded me by Dr. W. Ferguson. Towards the end of the year he obtained a senior post in the North Riding of Yorkshire and he leaves early in 1949. I wish him well.

I would also like to offer my thanks to the Chairman and Members of the Health Committee for their generous support throughout the year, to Mr. A. M. Kelly, Clerk to the Council, for his very kindly help and advice, and other officials of the Council for their co-operation.

To my staff in the Health Department I wish to put on record my most grateful thanks for their loyalty and devotion to duty at all times.

I am,

Your obedient servant,

J. MAIN RUSSELL,

Medical Officer of Health.



DISTRICT STATISTICS IN BRIEF.

The Wortley Rural District covers an area of 48,697 acres. The district is divided into four parishes, Ecclesfield, Bradfield, Tankersley and Wortley. The approximate acreage and the number of houses in each is as follows:—

Parish.			Acreage.			Number of Houses.
Ecclesfield	...	...	6,147	...	...	7,760*
Bradfield	...	...	35,134	...	...	3,023
Tankersley	...	...	2,436	...	...	586
Wortley	...	...	4,980	...	...	184
			48,697			11,553
		Total	...			

* 2,325 new houses erected on Parson Cross Estate. Of those, 26 are in Grenoside Ward — the remainder in Ecclesfield Ward.

The Rateable Value of the district is £229,112, while the product of a penny rate is £830 13s. 1d. as at 31st December, 1948.

VITAL STATISTICS.

Population. The Registrar General has given his estimation of the population at mid-1948 as 39,470. This is an increase of 5,170 as compared with the 1947 figure. This figure of course includes the population of patients and staff in the West Riding Mental Hospital which at mid-1948 was estimated at 2,000. The net district population would thus be 37,470.

Births. There were 724 live births registered in the district during 1948. Of these 379 were males and 345 females. This number is 89 more than that for 1947. There were 16 illegitimate births, 9 males and 7 females.

Still-Births. During the period under review there were 10 still-births, 3 males and 7 females, 6 less than in 1947. There were 3 illegitimate still-births, 1 male and 2 females.

Deaths. 329 deaths, 173 males and 156 females, were attributed to this district during 1948. This is a decrease of 7 as compared with the 1947 figures.

I set out below tables of Live Birth Rates, Still-Birth Rates and Crude Death Rates, with those rates for other parts of the country. By glancing at these tables it can be seen how this district compares with the country generally.

Rates per 1,000 Civilian Population.

Year	England and Wales	126 County Boroughs and Great Towns including London	148 Smaller Towns (Resident Population 25,000 to 50,000 at 1931 Census)	London Administrative County	Wortley R. D.
LIVE BIRTHS					
1948	17.9	20.0	19.2	20.1	19.3
1947	20.5	23.3	22.2	22.7	19.7
1946	19.1	22.2	21.3	21.5	18.6
1945	16.1	19.1	19.2	15.7	18.6
1944	17.6	20.3	20.9	15.0	20.5
STILL-BIRTHS					
1948	0.42	0.52	0.43	0.39	0.26
1947	0.50	0.62	0.54	0.49	0.49
1946	0.53	0.67	0.59	0.54	0.23
1945	0.46	0.58	0.53	0.40	0.58
1944	0.50	0.64	0.61	0.42	0.61
DEATHS (CRUDE DEATH RATE)					
1948	10.8	11.6	10.7	11.6	8.5
1947	12.0	13.0	11.9	12.8	10.0
1946	11.5	12.7	11.7	12.7	10.4
1945	11.4	13.5	12.3	13.8	9.7
1944	11.6	13.7	12.4	15.7	10.7

Principal Causes of Death.

	1944	1945	1946	1947	1948
CANCER of Buccal Cavity and Oesophagus	2	3	2	3	5
Uterus	6	2	2	2	2
Stomach and/or Duodenum	12	7	9	8	9
Breast	4	6	7	9	7
Other sites	29	33	28	32	26
CIRCULATORY SYSTEM.					
Intra-cranial Vascular Lesions	45	38	44	46	43
Heart Disease	77	98	87	92	95
Other Circulatory Diseases	18	7	6	7	29
RESPIRATORY SYSTEM.					
Bronchitis	23	12	11	21	21
Pneumonia	14	8	21	7	8
Other Respiratory Diseases	9	3	6	5	2
DIGESTIVE SYSTEM.					
Ulcer of Stomach and/or Duodenum	3	7	—	1	3
Diarrhoea (under 2 years)	2	1	3	2	5
Appendicitis	—	2	1	—	2
Other Digestive Diseases	5	10	8	5	8
GENITO-URINARY SYSTEM.					
Nephritis	10	5	11	11	10
Puerperal and/or Post Abortion					
Sepsis	1	—	1	1	—
Other Maternal Causes	—	—	—	1	—
INFANTS.					
Premature Birth	6	2	12	6	4
Congenital Malformation and/or Birth Injuries and/or Infant Diseases	4	8	8	13	9
VIOLENCE.					
Suicide	3	—	—	3	3
Road Traffic Accidents	3	3	1	3	1
Other Violent Causes	9	3	12	7	8
DIABETES	1	2	—	2	2
EPIDEMIC DISEASES (other than Tuberculosis)	8	1	10	7	—

Age Distribution of Deaths.

AGE GROUP	1943	1944	1945	1946	1947	1948
Under 1 year ...	26	21	16	31	33	20
1 to 2 years ...	6	2	—	3	3	2
2 to 5 years ...	4	3	2	1	1	2
5 to 15 years ...	11	2	8	—	2	1
15 to 25 years ...	10	8	3	4	3	2
25 to 45 years ...	52	22	15	24	30	25
45 to 65 years ...	75	85	64	77	67	66
65 yrs. and over...	170	169	180	177	197	211
Totals ...	354	312	288	317	336	329

Infantile Mortality. There were 20 Infantile deaths during 1948 (13 females and 7 males), equivalent to a rate of 28 per 1,000 related Live Births.

As stated elsewhere, this is a marked improvement upon last year's figures and is the best rate we have had in Wortley Rural District since 1941. Of these deaths, Prematurity was responsible for 15 whilst the commoner infections such as Respiratory Infections and Gastro-Intestinal Infections also took severe toll.

Deaths under 1 year.

RATES PER 1,000 LIVE BIRTHS.

Year	England and Wales	126 County Boroughs and Great Towns including London	148 Smaller Towns (Resident Population 25,000 to 50,000 at 1931 Census)	London Administrative County	Wortley R. D.
1948 ...	34	39	32	31	28
1947 ...	41	47	36	37	52
1946 ...	43	45	37	41	55
1945 ...	46	54	43	53	29
1944 ...	46	52	44	61	35

**Table showing Age Distribution of
Infantile Deaths.**

CAUSE OF DEATH	Under 1 week	1 to 2 weeks	2 to 3 weeks	3 to 4 weeks	Total under 4 weeks	1 to 3 months	3 to 6 months	6 to 9 months	9 to 12 months	Total under 1 year
Prematurity	7	1	-	-	8	-	-	-	-	8
Congenital and Wasting Diseases	-	-	-	-	-	1	-	-	-	1
Pneumonia and Bronchitis	-	-	-	1	1	1	-	2	-	4
Gastro-Intestinal Diseases..	-	-	-	-	-	-	-	3	-	3
Other Diseases	1	-	-	-	1	2	-	-	1	4
Total	8	1	-	1	10	4	-	5	1	20
1947	14	1	1	1	17	8	3	5	-	33
1946	20	1	1	-	22	2	4	2	1	31
1945	7	1	-	2	10	2	2	2	-	16
1944	-	11	-	-	11	1	2	4	3	21
1943	7	2	-	-	9	2	3	5	7	26
1942	9	-	-	1	10	4	4	2	-	20

Maternal Mortality. There were no maternal deaths during 1948.

Epidemic Diseases. The following table shows the principal causes of death in the Epidemic Diseases (other than Tuberculosis) Group over the past five years.

DISEASE	1944	1945	1946	1947	1948
Diarrhoea (under 2 years) ..	..	1	3	2	5
Diphtheria	2	..	1	..	..
Whooping Cough .. ..	..	..	1	1	..
Cerebro-Spinal Meningitis ..	..	..	..	..	..
Influenza	6	..	7	2	..
Dysentery .. ..	..	..	..	..	..
Puerperal Pyrexia.. ..	1	..	1	..	..
Acute Infective Encephalitis ..	..	1	1	..	..
Syphilitic Diseases .. ..	..	..	1	1	..
Measles .. ..	..	..	..	..	..
Poliomyelitis & Polioencephalitis .. ..	..	..	..	3	..

Inquests were held on 13 occasions and in 29 cases the cause of death was certified after Post Mortem Examination without inquest.

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES.

Infectious Diseases other than Tuberculosis. During the year, a total of 1,225 cases of Infectious Disease were notified. Set out below are tables which are self-explanatory:—

DISEASE	Total Cases Notified			Cases admitted to our Isolation Hospital			Total Deaths		
	1946	1947	1948	1946	1947	1948	1946	1947	1948
	Smallpox	—	—	—	—	—	—	—	—
Scarlet Fever	104	97	82	101	91	49	—	—	—
Diphtheria	23	15	10	25	10	11	—	—	—
Puerperal Pyrexia	8	8	3	—	—	5	—	1	—
Pneumonia	26	22	25	2	—	—	—	—	—
Ophthalmia Neonatorum	1	4	1	—	—	—	—	—	—
Cerebro-Spinal Meningitis	4	1	1	1	3	4	—	—	—
Dysentery	2	9	19	2	—	—	—	—	—
Erysipelas	9	13	5	2	7	1	—	—	—
Measles.. .. .	32	442	880	8	6	6	—	—	—
Whooping Cough	55	35	193	6	3	5	—	1	—
Malaria (believed to be contracted abroad)	1	1	1	—	—	—	—	—	—
Typhoid Fever	—	—	—	—	—	—	—	—	—
Para-Typhoid Fever	11	2	1	17	1	2	—	—	—
Polio-myelitis & Polio-encephalitis	—	21	1	—	22	—	—	—	—
Food Poisoning	—	—	1	—	—	—	—	—	—
Abortus Fever	—	—	2	—	—	—	—	—	—
Cerebro Encephalitis	—	—	—	—	—	1	—	—	1
Whooping Cough & Pneumonia	—	—	—	—	—	2	—	—	—
Infective Gastro-Enteritis	—	—	—	—	—	2	—	—	—
Other Cases	—	—	—	—	—	7	—	—	—

Included in the cases admitted to Hospital are:—

Scarlet Fever .. 8 cases from Stocksbridge. Cerebro Encephalitis.. 1 case from Killamarsh.

Pneumonia.. 1 case from Stocksbridge.

Measles.. 4 cases from Stocksbridge.

Other cases.. 1 case from Hoyland Common.

1 case of Scarlet Fever admitted from Stocksbridge was a woman advanced in pregnancy, who was delivered of a child while an in-patient. This baby is included in the Scarlet Fever totals.

**Attack Rate of Commoner Infectious
Diseases.**

DISEASE	England and Wales	148 Smaller Towns	Wortley R. D.
Scarlet Fever	1·73	1·82	2·18
Diphtheria	0·08	0·09	0·26
Typhoid Fever	0·01	0·01	0·03
Para-Typhoid Fever ...	0·01	0·01	0·00
Pneumonia	0·73	0·60	0·07
Cerebro-Spinal Meningitis ...	0·03	0·02	0·03
Measles	9·34	8·84	23·48
Whooping Cough	3·42	3·31	5·12
Erysipelas	0·21	0·21	0·13

Age Distribution of Infectious Diseases.

Age Groups	Food Poisoning		Scarlet Fever		Measles		Ophthalmia Neonatorum		Whooping Cough		Poliomyelitis		Pneumonia		Diphtheria		Typhoid Fever		Dysentery		Cerebro-Spinal Meningitis		Puerperal Pyrexia		Erysipelas		Malaria		Abortus Fever		
	D	H	D	H	D	H	D	H	D	H	D	H	D	H	D	H	D	H	D	H	D	H	D	H	D	H	D	H	D	H	
Under 1 year	-	-	-	-	31	-	1	-	18	-	-	-	1	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-
1-2	-	-	3	-	104	-	-	21	36	-	-	3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
2-3	-	-	5	-	102	-	-	31	31	-	-	1	-	-	-	-	-	-	-	2	-	-	-	-	-	-	-	-	-	-	
3-4	-	-	11	-	139	-	-	30	30	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	
4-5	-	-	14	-	145	-	-	51	51	-	-	-	-	-	-	-	-	-	-	3	-	-	-	-	-	-	-	-	-	-	
5-10	-	-	38	-	346	-	-	3	3	-	-	-	-	-	-	-	-	-	1	2	-	-	-	-	-	-	-	-	-	-	
10-15	-	-	8	-	7	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
15-20	-	-	1	-	3	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
20-35	1	-	1	-	3	-	-	1	1	-	-	-	2	-	-	-	-	-	-	-	3	-	-	-	-	-	-	-	-	-	-
35-45	-	-	-	-	-	-	-	-	-	-	-	-	3	-	-	-	-	-	-	-	2	-	-	-	-	-	-	-	-	-	-
45-65	-	-	-	-	-	-	-	-	1	-	-	-	7	-	-	-	-	-	-	4	2	-	-	-	-	-	-	-	-	-	-
Over 65 years	-	-	-	-	-	-	-	-	1	-	-	-	2	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-
Totals (Sub)	1	-	82	-	880	-	1	193	193	-	1	25	25	-	10	10	1	1	14	5	3	-	5	-	1	-	2	-	-	-	
TOTALS	1	-	82	-	880	-	1	193	193	-	1	25	25	-	10	10	1	1	19	19	3	-	5	-	1	-	2	-	-	-	

D — District Cases.

H — Hospital Cases.

Residential Distribution of Infectious Diseases.

DISTRICT	Scarlet Fever	Diphtheria	Puerperal Pyrexia	Pneumonia	Ophthalmia Neonatorum	Cerebro-Spinal Meningitis	Dysentery	Erysipelas	Measles	Whooping Cough	Poliomyelitis and Polioencephalitis	Para-Typhoid Fever	Abortus Fever	Malaria (believed contracted abroad)	Food Poisoning
ECCLESFIELD															
PARISH :															
Ecclesfield ..	14	2	1	11	-	1	8	2	383	81	1	-	-	1	1
Chapelton ..	2	2	2	4	1	-	1	-	162	31	-	-	-	-	-
High Green ..	11	-	-	1	-	-	-	1	102	10	-	1	-	-	-
Thorpe Hesley ..	2	-	-	2	-	-	-	-	15	5	-	-	-	-	-
Grenoside ..	6	1	-	1	-	-	-	-	50	12	-	-	-	-	-
TANKERSLEY															
PARISH :															
Tankersley ..	6	-	-	-	-	-	-	1	12	8	-	-	-	-	-
Birdwell ..	-	1	-	-	-	-	-	-	3	1	-	-	-	-	-
Hoyland Common	1	-	-	-	-	-	-	-	1	1	-	-	-	-	-
WORTLEY PARISH :															
Wortley ..	1	-	-	1	-	-	-	-	9	8	-	-	-	-	-
BRADFIELD															
PARISH :															
Bradfield ..	5	-	-	-	-	-	-	-	7	4	-	-	-	-	-
Worrall ..	-	-	-	-	-	-	-	-	12	9	-	-	-	-	-
Oughtibridge ..	14	3	-	1	-	-	-	-	24	13	-	-	2	-	-
Dungworth ..	-	-	-	-	-	-	-	-	11	1	-	-	-	-	-
Stannington ..	8	1	-	3	-	-	3	1	49	3	-	-	-	-	-
Loxley ..	5	-	-	1	-	-	2	-	30	2	-	-	-	-	-
Wharncliffe Side & Bightholmlee	3	-	-	-	-	-	-	-	-	2	-	-	-	-	-
S.Y.M. Hospital	2	-	-	-	-	-	4	-	-	1	-	-	-	-	-
Midhopstones ..	2	-	-	-	-	-	-	-	9	1	-	-	-	-	-
Wharncliffe Emerg. Hospital	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-
Holdsworth ..	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-
TOTALS	82	10	3	25	1	1	19	5	880	193	1	1	2	1	1

Scarlet Fever. There was a reduction of 15 in the number of Scarlet Fever cases notified during 1948, as compared to 1947. After correction, the final figure attributed to the district was 81. The districts principally affected were Oughtibridge, Ecclesfield and High Green, with 14, 14 and 11 cases respectively. The remainder of the cases were scattered evenly throughout the remaining part of the district. The disease was a mild type and it would appear that the type of Scarlet Fever which is prevalent throughout the country is this mild type of infection. In many cases children suffer from Scarlet Fever and the infection is so mild that the child is rarely ill enough to call attention and the result is that many mild cases are missed, and at the same time these cases have possibly been the means of spreading infection to other susceptible persons.

The majority of cases occurring up to and including the 5th July were admitted to the Isolation Hospital at Grenoside. After that, any case requiring Hospitalisation was removed to Lodge Moor or Swallownest Infectious Diseases Hospital.

Diphtheria. During the year, 10 cases of Diphtheria were notified, 8 of which occurred before the 5th July and were admitted to the Isolation Hospital, Grenoside. Of these 8 cases, all gave negative swabs on admission to the Hospital. Irrespective of the fact that negative swabs were received, in 5 of the cases I considered that the cases were clinical Diphtheria and treated them as such. The other 3 I treated as negative cases. The 5 cases were in the higher age groups and no trace of their having been immunised was found. The age distribution of the cases was as follows:—

Ages	1 — 3 years	...	...	1 case.
„	3 — 5 years	...	...	1 case.
„	5 — 10 years	...	...	3 cases.
„	10 — 15 years	...	...	1 case.
„	15 — 25 years	...	...	1 case.
„	25 years and over	...	...	3 cases.

There were no deaths.

Immunisation. The National Health Service Act, 1946, places the responsibility for providing Diphtheria Immunisation upon the County Council as the Local Health Authority. So far as your district is concerned, the County Council, as the Welfare Authority, have always had a scheme for providing this protective treatment, and the coming into being of the National Health Service Act made no practical difference to the procedure.

There is no doubt that Diphtheria Immunisation has really cut down the incidence of the disease. In 1940, in England and Wales there were 2,480 deaths from 46,281 notified cases of Diphtheria. In 1948 there were 148 deaths from 8,034 notified cases, the latter figures being provisional at the moment.

The general public to-day are becoming "immunisation conscious". I think I am safe in saying that parents are now considering that immunisation against Diphtheria is an essential milestone in the early part of the child's life and they look forward to the time when the child can receive this treatment.

In Wortley Rural District during 1948, 244 children under the age of 5 and 101 children between the ages of 5 and 14 received a full treatment, while 544 children received a reinforcement injection of the antigen.

Puerperal Pyrexia. During the year 3 cases of Puerperal Pyrexia were notified, a reduction of 5 as compared to the 1947 figures. Of these, 2 cases occurred in the Hallamshire Maternity Home. There were no deaths.

Measles. During the year it appeared that the peak of the epidemic of Measles which is visiting the district was reached. Measles seems to have been persistent throughout the country for nearly 2 years. Obviously successive crops of susceptible cases have appeared from time to time in the various parts of the district, who have fallen victim to the infection. There were altogether 880 cases notified during the year, of which 2 were admitted to the Isolation Hospital, Grenoside, each having developed a Broncho-Pneumonia as a complication of Measles. One case notified as Scarlet Fever during the year proved to be Measles, making a grand total of cases attributed to the Wortley Rural District as 881. This figure indicates a very high attack rate compared with that for England and Wales of 9.34.

The age group chiefly affected was the 5 - 10 group with a total of 346; the age group 4 - 5 had a total of 145, and the age group 3 - 4 had a total of 139. From the age of 10, there were precisely 13 cases notified. The parts of the district mainly concerned in this 1948 outbreak of Measles were Ecclesfield, including the Parson Cross Estate, where 712 cases occurred. All the other cases were distributed evenly throughout the remainder of the district. The cases occurred principally in the last quarter of the year. There were in fact 742 cases notified in that quarter.

I think the picture leads one to gain the opinion that Measles is still being treated as a normal mile-stone in the life of every child, a mile-stone which they must pass before they can emerge into youth. Cases of Measles are not being considered serious enough to be isolated and cared for as they ought to be. If a case of Scarlet Fever occurs the neighbourhood is so apprehensive that the people insist on thorough isolation and disinfection because of a dread of the disease. Yet it is questionable whether Scarlet Fever is any more dangerous a disease than Measles. It is obvious from the figures from your district that the moving about of the population and the coming together of large aggregates of the population in a new area has been the means of producing this moderately severe outbreak of Measles.

There were no deaths reported during the year from Measles and I have had no reports of any serious morbidity.

Whooping Cough. During the year 193 cases of Whooping Cough were notified. Towards the end of 1947 Whooping Cough appeared to be becoming more prevalent and the numbers increased in 1948. In the first quarter of 1948 there were 85 cases; in the second quarter 60 cases; in the third quarter 37 cases and the last quarter 11 cases. The incidence of Whooping Cough pursues a course in the opposite direction to Measles. This is the usual occurrence.

The remarks I have made about Measles apply more or less in the same way to Whooping Cough, although in Whooping Cough the spasms of coughing do alarm parents and force them to take notice of the patient. However, I do not think they take notice from the point of view that the child is infectious and may be spreading the infection to other susceptible children. The parents are alarmed about the picture presented by the child in a spasm of coughing which can certainly be very alarming, but do the parents understand that this child is infectious and is a danger to others from that point of view?

The parts of the district chiefly affected during the year were Ecclesfield, including the Parson Cross Estate, and Chapeltown, who between them had approximately 112 cases. High Green, Grenoside and Oughtibridge were the only other districts to have 10 cases or more.

Typhoid Fever. 1 case of Typhoid Fever was notified during the year. The case was that of a boy of 12, admitted from High Green. On admission to Hospital the case was confirmed by blood examination. Very fortunately, I was able to get the source of the infection immediately as there was living in the household a carrier whom I have had to deal with on a previous occasion. I had the carrier removed to the Isolation Hospital and no further case occurred. The child made an uninterrupted recovery.

Cerebro-Spinal Meningitis. During the year 1 case of Cerebro-Spinal Meningitis was notified. Although this case was notified in the first few days of 1948, the case actually occurred in the last few days of December when the child was admitted to Grenoside Isolation Hospital, and after Laboratory findings was proved to be suffering from Acute Influenzal Meningitis. The child died 26 hours after admission. The death having taken place in 1947 was attributed to the 1947 death figures for Hospital cases.

Tuberculosis. There were 60 new cases of Tuberculosis notified during the year as against 59 new cases in 1947. Of the 60 new cases, 5 were notified from the larger Hospitals and Institutions in the district, leaving a nett total of 55 cases notified amongst residents in the Wortley Rural District. Of the 60 cases, 49 were Pulmonary and 11 were Non-Pulmonary.

The tables below show the age, sex and residential distribution of the cases notified, other than Hospital cases and non-civilians.

Age Groups	New Cases				Deaths				
	Respiratory		Non - Resp.		Respiratory		Non - Resp.		
	M.	F.	M.	F.	M.	F.	M.	F.	
0 — 1 year	..	..	..	..	..	..	..	..
1 — 5 years	..	3	1	1	..	..	..	..
5 — 15 years	4	4	..	6	..	..	..	..
15 — 25 years	4	6	..	1	..	..	..	..
25 — 35 years	3	8	..	..	..	..	..	..
35 — 45 years	2	1	..	..	..	2	..	..
45 — 65 years	5	3	1	..	4	2	..	..
65 years and over	..	1	..	1	..	1	..	..
TOTALS	..	18	26	2	9	4	5

Area of Distribution of Tuberculosis Cases.

	Respiratory.		Non-Respiratory.	
	M.	F.	M.	F.
PARISH OF ECCLESFIELD :				
Ecclesfield	13	20	1	4
High Green	—	2	—	—
Chapelton	1	1	—	—
Grenoside	—	—	1	2
PARISH OF WORTLEY ...	—	—	—	1
PARISH OF BRADFIELD :				
Loxley	2	—	—	—
Midhapestones	—	—	—	—
High Bradfield	—	—	—	—
Oughtibridge	1	2	—	1
Wharnccliffe Side	—	—	—	—
Stannington	1	1	—	1
PARISH OF TANKERSLEY...	—	—	—	—
West Riding Mental Hospital ...	2	3	—	—
Totals	20	29	2	9

At first glance of the table, there appears to be an increased incidence of Tuberculosis in Ecclesfield. The figures do not indicate recently diagnosed cases exclusively, but include transferred cases from the City of Sheffield to the Wortley Rural District as a result of the occupation of the new houses on the Parson Cross Estate by Sheffield residents.

**Notifications of Tuberculosis received from Larger Hospitals and Institutions in this District (including Non-Civilians)—
Usual Place of Residence not in Wortley Rural District.**

	Respiratory.		Non-Respiratory.	
	M.	F.	M.	F.
0 — 25 years	—	—	—	—
25 — 35 years	2	—	—	—
35 — 45 years	—	2	—	—
45 — 65 years	—	1	—	—
Over 65 years	—	—	—	—
	2	3	—	—

During the year 15 cases were admitted to Sanatoria for treatment.

No action was taken under the Public Health (Prevention of Tuberculosis) Regulations, 1925 (relating to persons suffering from Pulmonary Tuberculosis employed in the Milk Trade), or under Section 172 of the Public Health Act, 1936 (relating to the compulsory removal to Hospital of persons suffering from Tuberculosis).

Infestations. During the year 6 cases of Scabies were brought to my notice. In each case arrangements were made for all members of the household to receive treatment, and all clothing was removed for steam disinfection. The treatment was carried out in Sheffield, and the cost was met by the West Riding County Council.

**GENERAL PROVISION OF HEALTH SERVICES.
(Hospitals, Clinics, etc.).**

Isolation Hospitals. There are two Isolation Hospitals provided by the District Council:

- (1) Grenoside.
- (2) Hallwood.

The Isolation Hospital at Grenoside is the Hospital used for the admission of the usual type of Infectious Disease, and it is capable of dealing with 26 cases on the basis of 144 sq. ft. per bed and 72 sq. ft. per cot. At Hallwood, which is practically exclusively used for Smallpox cases, there is accommodation for 14 adults and 5 children.

Staff.

Medical Superintendent ... Medical Officer of Health.
Matron ... Miss V. W. Farquaharson, S.R.N., S.C.M., R.F.N.
(Appointed 1/2/48).

There are Kitchen and Domestic Staff indoor and outdoor—2 Gardener-Porters and an assistant Gardener employed.

During the year under review, a total of 95 cases were admitted to the Hospital, as follows:—

Scarlet Fever	...	...	...	...	49
Diphtheria	...	...	...	...	11
Pneumonia	...	...	...	...	5
Cerebro-Spinal Meningitis	...	...	...	...	4
Erysipelas	...	...	...	...	1
Measles	...	...	...	...	6
Whooping Cough	...	...	...	...	5
Typhoid Fever	...	...	...	...	2
Cerebro Encephalitis	...	...	...	...	1
Whooping Cough c Pneumonia	...	...	...	...	2
Infective Gastro-Enteritis	...	...	...	...	2
Other Cases	...	...	...	...	7

In a previous table I have set out in tabular form the figures of admissions to the Isolation Hospital including those cases admitted from other districts. These cases were admitted as cases of the diseases mentioned, but quite a number proved, after admission, to be negative to the disease originally suspected and that fact explains possibly the discrepancy in the numbers of cases admitted and the number of notifications.

Laboratory Facilities. All the necessary facilities are available at the Wakefield Laboratory of the Medical Research Council. Bacteriological and Pathological examinations are carried out there upon request, and the Laboratory is always available to give any advice and assistance in any epidemiological investigation carried out in the district.

Hospital Services. On the 5th July, when the National Health Service Act, 1946, came into being, your Hospitals were taken over by the Regional Hospital Board. For the first month the Hospital carried on as usual admitting the cases, and I acting as the Medical Superintendent. At the end of July, however, the No. 3 Hospital Management Committee, in whose group your Hospital was included, decided that certain members of the staff could be of more value in one of the other Hospitals, and in view of the general shortage of staff all round, decided to cease further admissions to the Isolation Hospital. The Hospital still remained in being, and during this period and up to the end of the year, the Wortley Rural District Council acted as agents for the Regional Hospital Board in the day to day administration of the Hospital. From August 1948 onwards, all cases of Infectious Disease which required Hospitalisation were removed to Lodge Moor or Swallownest, or whichever Hospital the Hospital Management Committee found suitable from accommodation point of view.

Ambulance Facilities. Until the 5th July the Council possessed two Motor Ambulances for use at the Infectious Diseases Hospital. Generally speaking, these vehicles were capable of dealing

with all the demands for Infectious Diseases cases. Arrangements were, of course, in being for the Sheffield Corporation Ambulances at Lodge Moor to deal with any case had there been a breakdown in our own Service. Ambulance facilities for cases of sickness other than Infectious Diseases were provided by the Sheffield Central Ambulance Services. Contributors to the 1d. in the £ Scheme of the Sheffield Joint Hospitals were provided with the services, and all necessitous poor and old age pensioners were similarly provided. The District Council made an annual contribution to the service and so guaranteed that Ambulances were available to non-contributors to the 1d. in the £ Scheme. On and after the 5th July, of course, the Ambulance Service came under the Local Health Authority's administration as an essential service in Part III of the National Health Service Act, 1946. At the outset I must point out that there is no disagreement with the general opinion often expressed that the service was not so good after the 5th July as it was previous to the 5th July. It must be borne in mind that the Wortley Rural District was exceptionally well served, but at the same time there were other parts of the Local Health Authority's area that were very poorly served. The coming into being of the Local Health Authority Ambulance Service Scheme meant that those who were well off had to suffer a little so that those who were not so well off received a little better service. At the same time, I do not think that the service provided in the Wortley Rural District suffered, and few, if any, complaints were received about the inability of the Ambulance Service to deal with the task. The demands made on this service after the 5th July were overwhelming. A free Ambulance Service was provided, and the demands for this free service were naturally many. The County Ambulance Service faced a formidable task with a depleted fleet of vehicles and staff to man the vehicles. However, towards the end of the year, a general easing of the position was noticed. New vehicles were coming along and the personnel were being established.

The Wortley Rural District is served by Ambulances stationed at the Hoyland Ambulance Depot, and reciprocal arrangements have been made whereby the Ambulances of the Sheffield County Borough will answer any emergency calls received, without question. For Infectious Diseases the Ambulance is provided either from the Ambulance Service or direct from the Hospital to which the case has to be admitted. To sum up, my opinion is that here we have a new service that has done a good job of work to overcome extreme difficulties. It is now emerging at the end of the year into what we hope will be a satisfactory and efficient organisation.

Hallamshire Maternity Home. The West Riding County Council has a Maternity Home at Chapelton which is capable of dealing with 22 lying-in patients. On and after the 5th July this Hospital was taken over by the Regional Hospital Board, but until the end of the year the Divisional Medical Officer was still being asked to give his opinion as to the degree of priority of cases applying for admission.

Tuberculosis. The greater part of the district is served by the Dispensary at Wadsley Bridge. For those patients in that part of the parish of Bradfield nearest to Stocksbridge, the Dispensary there is available, while the Barnsley Dispensary is available for patients from the Tankersley District. In Rotherham there is a Tuberculosis Centre to which patients may go, and indeed, many find it more convenient to travel to Rotherham than to the others at Wadsley Bridge and Barnsley. On and after the 5th July, of course, the Tuberculosis Service became a Specialist Service provided by the Regional Hospital Board. Until the end of the year no apparent change was noticed; the Tuberculosis Medical Officer working in close co-operation with the Medical Officer of Health, as he had always done in the past. The Dispensaries remained as before, and the patients kept on attending the Dispensary to which they were in the habit of attending before the 5th July. There is no doubt, of course, that in the immediate future there will be a change, possibly, in the service, in that some Dispensaries will be considered redundant, while others will be improved, with a tendency to having a complete Dispensary available at suitable points in the administrative area of the Regional Hospital Board.

Venereal Diseases Clinics. There are five Special Treatment Centres for Venereal Disease, particulars of which are given below:—

Address.	Days and Hours of Attendance.	
	Men.	Women and Children.
Barnsley (Queen's Road)	Mon., 6—8 p.m. Thurs., 6—8-30 p.m.	Mon., 2-30—4-30 p.m. Thurs., 2-30—6 p.m.
Rotherham (No. 12, Frederick Street)	Tues., 9-30 a.m.— 12-30 p.m., and 5-30—8 p.m. Fri., 9-30 a.m.— 12-30 p.m.	Tues., 2—5 p.m. Thurs., 2—5 p.m. Fri., 5-30—8 p.m. Sat., 9-30 a.m.— 12-30 p.m.
Sheffield (Jessop Hospital for Women)	— — —	Tues., 4—6 p.m. Thurs., 4—6 p.m. Sat., 11 a.m.— 12-30 p.m.
Royal Hospital ...	Tues., 6 p.m. Thurs., 6 p.m.	Thurs., 11 a.m. Fri., 6 p.m.
Royal Infirmary	Tues., 5—7 p.m. Wed., 5—8 p.m. Fri., 6—8 p.m.	Tues., 2—4 p.m. — —

Mortuary. The public Mortuary and post mortem room at Grenoside, belonging to the District Council, is available for the whole area.

Disinfection. Until the 5th July, when the Hospital and the Hospital staff were taken over by the Regional Hospital Board, cases of Infectious Disease in the Wortley Rural District who required Hospitalisation were admitted to the Isolation Hospital at Grenoside. When the Ambulance called for the case, the Ambulance Driver/Attendant, after loading the Ambulance, went back into the home and disinfected the premises. If clothing had to be removed for steam disinfection, the Ambulance returned later and removed the clothing. As a general rule, disinfection was carried out very soon after the case was brought to the notice of the Health Department, and on many occasions before the General Practitioner's official notification was received. The Health Department acted on the request for admission to the Isolation Hospital. Since the 5th July, cases of Infectious Disease occurring in the Wortley Rural District are removed to Hospital and the Health Department at Grenoside are thus not informed that there is a case until the General Practitioner's notification is received. In a few instances there has been some delay in having disinfection carried out at the patient's home, and the delay has been due solely to the fact that the Medical Officer of Health has had no information in his Department that a case of Infectious Disease existed. I must point out that the responsibility for notifying the Medical Officer of Health of the existence of a case suffering from a notifiable disease rests first of all on "the head of the family or the nearest relative present and in attendance on the patient, or every person in charge of or in attendance on the patient, or the occupier of the building." At the same time it is the statutory duty of the General Practitioner to notify the Medical Officer of Health of the existence of a case of a notifiable disease. The one does not excuse the other, and both the head of the house and the General Practitioner must accept the responsibility for bringing to the notice of the Medical Officer of Health any case of notifiable disease existing in the home.

Towards the end of the year we were beginning to get a general improvement in this Disinfecting service since, on appeal to them direct, the Hospitals have co-operated and notified us when any case was admitted. The question arose as to how, and by whom, the disinfecting of the premises was to be carried out. It had always been done by the Hospital Ambulance Driver/Attendant. Such an extra duty to be imposed upon Sanitary Inspectors was unthinkable in view of their already extensive duties. A suggestion was made that a person should be appointed to the staff wholly responsible for the disinfection of premises when need be, and his duties would include Rodent Control and any other suitable duties that might from time to time be required in the district. You agreed to this scheme, and such a person was appointed in the early part of October. Until the end of the year he was fully employed on these duties with satisfactory results. At the same time the old Infectious Diseases Ambulance, which was not taken over by the Ambulance Service, was retained by the Health Department, and this vehicle is being used to transport disinfecting equipment, rodent control equipment, etc.

NATIONAL ASSISTANCE ACT, 1948.

Action under Section 47.

The provisions of Section 47 of the National Assistance Act, 1948, secure the necessary care and attention for persons who are:—

- (a) suffering from grave chronic disease, or being aged, infirm or physically incapacitated, are living in insanitary conditions and
- (b) are unable to devote to themselves, and are not receiving from other persons, proper care and attention.

The procedure in short is that the Medical Officer of Health certifies in writing to his Authority that this care and attention is necessary. The Local Authority, if satisfied by the report of the Medical Officer of Health, makes an application to Court for the compulsory removal of these persons to, and their detention in, an Institution which has already been approved as a suitable Institution for the reception of the patient or patients. This is a very powerful weapon in the hands of a Local Authority who can, on the written certificate from a Medical Officer of Health, incarcerate a person or persons for a minimum period of three months. It is a serious matter to take away the liberty of any person and Magistrates naturally demand the fullest information before they make the necessary order.

So far as your district was concerned, we had one such application during 1948, involving two persons, an aged man and wife, living in the Tankersley area. The Magistrate granted the necessary order and the cases were removed to the Institution at Grenoside. Shortly after admission to that Institution, the wife was certified under the Lunacy Act and was transferred to the Middlewood Mental Hospital. It was unfortunate that the man did not survive more than a week or two.

One feels in doubt as to whether or not one acted for the best in this case. These two people were living under conditions where they were not receiving care and attention, and were certainly not being properly looked after. Yet there was nothing in their condition which would have led one to think that their respective deaths were imminent. They were removed for this care and attention, and they did not survive very long in the Institution. Was the psychological effect of this sudden uprooting from their homes too much for them? It might have been. At the same time I do feel that my action in certifying to this Council that they required care and attention was justified, and I still consider that in this case I, as your Medical Officer of Health, did the right thing in making the necessary recommendation.

SANITARY CIRCUMSTANCES.

Rainfall.

The rainfall for the year, recorded at the Sewage Works, Ecclesfield, was 26·02 inches.

The driest month was March (0·62 inches) and the wettest month was January (5·44 inches).

The total rainfall figure is slightly higher than that for 1947 but is well below the average for the past 22 years (29·13 inches).

Water Supply.

There were 11,553 houses in the district at the year end. Of this number, 11,122 obtain a main water supply from one or other of the following water undertakings:—

Sheffield Corporation Waterworks.

Wortley Rural District Council Hallbroom and Bradfield Supplies.

Wharncliffe Estates Company Waterworks.

Barnsley Corporation Waterworks.

Whitley Private Supply.

The numbers of houses on a main supply in each parish are as follows :

Parish	Total Houses	Main Supply
Ecclesfield	7,756	7,670
Tankersley	586	584
Wortley	184	160
Bradfield	3,027	2,708
Totals	11,553	11,122

The Sheffield Corporation Supply serves the Ecclesfield Parish, Oughtibridge, Wharncliffe Side, Bightholmlee, Wadsley, Loxley (part), Upper Midhope, Low Bradfield in the Bradfield Parish and part of the Tankersley Parish. The approximate number of houses served is 9,102.

The supply is from impounding reservoirs, is soft and has acid characteristics. Suitable treatment, including chlorination, is applied before the water enters the distribution mains. 2 samples were taken during the year for bacteriological examination. Both were satisfactory.

This Council's own undertaking at Hallbroom serves Stannington, Dungworth, Worrall and part of Loxley. The supply comprises water from moorland springs supplemented as required by borehole water. The total number of houses served is 1,303.

The characteristics of this supply fluctuate according to the respective quantities of spring and borehole water used. The spring water is soft and acid in reaction whilst the borehole water is fairly hard, all the hardness being of a temporary nature. Regular bacteriological samples have been taken throughout the year and all 16 samples taken were satisfactory.

The Council's High Bradfield Supply serves 18 premises in High Bradfield. The water is gathered from a protected area and stored in an underground tank. Four samples were taken during the year, two of which were unsatisfactory.

The Wharnccliffe Estate Supply is from an impounding reservoir at Wortley. The water is soft and has acid characteristics which are suitably neutralised at the filter house. The undertaking supplies 470 dwellings in the Wortley and Tankersley Parishes. 5 samples were taken during the year for bacteriological analysis. The 3 early samples were unsatisfactory, but following the re-introduction of chlorination the remaining samples were satisfactory.

The Dearne Valley Supply is very hard borehole water, and supplies 98 houses in the Hoyland Common and Birdwell parts of the Tankersley Parish. One bacteriological sample was taken during the year and was satisfactory.

The Barnsley Corporation Supply is from an impounding reservoir at Upper Midhope. 75 houses at Midhopestones, Wortley and Tankersley derive their supply from the source. One sample was taken from this supply and was satisfactory.

The Whitley Private Supply is impounded spring water and serves 30 dwellings in Grenoside. Two of the three samples taken during the year were fairly satisfactory, the other being unsatisfactory. Work has since been carried out to improve the purity and sufficiency of the supply.

With the exception of 6 houses, all dwellings on a main supply have water laid into the house.

Apart from extension of mains to meet new development, 12 dwellings, all at Grenoside, have been connected to a main supply for the first time. A further four houses in the same locality will be connected when delivery of the necessary asbestos pipes is made.

The remaining 431 isolated farms and dwellings are served by wells and springs. Four samples for both chemical and bacteriological examination were taken from four different private supplies. All four were found to be bacteriologically pure but one chemical analysis showed the presence of traces of lead and appropriate action was taken in this case.

The largest groups of houses in the district without a main supply do not exceed 11 dwellings and long main extensions are necessary to meet their requirements. Schemes for the provision of main supplies at Hollowmeadows and Bightholmlee are under consideration.

The total number of houses on a piped water supply, including private piped supplies, is equivalent to over 99% of the total houses in the district. The water supply position throughout the district can therefore be considered to be very satisfactory.

SEWERAGE AND SEWAGE DISPOSAL.

Of the 11,553 houses in the district, 10,295, equivalent to 89% of the total, are connected to public or private sewers.

The sewage from the remaining 1,258 houses is disposed of by land drainage, septic tanks and filters and cesspools.

The largest groups of houses not connected to sewers are at Bradfield (50 houses), Dungworth (45 houses) and Howbrook (25 houses). There are no schemes in preparation for the sewerage of these areas.

Sewage from Stannington, Oughtibridge and Worrall discharges into the Sheffield Corporation sewerage system. Sewage from the Thorpe Hesley part of the district is dealt with by Rotherham Corporation.

This Council's works at Ecclesfield, Tankersley, Wharncliffe Side and Whitley, deal with the remaining sewered areas in the district.

The works at Ecclesfield which deal with the sewage from Chapelton, High Green, Grenoside and Ecclesfield are overworked and negotiations are well advanced for the laying of a trunk sewer into the Sheffield system. When this sewer is completed the Ecclesfield works will become redundant.

PRIVY CONVERSIONS.

During the year, 50 privies, 4 waste water closets and 1 pail closet were replaced by 68 water closets ; 2 additional W.C's were provided where no conversion was involved. Details of this work are set out hereunder :—

Locality	Conveniences Converted			No. of W.C's to replace	Additional W.C's	Amount of Contribution £ s. d.
	Privies	W.W.C's	Pails			
Chapelton ..	12	..	..	15	..	226 12 10
High Green ..	..	..	..	..	2	—
Grenoside ..	18	4	..	28	..	351 18 0
Thorpe Hesley	15	..	..	17	..	289 2 0
Stannington ..	5	..	1	8	..	116 14 0
Totals ..	50	4	1	68	2	£984 6 10

The 35 ashpits used in connection with the 50 privies referred to above were replaced by 70 ashbins. The privy conversion programme is making good progress. The outstanding conversions present complicated problems which tend to increase the cost of the work but it is expected that all possible conversions will be completed by the end of 1950.

The following table gives details in respect of the number of houses, types of sanitary conveniences and refuse receptacles in use in the district at the end of 1948:—

Locality	Houses	Water Closets	Privies	Pail Closets	Ash Pits	Ash Bins
Ecclesfield	3754	3492	58	..	98	3558
Chapelton	2118	1850	51	3	61	2000
High Green	900	786	22	..	18	867
Grenoside	829	705	94	1	109	672
Thorpe Hesley	159	97	24	..	20	111
TOTAL ECCLESFIELD PARISH	7760	6930	249	4	306	7208
Wadsley	44	32	1	..	3	43
Worrall	296	236	32	..	37	230
Oughtibridge	819	664	49	..	54	734
Wharnccliffe Side } Brightholmlee }	253	211	36	1	39	212
Loxley	354	243	86	..	92	225
Stannington } Dungworth }	947	652	175	2	164	692
Storrs }						
Midhope	43	5	22	14	26	3
Hollowmeadows	45	25	13	4	16	11
Bradfield	107	10	66	4	59	10
Bradfield (not scavenged)	115	23	68	29	82	..
TOTAL BRADFIELD PARISH	3023	2101	548	54	572	2160
TANKERSLEY PARISH ..	586	539	66	6	65	505
WORTLEY PARISH	184	107	100	1	88	70
GRAND TOTALS.. ..	11553	9677	963	65	1031	9943

REFUSE COLLECTION AND DISPOSAL.

With the exception of 115 outlying farms and cottages, the whole of the district is publicly scavenged by direct labour.

The total number of premises scavenged at the year end was 11,438, this figure being an increase of 1,526 over the total at the end of 1947.

The rapid extension of the Parson Cross Estate necessitated the formation of a new scavenging team towards the end of the year. The total houses on this estate now number 2,325.

The whole of the service, including transport, is now under the direct control of the Council.

No new vehicles were delivered during the year but it is expected that the Dennis 8 cu. yd. lorry ordered in October of last year will be made available early in 1949.

Details and dispositions of the vehicles operating at the year end were as follows:—

Make	Capacity	Year of Manufacture	District Served
Fordson ...	6 cu. yds.	1932	Parson Cross (major part).
Fordson ...	7 cu. yds.	1937	Grenoside and Parson Cross (minor part).
Fordson ...	7 cu. yds.	1937	High Green, Tankersley and Wortley.
Dennis ...	10 cu. yds.	1943	Westnall Ward, Bradfield, Loxley (part) & Midhope.
S. & D. Freighter...	8·9 cu. yds.	1947	Chapelton.
S. & D. Freighter...	8·9 cu. yds.	1947	Ecclesfield & Thorpe Hesley.
S. & D. Freighter...	8·9 cu. yds.	1947	Stannington and Loxley (part).

It is unfortunate that the old 1932 Fordson has had to be brought back into full-time service as it is in very poor condition. Delivery of the new Dennis will relieve this difficulty for the time being. Replacement of the remaining two Fordsons will also be necessary in the near future.

Owing to complaints from the police it was necessary to carry out alterations to the existing Dennis vehicle. Objections were raised to the carrying of too many loaders in the driving cab and part of the body was therefore partitioned off to overcome this difficulty. All new vehicles are being ordered with special cabs to accommodate loaders so as not to interfere with the driver.

Staff employed at the year end consisted of 7 drivers, 28 loaders, 1 full-time paper baler and 1 part-time paper baler and tip controller. The additional staff was necessary to meet the needs of new housing development.

Protective clothing in the form of overcoat, overalls, gloves and gum boots is supplied free of charge. The first two items are distributed as a personal issue whilst the gloves and gum boots are supplied as team issue. Protective clothing is replaced when no longer serviceable and after a reasonable period of wear.

All refuse collected was disposed of by tipping on sites at Cowley Hill, Westwood, Tankersley, Wortley and Worrall. The Council own three sites at Worrall (2) and Westwood (1), the remainder being leased for the purpose.

The tip at Cowley Hill is unlikely to last much longer but permission has now been obtained to tip on the site of the Ecclesfield Sewage Works. Approval is also being sought for tipping in the new recreation ground at Potter Hill in order to improve the levels.

There are no convenient facilities to weigh all loads of refuse collected and costs on a tonnage basis are not therefore reliable.

Test weighings were made during the year and it is estimated from these that the total tonnage collected and disposed of was 14,000 tons.

The total cost of collection and disposal was £12,432 3s. 0d. On the basis of an estimated population of 39,420 and the number of premises dealt with as 11,438, the cost figures for the service are as follows:—

Cost per 1,000 population	...	...	£315 7s. 5d.
Cost per head	...	...	6s. 3·7d.
Cost per 1,000 houses	...	...	£1,086 18s. 0d.
Cost per house	...	...	21s. 9d.
Cost per ton	...	...	17s. 9d.
Yield per 1,000 population per day	...	...	19·46 cwts.

The weather during the winter months was again mild and caused very little dislocation of the service. Some complaints were received from Ecclesfield and Parson Cross during the period immediately preceding the introduction of a new team in that locality, otherwise the service appears to have given general satisfaction.

ELIMINATION OF ASHPITS.

The drive to eliminate all ashpits where the water carriage system is in operation was again continued during the year.

293 notices were served on owners or occupiers for the renewal of defective dustbins or replacement of ashpits by bins. 667 new bins were provided during the year, this figure including provision on Council owned properties.

SALVAGE OF WASTE.

The total weight of salvage and the income derived therefrom again showed an increase in 1948.

A total weight of 173 tons 4 cwts. 0½ qrs. was collected and disposed of by the Council and 169 tons of waste paper was salvaged and disposed of by private organisations, making a grand total of 342 tons 5 cwts. 2 qrs. for the district.

Waste paper was again the principal commodity salvaged. The following table gives details of 1948 collections compared with those for 1947:—

Commodity	Salvage Statistics, 1948			Salvage Statistics, 1947								
	Weight T. C. Q.			Value £ s. d.			Weight T. C. Q.			Value £ s. d.		
Paper (Council Coll.)	152	8	0	983	17	4½	112	10	1	722	8	1½
Paper (Private Coll.) <i>a</i>	1	5	1	3	5	5¼	—	—	—	—	—	—
" " " <i>b</i>	167	16	0½	—	—	—	132	0	0	—	—	—
Scrap (Ferrous) ..	6	18	2	19	8	9	1	18	0	5	4	6
Scrap (Non-Ferrous) ..	1	7	0	70	3	5	—	—	—	—	—	—
Bones	1	7	0	7	15	2¾	1	2	2	6	0	5
Rags	5	2	2½	88	0	8½	6	5	1¾	99	18	0
Bottles, Jars, Cullett	6	1	0	45	9	7	6	2	2½	89	5	2
Twine	—	—	—	—	—	—	3	3½	—	19	0	¾
TOTALS	342	5	2	£1218	0	6¼	260	2	2¾	£923	15	3¼

The total weights and values of salvaged commodities disposed of during the whole of the campaign are as follows:—

INCOME					EXPENDITURE					
Commodity	Quantity Sold			Amount Received		Source	£ s. d.			
	T.	C.	Q.	£	s.		d.	£	s.	d.
Paper (Council Coll.)	1246	18	1½	7144	12	5¾	Wages ..	3397	4	3
Paper (Private Coll.) <i>a</i>	15	7	3	3	5	5½	Materials..	289	9	2
„ „ „ <i>b</i>	884	9	0½	—	—	—	Machinery	37	10	1
Scrap (Ferrous) ..	165	7	0	399	18	6¾	Publicity ..	104	10	6
Scrap (Non-Ferrous)..	4	19	2½	180	9	5	Transport ..	1	9	6
Tins (Loose) ..	106	5	1	—	—	—	Rental & Rates	38	10	1
„ (Baled) ..	—	—	—	—	—	—	Total ..	3868	13	7
Rags	72	7	1¾	868	18	8½	Balance ..	5267	11	11½
Bones	60	11	1½	261	4	0¾				
Bottles, Jars & Cullett	27	18	2½	207	5	4½				
Rubber	9	13	1	24	3	2				
Twine	—	8	2½	2	2	9¾				
Board of Trade Grant	—	—	—	44	5	6				
GRAND TOTALS ..	2954	6	1½	£9136	5	6½		£9136	5	6½

Summaries of Salvage Returns made by local authorities in Yorkshire are not available for the year ended 31st October, 1948, and the comparison of this Council's effort with that of other Yorkshire authorities cannot therefore be made. This Council's effort year by year over the period of the whole campaign is illustrated by the following figures:—

Value of Salvage in £'s per 1,000 Population								
1940	1941	1942	1943	1944	1945	1946	1947	1948
17·3	29·9	47·7	46·4	38·5	28·8	20·3	28·9	31·2
Average over whole period ...						32·1		

The Council entered the National Waste Paper Contest promoted by the Waste Paper Recovery Association. Judging was based on the percentage increase of waste paper collections during the three months March, April, May, 1948, over the corresponding three months of the previous year. The tabulated results so far as this Council was concerned are as follows:—

Month	Collection in 1947			Collection in 1948			Increase in Weight			Increase
	T.	C.	Q.	T.	C.	Q.	T.	C.	Q.	Comparative Percentage
March	1	18	2	13	10	0	11	11	2	601%
April	9	1	1	20	1	1	11	0	0	121%
May	9	14	2	22	15	3	13	1	1	134%
Totals	20	14	1	56	7	0	35	12	3	172%

The Council did not figure in the list of prizewinners but the effort was nevertheless praiseworthy and the large increase in paper collected adequately compensated for failure to obtain a prize.

The value of the 56 tons 7 cwts. of paper collected during the period was £386 8s. 11d. compared with the value of £127 0s. 4d. for the 20 tons 14 cwts. collected during the same period last year.

It was confidently expected that with the increase in the quantity of waste paper available for salvage, new records would be made in collections during 1949, but as this Report goes to print we find much to our surprise that the market for mixed waste paper is suddenly saturated and the future of the campaign so far as the small authorities are concerned is well and truly in the melting pot.

HOUSING.

The total number of houses in the district at the year end was 11,553. Of this total, 1,544 were new dwellings completed and occupied during the year. A further 2 dwellings were brought into use by conversion making a total addition of 1,546. The number of houses demolished or otherwise put out of use was 20, leaving a nett total of 1,526 more dwellings in the district than at the end of 1947.

Private enterprise was responsible for the erection of 5 traditional houses located at Chapeltown (4) and Wharncliffe Side (1).

Sheffield Corporation completed 1,347 houses on the part of the Parson Cross Estate within this district, making the total on this site 2,325. Of this total, 2,299 are within the Ecclesfield Ward and 26 in the Grenoside Ward.

This Council completed 192 dwellings during the year. The following table gives details of the distribution of these houses:—

District	Type of Dwellings		Converted Hutments	Total
	Permanent Airey and Traditional	Bungalow Permanent Aluminium		
Ecclesfield ...	6	...	...	6
Chapelton ...	66	...	...	66
High Green ...	...	18	...	18
Grenoside ...	26	...	...	26
Worrall ...	...	...	2	2
Wharnccliffe Side	16	...	...	16
Loxley ...	32	...	...	32
Stannington ...	12	...	...	12
Tankersley ...	14	...	...	14
Totals ...	172	18	2	192

Since 1920, the Council have been responsible for the erection or acquisition of 1,791 dwellings made up as follows:—

1,529 Permanent Estate Houses.

80 Prefabricated Temporary Bungalows.

18 Prefabricated Permanent Bungalows.

126 Adapted Bungalows at Bracken Hill.

2 Adapted Hutments at Worrall.

1 House at Ecclesfield acquired under the Housing Acts.

1 Adapted Dwelling at Salt Box Lane.

34 Hutments at Ecclesfield, Chapelton and High Green, which are now either demolished or disused as dwellings.

The Council also control 5 other houses attached to sewage works and parks in addition to several small cottages let under licence or forming part of compulsory purchase areas.

During the period 1920-48, 2,204 houses have been built by private enterprise and the respective localisation of Council, Sheffield Corporation and private houses built during the period is as follows:—

Locality	By Council		By Sheffield Corporation	By Private Enterprise	Total
	Per- manent	Pre- fabricated (Temp.)			
ECCLESFIELD PARISH.					
Ecclesfield ..	*310	20	2,299	413	3,042
Chapelton ..	*284	150	..	} 420	1,195
High Green ..	*341	..	..
Grenoside ..	94	..	26	333	453
Thorpe Hesley ..	..	..	..	6	6
BRADFIELD PARISH.					
Oughtibridge ..	154	..	..	160	314
Worrall ..	18	2	..	163	183
Stannington ..	110	20	..	385	515
Loxley ..	86	10	..	57	153
Dungworth ..	8	..	..	4	12
Middlewood ..	..	..	..	74	74
Wadsley ..	..	..	..	5	5
Wharnclyffe Side ..	16	..	..	76	92
Other Parts of Parish ..	..	..	..	38	38
TANKERSLEY PARISH					
	126	6	..	59	191
WORTLEY PARISH ..					
	..	..	..	11	11
TOTALS ..	1,547	208	2,325	2,204	6,284

* Excludes disused Hutments at Ecclesfield, Chapelton and High Green.

Licensed Dwellings. At the year end there were 5 houses occupied under licence from the Ministry of Health. During the year 3 houses were released from requisition and 2 further dwellings under licence and owned by the Council became vacant and were not re-let. The houses remaining under licence were all the subject of slum clearance procedure and have been maintained as "shelters" until accomodation can be provided for the occupiers.

Squatters' Camps. The two camps at Upper Midhope and Whitley Hall were still occupied at the year end. The number of families at Upper Midhope has been reduced to 2 by the re-housing of the remaining 23 families in Nissen Huts at Stocksbridge. It is expected that the remaining cases will be dealt with by this Council.

The number of huts occupied at Whitley Hall is now 8. The number of families originally housed on the site was 16. Early re-housing of the remaining families is highly desirable in view of the deterioration in the condition of the huts.

Slum Clearance. It has been possible during the year to put out of use 18 of the poorest houses in the district. Agreement was also reached between this Council and Sheffield Corporation regarding the demolition of a modern house at Ecclesfield which interfered with the proper layout of that part of the Parson Cross Estate.

The number of houses in the district which are the subject of confirmed Orders under the Housing Acts and are still occupied is 26. Of this number, 8 houses were condemned as unfit for habitation prior to 1939 and 18 since 1945. Details of these houses are set out hereunder :—

Locality	Houses put out of use in 1948	Houses occupied at end of 1948 but Condemned	
		A. Before 1939	B. Since 1945
Ecclesfield	2	1	1
Chapelton	2	1	2
High Green	3	...	3
Thorpe Hesley ..	1	...	...
Grenoside	6	...	3
Worrall	1	4	...
Wharncliffe Side ...	2	...	...
Loxley ... ..	...	...	...
Stannington ... ..	...	...	1
Wortley	1	...	7
Oughtibridge ... ..	...	2	1
Totals	18	8	18

Overcrowding. Good progress has been made in dealing with outstanding cases of statutory overcrowding.

At the time of the overcrowding survey in May 1946, 113 cases of statutory overcrowding were brought to light. The following table illustrates the progress made since that time:—

Locality	Over-crowding at May 1946	Additional cases since May 1946	Cases relieved since May 1946	Cases out-standing
Chapelton ...	24	4	18	10
High Green ...	15	...	12	3
Ecclesfield ..	12	3	9	6
Thorpe Hesley ...	2	...	1	1
Grenoside ...	17	1	15	3
Tankersley ...	12	...	12	...
Wortley ...	1	...	1	...
Wadsley ...	4	}	5	1
Worrall ...	2			
Oughtibridge ...	8	2	9	1
Wharncliffe Side	1	...	1	...
Midhope ...	3	...	1	2
Loxley ...	3	1	3	1
Bradfield ...	1	...	1	...
Stannington ...	8	...	6	2
Totals ...	113	11	94	30

Some of the 30 outstanding cases present difficult problems for solution but it is hoped that all those capable of straightforward abatement will receive urgent attention during 1949.

Occasional cases of deliberate overcrowding of premises in the district have occurred. Although there is legal provision for dealing with such cases it would appear that the time is hardly opportune for such drastic steps to be taken. These occurrences are most disappointing to official and housing committee alike but it is possible at least to ensure that no special housing priority is obtained by virtue of such action.

Housing Repairs. In spite of the high costs of labour and materials, property owners have generally been co-operative and little difficulty has been experienced in obtaining compliance with notices requiring the carrying out of housing repairs. The most difficult problem encountered is dealing with the poorer types of dwelling which have deteriorated badly during the war years and are now hardly worth repairing. Until such time as slum clearance can be resumed the most one can hope to achieve with such premises is to keep them wind and weather tight and this is not always easily accomplished.

It was necessary during the year to serve statutory notices under the Housing Acts for the carrying out of works to 10 houses. In 7 cases the owner failed to comply with the notices and the work was carried out in default. Action in connection with defective roofs and other forms of dampness was taken under the nuisance provisions of the Public Health Act, 1936, and details are set out in that section of the Report.

Nuisances. During the year, 1,320 inspections were made for the detection and abatement of nuisances and the supervision of work in progress.

The number of nuisances reported was 221, which together with the 38 in hand at the end of 1947, left a total of 259 requiring abatement. The number abated was 232, the remaining 27 being outstanding at the year end.

189 Informal and 3 Statutory Notices were served of which 158 and 2 respectively were complied with. It was necessary to take court action to obtain the abatement of nuisances at 2 of the properties covered by statutory notice.

The 221 nuisances reported during the year comprised :—

Choked and Defective Drains	...	...	58
Defective W.C's	...	...	25
Defective Roofs, etc.	...	...	125
Nuisance from Keeping of Animals	...	...	10
Miscellaneous ...	...	...	3

VERMINOUS HOUSES.

During the year, 546 visits were made to 523 premises in the district for the purpose of inspection for bed bugs, cockroaches, and other insect infestations. Details of these visits and the treatment carried out are set out in the following table:—

Ward	Houses Inspected		Total Visits		Houses Verminous			Treatment by	
	Council	Private	Council	Private	Bugs	Cock-roaches	Other	Council	Private
Chapelton	39	35	40	39	4	26	..	30	..
High Green	85	21	88	23	5	64	..	69	..
Ecclesfield	29	117	31	123	2	11	..	13	..
Grenoside ..	14	23	14	23	..	..	..	..	..
Tankersley	9	9	9	9	..	..	..	..	..
Wortley ..	..	2	..	2	..	..	..	..	..
Westnall ..	55	38	56	39	3	31	1	35	..
Stannington	19	12	19	14	..	3	..	2	..
Loxley ..	6	10	6	11	1	..	..	1	..
TOTALS ..	256	267	263	283	15	135	1	150	..

Disinfestation for bed bugs was carried out principally by the use of D.D.T. in solution. Results continue to be very satisfactory.

It has now been possible to resume treatment for cockroaches by blowing mixtures of gammexane, sodium fluoride and pyrethrum powder beneath Council house floors by means of a rotary blower. Although this procedure takes longer than other methods, the frequency of visits is substantially reduced and results are more satisfactory.

The appointment of an operative to carry out the actual spraying and powder blowing involved in these operations has considerably eased the burden on the inspectorial staff.

The number of visits made during the year in connection with this work was in excess of inspections made in 1947. This was due to an increase in the number of changes of tenancy involving Council property.

All household effects moved into Council houses are inspected prior to removal and the necessary treatment carried out. Similar inspection is also made of Council houses becoming vacant after occupation.

FACTORIES ACT, 1937.

The number of factories in the district at the year end was 94 and the number of visits made 103.

Supervision of sanitary conveniences was carried out in respect of all factories. In factories where no mechanical power is used supervision was extended to include cleanliness, overcrowding, temperature, ventilation, etc.

In 2 cases it was necessary to send written notices requiring compliance with provisions relating to sanitary conveniences. One notice was outstanding at the year end but it is expected that this matter will be dealt with early in 1949.

The following table gives details of classification of factories and numbers of visits to each :—

Premises	No. on Register	Number of Inspections	Written Notices	Prosecutions
Factories without power ..	8	16	Nil	Nil
Factories with power	77	73	1	Nil
Special Premises	9	14	Nil	Nil
Total	94	103	1	Nil

INSPECTION AND SUPERVISION OF FOOD.

Milk.

During the year, 650 inspections were made of milk farms and dairies in the district. Conditions were found to be generally satisfactory although there is a tendency among some of the smaller producers to neglect the cleansing of cowsheds and cows if any work on the farm has to be neglected. 25 informal notices for cleansing and lime-washing of cowsheds were served and complied with.

The following table gives details of dairy premises and milk purveyors in the district :—

Parish	Producer Retailers	Producers only	Retailers only	Total
Ecclesfield	35	9	15	59
Tankersley	4	4	1	9
Wortley	14	8	1	23
Bradfield	97	76	15	188
Grand Totals ..	150	97	32	279

Three licences for the production of Tuberculin Tested milk and 11 for Accredited milk are in force in the district. These licences are issued by the County Council under the provisions of the Milk (Special Designations) Regulations 1936-46. Towards the end of the year there was a noticeably increased interest among farmers in the production of designated milk, coinciding with Government announcements regarding future safe milk policy. It would appear that purveyors are also experiencing a greater demand from customers for T.T. (Pasteurised) milk which is now being marketed by the large milk heat-treatment dairies.

Three licences for the sale of Pasteurised and three for the sale of T.T. (Pasteurised) milk were issued during the year.

Twenty-four samples of milk were taken by the County Sanitary Officers within this district during the year. Of these, 7 samples were from Pasteurised School Milk supplies and 2 were unsatisfactory.

The remaining 17 samples were from Accredited and Tuberculin Tested herds and 5 were unsatisfactory. 3 of the 17 samples were test samples taken prior to the granting of a licence; 2 were unsatisfactory and the other satisfactory.

Six samples were taken by officers of this authority; one was in connection with suspected tuberculous milk, three were for examination for B.Abortus arising from cases of Undulant Fever and the remaining two were control samples of Pasteurised milk bottled in the district and sampled by the County Council at the place of delivery outside the district. Suitable action was taken where reports were unsatisfactory.

There are no pasteurising plants in the district but a plant for the bottling of pasteurised milk received in bulk, for supply to schools, is in operation at Ecclesfield.

It is highly probable that the Food and Drugs (Milk and Dairies) Act, 1944, will come into operation during 1949. By virtue of the provisions of this Act, supervision of milk production will pass under the control of the Ministry of Agriculture and Fisheries and will no longer be administered by the local authority. Officers appointed to work under the Act will be fortunate in so far as they will be equipped with wider powers to eliminate the undesirable milk producer than have previously been available. Transport and distribution of milk will still remain the concern of the local authority.

Ice Cream.

There are three establishments registered in the district for the manufacture and sale of ice cream, situated at Ecclesfield, High Green and Tankersley. The equipment in use complies with the requirements of the Ice Cream (Heat Treatment) Regulations. The number of premises licenced for the storage of and sale of ice cream is 16. 40 visits were made to these premises during the year and conditions were found to be satisfactory.

Meat.

The only slaughtering in the district is carried out under the provisions of Food Circular F.I.G. 107. Animals slaughtered under the provision of this Circular are for the feeders' own use although a portion of the carcass may be disposed of to the Local Meat Agent for redistribution to the retail trade.

Inspection of the carcasses is carried out where possible and the owners are advised as to the suitability or otherwise of the meat for food. Slaughtermen are encouraged to use a mechanical stunner. The number of slaughtermen registered by this Council under the provisions of the Slaughter of Animals Act, 1933, is 41.

The carcasses and organs of 575 pigs were inspected during the year and very few cases of disease were found. This figure is a reduction on the number slaughtered in 1947.

Other Foods.

Requests for inspection of various other foods were received and the following items were found to be unfit for human consumption:—

- 1 tin of Ox Tongue.
- 1 tin of Potted Meat.
- 2 stones of Wrapped Kippers.
- 1 tin of Cockles.
- 3 tins of Fish Spread.
- 3 lbs. 2 ozs. of Biscuits.
- 50 lbs. of Oatmeal.
- 110 lbs. Margarine
- 26 tins of Milk.
- 8½ lbs. of Jam and Marmalade.
- 16 tins of Peas.
- 1 tin of Beans.
- 6 tins of Soup.
- 2 bottles of Pickles.
- 2 bottles of Sauce.
- 1 bottle of Beetroot.
- 1 bottle Red Cabbage.
- 5 tins of Tomatoes.
- 2 tins of Tomato Juice.
- 1 tin of Apricots.
- 3 tins of Plums.
- 1 tin of Gooseberries.
- 1 tin of Grapefruit.
- 1 tin of Peaches.
- 2 lbs. of Prunes.

RATS AND MICE (DESTRUCTION) ACT, 1919. INFESTATION ORDER, 1943.

A total of 645 visits have been made during the year to premises infested with rats and mice and to sewer baiting points. The greatly increased activity in this work has been made possible by the employment of a rodent operative who commenced duties in October. A van has been made available for his transport and in addition to rodent work his duties include disinfection, disinfestation (insects), and drain cleansing.

311 visits were made to dwelling houses, business premises, water courses, Council salvage huts, tips and sewage works, and 334 visits to 167 baiting points on the sewers at:—

Chapelton.	Tankersley.
Ecclesfield (including Parson Cross).	Wharncliffe Side.
Worrall.	High Green.
Wortley.	Loxley.
Grenoside.	Thorpe Hesley.
Stannington.	Oughtibridge.

Disinfestation was carried out in all cases by poisoning as recommended by the Ministry of Agriculture and Fisheries Pests Technical Department. The principal bait used was damp sausage rusk and poisons included zinc phosphide, arsenious oxide, and red squill. Results obtained were very satisfactory.

Treatment of private dwelling houses is carried out free of charge and work in business premises is charged for pro rata. Subject to compliance with certain requirements, the Ministry have undertaken to bear part of the cost of carrying out the work.

MOVEABLE DWELLINGS.

There were 138 moveable dwellings in the area at the year end. During the year, 3 applications were received for the licencing of sites for 3 moveable dwellings. All these applications were refused. Licences were issued however in respect of the 3 dwellings themselves. An application to transfer a dwelling from one licenced site to another was approved. An application to station an additional dwelling on a licenced site was refused. One dwelling was removed during the year. Only a few of these dwellings are occupied regularly, the remainder being used at week-ends during the summer and for holiday periods.

The largest licenced sites are in the Ughill area of Bradfield. As these sites are on the watershed area of the Sheffield Corporation Waterworks, undertakings have been given by the owners of the land not to make applications to station further structures thereon.

There are a few unlicenced moveable dwellings in the area which are occupied by persons working on temporary undertakings such as coal outcropping. These will be removed as and when the work terminates.

SHOPS ACTS, 1912 - 1938.

There are 703 shops on the register. 42 inspections were carried out during the year. All shops comply with the requirements regarding sanitary conveniences and conditions were found to be satisfactory.

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COUNTY COUNCIL OF THE WEST RIDING OF YORKSHIRE.

DIVISIONAL SCHEME OF PREVENTIVE MEDICAL SERVICES.

DIVISION No. 22.

GENERAL PUBLIC HEALTH.

Summary of Vital Statistics, 1948.

The County Districts forming Division 22 are as follows:—

Hoyland Urban.	Penistone Rural.
Penistone Urban.	Wortley Rural.
Stocksbridge Urban.	

Area of Division	...	...	...	...	89,923 acres
Estimated Population (Mid. Year 1948)	...	...	...	...	78,570
Birth Rate (per 1,000 estimated population)	...	...	...	...	18·4
Death Rates (all per 1,000 estimated population)					
All Causes	...	...	...	...	8·8
Cancer	...	...	...	...	1·22
Heart and Circulatory Diseases	...	...	...	...	3·11
Zymotic Diseases	...	...	...	...	0·14
Respiratory Diseases	...	...	...	...	0·88
Respiratory T.B.	...	...	...	...	0·25
Other forms of Tuberculosis	...	...	...	...	0·04
Infantile Mortality	...	...	...	...	26
Diarrhœa—Deaths in infants under 2 years of age	...	...	...	...	4·16
Maternal Mortality	...	...	...	...	Nil

Births.

The number of Live Births registered in the Divisional Area during 1948 was 1,442 (males 750, females 692). This was equal to a rate of 18·4 per thousand of the estimated population.

During the year, 33 Still Births were registered. Illegitimate Births totalled 39; 24 males and 15 females.

Deaths.

The deaths in 1948 numbered 690 (390 males, 300 females), the Death Rate from all causes being 8·8. Unfortunately an Areal Comparability Factor is not available and, therefore, it is not possible to give adjusted Death Rates. It will be appreciated, however, that the age and sex constitution of the population is not the same in different districts, and this affects the level of the Crude Death Rate. An adjusted Death Rate takes into account the variation in age and sex distribution, and is a more reliable index for comparison of different districts.

Urban and Rural Statistics for 1948.

These are set out below for the aggregate districts, and a comparison is afforded with the figures for England and Wales.

Annual Rates per 1,000 of the Estimated Population.

	Live Birth Rate	Death Rate	Zymotic Death Rate	Respiratory Diseases Death Rate	Heart and Circulatory Diseases	Cancer	Tuberculosis Death Rate	Infant Mortality	Diarrhoea (Deaths under 2 per 1000 Live Births)
Division 22 ...	18.4	8.8	0.14	0.88	3.11	1.22	0.29	26	4.16
U.D's in West Riding	18.3	11.8	0.12	1.34	3.98	1.83	0.44	38	4.17
R.D's in West Riding	19.2	9.8	0.12	0.15	3.03	1.49	0.43	40	4.97
West Riding Administrative County	18.5	11.3	0.12	1.29	3.73	1.74	0.44	39	4.38
England and Wales ...	17.9	10.8	X	X	X	1.86	0.51	34	3.3

X Figures not yet available.

Infant Mortality.

In 1948, the deaths of infants under one year of age numbered 37, representing a rate of 26 per thousand Live Births.

The majority of the deaths of infants were from the group of causes which includes congenital debility, premature birth and injury at birth, and of these deaths most occurred in the first four weeks of life.

The general rate for Division 22 compares very favourably with that for the rest of the County.

Care of Mothers and Young Children.

Estimated Population 1948 ...	...	...	...	78,570
Number of Live Births ...	...	...	...	1,442
Number of Illegitimate Births ...	...	...	...	39
Number of Still Births ...	...	...	...	33
Estimated Child Population (0—4) (supplied by Registrar General)	...	...	...	7,839
Estimated Child Population (5—14) (supplied by Registrar General)	...	...	...	11,197

Below I give some statistics concerning the Child Welfare Centres and/or Ante-Natal Clinics which are established in the Division. The area is very well covered for these services, there being 14 Child Welfare Centres and 9 Ante-Natal Clinics. In a number of areas where no Ante-Natal Clinic is established, there is an arrangement whereby expectant Mothers may receive Ante-Natal supervision and examination at the Child Welfare Centre. This applies in such places as Grenoside, Loxley, Oughtibridge, Stannington, Worrall and Cawthorne.

I need not emphasise the value of the "Clinic" in the everyday life of the young Mother and her baby. The Clinic has come to be recognised as a very important appointment during each week. At the Clinic the young Mother meets others, where they discuss the various idiosyncracies of the respective children and where they talk welfare amongst themselves in their own way. They are able to get advice from a Doctor if it is required in the interests of the child or the Mother, and they are able to see the Nurse and discuss important domestic matters with her. In all, this is a complete Welfare Service. Of course, the Mothers, when they visit the Welfare, make it a social event, and one does not blame them. Anything which encourages the young Mother to attend the Clinic is important in this service. The Health Visitor, as she goes round the homes and sees the Mother and

the baby in the home surroundings, advises the Mother to bring the baby to the Clinic, and it is very comforting to the young Mother to find, on going to the Clinic, that she is welcomed there by the same Nurse who visited her in her home. There is at once a feeling of confidence on the Mother's part. This is one of my main reasons for having the Health Visitor in the Clinic. There are some who say that a Health Visitor should spend her time practically exclusively visiting homes of the people and not spending so much time in Clinics. The Health Visitor who visits the home ought to be one of the staff of the Clinic. In Division 22 we find that the Clinic is a very popular event in the day's life of the Mothers and the attendances are extremely good.

Not all the premises in which the Clinics are held can be stated to be ideal by any means, but they are the best we can have at the moment, and it is amazing how much good work is done in those Clinics.

Child Welfare Centres and Ante-Natal Clinics.

	Urban Districts			Rural Districts	
	Hoyland	Penis- tone	Stocks- bridge	Penis- tone	Wortley
Number of Infant Welfare sessions held each week ...	2	1	1	1	6
Number of Infant Welfare sessions held each fortnight...	—	—	—	—	3
Number of Ante-Natal sessions held each week ...	2	—	—	—	2
Number of Ante-Natal sessions held each fortnight ...	—	1	1	—	2

Child Welfare Centres.

Name and Address of Centre. Name of Doctor and Nurse in attendance.	Day and Time of sessions	Total number of attendances during the year	
		Number who attended for first time during this year	Children up to 5 years
CHAPELTOWN. Miners' Welfare Pavilion. Dr. A. Anderson and Miss E. Gerrard.	Wednesday afternoon	131	2928
ECCLESFIELD. Gatty Memorial Hall. Dr. A. Anderson and Miss B. S. Ward.	Monday afternoon	387	3240
GRENOSIDE. Scout Hut. Dr. E. G. Wilson and Miss B. S. Ward.	Tuesday afternoon	81	2092
HIGH GREEN. Methodist Sunday School, Wortley Rd. Dr. W. Ferguson and Miss E. Gerrard.	Tuesday afternoon	91	2161
LOXLEY. Congregational Chapel. Dr. S. Lindsay and Miss E. M. Homeyer.	Alternate Tuesday afternoons	80	682
OUGHTIBRIDGE. Church Hall. Dr. W. Ferguson and Miss D. Sill.	Thursday afternoon	153	1566
STANNINGTON. Methodist Sunday School. Dr. S. Lindsay and Miss E. M. Homeyer.	Wednesday afternoon	169	2217
WORRALL. Memorial Hall. Dr. S. Lindsay and Miss E. M. Homeyer.	Alternate Tuesday afternoons	73	811
TANKERSLEY. Scout Hall. Dr. E. Allott and Miss D. Rimmer.	Alternate Monday afternoons	9	324
HOYLAND. Miners' Welfare Institute. Dr. J. Allott and Miss M. F. Senior.	Tuesday afternoon	139	2946

Child Welfare Centres — continued.

Name and Address of Centre. Name of Doctor and Nurse in attendance.	Day and Time of sessions	Total number of attendances during the year	
		Number who attended for first time during this year	Children up to 5 years
HOYLAND COMMON. Christ Church, Hoyland Road. Dr. M. Allott and Miss D. Rimmer.	Thursday afternoon	112	3208
PENISTONE. Methodist Chapel, Shrewsbury Road, Dr. M. V. Wilby and Miss W. Morris.	Monday afternoon	700	1782
CAWTHORNE. Golf Club (Weighing Centre only). Miss B. E. Haigh.	Wednesday afternoon	141	1014
STOCKSBRIDGE. British Hall. Dr. D. Patterson and Miss W. Morris.	Tuesday afternoon	376	2142

Ante-Natal and other Clinics.

Name and Address of Clinic, Name of Doctor and Nurse in attendance.	Day and Times of sessions	Total Number of attendances	
		A.N.	P.N.
CHAPELTOWN. Hallamshire Maternity Home. Dr. M. R. Powell.	Tuesday a.m. & p.m. Thursday a.m.	1556	71
ECCLESFIELD. Gatty Memorial Hall. Dr. M. Rushbrook and Miss B. S. Ward.	Thursday p.m.	1024	16
HIGH GREEN. Methodist Sunday School. Dr. W. Ferguson and Miss E. Gerrard.	Wednesday p.m.	190	3
HOYLAND. Miners' Welfare Institute. Dr. J. Allott and Miss M. F. Senior.	Monday p.m.	766	33
HOYLAND COMMON, Christ Church, Hoyland Road. Dr. M. Allott and Miss D. Rimmer.	Wednesday p.m.	437	42
PENISTONE. Shrewsbury Road Methodist Chapel. Dr. M. V. Wilby and Miss W. Morris.	1st Friday a.m.	100	7
STOCKSBRIDGE. British Hall. Dr. D. Patterson and Miss W. Morris.	1st and 3rd Friday p.m.	245	15

Consultant Services.

In conjunction with the scheme for Ante-Natal Supervision is that of the Consultant Clinic. In this area we are able to call on the services of three Consultants in Sheffield—Mr. Chisholm, Mr. Patrick and Mr. Stacey. Cases referred to these three gentlemen are invariably seen at their consulting rooms. In addition, Mr. Patrick has a weekly Clinic at the Montagu Hospital, Mexborough, at which patients from the Hoyland area can be seen, and for those patients living in areas accessible to Barnsley, Mr. Stacey has a weekly Clinic at 2, Pollitt Street, Barnsley.

During 1948 the number of cases referred to the Consultants was 62.

Birth Control.

The West Riding County Council has provided a Clinic at Swinton to which Child Welfare Medical Officers can refer patients to receive advice and instruction in birth control methods in those cases where further pregnancy would be detrimental to health. During 1948, 11 such cases were referred from the Division.

Lying-in Accommodation.

The area is served in the main by the Hallamshire Maternity Home. Cases are, however, admitted to the St. Helen Hospital, Barnsley, and the Princess Royal Maternity Home, Huddersfield.

The present demand on the accommodation far exceeds that which can be provided and in consequence priority is given to the following types of cases:—

- (a) Primiparæ.
- (b) Patients with unsatisfactory home conditions.
- (c) Patients with abnormalities of pregnancy.

On July 5th, 1948, this service was taken over by the Regional Hospital Boards, but the authority continued to deal with this service on an agency basis until the end of the year. Consequently there were no material alterations in the service.

Care of Premature Infants.

Of recent years more care and attention has been paid to Premature Babies. In the final assessment of the reduction in the infantile mortality rate, it is probable that the drive for the provision of more care and attention for the Premature Baby has had a marked effect. In this Division they are zealously and carefully safeguarded so far as is humanly possible. It must be borne in mind that a Premature Baby is a special problem demanding the utmost skill for the safeguarding of its welfare. Because the Local Health Authority, through the Medical Officer of Health or the Health

Visitor, or both, take an apparent "over-enthusiastic" interest in the child's welfare, it is not for any other reason than that they have the welfare of that child at heart; it is certainly not that they wish to interfere in the ordinary domestic life of the home into which the Premature Baby has arrived.

The West Riding County Council approved of a scheme whereby Health Visitors would be sent as resident students at the Sorrento Maternity Hospital in Birmingham, where a most comprehensive course in the care and welfare of Premature Babies could be received.

We have one Health Visitor in our Division, Miss Rimmer, of Hoyland, who received this special training, and is available to visit the home of the infant immediately upon receipt of a notice that a premature child has been born. The West Riding County Council have also provided each Division with an outfit called a "Sorrento Cot," which is composed of a special cot, with special equipment including blankets, baby clothing, oxygen cylinder, etc., etc. This equipment is available to be rushed out to any home where the Nurse considers that it is required for a Premature Baby. The County Council have also on their staff a Pædiatrician who is available, when required, at any time to go to the home of a Premature Baby and give the Midwife or General Practitioner, or the Health Visitor, expert advice on the treatment and care of the infant. A Home Help under the Home Help scheme may also be available to go to the home to help the Mother, so that the Mother may be allowed to give her undivided attention to the care of the child. If Hospital facilities are required, then these are provided at the Jessop Hospital for Women, in Sheffield.

It is some time ago since the West Riding County Council, in their determination to do everything possible for the Premature Baby, decided to instal in the Hallamshire Maternity Home a Premature Baby Unit. In preparation for the commencement of this unit, the Matron, Miss Lancefield, was one of the first of the County Staff to attend the special Course at the Sorrento Hospital to have this training. Although employed in the Hallamshire Maternity Home, Miss Lancefield has always been willing to give advice and help in any such case. Preparations for this unit were still proceeding on the 5th July, when the Hospital was taken over by the Regional Hospital Board. The County Council have now approved of a scheme whereby Midwives can attend this Course at the Sorrento Hospital, Birmingham.

Dental Treatment.

Dental treatment is provided for expectant and nursing mothers attending Child Welfare Centres and Ante-Natal Clinics. Before July 5th this treatment had to be recommended by the Medical Officer. Since the coming into being of the National Health Service Act, 1946, every expectant and nursing mother is entitled to a dental examination. These schemes, however, have been very badly supported, although at the time of writing more mothers are taking advantage of the scheme to have an examination and, if found necessary, to have treatment carried out.

Supply of Milk and Other Foods.

The scheme for the sale and distribution of dried milk and other foods is carried out through the Child Welfare Clinics. It includes the provision of Dried Milk Powder, Virol, Glucose D, Pure Cod Liver Oil, Olive Oil, etc. Some idea of the amount of work and time involved in the scheme can be obtained from the following table giving the yearly sales of the more popular branded supplies.

CLINIC	Virol	Glucose D	Pure Cod Liver Oil	Olive Oil	Sunrose	Ostermilk	Cow and Gate	Trufood
HOYLAND	81	2115	28	78	1553	646	1943	200
HOYLAND COMMON	128	1774	-	75	551	591	2594	24
GRENOSIDE	112	498	11	41	192	268	350	9
CHAPELTOWN ..	79	382	9	52	687	417	1263	-
ECCLESFIELD ..	143	538	11	63	1363	1531	1169	142
HIGH GREEN ..	98	340	9	91	475	669	1028	-
TANKERSLEY ..	44	459	-	68	-	-	307	-
STOCKSBRIDGE ..	61	785	4	69	1849	300	1194	-
OUGHTIBRIDGE ..	77	553	7	29	439	174	541	-
WORRALL	96	263	6	-	146	483	-	12
LOXLEY	63	417	-	5	173	567	-	9
STANNINGTON ..	110	494	-	11	343	943	278	74
CAWTHORNE ..	152	1105	2	14	416	108	458	228
PENISTONE	72	487	-	53	237	108	385	-
PACKINGS ..	1-lb. car- tons	$\frac{1}{2}$ -lb. pkts.	8-oz. bottles	8-oz. bottles	1-lb. tins	1-lb. tins	1-lb. pkts.	1-lb. tins

Health Visiting.

The mainstay of most schemes to safeguard the health of mothers and young children is the Health Visitor, who has to visit and give advice in the homes of the mothers. Since the coming into being of the National Health Service Act, 1946, the scope of the work of the Health Visitor has been greatly extended. It now includes the visiting of persons in their own homes for the purpose of giving advice as to the care of young children, persons suffering from illness, and expectant and nursing mothers, and as to measures necessary to prevent the spread of infection. In short, she is to be the people's philosopher and friend from the cradle to the grave.

This is a very drastic change from the old order, and one which cannot be evolved overnight. Yet with goodwill on all sides it can be achieved. The great extension of duties demands two things, liaison with Hospitals and close liaison with general Medical Practitioners.

So far as this Division is concerned, our relationship with the Hospitals is very good. Information asked for by both sides is readily obtained and given and there is no reason why this effective liaison should not continue.

Integration between the work of the Health Department and the General Practitioner is not quite so good. I think the General Practitioner can use the services of the Health Visitor more than is appreciated. In her new role the Health Visitor can materially assist in giving continued advice to patients. The family Doctor now has not the time to give this advice which helps his patients along the road to recovery.

All these ideals, however, will not be achieved until the number of nurses increases. We have seven qualified Health Visitors and four assistant Visitors. They have done and are still doing a very good job of work. Mistresses of their job and oblivious of time, they have undertaken a magnitude of tasks with cheerfulness and unselfishness which reflects the greatest credit on their abilities. We have room for fourteen Health Visitors. I hope we can get the vacancies soon filled so that the burden on the present staff may be eased a little as they advance to the eventide of their working lives.

The following table shows the disposition of the Nurses throughout the Division.

Hoyland Nether U.D.

NURSE D. RIMMER	..	HOYLAND COMMON.
NURSE M. F. SENIOR	..	HOYLAND, PLATTS COMMON, ELSECAR.
NURSE E. CHETTLEBURGH	-do-	-do- -do-
(Asst. H.V.)		

Stocksbridge U.D.

NURSE W. MORRIS .. STOCKSBRIDGE, BOLSTERSTONE.

NURSE D. SILL DEEPCAR.

NURSE H. DRANSFIELD.. STOCKSBRIDGE and PENISTONE.
(Asst. H.V.)

Penistone U.D.**Penistone R.D.**

These areas have been covered by NURSE MORRIS, with the exception of Cawthorne and Silkstone, which were covered by NURSE HAIGH, of Dodworth.

Wortley R.D.

NURSE E. GERRARD) CHAPELTOWN, HIGH GREEN, WARREN,
NURSE D. M. SIMPSON } .. BURN CROSS, THORPE HESLEY.
(Asst. H.V.)

NURSE B. S. WARD) ECCLESFIELD, PARSON CROSS,
NURSE L. M. BEAUMONT } GRENOSIDE.
(Asst. H.V.)

NURSE E. M. HOMEYER.. STANNINGTON, LOXLEY, WORRALL,
BRADFIELD.

Home Nursing.

This service was undertaken by the County Council on the 5th July, 1948. There are 13 Home Nurses, of whom 6 also undertake Midwifery. At the end of the year they had made 10,035 visits. That is a bald statement of fact, but it is no indication of the value and worth of the Home Nursing Service. The District Nurse as she was formerly known tended to be at the beck and call of every contributor to the former Nursing Associations. As a result, curative medicine, as practiced by a District Nurse, tended to become merely the care of the chronic sick.

Now the status of the Home Nurse is being raised. Many persons now sick in their own homes seek the services of the Nurse. The Doctor overwhelmed with work is now turning to the Nurse for long-awaited assistance. The effects of this Doctor-Nurse partnership can indeed be very far-reaching.

Vaccination and Immunisation.

During the year, the number of children immunised was 733, and 570 children received booster doses. Details are given below :—

County District	Number of Children Immunised in 1948			Number given Secondary Doses
	Under 5 years	5 - 14 years	Total	
Hoyland Nether Urban ...	126	12	138	6
Penistone Urban	87	2	89	5
Stocksbridge Urban ...	85	19	104	8
Penistone Rural	50	7	57	7
Wortley Rural	244	101	345	544
Totals	592	141	733	570

83 persons were vaccinated during the year, and 13 re-vaccinated. Details are given below :—

County District	Number Vaccinated	Number Re-Vaccinated	Total
Hoyland Nether Urban ...	25	6	31
Penistone Urban	13	5	18
Stocksbridge Urban ...	3	...	3
Penistone Rural	10	...	10
Wortley Rural	32	2	34
Totals	83	13	96

PREVENTION OF ILLNESS. CARE AND AFTER CARE.

Tuberculosis.

All notified cases of Tuberculosis are investigated with a view to ensuring that the patient avails himself of facilities for treatment and the examination and supervision of the health of contacts. In this area we have two Tuberculosis Nurses who undertake this work along with duties at the various Dispensaries. Particular emphasis is placed on the care of the children of the tuberculous patient, and in this connection housing authorities are asked to co-operate. It is gratifying to know that in this Division all the District Councils are willing to play their part in helping to overcome this difficult problem. Where necessary shelters are provided and supplies of beds and bedding are available to enable patients to sleep alone. Supplies of clothing and extra nourishment are also provided where considered necessary.

Other Types of Illness.

All patients discharged from Hospital needing care and attention become the responsibility of the Health Authority. Consequently the Authority is prepared to afford any such care which may be thought necessary. In 1948, however, the demand for such care was negligible.

There was quite a brisk demand, however, for equipment held by the Home Nurses and in the Divisional Office. Such items as Bed Rests, Bed Pans, Rubber Sheets, etc., can be obtained from the Nurse, and larger items of equipment such as Wheel Chairs can be obtained through the Divisional Office.

Mental Health Service.

The Mental Health Service has functioned successfully during the past year and all notified mental defectives are now supervised by a Mental Health Social Worker.

There have been 5 notifications under Section 57 of the Education Act, 1944; 3 admissions to Mental Deficiency Institutions; 2 de-certifications and 2 removals to other Authorities. The number of mental defectives under supervision as on 31/12/1948 is:—

- Statutory Supervision.** Over 16 years of age. 61.
Under 16 years of age. 27.
- Under Guardianship and in receipt of financial aid.** 11.
- Under Observation.** 9.
- On Licence from Institutions.** 3.

31 mental defectives are in regular gainful employment and 36 are engaged in the home. 28 defectives, including children excluded from School, would benefit by Occupation Centre training and enquiries are being made in the Division to obtain suitable premises for the establishment of such a Centre, which would serve all mentally defective children excluded from School and older defectives who would benefit from training in handicrafts, routine methods, etc.

6 patients are awaiting admission to Institutions as their parents no longer are able to give care and attention necessary for their well being. Their names have been included on the list submitted to the Regional Hospital Board and vacancies are now awaited.

Domestic Help.

The County Council began a scheme for the provision of Home Helps in 1938. This related only to maternity cases, but was later extended to sickness cases. Now the Home Help has been recognised as one of the team of the Preventive Medical Services. In this Division there were 22 Home Helps available and they attended 61 cases. I should like here to pay my tribute to these ladies. Their task is not easy; much diplomacy and tact are needed. It is good to be able to report that they did their job efficiently.

Midwifery Service.

The Domiciliary Midwifery Service in Division 22 is almost entirely undertaken by whole time Midwives employed by the Local Health Authority. In some instances — e.g., Silkstone, Penistone, Loxley, Oughtibridge — the Midwifery work is undertaken by Nurses performing the combined duties of District Nurse and Midwife.

It is to be hoped that when the supply of Nurses becomes sufficient, the duties will be separated, and that there will be Midwives and Home Nurses each doing her separate work and not a mixture of both.

The arrangements in Division 22 for the Domiciliary Midwifery Service are very satisfactory. It has required some re-organisation in certain areas but a service is now available throughout the whole Division. The district of Parson Cross required much thought, but thanks to the Sheffield Corporation, who allowed the County Council to become tenants of one of the new houses on the estate, a Midwife was established there to deal with the increasing number of population. As the numbers of new buildings increase it will be necessary to provide another Midwife and an appeal will be made to the Sheffield Corporation for another house for a Midwife.

There are important factors to keep in mind when setting up a satisfactory Midwifery service. One is that the Midwives should be mobile. The days when the Midwife trailed round the countryside on foot, carrying her bag and any other equipment she might require, are rapidly ending. One can only pay tribute to their astonishing endurance. But it is not right to arrive at a case to perform a very skilful job tired after a long walk and maybe drenched to the skin, the result of having to walk in a snow storm or a rain storm. The Midwife must be recognised for her skill as a specialist in a particular section of the service and not from sentiment engendered by contemplation of her amazing physical endurance albeit possessing a kindly manner.

The Nurse must be provided with a car — she has heavy equipment to carry — Analgesic outfits and maybe Maternity outfits. She must arrive at her case fresh and alert for her work and she must command the respect her calling demands.

The Midwife to-day has a much wider field to cover than was the rule in the past. She therefore has much further to travel and mobility is essential.

In Division 22, two only are without cars. The County Council's policy is to encourage the use of cars and they pay an agreed allowance in respect of these cars. Also the County Council have a scheme for providing financial assistance to Midwives to purchase cars.

Immobile Midwives can call on Ambulance Services and Taxis if necessary.

Analgesia in Childbirth.

The West Riding County Council policy has always been to encourage the County Midwives to become trained in the administration of Gas and Air Analgesia. Arrangements have been made with certain centres to take so many of the staff and give them this training. The centres offering these facilities are — Leeds, Tadcaster, Grimsby, Halifax.

At the moment of writing this Report the provision of Gas and Air Analgesia in Childbirth has been given wide publicity.

So far as Division 22 is concerned there are 15 Nurses and Midwives practicing Midwifery. Of these, 6 are qualified to administer Gas and Air Analgesia, and the remaining 9 are all booked up to go for training when vacancies occur in the training centres. There are two Gas and Air Machines available in the Division. This was the position as at December, 1948, but at the end of June, 1949, the number of trained Nurses has increased by 50%. There are now four machines, with more due for delivery.

During 1948, five women had this Analgesia administered.

SCHOOL HEALTH SERVICE.

The children to-day are taller, stronger, cleaner in their habits and person than were their counterparts 50 years ago. I think it is certain that much of this change has been brought about by the steady progress in efficient School Medical Inspection. At its inception the School Health Service demanded three inspections during a child's School life, and the Education Act, 1944, still suggests three inspections:—

- (1) As soon as possible after commencing School life.
- (2) During the last year in the Primary School.
- (3) During the last year of School life.

The history of the School Health Service from its commencement in 1907 to the present day is one of progress in the study of children's diseases and in social medicine. To-day, nearly every large Centre has its Specialist in Child Health, and every University its chair of Child Health. The Pædiatrician, therefore, is an essential part of any service which deals with the health and welfare of children. To make the School Health Service a complete success there must, therefore, be a close link up between the Local Health Authority's preventive services and those curative services provided by the Regional Hospital Board, through their Specialist Pædiatrician.

In the West Riding, Pædiatricians have been appointed by the Local Health Authority, and the one giving coverage for the part of the County in which is included Division 22 is available for consultations and advice in any case where I find it is necessary. Dr. Harvey, the Pædiatrician concerned, has a close link up with the Children's Hospital in Sheffield, the Montagu Hospital, Mexborough, and the County Hospital in Wakefield.

To get back to the routine medical inspection of School children, it is obvious that to be of any use at all it must be a meeting of the parent, the teacher, the doctor, the Health Visitor and, of course, the child. Each can throw some light on the child's life up to that time, and it is by pooling all that information that a complete assessment of the child's health can be gained.

I wish to emphasise that in the interests of the children, and the child's welfare, it is necessary for the parent or guardian to attend when the child is medically inspected.

The Schools in Division 22 have all been inspected during the year, and the statistical review is given in tabular form below. I am sorry I cannot give separate figures for each School, as it is usual for all the figures to be lumped together and passed through for a complete County Report. I hope that in the near future statistics for smaller groups of Schools will be available for the interest of the County District Councils within the Division.

Estimated number of School Children at December, 1948 ...	12,320
Number of Medical Inspections carried out within Division 22 during 1948 :—	
Entrants	1,195
Second Age Group — last year in Primary School ...	922
Third Age Group — last year of School life ...	577
	2,694

Special Inspections.

Special Inspections ...	...	...	...	175
Re-Inspections ...	...	...	...	14
				<hr/> 189

Number Requiring Treatment.

Entrants ...	...	...	...	372
Second Age Group ...	...	...	...	229
Third Age Group ...	...	...	...	121
				<hr/> 722

General Condition of Pupils.

	A	B	C
	Good	Fair	Poor
Entrants ...	438	741	16
Second Age Group ...	445	472	5
Third Age Group ...	212	347	18

Infestation with Vermin.

Total number of examinations in the Schools by School Nurses/Health Visitors ...	...	24,886
Total number of individual pupils found to be infested ...	...	1,832

No Cleansing Notices (Sect. 54 (2) Education Act, 1944) or Cleansing Orders (Sect. 54 (3) Education Act, 1944) were issued during the year.

The conditions found amongst the children which required treatment are varied. Diseases of the Ear, Nose and Throat were the largest group of conditions requiring attention, defective vision the next largest, and skin conditions occupying another large group. The infestations with Vermin were chiefly cases found by the School Nurse to be suffering from verminous condition of the head, requiring treatment, and in most cases the condition was cleared up within the course of a few days.

In connection with treatment of School children, one of the greatest obstacles at the present moment is the provision of facilities for the removal of Tonsils and Adenoids. During 1947, you will remember, when Poliomyelitis was prevalent, the operation for the removal of Tonsils and Adenoids was interdicted generally throughout the country. We have never been able to catch up on those cases since

that time, and there is a considerable time lag between discovering the cases and having the operation done. During the year I organised an Ear, Nose and Throat Operative Clinic at the Smallpox Hospital at Hallwood, kindly rented to us by the Wortley Rural District Council. Two such sessions were held at Hallwood. On each occasion 12 children had the operation, being in-patients for 48 to 60 hours. The operation was carried out by Mr. J. Cobb, Ear, Nose and Throat Surgeon from Sheffield, who was assisted by the Consultant Anæsthetist, Dr. Rippon. The medical staff of this Division supervised the Clinical work and the staffing was ably carried out by Health Visitors. The domestic work was done by Home Helps. After the 5th July the scheme was held in abeyance until we received the opinion of the Regional Hospital Board as to the future use of the Hospital. It is hoped that in the near future this Clinic might be re-organised.

PROVISION OF MEALS IN SCHOOLS.

Division 22 of the Scheme of Preventive Medical Services for the County covers two Educational Divisions, namely, Divisions 19 and 37. The No. 19 is known as Wharnccliffe Division, and No. 37, Penistone. The School Meal Service in these two Divisions is now complete and arrangements have been made for all children who are desirous of having meals in School to be so provided.

In some districts, e.g., Penistone, meals are prepared in a Central Canteen and delivered in specially designed heat retaining cabinets to the various Schools. In other parts of the district, e.g., High Green, the meals are prepared at one of the Central Schools and conveyed in the same type of cabinet to other smaller Schools in the vicinity.

The standard of meals supplied throughout, from my own personal experience, is very good, and on the several occasions that I have seen School meals being served, there always appeared to be sufficient of a well-balanced meal.

It has been difficult for all the children staying for meals to have facilities for washing before they sat down to their meal, but strenuous efforts have been made by the Head Teachers in the Schools to overcome the difficulty, and it is amazing how the normal hygiene principles have been carried out under the circumstances.

In the two Divisions, approximately 85% of School children remain for meals, and during 1948 a grand total of 1,844,200 meals were served in Schools.

The first part of the report deals with the general situation of the school system in the district. It is noted that the school system is in a state of transition, and that the school system is in a state of transition. The report also discusses the various factors which are influencing the school system, and the various factors which are influencing the school system. The report also discusses the various factors which are influencing the school system, and the various factors which are influencing the school system.

PROVISION OF MEALS IN SCHOOLS

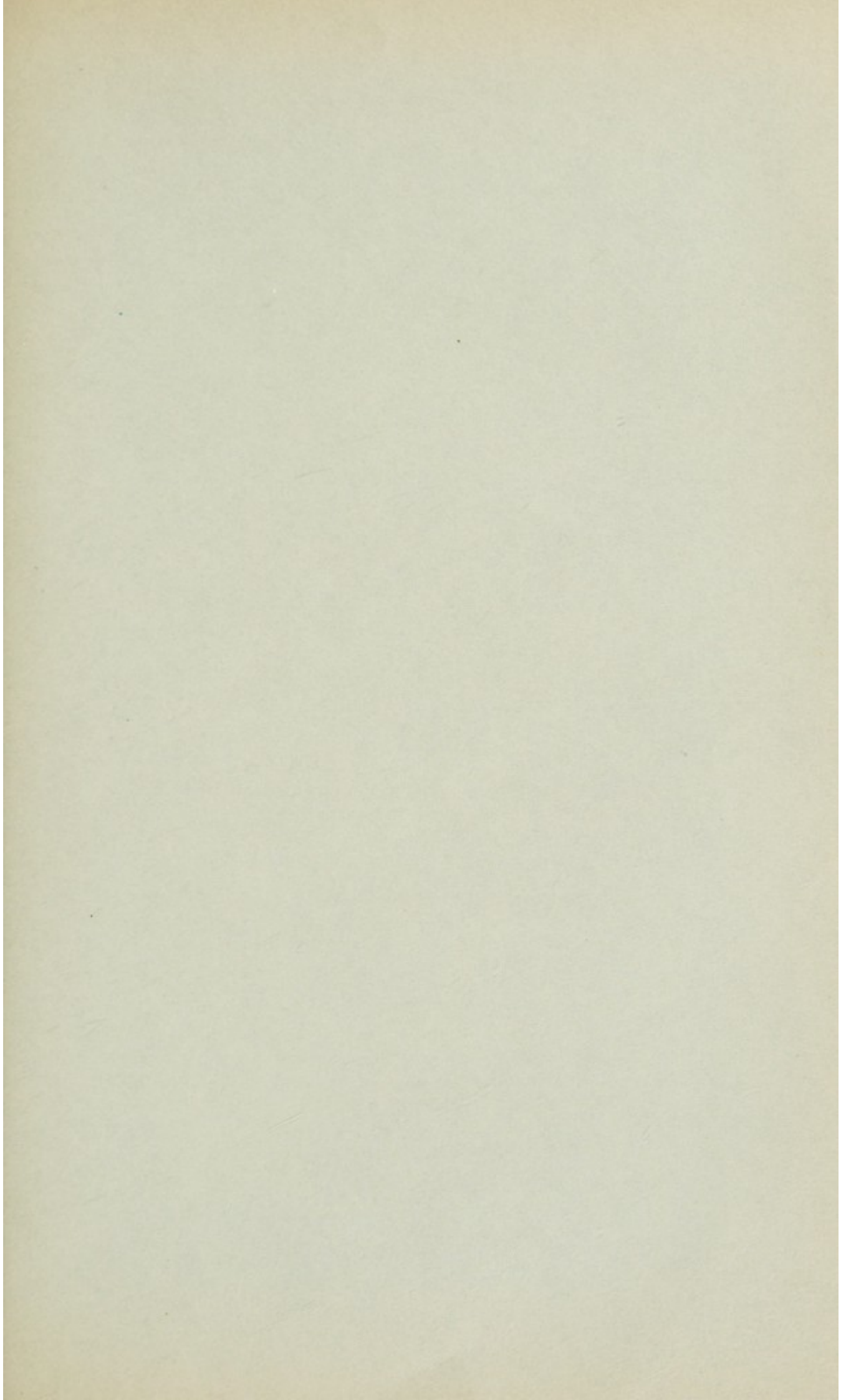
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