

## **Report for the year 1920 of the Medical Officer of Health.**

### **Contributors**

Hampstead (London, England). Metropolitan Borough.  
Scruse, Frank E.

### **Publication/Creation**

[Place of publication not identified] : [publisher not identified], [1921]

### **Persistent URL**

<https://wellcomecollection.org/works/ydpn2pz6>

### **License and attribution**

You have permission to make copies of this work under a Creative Commons, Attribution, Non-commercial license.

Non-commercial use includes private study, academic research, teaching, and other activities that are not primarily intended for, or directed towards, commercial advantage or private monetary compensation. See the Legal Code for further information.

Image source should be attributed as specified in the full catalogue record. If no source is given the image should be attributed to Wellcome Collection.



Wellcome Collection  
183 Euston Road  
London NW1 2BE UK  
T +44 (0)20 7611 8722  
E [library@wellcomecollection.org](mailto:library@wellcomecollection.org)  
<https://wellcomecollection.org>

With the  
Medical Officer of Health's  
Compliments.

Public Health Department.  
Town Hall, Haverstock Hill,  
Hampstead, N.W.

pages 4  
5  
11  
57  
55  
77  
81  
93-98





THE  
 Metropolitan Borough of Hampstead.

# REPORT

for the year 1920,

OF THE

Medical Officer of Health,

FRANK E. SCRASE,

F.R.C.S. (Eng.), L.R.C.P. (Lond.), D.P.H. Lond.)

## CONTENTS.

SECTION		PAGES.
A.—Natural and Social Conditions of the Borough (including a review of the Vital Statistics, etc.)..		6-15
„ B.—Sanitary Circumstances of the Borough ..		16-28
„ C.—Food .. .. .		29-44
„ D.—Prevalence of and Control over Infectious Diseases		45-66
„ E.—Maternity and Child Welfare .. .. .		67-89
„ F.—Sanitary Administration .. .. .		90, 91
„ G.—Housing .. .. .		92-107
„ H.—Vital Statistics .. .. .		108-112





Metropolitan Bureau of Hygiene

# REPORT

for the year 1900

by the

Medical Officer of Health

FRANK E. SCHAFER

L.R.C.P. (Lond.)



## CONTENTS

1-10	General Report and Local Legislation in the Borough
11-15	Sanitary Administration of the Borough
16-20	Sanitary Statistics
21-25	Sanitary and Local Legislation
26-30	Sanitary and Local Legislation
31-35	Sanitary and Local Legislation
36-40	Sanitary and Local Legislation
41-45	Sanitary and Local Legislation
46-50	Sanitary and Local Legislation
51-55	Sanitary and Local Legislation
56-60	Sanitary and Local Legislation
61-65	Sanitary and Local Legislation
66-70	Sanitary and Local Legislation
71-75	Sanitary and Local Legislation
76-80	Sanitary and Local Legislation
81-85	Sanitary and Local Legislation
86-90	Sanitary and Local Legislation
91-95	Sanitary and Local Legislation
96-100	Sanitary and Local Legislation

His Worship the Mayor (Mr. Alderman J. I. FRASER, J.P.) *ex-officio* member of all Committees.

### PUBLIC HEALTH COMMITTEE.

*Chairman:* Miss Councillor BALKWILL.

Mr. Alderman G. Buckle	Mr. Councillor H. C. John
" " G. W. H. Budd	( <i>Resigned in March</i> )
" " R. J. J. Willis	C. J. R. MacFadden, M.D.,
Mr. Councillor C. W. Cunningham, M.R.C.S., D.P.H.	" " T. H. NUNN [C.M.]
Mr. " R. H. H. Cust	" " E. S. Payne
Mrs. " Dow, B.A.	" " H. R. Smith
Miss " FAWCETT	

*Sub-Committees:*—Drainage Plans, Tuberculosis, Venereal Diseases.

### MATERNITY AND CHILD WELFARE COMMITTEE.

*Members of the Council.*

*Chairman:* Mr. Councillor C. J. R. MACFADDEN, M.D., C.M.

Mr. Alderman R. J. J. Willis	Mrs. Councillor Dow, B.A.
Mrs. Councillor Arnholz	Miss " Fawcett
Miss " Balkwill	Mrs. " Fisher
Mr. " C. W. Cunningham,	" " Monro
M.R.C.S., D.P.H.	Mr. " T. H. Nunn

*Persons not Members of the Council.*

(Appointed in pursuance of Section 2 (2) of the Maternity and Child Welfare Act, 1918.)  
Mrs. Roche Mrs. Stewart.

### HOUSING COMMITTEE.

*Chairman:* Mr. Councillor H. R. SMITH.

Mr. Alderman G. Buckle	Mr. Councillor F. B. Glover
" " J. C. Swinburne-Hanham, J.P.	" " F. G. Howard
" " R. J. J. Willis	" " H. C. John ( <i>Resigned in March</i> )
Mrs. Councillor Arnholz	" " W. P. Newman
Miss " Balkwill	" " G. H. Paine
Mr. " Belfour	" " W. J. Spriggs
" " V. H. Blessley	" " E. C. Taylor, M.D. ( <i>from March</i> )
Mrs. " Dow, B.A.	" " P. E. Vizard

### Staff of the Public Health Department, 1920.

#### Sanitary Inspectors:

W. G. Kershaw, *Senior Sanitary Inspector.*

R. Geary ( <i>Wards 1 &amp; 2</i> ).	W. F. Horniblow ( <i>Wards 3 &amp; 7</i> ).	} <i>Divisional Inspectors.</i>
J. Grimsley ( <i>Wards 4 &amp; 5</i> ).	A. C. Townsend ( <i>Ward 6</i> ).	
F. H. Hudson, Sale of Food and Drugs Acts, and Factory and Workshop Acts.		
A. Peverett, Housing Acts.		
Mrs. T. Fisher, M.A., Factory and Workshop Acts and Tuberculosis Regulations.		
Miss F. Hall, Infectious Diseases.		

#### Health Visitor:

Mrs. K. Roche, Notification of Births Act and Maternity and Child Welfare Act.

#### Assistants to Inspectors:

W. Larkin, A. Edwards, E. Stratton.

#### Public Mortuary:

W. Larkin, 63, Flask Walk, *Keeper.* E. Stratton, *Deputy Keeper.*

#### Disinfecting and Cleansing Stations:

T. Rider, G. Allaway, R. Bell, and A. L. Gibbons, *Disinfectors.*  
Mrs. Rider and Mrs. Hayter, *Attendants at Cleansing Station.*

#### Tuberculosis Dispensary:

A. J. Scott Pinchin, M.D. (Lond.), M.R.C.P. (Lond.), *Tuberculosis Medical Officer.*  
Miss M. Lowen, *Nurse.*

#### Pre-Maternity Clinics:

Miss Mary Kidd, M.B. (Lond.), *Medical Officer in Charge.*  
Miss M. Lowen, (*Temporary*) *Nurse.*

#### Public Analyst:

A. W. Stokes, F.C.S., F.I.C.

#### Clerical Staff:

Miss E. Blakeman, R. H. Box, W. Sell, F. S. Hill.  
(*Temporary*) Miss K. Geary, Mrs. E. Ellis-Fermor

#### Medical Officer of Health:

Frank E. Scrase, F.R.C.S. (Eng.), L.R.C.P. (Lond.), D.P.H. (Lond.).

Note.—The Medical Officer of Health and all Sanitary Inspectors are appointed as Officers under the Housing Acts.



PUBLIC HEALTH DEPARTMENT,  
TOWN HALL, HAVERSTOCK HILL, HAMPSTEAD, N.W. 3.

22nd March, 1921.

*To the Mayor, Aldermen and Councillors  
of the Metropolitan Borough of Hampstead.*

MR. MAYOR, LADIES AND GENTLEMEN,

I have the honour to place before you my Annual Report for the year 1920.

The various sections, with their subject matter, are arranged in accordance with the Memorandum of the Ministry of Health, dated February, 1921, as far as these relate to matters appertaining to the Borough.

On page 58 I have incorporated a Report received from Dr. A. J. Scott Pinchin, the Tuberculosis Medical Officer, on the work of the Municipal Tuberculosis Dispensary; and on page 85 will be found a Report submitted by Dr. Mary Kidd, the Medical Officer in charge of the Pre-Maternity Clinics, on the work of these Clinics during the year under review.

The year has been one of increasing activity for the Public Health Department; a considerable amount of additional work accruing on account of the Housing Acts and the Maternity and Child Welfare Act.

Also, the general condition of the residents of the Borough has changed considerably, the population being much denser than hitherto, whilst the cost of labour and materials has added to the difficulties of administering the Public Health and Housing Acts.

The Department is becoming more and more sectional as the sphere of its work widens: yet the increased work cannot be limited to one section of the Department for the work of each section is too closely interwoven with others ever to be separated. Thus, it is impossible to separate the question of tuberculosis or infantile mortality from that of housing; for success in combating either depends upon due and proper housing of the people.

Until the coming Census has been taken, the vital statistics must be regarded as approximate only; but certain returns are noteworthy, and constitute records for the Borough. The death rate is the lowest ever recorded in Hampstead; whilst the number of births is higher than any year since 1900, when 1621 children were born in the Borough.

The most gratifying return of all, however, is that of infantile mortality. The infantile mortality rate for 1920 is 48 per 1000 births which is the lowest ever recorded in Hampstead, or, as far as I know, in any other London Borough. In a Special Report in May, 1919, I



ventured to predict that we might achieve a rate as low as 50 and this has now been accomplished. The infantile mortality rate for London is 75 and for England and Wales 80.

During the past year the Department has striven hard to carry out the provisions of the Housing Acts, but these, like all Acts on the subject, have proved to be difficult in administration. Only one, among the many schemes for the erection of new dwellings, has matured; this is known as the South End Green Scheme and is well advanced. It will provide 140 flats arranged in 4 blocks. Of the other schemes put forward, I regret to say, none fructified.

Under the Maternity and Child Welfare Act considerable progress has been made, and arrangements have been completed for hospital accommodation for sick children at Northcourt Hospital, situated right in the midst of our Borough, also convalescent beds at the Catherine Gladstone Home, Mitcham, for women recovering from recent confinement. Arrangements have also been made whereby the Borough Council's Health Visitors will attend at the Centres of the Hampstead Council of Social Welfare; and the Borough Council's Dental Clinic in connection with the Pre-Maternity Clinics has been started, and is doing useful work. Full details of these schemes will be found in Section "E." the Maternity and Child Welfare Section of this Report.

Although the Annual Report of a Medical Officer of Health is not of much interest to the majority of the citizens, yet I hold that it is all-important that it should have the widest circulation, and that everything should be done to engender a popular interest in the subjects with which it deals, and help to create an enlightened public opinion which shall support the Sanitary Authority in the realisation of its high responsibility respecting the health of the Borough and help to secure that co-operation between the general public and the Sanitary Authority and its Officers which is essential to success.

I would like to take the opportunity of expressing my thanks to the Council, especially to the Chairmen and Members of the Public Health, Housing and Maternity and Child Welfare Committees for the support and sympathetic consideration they have afforded me.

I desire also to place on record my appreciation of the work of the Staff of the Department who have at all times accorded me their loyal and unselfish co-operation.

I have the honour to be,

Mr. Mayor, Ladies and Gentlemen,

Your obedient Servant,

FRANK E. SCRASE, *Medical Officer of Health.*

## Section A.

NATURAL AND SOCIAL CONDITIONS OF THE  
BOROUGH.

## SUMMARY OF VITAL STATISTICS FOR 1920.

---

Population estimated to middle of 1920	...	...	91,519
Density	...	...	40·4 persons per acre
Marriages	...	...	859
Marriage-Rate	...	...	16·6
Births	...	...	1,566
Birth-Rate	...	...	17·1
Deaths	...	...	860
Death-Rate	...	...	9·4
Deaths of Infants under 1 year	...	...	75
Infantile Mortality Rate	...	...	47·9
Death-Rate from the principal Epidemic Diseases	...	...	0·27
Death-Rate from Pulmonary Tuberculosis	...	...	0·45
Death-Rate from All Forms of Tuberculosis	...	...	0·60

---

## Census, 1911.

Population	...	...	85,495
Buildings used as Dwellings	...	...	11,976
Average number of persons per house	...	...	7·1
Ordinary Dwelling Houses	...	...	10,062
Average number of persons per house	...	...	6·7

---

Area of Borough	...	...	2265 acres
„ „ (excluding area covered by water)	...	...	2253 acres



## POPULATION.

The population of the Borough at the middle of the year 1920 was estimated by the Register-General to have been 91,519.

This figure is, of course, an estimate only ; and I feel sure it is an under-estimate of the population of the Borough at the middle of 1920, and the coming Census, which is to be taken on 19th June, 1921, will be of great assistance in arriving at correct figures. The last Census was taken in 1911. When the population was rationed in November, 1919, upwards of 96,000 people were put upon rations, and this did not include certain military population.

Never within my experience of the Borough has it been so populous as to-day. It would not, therefore, surprise me if the population of the Borough proved to be upwards of 100,000.

The natural increase in population, *i.e.*, excess of births over deaths, was 706.

I have prepared the following estimates of the population of each Ward, but in view of the length of time that has elapsed since the last Census, and of the intervening disturbances, these figures can only be regarded as rough estimates.

Ward.	Estimated Population
No. 1 (Town) .. ..	14600
No. 2 (Belsize) .. ..	14500
No. 3 (Adelaide) .. ..	10900
No. 4 (Central) .. ..	10719
No. 5 (West End) .. ..	13600
No. 6 (Kilburn) .. ..	15700
No. 7 (Priory) .. ..	11500
The Borough .. ..	91519

### Physical Features and General Character of the Borough.

Physically, Hampstead is a hilly district, varying in height from 100 feet above sea-level at Chalk Farm to 438 feet at the Flagstaff at the summit of the Heath. Though consisting of a large elevation in

the London clay, a large portion of the Borough is sand, this sand capping the top of the Hampstead Hill and being in places 80 feet deep. This cap of sand is known as the Bagshot sands and is a continuation of a huge stretch of sand which is found over a large portion of Surrey, Hampshire and Berkshire.

It is one of the healthiest and most popular districts around London for private residence; it is almost entirely residential, the greater portion being composed of well-to-do people, with two districts situated on the east and west composed almost entirely of the working classes.

The atmosphere is dry and bracing, and the prevailing winds south-west and mild.

### MARRIAGES.

According to the return kindly furnished to me by the Superintendent Registrar of Hampstead, it appears that 859 marriages were registered in the Borough during 1920, as compared with 777 in the preceding year.

The following Table gives the marriage rates per 1,000 of the population for the years 1910-1920 :—

1910	-	14·8	1915	-	23·2
1911	-	16·3	1916	-	17·8
1912	-	15·0	1917	-	18·7
1913	-	14·9	1918	-	18·5
1914	-	19·0	1919	-	17·0
		1920	-		16·6

### BIRTHS.

During the year 1,594 births—837 males and 757 females—were registered in Hampstead, as compared with 1,064 registered in the previous year. Of the 1,594 births, 134 males and 137 females—were of children who could not be deemed to belong to Hampstead. In addition, 243 births of children—132 males and 111 females—whose mothers were Hampstead residents, occurred outside the Borough in Lying-in Institutions, &c.

The nett number of births belonging to Hampstead was therefore 1,566—835 males and 731 females—as compared with 1,156 in 1919, and being an increase of no less than 410.



The following are the birth rates per 1,000 of the population for each of the Wards, the Borough, London, and England and Wales :—

No. 1 (Town) Ward	..	..	14·2
No. 2 (Belsize) „	..	..	14·6
No. 3 (Adelaide) „	..	..	14·7
No. 4 (Central) „	..	..	12·2
No. 5 (West End) „	..	..	19·7
No. 6 (Kilburn) „	..	..	26·0
No. 7 (Priory) „	..	..	15·4
<b>The Borough</b> ..	..	..	<b>17·1</b>
London ..	..	..	26·5
England and Wales ..	..	..	25·4

The excess of male children born over female children has been most pronounced during 1920 ; the total excess amounting to 104. This increase is in consonance with the excess of male children over female children born in the whole country in recent years ; and which has accompanied the close of the War.

The birth rate for 1920 shows a marked increase over that for recent years. For many years the birth rate has steadily declined from the highest rate 24·5 recorded in 1878 ; the lowest being 11·1 in 1918. Such a high birth rate as the year under review has not been achieved since 1906, when a similar rate was recorded.

In the Table on page 112 the birth-rates of Hampstead may be compared with those of England and Wales since 1891.

### Illegitimate Births.

Of the 1,594 births registered in the Borough 41 were of illegitimate children.

Of the total 1,566 nett births belonging to Hampstead, 88 or 56 per 1,000 births registered were those of illegitimate children. 55 of these were born outside the Borough, chiefly in Lying-in Institutions, while 8 occurring within the Borough were considered not to be Hampstead children. The rate per 1000 births in 1919 was 101. This subject is referred to in the Section relating to Maternity and Child Welfare.

## DEATHS.

The "recorded" death rate is the rate obtained by calculating the number of "nett" deaths per 1000 of the population. From the total deaths of civilians registered is deducted the number who were non-resident persons, and, after subtracting these, the number of deaths of civilian Hampstead residents who died outside the Borough is added. The total nett deaths during 1920 was 860, or 9.4 per 1000 of the population, as compared with 11.8 in the preceding year.

The following are the death-rates per 1000 of the population for each of the Wards, the Borough, London, and England and Wales:—

No. 1 (Town) Ward	..	..	9.7
No. 2 (Belsize) „	..	..	9.1
No. 3 (Adelaide) „	..	..	10.0
No. 4 (Central) „	..	..	8.5
No. 5 (West End) „	..	..	8.7
No. 6 (Kilburn) „	..	..	10.9
No. 7 (Priory) „	..	..	8.3
<b>The Borough</b>	..	..	<b>9.4</b>
London ..	..	..	12.4
England and Wales	..	..	12.4

In the table on page 112 the death-rates of Hampstead may be compared with those of England and Wales since 1891.

The following table shows the death-rate of Hampstead as compared with the rates of the County of London, and the Metropolitan Cities and Boroughs:—



TABLE SHOWING THE DEATH-RATES FROM ALL CAUSES IN THE COUNTY OF LONDON, THE CITY OF LONDON, AND THE METROPOLITAN BOROUGHES DURING 1920.

DISTRICT.					Death-rate from all causes.
<b>Hampstead</b>	..	..	..	..	<b>9·4</b>
Wandsworth	..	..	..	..	10·0
Woolwich	..	..	..	..	10·4
Lewisham	..	..	..	..	10·8
Paddington	..	..	..	..	11·1
Hammersmith	..	..	..	..	11·2
Fulham ..	..	..	..	..	11·3
Camberwell	..	..	..	..	11·5
Westminster, City of ..	..	..	..	..	11·6
Chelsea ..	..	..	..	..	11·9
Greenwich	..	..	..	..	11·9
Deptford ..	..	..	..	..	12·0
Battersea ..	..	..	..	..	12·3
St. Pancras	..	..	..	..	12·3
St. Marylebone	..	..	..	..	12·5
Hackney ..	..	..	..	..	12·6
Stoke Newington	..	..	..	..	12·8
Bermondsey	..	..	..	..	13·0
Kensington	..	..	..	..	13·0
Lambeth ..	..	..	..	..	13·0
Islington ..	..	..	..	..	13·3
London, City of	..	..	..	..	13·3
Southwark	..	..	..	..	14·4
Stepney ..	..	..	..	..	14·4
Finsbury ..	..	..	..	..	14·5
Poplar ..	..	..	..	..	14·6
Bethnal Green	..	..	..	..	14·7
Holborn ..	..	..	..	..	14·9
Shoreditch	..	..	..	..	15·4
County of London	..	..	..	..	12·4



### Deaths at Various Ages.

The following table shows the number of deaths at the various age periods, the causes of such deaths being shown in the Tables on pages 15 and 75.

Age Periods.	Under 1 year.	1 and under 2 years.	2 and under 5 years.	5 and under 15 years.	15 and under 25 years.	25 and under 45 years.	45 and under 65 years.	65 and upwards	All Ages.
Deaths	75	14	12	19	27	93	230	390	860

It will be seen that 45 per cent. of the deaths occurring were of persons aged 65 and upwards.

Detailed information concerning the deaths of infants under one year of age is given in the Section relating to Maternity and Child Welfare.

### Causes of Death.

The causes of death are given in the Table at the end of this Section.

#### *Cancer.*

The deaths from Cancer call for special consideration. The following Table gives the number of deaths from Cancer and the death-rate per 1,000 of the population in each of the years 1914—1920.

Year.	No. of Deaths from Cancer.	Death-rate per 1000 of the population.
1914	114	1.31
1915	118	1.44
1916	113	1.38
1917	107	1.41
1918	105	1.46
1919	123	1.40
1920	120	1.31

Of the deaths from Cancer, 76 were females and 44 males. On this point it must be borne in mind that the population of the Borough was found at the census of 1911 to consist of 52,688 females and 32,807 males. In 53 cases the persons were over 65 years of age.

The next table gives the anatomical distribution of the disease in each sex.

Situation.			Males.	Females.	Total.
Tongue .. ..	..	..	1	3	4
Desophagus .. ..	..	..	5	3	8
Stomach .. ..	..	..	8	6	14
Liver and Gall Bladder ..	..	..	7	11	18
Intestines .. ..	..	..	6	6	12
Rectum .. ..	..	..	6	6	12
Uterus .. ..	..	..	—	11	11
Breast .. ..	..	..	—	13	13
Other organs .. ..	..	..	11	17	28
Totals ..			44	76	120

*Diarrhœa and Enteritis.*

Of the total deaths at all ages from Diarrhœa and Enteritis in Hampstead during 1920, which numbered 12, 5 took place among children under one year of age. The deaths from these diseases at various age periods in recent years is as follows:—

YEAR.			Under 1 year.	1 and under 2 years.	2 and under 5 years.	5 and under 15 years.	15 and under 25 years.	5 and under 45 years.	45 and under 65 years.	65 years and upwards.	All ages.
1914.. ..	..	..	7	2	1	1	—	1	2	2	16
1915.. ..	..	..	14	—	1	—	—	2	—	1	18
1916.. ..	..	..	6	—	—	—	—	—	—	2	8
1917.. ..	..	..	9	—	—	—	—	—	1	2	12
1918.. ..	..	..	8	—	—	—	—	—	3	2	13
1919.. ..	..	..	16	—	1	—	—	—	2	2	21
1920.. ..	..	..	5	—	—	—	—	2	4	1	12
Totals ..			65	2	3	1	—	5	12	12	100

*Principal Epidemic Diseases.*

All of these, with the exception of whooping cough, are notifiable diseases, and information concerning them is set out in Section "D" of this Report. The total number of deaths from the principal epidemic diseases is as follows; the death-rate being 0·27 per 1000 of the population.

Enteric Fever	2	Scarlet Fever	4	Small-pox	—
Whooping Cough	6	Measles	8	Diphtheria	5



*Tuberculosis.*

The mortality from Tubercular Diseases is dealt with in Section "D" of this Report.

*Child Mortality.*

The deaths of children under five years of age are referred to in Section "E."

*Violent Deaths (excluding Suicide).*

19 deaths were classified under this heading as compared with 20 in 1919. The causes of death were as follows:—4 were due to falls indoors, and 4 to falls out of doors; 6 to injuries caused by being knocked down or run over by motor or tram cars, etc., and 1 to poisoning. Occurring among children 3 deaths were due to suffocation, and 1 to injury to head. No death due to overlying was registered in the year.

*Suicide.*

11 persons committed suicide, the number in 1919 being 10.

The causes of death were as follows:—Asphyxia by coal gas, 1; hanging or strangulation by rope or cord, 2; drowning, 2; cut throat with razor, 5; jumping from window, 1.

CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE DURING  
THE YEAR 1920.

CAUSES OF DEATH.	Nett deaths at the subjoined ages of "Residents," whether occurring within or without the Borough.									
	Sex.	All ages.	Under 1 year.	1 and under 2 years.	2 and under 5 years.	5 and under 15 years.	15 and under 25 years.	25 and under 45 years.	45 and under 65 years.	65 years and upwards.
	2	3	4	5	6	7	8	9	10	11
1. Enteric Fever ... ..	M	1	...	...	...	...	...	1	...	...
	F	1	...	...	...	...	...	1	...	...
2. Small-pox ... ..	M	...	...	...	...	...	...	...	...	...
	F	...	...	...	...	...	...	...	...	...
3. Measles ... ..	M	3	...	...	2	1	...	...	...	...
	F	5	1	3	...	1	...	...	...	...
4. Scarlet Fever ... ..	M	4	...	1	3	...	...	...	...	...
	F	...	...	...	...	...	...	...	...	...
5. Whooping Cough ... ..	M	3	1	2	...	...	...	...	...	...
	F	3	2	1	...	...	...	...	...	...
6. Diphtheria and Croup ...	M	2	1	...	...	1	...	...	...	...
	F	3	...	...	...	3	...	...	...	...
7. Influenza ... ..	M	8	...	...	...	...	1	1	2	4
	F	10	...	...	...	...	3	1	3	3
8. Erysipelas ... ..	M	2	...	...	...	...	...	...	...	2
	F	2	...	...	...	...	...	...	...	2
9. Pulmonary Tuberculosis	M	14	...	...	...	...	2	8	4	...
	F	27	...	...	...	2	6	4	11	4
10. Tuberculous Meningitis	M	2	...	...	1	1	...	...	...	...
	F	4	1	2	1	...	...	...	...	...
11. Other Tuberculous Diseases	M	3	...	...	...	...	1	2	...	...
	F	5	...	...	...	...	2	2	1	...
12. Cancer, malignant disease	M	44	...	...	...	...	...	...	29	15
	F	76	...	...	...	1	...	9	28	38
13. Rheumatic Fever ... ..	M	2	...	...	...	1	...	...	...	1
	F	3	...	...	...	1	1	1	...	...
14. Meningitis (A) ... ..	M	2	2	...	...	...	...	...	...	...
	F	1	...	...	...	...	1	...	...	...
15. Organic Heart Disease ...	M	54	...	...	...	...	...	4	17	33
	F	62	...	...	1	3	...	4	17	37
16. Bronchitis... ..	M	26	1	...	1	...	...	1	4	19
	F	22	4	1	...	...	...	...	...	17
17. Pneumonia (all forms) ...	M	34	5	2	1	...	...	1	13	12
	F	35	2	1	...	...	1	7	6	18
18. Other Respiratory Diseases	M	5	...	...	1	1	...	...	3	...
	F	9	...	...	...	...	1	2	1	5
19. Diarrhœa, &c. (B) ... ..	M	8	5	...	...	...	...	1	2	...
	F	4	...	...	...	...	...	1	2	1
20. Appendicitis and Typhlitis	M	3	...	...	...	...	...	...	2	1
	F	6	...	...	...	1	...	4	1	...
21. Cirrhosis of Liver ... ..	M	2	...	...	...	...	...	1	1	...
	F	2	...	...	...	...	...	1	1	...
21A. Alcoholism ... ..	M	...	...	...	...	...	...	...	...	...
	F	1	...	...	...	...	...	...	...	1
22. Nephritis and Bright's Disease	M	15	...	...	...	...	...	1	5	9
	F	12	...	...	...	...	...	1	6	5
23. Puerperal Fever ... ..	M	...	...	...	...	...	...	...	...	...
	F	2	...	...	...	...	...	2	...	...
24. Parturition apart from puerperal fever	M	...	...	...	...	...	...	...	...	...
	F	1	...	...	...	...	...	1	...	...
25. Congenital Debility, &c.	M	22	22	...	...	...	...	...	...	...
	F	12	12	...	...	...	...	...	...	...
26. Violence, apart from Suicide	M	12	2	...	1	...	1	2	2	4
	F	7	2	...	...	1	1	...	2	1
27. Suicide ... ..	M	8	...	...	...	...	...	3	4	1
	F	3	...	...	...	...	...	1	1	1
28. Other Defined Diseases	M	112	6	...	...	...	3	14	31	58
	F	150	6	...	...	1	3	11	31	98
29. Causes ill-defined or unknown ... ..	M	1	...	1	...	...	...	...	...	...
	F	...	...	...	...	...	...	...	...	...
All causes {	M	392	45	6	10	5	8	40	119	159
	F	468	30	8	2	14	19	53	111	231
TOTALS ... ..		860	75	14	12	19	27	93	230	390

All "Transferable Deaths" of residents, *i.e.*, of persons resident in the Borough who died outside it, have been included. Transferable deaths of non-residents, *i.e.*, of persons resident elsewhere in England and Wales who died in the Borough have in like manner been excluded.

14 (A) Exclusive of "Tuberculous Meningitis" (see Title 10), but inclusive of Cerebro-spinal Meningitis.  
19 (B) Title 19 is used for deaths from Diarrhœa and Enteritis at *all ages*.







## Section B.

# SANITARY CIRCUMSTANCES OF THE BOROUGH.

## Scavenging.

The arrangements having been completed for dealing with the house refuse of the Borough by crushing, these are now well towards completion and should be in operation shortly.

## Sanitary Inspection of Borough.

Much of the work of the Sanitary Inspectors, which is of great value in maintaining and improving the standard of sanitation of the Borough, does not readily admit of tabulation and cannot be reported upon in that manner; but the following Statement and information affords some indication of the work of the staff of the Public Health Department:—

*Statement of information, and of sanitary work accomplished, &c., during 1920.*

Total number of Inspections, 6790.	Re-inspections, 11492.
„ Intimation Notices, 1128.	Statutory Notices 897.
„ deposits of plans and particulars for redrainage work, &c., 579.	
„ Complaints of insanitary conditions received and investigated, 778.	

### Smoke Nuisances—

Number of nuisances and complaints	..	..	3
„ of observations	..	..	29
„ of notices	..	..	—
„ of summonses	..	..	—

### Housing of the Working Classes—

Number of houses inspected	..	..	16
„ of representations by householders	..	..	—
„ of houses included in such representations	..	..	—
„ of representations by Medical Officer of Health	..	..	16
„ of houses included in such representations	..	..	16
„ of houses remedied without closing orders	..	..	7
„ of closing orders	..	..	14
„ of houses included in such closing orders	..	..	14

Number of closing orders determined	..	..	4
„ of demolition orders	..	..	10
„ of houses demolished—			
(a) in pursuance of orders (voluntarily by Owners)	..	..	8
(b) voluntarily	..	..	2
„ buildings demolished	..	..	10
„ of houses dealt with under section 15 of the Housing Act, 1909	..	..	—

*Obstructive Buildings—*

Number of representations under section 38, Housing Act, 1890	..	..	—
„ representations still under consideration	..	..	—

Number of orders for repairs issued under section 28, Housing Act, 1919	..	..	—
„ of houses repaired by Borough Council	..	..	—
„ of houses closed on notice by owner that they could not be made fit	..	..	—

*Total number of houses in the Borough* .. .. 12091

*Number of houses occupied by the Working Classes* .. .. 1833

*Number of houses for the Working Classes—*

(a) erected during 1920	..	..	..	—
(b) in course of erection	..	..	..	—

*Other Details—*

Closing orders confirmed	..	..	..	—
Work in hand at end of year at premises under closing orders	..	..	..	—

	No. on Register.	No. of Inspections.	No. of Notices.	No. of Prosecutions.
<i>Houses let in Lodgings</i>	405	663	349	—
<i>Common Lodging Houses</i>	—	—	—	—

*Underground Rooms—*

Number illegally occupied	..	..	..	34
„ closed or illegal occupation discontinued	..	..	..	34
„ of prosecutions	..	..	..	—

*Overcrowding—*

Number of rooms found overcrowded	..	..	..	13
„ remedied	..	..	..	13
„ of prosecutions	..	..	..	—



*Cleansing—*

Number of adults cleansed	..	..	..	26
„ of children cleansed or re-cleansed	..	..	..	1525
„ of rooms or premises cleansed	..	..	..	42

*Water supply to tenement houses—*

Number of houses dealt with	..	..	..	86
„ of tenements supplied	..	..	..	143
„ of prosecutions	..	..	..	—

*Bakehouses—*

		Factories.	Workshops.
Number on Register	..	21 (12 under-ground)	18 (8 under-ground)
„ of Inspections	..	48	38
„ of Notices	..	—	—
„ of Prosecutions	..	—	—

*Sale of Food, &c.—*

	Milkshops.	Ice-cream. Premises.	Restaurant Kitchens.	Slaughter-houses.	Cowsheds.	Fried Fish Shops.	Offensive Trades.	Other Food Premises
Number on Register ..	85	72	63	4	nil.	9	nil.	515
„ of Inspections	260	118	202	24		36		1545
„ of Notices ..	8	8	7	—		—		25
„ of Prosecutions	—	—	—	—		—		—

*Disinfection Shelter -*

Number of persons accommodated	..	..	—
--------------------------------	----	----	---

*Customs and Inland Revenue Acts—*

Number of houses for which certificates asked	..	2
„ of dwellings contained therein	..	6
„ of houses certified	..	—
„ of dwellings contained therein	..	—

*Public Mortuary—*

Number of bodies admitted	..	..	54
---------------------------	----	----	----

*Increase of Rent and Mortgage Interest (Restrictions) Acts—*

Number of certificates applied for ..	..	..	29
„ „ issued	..	..	24

In addition to the matters mentioned in the foregoing Statement, the following subjects call for special mention :—

### Legal Proceedings.

Legal proceedings were taken by the Council in connection with the work of the Health Department in 44 cases during the year. The facts relate only to the cases that were heard and decided in 1920.

Statute or By-law.	Fines.			Costs.		
	£	s.	d.	£	s.	d.
Public Health (London) Act, 1891, and Bye-laws made thereunder .. .. .	79	0	0	32	8	5
Metropolis Management Acts, and Bye-laws made thereunder .. .. .	33	0	0	14	14	0
Sale of Food and Drugs Acts	20	0	0	4	0	0
Factory and Workshop Act...	5	0	0	5	0	0
Total .. .. .	137	0	0	56	2	5

### Drainage Works.

Since the Bye-laws of the London County Council, which require the deposit of plans and particulars, came into operation in August, 1903, 617 plans for the drainage of new buildings and 10,048 plans for the alteration and reconstruction of drains in existing premises have been received. During 1920, 579 deposits of plans and particulars relating to redrainage work, etc., and 11 relating to new buildings were approved.

### Cleansing Station.

During 1920, 26 cleansings of adults and 1,525 cleansings of children were carried out at the Cleansing Station, in the Electricity Station Yard, Lithos Road, by the Council's Attendant, and whilst this was in progress their clothes were thoroughly disinfected.

Full details of the medical examination of school children in London County Council Schools will be found in the Section of the Report dealing with Maternity and Child Welfare.



### Customs and Inland Revenue Acts.

During the year applications for certificates under these Acts were received in respect of 6 dwellings. No certificates were issued.

### Increase of Rent and Mortgage Interest (Restrictions) Acts 1919 and 1920.

During the year 29 applications have been made for certificates under these Acts, and have been suitably dealt with. In this connection 24 certificates were issued.

### Smoke Nuisances.

During the year observations were made in 29 instances by the Sanitary Inspectors, but it was not found necessary to serve any notices.

### Public Mortuary.

During the year the bodies of 54 persons were brought to the mortuary—25 by order of the Coroner, 13 by the Police, and 16 at the request of friends of deceased persons. In 36 instances inquests were held, and in 30 instances postmortem examinations were made and inquests followed. The following table indicates the causes of death of the persons whose bodies were received into the Mortuary.

Cause of Death or Verdict				Number of Bodies received.
Deaths from natural causes	..	..	..	30
Accidental deaths	..	..	..	8
Open Verdict	..	..	..	1
Misadventure	..	..	..	5
Neglect at Birth	..	..	..	3
Suicide—Fall from window	..	..	..	1
Poisoning	..	..	..	3
Drowning	..	..	..	1
Cut throat	..	..	..	1
Total				53

In addition to these 53 bodies, the body of one still-born child was also brought to the Mortuary.

### **Disinfecting Station.**

During the year 1,583 houses or parts of houses, together with their contents were disinfected, while in addition all infected articles of clothing, &c., were suitably dealt with.

### **Certificates as to Water Supply.**

Under the terms of Section 48 of the Public Health (London) Act, 1891, it is provided that a newly erected or rebuilt house shall not be occupied as a dwelling house until it is certified as possessing a proper and sufficient supply of water.

During the year applications were received in respect of two new houses and certificates were granted in both cases.

### **Premises and Occupations which can be controlled by Bye-laws or Regulations.**

A reference to bye-laws in regard to houses let in lodgings will be found in the section relating to "Housing."

### **Underground Rooms.**

The Regulations made by the Borough Council under section 17 (7) of the Housing Town Planning, &c., Act, 1909 were set out *in extenso* in my Annual Report for 1919. A room *habitually used as a sleeping place*, the floor of which is more than three feet below the surface of the part of the street adjoining or nearest to the room, or more than three feet below the surface of any ground within nine feet of the room, is to be deemed to be a dwelling house so dangerous or injurious to health as to be unfit for human habitation, if the room (a) is not on an average at least seven feet in height from floor to ceiling, or (b) does not comply with the Regulations made for securing the proper ventilation and lighting of such rooms and their protection against dampness, effluvia or exhalation. During 1920 the illegal occupation of underground rooms was discontinued in 34 cases.



## FACTORY AND WORKSHOP ACT, 1901.

Section 132 of the Act requires every Medical Officer of Health in his Annual Report specially to report on the administration of the Act, and five tabulated statements were framed by the Home Secretary with a view to such reports being made upon uniform lines.

### Factories, Workshops, and Workplaces (including Out-Workers premises).

---

#### Administration.

The supervision of these premises is largely controlled by the Factory and Workshops Acts; and in London by the Public Health (London) Act, 1891.

For the purpose of their duties with respect to workshops and workplaces under the Acts, the Borough Council and their officers are given by section 125 of the Factory and Workshop Act, 1901, the same powers of entry, inspection, taking legal proceedings, or otherwise, as are possessed by Factory Inspectors.

Under section 131 of the Act of 1901, it is the duty of the Borough Council to keep a Register of all Workshops situate within their district. During 1920 our records have been brought up-to-date, and an inspection has been made of the Borough with this object in view, for, during the War, changes have occurred which to some extent had rendered the Register somewhat out-of-date. A new Register has been made, and advantage has been taken of this opportunity to prepare the Register on the card-index principle.

The following summary briefly states the powers and duties of the Borough Council in relation to factories, workshops and workplaces.

*Factories.*—In the case of factories the duties of the Borough Council are few. They have, however, special duties in regard to bakehouses and domestic factories, and in the enforcement of the requirements of section 38 of the Public Health (London) Act, 1891, as to the provision of suitable and sufficient sanitary conveniences.

*Workshops and Workplaces.*—In regard to workshops and workplaces, the Borough Council have important duties which may be broadly classified under four heads :—

- (1) The supervision of the sanitary conditions of workshops and workplaces generally. The principal conditions are those relating to (a) cleanliness, (b) air space, (c) ventilation and (d) drainage of floors.
- (2) The enforcement of the provision of suitable and sufficient sanitary accommodation.
- (3) The enforcement of special sanitary regulations for bake-houses.
- (4) The control of conditions under which certain classes of work are done in the homes of the workers.

*Domestic Factories and Domestic Workshops.*—In some cases, dwellings in which home work is done constitute a factory or workshop. Such places are subject to the ordinary provisions of the Acts with regard to factories and workshops. An important exception, however, is made for dwellings in which no mechanical power is used, and the only persons employed are members of the same family dwelling there. These places (termed “Domestic Factories” and “Domestic Workshops”) are exempted from many of the provisions of the Act.

*Workplaces.*—These are neither factories nor Workshops, but are places “where work is done permanently and where people assemble together to do work permanently of some kind or other.” Thus, a stable or stableyard where men were employed as cab cleaners and horse keepers has been held to be a workplace. The Secretary of State has been advised that the kitchens of restaurants, &c., though they are not workshops, come within the meaning of the term “workplace,” which it will be seen is a fairly comprehensive one.



1.—*Inspection of Factories, Workshops, and Workplaces.**Including Inspections made by Sanitary Inspectors.*

Premises. (1)	Number of		
	Inspections. (2)	Written Notices. (3)	Prosecutions. (4)
Factories .. .. . (Including Factory Laundries)	96	6	—
Workshops .. .. . (Including Workshop Laundries)	448	21	—
Workplaces .. .. . (Other than Outworkers premises included in Part 3 of this Report)	1545	25	—
Total .. .. .	2089	52	—

2.—*Defects found in Factories, Workshops, and Workplaces.*

Particulars.  (1)	Number of Defects.			Number of Prosecutions.  (5)
	Found.  (2)	Remedied.  (3)	Referred to H.M. Inspector.  (4)	
<i>Nuisances under the Public Health Act :—</i>				
Want of cleanliness .. .. .	55	55	—	—
Want of ventilation .. .. .	22	22	—	—
Overcrowding .. .. .	6	6	—	—
Want of drainage of floors .. .. .	—	—	—	—
Other nuisances .. .. .	43	43	—	—
Sanitary accommodation {	insufficient .. .. .	1	1	—
	unsuitable or defective .. .. .	5	5	—
	not separate for sexes .. .. .	2	2	—
<i>Offences under the Factory and Workshop Act :—</i>				
Illegal occupation of underground bakehouse (s. 101) .. .. .	—	—	—	—
Breach of special sanitary requirements for bakehouses (ss. 97 to 100) .. .. .	—	—	—	—
Other offences .. .. .	—	—	—	—
(Excluding offences relating to outwork, which are included in Part 3 of this Report)				
Total .. .. .	134	134	—	—

## 3.—Home Work.

76 lists of outworkers were received from employers. These contained 164 entries.

*NATURE OF WORK.		Outworkers' Lists, Section 107.					
		Lists received from Employers.					
		Sending Twice in the year.			Sending Once in the year.		
		Outworkers†			Outworkers		
		Lists	Con- tractors.	Work- men.	Lists	Con- tractors.	Work- men.
1		2	3	4	5	6	7
(1) Wearing Apparel—							
(a) making, &c. ... ..		34	13	65	19	16	19
(b) cleaning and washing ... ..		4	—	6	1	1	—
(2) Making-up, ornamenting, finishing and re- pairing of table linen, bed linen, or other household linen (including in the term linen articles of cotton or cotton and linen mixtures) and any process incidental thereto ... ..		2	2	6	—	—	—
(3) Making, ornamenting, mending, and finishing of lace and of lace curtains and nets ... ..		2	—	5	—	—	—
(4) Making of curtains and furniture hangings and any process incidental thereto ... ..		6	5	4	—	—	—
(5) Cabinet and furniture making and upholstery work ... ..		2	2	4	1	—	1
(6) Making of Electro-plate ... ..		—	—	4	—	—	—
(7) Making of files ... ..		—	—	—	—	—	—
(8) Manufacture of brass and of any articles or parts of articles of brass (including in the term brass any alloy or compound of copper with zinc or tin) ... ..		—	—	2	—	—	—
(9) Fur-pulling ... ..		—	—	2	—	—	—
(10) Making of iron and steel cables and chains ... ..		—	—	—	—	—	—
(11) Making of iron and steel anchors and grapnels ... ..		—	—	—	—	—	—
(12) Making of cart gear, including swivels, rings, loops, gear-buckles, mullin bits, hooks, and attachments of all kinds ... ..		—	—	—	—	—	—
(13) Making of locks, latches, and keys ... ..		—	—	—	—	—	—
(14) Making or repairing of umbrellas, sunshades, parasols, or parts thereof ... ..		2	—	2	1	—	1
(15) Making of artificial flowers ... ..		—	—	—	—	—	—
(16) Making of nets other than wire nets ... ..		—	—	—	—	—	—
(17) Making of tents ... ..		—	—	—	—	—	—
(18) Making or repairing of sacks ... ..		—	—	—	—	—	—
(19) Covering of racquet or tennis balls ... ..		—	—	—	—	—	—
(20) Making of paper bags ... ..		—	—	—	—	—	—
(21) Making of boxes or other receptacles or parts thereof made wholly or partially of paper, cardboard, chip, or similar material ... ..		2	—	4	—	—	—
(22) Making of brushes ... ..		—	—	—	—	—	—
(23) Pea picking ... ..		—	—	—	—	—	—
(24) Feather sorting ... ..		—	—	—	—	—	—
(25) Carding, boxing, or packeting of buttons, hooks and eyes, pins, and hair pins ... ..		—	—	—	—	—	—
(26) Making of stuffed toys ... ..		—	—	—	—	—	—
(27) Making of baskets ... ..		—	—	—	—	—	—
(28) Manufacture of chocolate or sweetmeats ... ..		—	—	—	—	—	—
(29) The making or filling of cosagues, Christmas crackers, Christmas stockings, or similar articles or parts thereof ... ..		—	*	—	—	—	—
(30) The weaving of any textile fabric ... ..		—	—	—	—	—	—
Total ... ..		54	22	104	22	17	21

Notices served on occupiers as to keeping or sending lists of Outworkers, Nil; Prosecutions in relation to Outworkers' Lists, Nil.

Outwork in unwholesome premises, Sec. 108, Nil; Outwork in infected premises, Secs. 109—110, Nil.

\* In the case of those occupiers who gave out work of more than one of the classes specified in Column 1, and subdivided their lists in such a way as to show the number of workers in each class of work, the list has been included among those in column 2 (or 5 as the case may be) against the principal class only, but the outworkers have been assigned in columns 3 and 4 (or 6 and 7) into their respective classes.

† The figures in columns 2, 3 and 4 are the total number of the lists received from those employers who comply strictly with the statutory duty of sending two lists each year, and of the entries of names of outworkers in those lists.



4.—*Registered Workshops.*

Workshops on the Register (s. 131) at the end of the year. (1)	Number. (2)
Bakers .. .. .	17
Bootmakers .. .. .	32
Dressmakers and ladies' tailors .. .. .	68
Tailors .. .. .	41
Upholsterers .. .. .	20
Other trades .. .. .	183
<b>Total number of workshops on Register ..</b>	<b>361</b>

5.—*Other Matters.*

Class. (1)	Number. (2)
Matters notified to H.M. Inspector of Factories :—	
Failure to affix Abstract of the Factory and Workshop Acts (s. 133) .. .. .	41
Action taken in matters referred by H.M. Inspector as remediable under the Public Health Acts, but not under the Factory and Workshop Acts (s. 5) } Notified by H.M. Inspector ..	5
Other .. .. .	4
Reports (of action taken) sent to H.M. Inspector .. .. .	5
Underground Bakehouses (s. 101.) in use at the end of the year .. .. .	20

**Factories.**

The following is a list of the different classes of Factories in Hampstead :—

Bakers .. .. .	21	Laundries .. .. .	2
Bootmakers .. .. .	14	Metal Workers .. .. .	5
Builders .. .. .	4	Motor Workers .. .. .	10
Butchers .. .. .	8	Opticians .. .. .	2
Carpet Beaters .. .. .	2	Printers .. .. .	12
Coffee Roasters .. .. .	5	Other trades .. .. .	20
Dairymen .. .. .	2		
Engineers .. .. .	4		
			<b>111</b>

96 inspections were made during the year and 6 notices were served,

### Workshops.

At the end of 1920 there were 329 workshops on the Register, and in addition 32 domestic workshops. Excluding these latter, there were 493 males and 611 females employed in the workshops. During the year 448 inspections were made and 2 notices served.

Trade or Business.	Workshops other than Domestic Workshops.				Domestic Workshops.	Total number of Workshops.
	Number of Work-shops.	Number of Work-rooms.	Number of Employees.			
			Males.	Females.		
Bakers ... ..	17	18	39	7	—	17
Blindmakers ... ..	3	5	5	3	—	3
Bootmakers ... ..	31	34	59	—	1	32
Builders and carpenters ...	19	22	30	—	—	19
Cabinetmakers and polishers	3	10	29	—	1	4
Carriage builders ... ..	4	12	13	—	—	4
Corset makers ... ..	2	3	—	5	—	2
Cycle makers and repairers ...	2	6	6	3	—	2
Dressmakers and ladies' tailors	60	68	6	295	8	68
Harness makers ... ..	3	4	11	1	—	3
Ironmongers ... ..	13	13	24	—	—	13
Laundresses ... ..	3	8	2	24	—	3
Milliners ... ..	21	21	—	45	3	24
Monumental masons ... ..	2	2	13	—	—	2
Motor makers and repairers...	12	19	46	—	—	12
Outfitters ... ..	7	24	1	90	—	7
Pianoforte makers ... ..	2	4	12	—	—	2
Picture frame makers ... ..	10	12	12	—	—	10
Sign writers ... ..	2	6	8	4	—	2
Smiths ... ..	8	8	15	—	—	8
Tailors ... ..	28	34	46	39	13	41
Upholsterers ... ..	19	22	25	19	1	20
Watchmakers and jewellers...	11	11	16	—	—	11
Wigmakers ... ..	10	11	1	22	—	10
Miscellaneous ... ..	37	54	74	54	5	42
Totals ... ..	329	431	493	611	32	361

### Domestic Workshops.

As stated in the preceding table, the number of domestic workshops known to the Department is 32.

### Workplaces.

Among the more important workplaces in Hampstead are the kitchens of restaurants, coffee-houses, &c. During the year 1545 inspections were made and 25 notices were served.

### Home Work.

Certain specified classes of work done at the homes of the workers are controlled by virtue of special clauses in the Factory and Workshop Act, 1901. The object of this supervision is to prevent



the home work being done in insanitary dwellings, or in premises where there is dangerous infectious disease. Every occupier of a factory, workshop, or place from which such work is given out, and contractors employed by such occupiers, are required by law to keep lists showing the names and addresses of all persons employed by them, either as workmen or contractors, outside the factory, workshop or place, and the premises where they are employed. The occupiers are required to send to the Council twice in each year, viz.:—on or before 1st February and 1st August, copies of such lists. Upon receipt of these lists, the names and addresses of home workers residing in the districts of other sanitary authorities are forwarded to the Medical Officers of Health concerned.

In preceding Table 3, page 25, will be seen an analysis of the Outworkers' lists during the year.

## Section C.

### FOOD.

---

#### Milk Supply.

The number of premises in respect of which persons are registered as purveyors of milk is 85, comprising 45 dairies, 18 bakehouses and confectioners, 11 restaurants and coffee shops, and 11 general shops.

During the year 260 inspections were made and 8 notices were served.

#### Milk.

An important step was taken by the Ministry of Health in October in the matter of pure milk, when they addressed a communication to the Borough Council calling attention to the arrangements under which the Food Controller, on the advice of the Ministry, issues licenses permitting and regulating the use of the designations "Grade A (Certified) Milk" and "Grade A Milk" in connection with the sale of milk produced and handled in accordance with prescribed conditions.

The Ministry desired that increased publicity should be given to the arrangements and that producers and distributors should be encouraged, by a growing demand, to undertake the supply of high grade milk.

The licenses issued by the Food Controller permit, under certain specified conditions, the use of the designations:—1. "Grade A Milk," and 2. "Grade A (Certified) Milk."

"Grade A Milk," in relation to the sale of which licenses are issued, must be produced under specially clean and hygienic conditions from a herd free from tuberculosis; and certain important conditions must be complied with.

Although there is much to be said for an endeavour such as this to place within the reach even of only a certain section of the community milk which is pure, it is equally desirable that *all* Milk supplied to the



*whole* population should also be pure, for, as the Ministry of Health state in their "Pamphlet in regard to the use of Milk":—

"Milk is essential to the healthy growth of infants and children; it is often the most important article of diet in sickness. It is therefore necessary that there should be a sufficient supply of good milk at a reasonable cost for all who require it."

Yet milk often contains considerable dirt which has got into it from dirty conditions at the farm, in the dairy, on the railway, or in the street when delivered to the customer. If it were fully realised how easily milk may be contaminated and spread diseases such as infantile diarrhoea, typhoid fever, scarlet fever, and diphtheria; and how persons may develop tuberculosis as a result of drinking infected milk, it is probable that far more consideration would be given to the subject, and that the general public would demand that all milk should conform to a standard as high as that now prescribed for "Grade A Milk."

The County Council's Veterinary Inspector, when examining cows at farms outside the County, sometimes finds tuberculous animals in the herds; and despite all efforts that are made to prevent it occurring, milk infected with the tubercle bacillus is still being sent to London.

### **Bacteriological and Chemical Analysis of Milk Samples.**

The Public Health Committee having decided that samples of the milk supply of the Borough should be specially analysed bacteriologically and chemically, in addition to the routine sampling of milk that is carried out; five samples were taken, one each at Cricklewood Heath Street, West End Lane, South End Road, and Adamson Road.

Details of these 5 samples are as follows:—

*Sample No. 1, 12th February.*—Sample taken at Cricklewood; milk arrived at Willesden Green Station about 9.45 a.m. from a farmer of Finmere; morning's milk; churn 16, lid 48. Contents of churn: 8 barn gallons; sample, 1 quart.

*Chemical Examination.*—Specific gravity at 60° F. 1030.9; total solids, 11.98 per cent.; fat, 3.42 per cent.; solids not fat, 8.55 per cent.; ash, 0.71 per cent.; boric acid and formaldehyde absent. No evidence of tuberculosis, sample of satisfactory quality.

*Bacteriological Examination.*—Number of organisms per c.c., 114,555; no *B. coli* were found in  $\frac{1}{10}$ th c.c.; the amount of "dirt" present was not greater than 5 parts in 1,000; the organisms present in the deposit included cocci, streptococci, and diphtheroids.

*Sample No. 2, 12th February.*—Sample taken at Heath Street; milk arrived about 12.30 from Ashby Manor; morning's milk; churn 5,553, lid 11. Contents of churn: 8 barn gallons; sample, 1 quart.

*Chemical Examination.*—Specific gravity at 60° F. 1031.2; total solids, 12.48 per cent.; fat, 3.90 per cent.; solids not fat, 8.58 per cent.; ash, 0.72 per cent.; boric acid and formaldehyde absent. No evidence of tuberculosis, sample of satisfactory quality.

*Bacteriological Examination.*—Number of organisms per c.c., 274,221; *B. coli* were found in  $\frac{1}{10}$ th c.c.; the amount of "dirt" present was not greater than 5 parts in 1,000; the organisms present in the deposit included cocci and streptococci.

*Sample No. 3, 13th February.*—Sample taken at West End Lane, 11.15 a.m.; milk arrived from Edgecott, near Aylesbury, ex Calvert Station; churn, No. 3 on the lid, no number on the churn. Contents of churn: 8 barn gallons; morning's milk; sample, 1 quart.

*Chemical Examination.*—Specific gravity at 60° F. 1,030.6; total solids, 11.48 per cent.; fat, 3.18 per cent.; solids not fat, 8.30 per cent.; ash, 0.70 per cent.; boric acid and formaldehyde absent; no evidence of tuberculosis, sample of poor quality, the amount of "solids not fat" being below the minimum required by the legal standards of the Board of Agriculture. These standards are: Fat not less than 3.0 per cent., solids not fat not less than 8.5 per cent.

*Bacteriological Examination.*—Number of organisms per c.c., 277,333; *B. coli* were found in  $\frac{1}{1000}$ th c.c.; the amount of "dirt" was not greater than 5 parts in 1,000; the organisms present in the deposit included cocci, streptococci, and a few diphtheroids.



*Sample No. 4, 13th February.*—Sample taken at South End Road; arrived at Hampstead Heath Station at 12.45, ex Bucks, from Buckingham; morning's and evening's milk mixed; churn 58, lid 64. Contents of churn: 8 barn, 17 imperial gallons; sample, 1 quart.

*Chemical Examination.*—Specific gravity at 60° F. 1,031.8; total solids, 12.36 per cent.; fat, 3.48 per cent.; solids not fat, 8.88 per cent.; ash, 0.72 per cent.; boric acid and formaldehyde absent. No evidence of tuberculosis, sample of satisfactory quality.

*Bacteriological Examination.*—Number of organisms per c.c., 214,888; *B. coli* were found in  $\frac{1}{100}$ th c.c.; the amount of "dirt" present was not greater than 5 parts in 1,000; the organisms present in the deposit included cocci, streptococci and yeasts.

*Sample No. 5, 10th March.*—Sample taken at Adamson Road at 11.25 a.m.; morning's milk; sample, 1 quart.

*Chemical Examination.*—Specific gravity at 60° F. 1,031.0; total solids, 12.02 per cent.; fat, 3.42 per cent.; solids not fat, 0.60 per cent.; ash, 0.60 per cent.; boric acid and formaldehyde absent. No evidence of tuberculosis. Sample of satisfactory quality.

*Bacteriological Examination.*—Number of organisms per c.c., 40,621; *B. coli* was found in  $\frac{1}{1000}$ th c.c. (1 out of 2 tubes); the amount of "dirt" as shown by the "dirt" test is less than 1 in 1,000; the organisms found on microscopic examination of the centrifuged deposit were Gram positive cocci and streptococci, but only in small numbers.

A perusal of the reports on these five samples demonstrates the following facts:—

In neither case was the tubercle bacillus found.

Each case exceeded the number of organisms set up for "Grade A (Certified) Milk," *i.e.*, not more than 30,000 organisms per c.c. (No. 5 sample only by a small number).

There was no preservative found in the samples.

Respecting *B. coli*; sample No. 1 alone did not exceed the standard set up for "Grade A (Certified) Milk, *i.e.*, no *B. coli* in  $\frac{1}{10}$  c.c.

With regard to sample No. 5, for a dairy sample of milk, the report of the number of organisms and the amount of dirt was very good indeed; and on that account the comparatively high *B. coli* content is surprising.

### Public Health (Milk and Cream) Regulations, 1912 and 1917.

These Regulations aim at securing that cream containing preservative shall be distinguished at all stages of sale from cream to which no preservative has been added. It is no longer permitted in any case to add preservative to milk.

The Ministry of Health require the Medical Officer of Health to report on the administration of the above-mentioned Regulations, and for convenience the report has been drawn up under the following headings:—

#### Report for the Year ended 31st December, 1920.

##### 1.—Milk; and Cream not sold as preserved Cream.

	(a)—Number of samples examined for the presence of a preservative.	(b)—Number in which preservative was reported to be present, and percentage of preservative found in each sample.
Milk .. ..	320	Nil.
Cream .. ..	6	Nil.

Nature of preservative in each case in column (b) and action taken under the Regulations in regard to it, nil.

##### 2.—Cream sold as Preserved Cream (no samples obtainable).

(a) Instances in which samples have been submitted for analysis to ascertain if the statements on the label as to preservatives were correct:—

1. Correct statements made, nil.

2. Statements incorrect, nil.

3. Percentage of preservative found in each sample, nil.

Percentage stated on Statutory label, nil.



(b) Determinations made of milk fat in cream sold as preserved cream :—1. Above 35 per cent., nil.

2. Below 35 per cent., nil.

(c) Instances where (apart from analysis) the requirements as to labelling or declaration of preserved cream in Article V (1) and the proviso in Article V (2) of the Regulations have not been observed :—nil.

(d) Particulars of each case in which the regulations have not been complied with, and action taken :—nil.

### 3.—Thickening substances.

(a) Any evidence of their addition to cream or to preserved cream, nil.

(b) Action taken where found, nil.

### 4.—Other observations (if any), nil.

## Milk (Mothers and Children) Order, 1919.

The effect of this Order is to empower the local authority to supply milk to expectant and nursing mothers and young children (without previously obtaining the consent of the Ministry of Health), free or under cost price, where some person authorised by the local authority certifies this to be necessary by reason of the retail price in its district.

The grant from the Ministry in this matter is limited to the cost of assistance to necessitous cases occurring among expectant and nursing mothers, and children under five years of age.

The scale of weekly income below which help is given is as follows :—

2 Parents	..	40s.
For each of the first 3 children	..	15s.
For the 4th child and others	..	10s.

The amount of milk towards which the Council contribute is based upon the following scale :—

For children under 18 months, not more than  $1\frac{1}{2}$  pints daily.

For children between 18 months and two years, not more than one pint daily.

For expectant and nursing mothers, one pint daily.

The following table gives the percentage analysis of the cases being helped in 1920, either receiving milk free of cost, or being assisted in its purchase:—

		Minimum.			Maximum.			Average.			Percentage of total cases assisted.
		£	s.	d.	£	s.	d.	£	s.	d.	

*Widow and one child.*

Income	..	..	0	12	0	1	16	8	1	1	7	4
Rent	..	..	0	3	0	0	7	0	0	3	6	

*Man, wife, and one child.*

Income	..	..	0	5	6	2	17	0	1	15	10	11
Rent	..	..	0	3	6	0	15	6	0	7	11	

(4 unemployed, in receipt of no income.)

*Widow and two children.*

Income	..	..	1	10	0	—			—			1
Rent	..	..	0	6	6	—			—			

(unemployed, in receipt of no income.)

*Man, wife, and two children.*

Income	..	..	0	15	0	3	10	0	2	6	10	24
Rent	..	..	0	3	6	0	17	6	0	8	4	

(2 unemployed, in receipt of no income.)

*Widow and three children.*

Income	..	..	1	10	0	2	12	0	2	2	0	2
Rent	..	..	0	5	0	0	9	4	0	6	10	

*Man, wife, and three children.*

Income	..	..	0	12	8	4	0	0	2	14	11	19
Rent	..	..	0	5	0	0	14	5	0	9	0	

(2 unemployed, in receipt of no income.)

*Widow and four children.*

Income	..	..	3	0	0	—			—			1
Rent	..	..	0	16	6	—			—			

(unemployed, in receipt of no income.)



											Percentage of total cases assisted.	
			Minimum.			Maximum.			Average.			
			£	s.	d.	£	s.	d.	£	s.	d.	
<i>Man, wife, and four children.</i>												
Income	..	..	0	13	10	4	0	0	2	19	6	15
Rent	..	..	0	5	6	1	0	8	0	9	9	
(2 unemployed, in receipt of no income.)												
<i>Man, wife, and five children.</i>												
Income	..	..	1	0	0	4	4	10	3	1	1	11
Rent	..	..	0	6	8	0	16	0	0	9	10	
<i>Widow and six children.</i>												
Income	..	..	1	16	0	—			—			1
Rent	..	..	0	11	4	—			—			
<i>Man, wife, and six children.</i>												
Income	..	..	1	15	0	5	0	0	3	7	9	7
Rent	..	..	0	6	0	0	13	6	0	9	11	
<i>Man, wife, and seven children.</i>												
Income	..	..	1	17	0	5	0	0	3	6	0	4
Rent	..	..	0	7	7	0	15	6	0	8	7	
												100

The help given by the Borough Council has been in the majority of cases to pay half the cost of milk where it has been assisted, but in May, when the price of milk fell to 8d. per quart, the Council reconsidered the amount of help to be afforded; and resolved that while the scale of weekly income below which help is given (which was adopted by the Council on 20th November, 1919) should be maintained; the Council should in future pay only any excess in the price of milk over and above 6d. per quart, with the exception of those cases in which the milk is supplied free.

This scale of payment held good until the end of September when the price of milk again rose to 10d. per quart, and the scale of help given by the Council for assisted milk was again raised to half the cost.

The following statement gives in tabular form an account of the milk given, either free or assisted, in each month of 1920. The amount paid by the Council during the year for this assistance was £1708 18s. 1d. :—

Month.	Number of families being helped.	Number receiving		Price of Milk per quart.	Rate of help given by Council.
		Assisted Milk.	Free Milk.		
January ..	328	293	35	1s.	} Council paid half the cost of Assisted Milk.
February	299	269	30	11d.	
March ..	325	294	29	"	
April ..	316	287	29	10d.	
May ..	384	345	39	8d.	} Council paid quarter the cost of Assisted Milk
June ..	300	266	34	"	
July ..	240	173	67	"	
August ..	172	124	48	"	
September	180	123	57	"	} Council paid half the cost of Assisted Milk
October ..	252	174	78	10d.	
November	238	148	90	"	
December	220	138	82	11d.	

### Food (other than Milk).

The Borough Council provides food other than milk for expectant and nursing mothers, where recommended by the Medical Officer in charge of the Pre-Maternity Clinics or by the Health Visitor. Arrangements have been made with tradesmen to supply food to the Council's order; and with proprietors of eating houses to supply dinners to expectant and nursing mothers. This latter seems the best and most popular way with the mothers; it has the advantage of ensuring that the woman herself eats the food, which is not always certain in other cases, and it is the method that is usually adopted in Hampstead.

The amount paid by the Council during 1920 for this assistance was £136 14s. 10d.

The Ministry of Health are prepared to pay grants not exceeding one half of approved nett expenditure involved in this connection.



The following table shows the number of persons receiving free dinners or other food (excluding milk) during each month of the year:—

Month.	Number of women receiving help.	
	Dinners.	Other Food (e.g., Oatmeal, Cocoa).
January .. ..	2	6
February .. ..	7	10
March .. ..	9	2
April .. ..	11	6
May .. ..	13	3
June .. ..	14	5
July .. ..	14	7
August .. ..	9	5
September .. ..	10	5
October .. ..	9	6
November .. ..	7	5
December .. ..	8	5

#### Unsound Food Seized or Surrendered.

The following is a list of food seized or voluntarily surrendered during the year.

Date.	Premises.	Food.	Quantity.
Jan. 19th	High Road, Kilburn	Corned Beef ... ..	1 tin.
		Tomatoes ... ..	14 tins.
		Eggs ... ..	352
Feb. 2nd	" ..	Rabbits ... ..	14
" 14th	" ..	Eggs ... ..	320
" 25th	Cricklewood	Corned Beef ... ..	6 lbs.
	Broadway		
" 25th	Fortune Green Road	Ox Kidneys ... ..	15 lbs.
Mar. 9th	Cricklewood	Cooked Ham ... ..	10 lbs.
	Broadway		
" 22nd	High Road, Kilburn	Rabbits ... ..	57 lbs.
" 24th	Belsize Parade ...	Beef ... ..	33 stone
April 8th	High Road, Kilburn	Milk ... ..	15 tins condensed
" 8th	" ..	Tomatoes ... ..	25 tins
" 8th	" ..	Eggs ... ..	308
May 7th	Cricklewood	Tomatoes ... ..	10 tins
	Broadway		
" 7th	" ..	Salmon ... ..	3 tins
" 7th	" ..	Milk ... ..	8 tins
" 7th	" ..	Salmon Paste ... ..	1 pot
" 7th	" ..	Ham and Tongue ...	2 pots

Date.		Premises,	Food,	Quantity.
May	21st	High Street ...	Corned Beef ...	6 lbs.
"	21st	" ...	Milk ...	28 tins
"	21st	" ...	Cooked Ham ...	17 lbs.
"	22nd	Fairfax Road ...	Beef ...	11 stone, 1 lb., 13 ozs.
June	2nd	Cricklewood ...	Milk ...	26 tins
		Broadway		
"	4th	High Street ...	Pears ...	2 tins
"	4th	" ...	Tomatoes ...	8 tins
"	4th	" ...	Sardines ...	5 tins
"	4th	" ...	Salmon ...	1 tin
"	4th	" ...	Tongue ...	1 tin
"	4th	" ...	Milk ...	33 tins
"	4th	" ...	Bloater Paste... ..	1 pot
"	4th	High Road, Kilburn	Eggs ...	305
"	26th	New End ...	Bacon ...	65 lbs.
July	1st	Finchley Road ...	Milk ...	8 tins
"	1st	" ...	Fish ...	3 tins
"	1st	High Street ...	Corned Beef ...	6 lbs.
"	1st	" ...	Tomatoes ...	7 tins
"	1st	" ...	Peaches ...	2 tins
"	1st	" ...	Pears... ..	4 tins
"	1st	" ...	Milk ...	10 tins
"	1st	" ...	Cooked Ham ...	5½ lbs.
"	2nd	High Road, Kilburn	Tomatoes ...	8 two-lb. tins
"	2nd	" ...	" ...	1 one-lb. tin
"	2nd	" ...	Eggs ...	120
"	8th	Cricklewood ...	Corned Beef ...	2¼ lbs.
		Broadway		
"	8th	" ...	Milk ...	5 tins
"	8th	" ...	Milk ...	6 tins
"	8th	" ...	Tomatoes ...	4 tins
"	8th	" ...	Pears ...	1 tin
"	8th	" ...	Pineapple ...	1 tin
"	8th	" ...	Salmon ...	1 tin
"	8th	Fairfax Road ...	Flour ...	30½ sacks
July	8th	" ...	Bread ...	190 lbs.
"	12th	" ...	" ...	39 lbs.
"	16th	High Street ...	Milk ...	29 tins
"	16th	" ...	Salmon ...	5 tins
"	16th	" ...	Pears ...	1 tin
"	16th	" ...	Tomatoes ...	2 tins
"	16th	" ...	Eggs ...	74
"	20th	High Road, Kilburn	Milk ...	22 tins
"	20th	" ...	" ...	2 tins
"	20th	" ...	Eggs ...	200
"	20th	" ...	Corned Beef ...	6 lbs.
Aug.	4th	Finchley Road ...	Milk ...	13 tins
"	4th	" ...	Corned Beef ...	2 tins
"	4th	" ...	Fish ...	2 tins
"	4th	" ...	Tomatoes ...	4 tins
"	4th	" ...	Ox Tongue ...	1 jar
"	4th	" ...	Potted Meat ...	1 jar
"	5th	High Road, Kilburn	Eggs ...	200
"	5th	" ...	Corned Beef ...	6 lbs.



Date.	Premises.	Food,	Quantity.
Aug. 17th	High Street ...	Corned Beef ...	4 $\frac{3}{4}$ lbs.
" 17th	" ...	Milk ...	10 tins.
" 17th	" ...	Fruit ...	8 tins
" 17th	" ...	Corned Beef ...	1 tin
" 17th	" ...	Fish ...	2 tins
" 17th	" ...	Eggs ...	35
" 31st	Cricklewood	Fish Paste ...	3 tins
	Broadway		
" 31st	"	Tomatoes ...	1 tin
" 31st	"	Pineapple ...	1 tin
" 31st	"	Corned Beef ...	6 tins
" 31st	"	Milk ...	15 tins
" 31st	"	Eggs ...	100
Sept. 3rd	West End Lane ...	Milk ...	10 tins
" 7th	Upper Park Road ...	Skate ...	2 stone.
" 24th	High Street ...	Milk ...	20 tins
" 24th	" ...	Salmon ...	4 tins
" 24th	" ...	Ox Tongue ...	1 glass
" 24th	" ...	Eggs ...	111
" 28th	Finchley Road ...	Fish ...	5 tins
" 28th	" ...	Tomatoes ...	1 tin
" 28th	" ...	Corned Beef ...	2 tins
" 28th	" ...	Eggs ...	273
" 28th	" ...	Potted Meat ...	5 jars
" 28th	" ...	Milk ...	16 tins
" 28th	" ...	Corned Beef ...	3 $\frac{1}{2}$ lbs.
Oct. 2nd	" ...	" ...	6 tins
" 8th	" ...	Fish ...	10 stone
" 13th	" ...	Eggs ...	127
" 27th	High Road, Kilburn	" ...	280
" 28th	High Street ...	" ...	132
" 28th	" ...	Milk ...	5 tins
Nov. 3rd	Finchley Road ...	Tomatoes ...	2 tins
" 3rd	" ...	Sardines ...	1 tin
" 3rd	" ...	Paste ...	4 pots
" 3rd	" ...	Milk ...	19 tins
" 3rd	" ...	Eggs ...	250
" 16th	High Road, Kilburn	" ...	210
" 16th	"	Milk ...	10 tins
" 16th	"	Tomatoes ...	1 tin
Dec. 8th	"	Barley ...	11 lbs.
" 16th	"	Eggs ...	270
" 30th	"	Luncheon Sausage ...	5 lbs.
" 30th	"	Tomatoes ...	8 tins
" 30th	"	Milk ...	2 tins
" 30th	"	Cream ...	1 tin
" 30th	"	Eggs ...	80

### Food Premises.

Section 8 of the London County Council (General Powers) Act, 1908, very considerably increased the power of Sanitary Authorities to improve and maintain the condition of food premises. These premises are kept under constant supervision by the Special Food Inspector.

During 1920 all food premises have been supervised. In 25 instances notices were served before insanitary conditions were abated.

#### Butter Factories and Wholesale Dealers in Margarine.

No premises were registered during the year as a Butter Factory. The only Butter Factory formerly registered was that occupied by the Express Dairy Co., Ltd., at 25 and 27, Heath Street, and this was struck off the Register in 1920, no butter being made on such premises.

During 1920 the following Wholesale Dealers in Margarine were registered in respect of the undermentioned premises:—

Home & Colonial Stores, Ltd., 182, Finchley Road.

Pearks' Dairies, Ltd., 6, Netherwood Street.

The other dealers previously registered are as follows:—

Home & Colonial Stores, Ltd., 88, Cricklewood Broadway.

„ 140, High Road, Kilburn.

„ 80, High Street.

„ 252, West End Lane.

Messrs. Lipton, Ltd., 48, Cricklewood Broadway.

„ 134, Finchley Road.

„ 312, High Road, Kilburn.

„ 59, High Street.

Messrs. The Maypole Dairy Co., Ltd., 304, High Street, Kilburn.

#### Fried Fish Shops.

The following is a list of the Fried Fish Shops in the Borough. These now kept under systematic inspection:—

TOWN WARD . . 7, Flask Walk, and 2, New End Square.

BELSIZE WARD . . 106, Fleet Road.

WEST END WARD . . 1A, Broomsleigh Street, and 1, Munro Terrace.

KILBURN WARD . . 132, High Road; 68 and 89, Kingsgate Road,  
95, Palmerston Road.



### Ice Cream.

There are 72 shops in the Borough in which Ice Cream is sold.

### Bakehouses.

At the end of 1920, there were 39 occupied bakehouses on the register, 20 being underground, and 19 above ground. Nine of the bakehouses situated above ground and twelve underground use power, and are therefore factories.

Forty-eight inspections were made in respect of the factory bakehouses, and 38 inspections in respect of the workshop bakehouses.

The following is a list of the occupied bakehouses on the Register at the end of the year:—

TOWN WARD .. 39, 67, Heath Street, 3, 67, High Street and 26, New End.

BELSIZE WARD .. †6 and †\*65 Fleet Road and †45 South End Road.

ADELAIDE WARD \*†44, England's Lane and \*2, King's College Road.

CENTRAL WARD.. \*64, Belsize Lane, †\*225, \*289 and †307, Finchley Road, \*98 and 250 West End Lane and †2, Broadhurst Gardens.

WEST END WARD †60 and †110, Cricklewood Broadway, †553, Finchley Road, Field Lane School, Hillfield Road, †\*43, 44, Mill Lane, †4, Munro Terrace, Fortune Green, and 251 and †\*279, West End Lane.

KILBURN WARD.. \*63, Hemstal Road, †\*94, †218 and \*†354, High Road, Kilburn, †\*4, Kelson Street, 67, Kingsgate Road, \*†99, Palmerston Road.

PRIORY WARD. . . \*202, †\*228, Belsize Road, \*†98, Boundary Road, \*†93, Fairfax Road, \*7, Fairhazel Gardens, and \*137, Finchley Road.

Those marked \* are underground bakehouses.

Those marked † are factory bakehouses.

Bakehouses—Underground .. 20

„ Above ground .. 19

Total ... 39

### Restaurant Kitchens, etc.

The total number of these premises on the register at the end of 1920 was 63. They are kept under regular supervision, 262 inspections have been made and 7 notices served during the year.

### Meat Supply.

The Meat Supply of the Borough is on the whole good. A list of the unsound food seized or surrendered is shown in detail on page 37.

### Slaughter Houses.

There are 4 Licensed Slaughter Houses in the Borough, situated at 40, England's Lane, and 17 and 69, High Street and 6 Fairfax Mews.

Licensed Slaughter Houses:—In 1914 there were 4; and in Jan. 1920, 4; and in Dec., 1920, 4.

There is no public abattoir in the Borough.

### Sale of Food and Drugs Act.

506 samples were taken for analysis during the year. The number certified to be adulterated was 2, or 0·39 per cent. of the total number, as against 1·0 in 1919. 2 samples were certified to be of low quality.

474 samples (2 of which were adulterated) were purchased from Hampstead tradesmen and 32 from tradesmen coming from other districts.

The following table shows the articles of which samples were taken during the year:—

Articles.	Number taken.	Adulterated.	Low Quality.
Bread .. ..	1	—	—
Butter .. ..	56	1	—
Cheese .. ..	20	—	—
Cocoa .. ..	22	—	—
Coffee .. ..	24	—	—
Cream .. ..	6	—	—
Dripping .. ..	1	—	—
Iodine, Tincture of .. ..	4	—	—
Lard .. ..	34	—	—
Margarine .. ..	11	—	—
Milk .. ..	320	1	2
Mustard .. ..	1	—	—
Pepper .. ..	1	—	—
Sugar .. ..	5	—	—
Totals .. ..	506	2	2



The following table shows the articles adulterated, nature of adulteration, and the results of proceedings taken :—

No. of Sample.	Article.	How adulterated.	Result of proceedings.
94	Butter ..	60 per cent. foreign fat	Fined £10 and £2 costs. Also fined £10 and £2 costs for selling the sample in an unmarked wrapper.
264	Milk ..	17 per cent. added water	Dismissed.

## Section D.

PREVALENCE OF AND CONTROL OVER  
INFECTIOUS DISEASES.

## 1.—Notifiable Infectious Diseases.

The following is a list, alphabetically arranged, of the infectious diseases which were compulsorily notifiable in Hampstead during 1920 :—

Anthrax	Ophthalmia Neonatorum
Cerebro-Spinal Meningitis,	Plague
acute	Pneumonia, acute influenzal or
Cholera	acute primary
Continued Fever	Polio-Encephalitis, acute
Diphtheria	Polio-Myelitis, acute
Dysentery	Puerperal Fever
Encephalitis Lethargica,	Relapsing Fever
acute	Scarlatina
Enteric Fever	Scarlet Fever
Erysipelas	Small-pox
Glanders	Trench Fever
Hydrophobia	Tuberculosis, all forms
Malaria	Typhoid Fever
Measles (from 1st August)	Typhus Fever
Membranous Croup	

No cases of the following notifiable diseases were reported during the year :—

Anthrax	Hydrophobia
Cholera	Membranous Croup
Continued Fever	Relapsing Fever
Glanders	Trench Fever

Typhus Fever.



# CASES OF INFECTIOUS DISEASE NOTIFIED DURING THE YEAR 1920.

NOTIFIABLE DISEASE.	Number of cases notified.								Total Cases Notified in each Ward.							Total Cases removed to Hospital.
	At all Ages.	At Ages—Years.							Ward No. 1 (Town).	Ward No. 2 (Belsize).	Ward No. 3 (Adelaide).	Ward No. 4 (Central).	Ward No. 5 (West End).	Ward No. 6 (Kilburn).	Ward No. 7 (Priory).	
		Under 1.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 45.	45 and under 65.	65 and upwards.								
Cerebro-spinal Meningitis, acute .. .. .	2	1	..	..	1	..	..	..	31	40	11	1	..	1	..	2
Diphtheria .. .. .	162	3	22	82	31	23	1	..	..	40	11	6	44	21	9	143
Dysentery .. .. .	1	..	..	..	..	1	..	..	1	1	..	..	..	..	..	2
Encephalitis Lethargica, acute .. .. .	4	..	..	1	..	1	1	1	1	1	..	2	..	..	..	7
Enteric Fever .. .. .	23	..	..	..	14	5	4	..	5	3	9	3	3	..	..	15
Erysipelas .. .. .	39	..	..	1	4	12	15	7	5	7	8	1	12	5	1	7
Malaria .. .. .	8	..	..	..	2	5	1	..	2	1	1	..	2	1	1	7
Measles (from 1st August) .. .. .	15	3	5	5	1	1	..	..	1	2	..	1	1	8	2	3
Ophthalmia Neonatorum .. .. .	9	9	..	..	..	..	..	..	2	..	..	..	2	3	2	8
Pneumonia .. .. .	75	2	9	5	11	26	13	9	13	16	10	9	5	17	5	1
Polio-encephalitis .. .. .	1	..	..	..	1	..	..	..	..	..	..	..	1	..	..	1
Polio-Myelitis, acute .. .. .	2	..	..	..	1	1	..	..	1	..	..	..	..	1	..	2
Puerperal Fever .. .. .	1	..	..	..	1	..	..	..	1	..	..	..	..	..	..	1
Scarlet Fever .. .. .	253	..	28	159	37	29	..	..	26	47	21	27	42	75	15	218
Small-pox .. .. .	1	..	..	..	..	..	1	..	..	..	..	..	..	..	1	1
*Tuberculosis, Pulmonary .. .. .	118	..	..	11	28	58	19	2	11	15	18	4	19	38	13	44
*Tuberculosis, Non-Pulmonary .. .. .	53	1	5	28	9	9	1	..	9	4	3	1	3	25	8	14
Totals .. .. .	767	19	69	292	141	171	56	19	108	137	81	55	134	195	57	461

Isolation Hospitals are provided by the Metropolitan Asylums Board, and residents of Hampstead suffering from infectious disease (excluding Tuberculosis) were chiefly removed to the North-Western Fever Hospital, which is within the Borough, and is situate at Lawn Road in No. 2 (Belsize) Ward.

Persons suffering from Tuberculosis when removed were sent to institutions in various parts of the country.

\* These figures relate only to cases notified for the first time in 1920.

CASES OF INFECTIOUS DISEASE OCCURRING IN EACH MONTH DURING  
1920.

DISEASE.	MONTHS.												Totals.
	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	
Cerebro Spinal Meningitis (Acute)	—	—	—	—	—	1	—	—	1	—	—	—	2
Diphtheria .. ..	13	10	13	14	12	9	3	11	17	17	20	23	162
Dysentery .. ..	—	—	—	—	—	—	—	—	—	—	1	—	1
Encephalitis Lethargica (Acute)	1	—	1	1	1	—	—	—	—	—	—	—	4
Enteric Fever .. ..	—	6	7	—	2	—	1	—	2	3	—	1	23
Erysipelas .. ..	3	4	1	4	2	3	5	5	—	4	2	6	39
Malaria .. ..	3	—	—	—	3	—	—	—	1	1	—	—	8
Measles (from 1st Aug.)	—	—	—	—	—	—	—	1	1	5	6	2	15
Ophthalmia Neonatorum .. ..	1	—	1	1	—	1	—	1	2	—	—	2	9
Pneumonia .. ..	14	7	14	12	11	2	2	—	3	3	5	2	75
Polio-encephalitis .. ..	—	—	—	—	1	—	—	—	—	—	—	—	1
Polio-Myelitis (Acute)	—	1	—	—	—	—	1	—	—	—	—	—	2
Puerperal Fever .. ..	1	—	—	—	—	—	—	—	—	—	—	—	1
Scarlet Fever .. ..	21	10	6	13	12	23	12	6	13	39	45	53	253
Small-pox .. ..	—	—	—	—	—	—	—	—	—	—	—	1	1
Tuberculosis Pulmonary .. ..	22	4	11	1	16	7	10	8	13	11	5	10	118
Tuberculosis Non-Pulmonary .. ..	—	3	13	3	2	3	4	4	6	6	5	4	53
Totals .. ..	80	45	67	49	62	49	38	36	59	89	89	104	767

### Cerebro Spinal Meningitis, Acute.

Two cases occurred in 1920, one in the person of a female aged 16 years, and the other a male aged 9 months. Both were removed from home to be nursed, and terminated fatally.

### Diphtheria and Membranous Croup.

The number of cases notified in 1920 was 162, as compared with 76 in 1919. The attack rate, or number of cases notified per 1,000 of the population, was 1·8 compared with the rate of 0·86 in the previous year.

The number of cases notified proving fatal was 5 or 3·1 per cent. of the cases notified, as against 9·2 per cent. in 1919. 143 patients, or 88 per cent. of the cases notified were removed to hospital.

In accordance with the Diphtheria Anti-toxin (London) Order, 1910, the Borough Council supply anti-toxin free to medical practitioners for use for the poorer inhabitants of the Borough.



In 357 instances examination of specimens in suspected cases was made at the Lister Institute, 86 giving a positive, and 271 a negative result.

### **Encephalitis Lethargica, Acute.**

This disease, together with acute polio-encephalitis, was first made compulsorily notifiable by Regulations which came into force on January 1st, 1919.

Four cases, all occurring among females, were notified during 1920, as follows:—

Patient, aged 46 years, nursed at home, recovered.

„ „ 14 „ died.

„ „ 34 „ not nursed at home, recovered.

„ „ 84 „ „ „ died.

### **Enteric Fever.**

The number of cases notified was 23 as compared with 7 in 1919. The attack rates per 1,000 of the population was 0·20, as compared with the rate of 0·08 in 1918. One of the cases notified proved fatal. 15 cases were removed to hospital.

### **Erysipelas.**

39 cases were notified, and four deaths occurred, as compared with 41 cases in 1919, none of which proved fatal. The attack rate per 1000 of the population was 0·43, as compared with the rate of 0·47 in 1919. Of the cases notified, 7, or 18 per cent, were removed to the Work-house Infirmary or Nursing Homes.

### **Polio-Encephalitis, Acute.**

This disease, together with acute Encephalitis Lethargica, was first made compulsorily notifiable by Regulations which came into force on January 1st, 1919.

One case occurred in 1920 in the person of a male, aged 20. The patient, who was not nursed at home, died.

### **Scarlet Fever.**

253 cases of scarlet fever were notified during the year, as compared with 116 in 1919. The number of cases per 1000 of the

population was 2·7; the corresponding figure in 1919 being 1·3. Four cases or 1·6 per cent. proved fatal as compared with 3 in 1919. Of the cases notified, 218, or 86 per cent., were removed to hospital.

### **Small-pox.**

Hampstead had been free from small-pox since 1907, in which year one case occurred. In December, 1920, one case was notified in the person of a male aged 46 years. The patient, an architect, whose permanent residence was at Southend, journeyed daily to his office at Chelmsford. He came to Hampstead on 23rd December to spend Christmastide; and fell ill on the day of arrival. The patient was promptly removed to the Small-pox Hospital of the Metropolitan Asylums Board; thorough disinfection was carried out; and every person who could be considered to be a "contact" was vaccinated the same day.

The contacts were kept under close observation for the usual period, and no further case occurred.

### *Vaccination.*

Of the total births dealt with by the Vaccination Officer, amounting to 1,596, in 1920, 826 were successfully vaccinated. In 8 cases the children were insusceptible of vaccination. In regard to 409, certificates of Conscientious Objection were obtained; 47 died before vaccination was performed; 38 cases of vaccination were postponed, and 268 remained to be dealt with.

I am indebted to the Vaccination Officer for these statistics.

### **Provision for Isolation of "Contacts."**

By the rearrangement effected last year the existing cleansing station, which occupies the cottage-shelter in the corner of the electricity yard (adjoining Lithos Passage) and the remainder of that building, will be able to be utilized, should occasion arise, as a shelter for small-pox and other infectious disease contacts and also for the temporary housing of poor persons during the disinfection of their goods or rooms.

By virtue of the Public Health (Small-pox Prevention) Regulations, 1917, the Medical Officer of Health is empowered to perform vaccination. It was not necessary for me to exercise this authority during the year.



### Malaria, Dysentry, Trench Fever, Acute Primary Pneumonia, and Acute Influenzal Pneumonia.

These diseases were made compulsorily notifiable by the Public Health (Pneumonia, Malaria, Dysentry, &c.) Regulations, 1919, which came into operation on March 1st, 1919.

#### *Malaria.*

Eight cases were notified; none was removed to hospital.

#### *Dysentry.*

One case was notified; the patient was not removed to hospital.

#### *Acute Primary and Acute Influenzal Pneumonia.*

75 cases were notified; 8 of which were removed to hospital.

### Measles, German Measles, Ophthalmia Neonatorum, Polio-Myelitis, and Puerperal Fever.

Details of these cases will be found in Section E relating to Maternity and Child Welfare.

### VERMINOUS CONDITIONS.

Information concerning the work done at the Borough Council's Cleansing and Disinfecting Stations in connection with verminous persons and their belongings will be found in Section B relating to Sanitary Circumstances of the Borough.

### TUBERCULOSIS.

During the year 1920, 171 new cases of Tuberculosis were notified, 118 being cases of Pulmonary Tuberculosis, and 53 other forms of the disease.

In the following table these 171 cases have been analysed as to sex and age, and it will be noticed that 39 per cent. were aged between 25 and 45.

			0-1.	1-5.	5-10.	10-15.	15-20.	20-25.	25-35.	35-45.	45-55.	55-65.	Over 65.	Total.
Pulmonary	males	...	—	—	6	—	5	6	13	11	7	4	1	53
"	females	...	—	—	4	1	8	9	20	14	6	2	1	65
Non-Pulmonary	males	...	1	2	11	6	1	—	3	2	—	—	—	26
"	females	...	—	3	5	6	2	6	2	2	1	—	—	27
			1	5	26	13	16	21	38	29	14	6	2	171

From a careful scrutiny of all the information available, it would appear that about 20 per cent. of the cases of tuberculosis that occur are not notified. About 5 per cent. are moribund when notified and approximately 10 per cent. die within a year of the date of notification.

It is my invariable practice upon receiving information of the death of a non-notified tuberculosis case to write to the certifying medical practitioner calling his attention to the oversight, and urging the importance of prompt notification of tuberculosis immediately upon diagnosis.

I desire to bring home to the medical practitioners the fact that the failure to notify promptly so large a percentage of cases is a distinct drawback in our efforts to combat the disease, and I would urge upon all medical practitioners the importance of notifying their tuberculosis cases as promptly as they would notify any other notifiable disease.

Of the cases newly notified during 1920, 8 were of persons already dead or dying, and in 8 other cases the patients did not survive the year under review. Of the total new cases in 1920 the number who have attended the Municipal Tuberculosis Dispensary is 107.

The number of cases notified in 1920 and previous years are as follows :—

Year.	Persons newly notified.		Total.
	Pulmonary Tuberculosis Voluntarily notifiable 1902; Compulsorily notifiable 1912.	Non-Pulmonary Tuberculosis (Notifiable from 1st Feb- ruary, 1913).	
1902 .. ..	51	—	51
1903 .. ..	34	—	34
1904 .. ..	39	—	39
1905 .. ..	27	—	27
1906 .. ..	35	—	35
1907 .. ..	55	—	55
1908 .. ..	30	—	30
1909 .. ..	67	—	67
1910 .. ..	77	—	77
1911 .. ..	113	—	113
1912 .. ..	183	—	183
1913 .. ..	244	56	300
1914 .. ..	142	30	172
1915 .. ..	172	48	220
1916 .. ..	193	51	244
1917 .. ..	256	52	308
1918 .. ..	291	70	361
1919 .. ..	165	48	213
1920 .. ..	118	53	171



The total number of cases of Tuberculosis known to the Department at the close of 1920 was 997—767 pulmonary and 230 non-pulmonary cases.

### Occupations.

The following is an analysis of the occupations of the new cases notified as tuberculous during 1920 :—

Occupation.	Pulmonary Cases.	Non-Pulmonary Cases.	Occupation.	Pulmonary Cases.	Non-Pulmonary Cases.
Architect ... ..	1	—	Labourer ... ..	1	1
Artist ... ..	2	—	Laundress ... ..	1	—
Baker ... ..	1	—	Licensed Victualler	1	—
Barrister ... ..	1	—	Manager ... ..	1	—
Charwoman ... ..	5	1	Man Servant ... ..	1	—
Chemist ... ..	2	—	Medical Practitioner	1	—
Clerk ... ..	9	—	No occupation ... ..	6	7
Domestic Servant	9	4	Porter ... ..	1	—
Engineer ... ..	1	1	School Child ... ..	11	28
Ex-Army Officer ...	3	—	Secretary ... ..	1	—
Ex-Soldier ... ..	17	3	Shop Assistant ... ..	3	2
Ex-Telegraph Mes-			Sister of Charity ...	1	—
sage Girl ... ..	1	—	Tailor ... ..	1	—
Ex-Postmen ... ..	3	—	Teacher ... ..	2	—
Factory Hand ... ..	1	1	Umbrella Finisher	1	—
Gravedigger ... ..	1	—	Waitress ... ..	—	1
Hairdresser ... ..	1	—	No Information ... ..	3	—
Housewife ... ..	25	4			
				118	53

### Removal of Cases.

Of the newly notified cases in 1920, 58 were removed.

	Pulmonary.	Non-Pulmonary
To Sanatoria (insured) ..	12	—
To Sanatoria (non-insured) ..	13	3
To Hospitals .. ..	8	7
To Infirmarys .. ..	5	1
To Nursing or other Homes..	6	3
	<u>44</u>	<u>14</u>

The following cases, notified prior to 1920, were also removed.

	Pulmonary.	Non-Pulmonary.
To Sanatoria (insured) ..	19	—
To Sanatoria (non-insured) ..	12	2
To Hospitals .. ..	14	2
To Infirmarys .. ..	3	1
To Nursing or other Homes..	4	3
	<u>52</u>	<u>8</u>

### Deaths from Tuberculosis.

The number of deaths from Tuberculosis in 1920 was 55. Of these 41 were due to Pulmonary Tuberculosis, 6 to Tubercular Meningitis, and 8 to other forms of Tuberculosis.

### Pulmonary Tuberculosis.

The following table shows the age distribution of patients dying from Pulmonary Tuberculosis in Hampstead since 1903 :—

Year.	Age Period.					All Ages.
	0—5	5—15	15—25	25—65	65—	
1903	—	1	14	46	5	66
1904	1	1	15	53	3	73
1905	1	—	12	57	3	73
1906	1	—	8	45	3	57
1907	1	2	10	45	3	61
1908	—	2	14	55	3	74
1909	1	1	12	37	2	53
1910	1	1	12	37	7	58
1911	1	1	5	44	5	56
1912	2	2	13	45	2	64
1913	—	1	4	39	5	49
1914	—	2	10	42	3	57
1915	—	1	7	37	3	48
1916	—	4	11	37	3	55
1917	—	—	21	47	1	69
1918	1	1	11	59	3	75
1919	—	1	13	39	3	56
1920	—	2	8	27	4	41
Totals	10	23	200	791	61	1085

### Non-pulmonary Tuberculosis.

The 14 deaths from all forms of Non-Pulmonary Tuberculosis in 1920 were distributed in age periods as follows:—0-5. 5; 5-15, 1; 15-25, 3; 25-65 5.



*Table showing the number of deaths and death-rates from all forms of Tuberculosis and from Pulmonary Tuberculosis since 1902.*

Year.	Total deaths from Tuberculosis.	Death-rate per 1000 Population.	Deaths from Pulmonary Tuberculosis.	Death-rate per 1000 Population.	Cases of Pulmonary Tuberculosis notified.
1902	97	1.18	73	0.89	51
1903	90	1.09	66	0.80	34
1904	102	1.23	73	0.88	39
1905	95	1.14	73	0.87	27
1906	79	0.94	57	0.68	35
1907	92	1.09	61	0.72	55
1908	84	0.99	74	0.87	30
1909	75	0.88	53	0.62	67
1910	80	0.94	58	0.68	77
1911	70	0.82	56	0.65	113
1912	77	0.88	64	0.74	183
1913	61	0.81	49	0.56	244
1914	71	0.82	57	0.66	142
1915	71	0.86	48	0.58	172
1916	80	0.98	55	0.67	193
1917	85	1.12	69	0.91	256
1918	89	1.24	75	1.04	291
1919	72	0.82	56	0.64	165
1920	55	0.60	41	0.45	118

The deaths from Pulmonary Tuberculosis and from all forms of Tuberculosis during 1920 were distributed among the wards as follows :—

Ward.	Area (Acres).	Estimated Population middle of 1918.	Pulmonary Tuberculosis.		Tuberculosis (All Forms.)	
			Deaths.	Death-rate per 1000 of the Population.	Deaths.	Death-rate per 1000 of the Population.
No. 1 (Town) ..	686	14,600	4	0.27	6	0.41
„ 2 (Belsize) ..	271	14,500	7	0.48	9	0.62
„ 3 (Adelaide)	325	10,900	3	0.28	4	0.40
„ 4 (Central)	312	10,719	2	0.19	3	0.28
„ 5 (West End)	247	13,600	6	0.44	8	0.60
„ 6 (Kilburn) ..	195	15,700	14	0.90	18	0.15
„ 7 (Priory) .	229	11,500	5	0.43	7	0.60
<hr/>						
The Borough ..	2,265	91,519	41	0.45	55	0.60

The loss of life occasioned by tuberculosis, which, it should always be remembered, is a preventable disease, has been frequently commented upon. In this matter, Hampstead suffers to a degree which, in view of its social conditions and healthy situation, is somewhat surprising, even when allowance is made for the number of persons who come to reside in so healthy a district. Since the Borough Council has been in existence, that is, during the 21 years 1900 to 1920, the total deaths from tuberculosis amount to 1735. Of these, 1300 were due to pulmonary tuberculosis and 435 to non-pulmonary tuberculosis. The total number of deaths of "residents" occurring from all causes during this period was 18,662, and it will thus be seen that no less than *nine per cent.* of the total deaths that occurred were due to one more or less preventable cause alone.

The economic loss to the community occasioned by the disease is not easily assessable, but there is no question that it must be very great, for the patient who frequently has other persons dependent upon him usually breaks down while in his wage-earning period of life. To this loss must be added the cost of the municipal and voluntary efforts to combat the disease, with sanatoria, hospitals, homes, dispensaries, etc. It is evident that such efforts alone are of limited use, for only too often the patient is forced to return to his previous environment and occupation; while some of the chief causes tending to the development of the disease, such as insanitary and overcrowded dwellings, still remain effectually to be dealt with. A great impetus would be given to the attempt properly to house the people, if the importance and close relation of this matter to tuberculosis were fully realised; and it is a moot question whether to attempt to effect a radical cure by far, wide-sweeping and drastic reforms in connection with housing, poverty, etc., would, in the long run, be more expensive to the community than the continual expenditure of money and effort that is now incurred, the results of which have undeniably fallen short of what was anticipated from them.

*Staff engaged on Tuberculosis Work.*—The staff specially engaged on work directly connected with Tuberculosis consists of the Tuberculosis Medical Officer (a part-time Officer), the Tuberculosis Dispensary Nurse, and one Lady Sanitary Inspector, the major portion of whose time is occupied in visiting cases, etc.

*Municipal Tuberculosis Dispensary.*—The report of the Medical Officer on the work of the Dispensary during 1920, will be found at the end of this section.



*Dental treatment for persons attending the Tuberculosis Dispensary.*—

In the early part of the year inquiries were made into the question of providing facilities for dental treatment for persons attending the Tuberculosis Dispensary, and as it appeared that a good service could be obtained from the British Dentists' Hospital, who undertook to supply a dentist for one session per week, the Council entered into an agreement with that Hospital accordingly. Grants will be received from the London Insurance Committee, from the London County Council, and from the Ministry of Health towards the expense incurred. The dental clinic was opened on 14th July, 1920, at the Tuberculosis Dispensary.

The following is a statement of attendances, etc.:—

	Insured.	Non-insured.	Total.
New Applicants ..	1	12	13
Old Cases. . .	11	40	51
	—	—	—
Totals ..	12	52	64
	—	—	—

The number of free consultations was 22.

Assistance is given by the Council to those persons who are unable to pay the full cost of their treatment and dentures, according to their means.

*Separate Beds and Shelter for Tubercular Patients.*—Early in the year the Borough Council decided to avail themselves of the powers conferred upon them by Section 3 of the Public Health (Prevention and Treatment of Disease) Act, 1913, which makes it lawful for the Council to make any such arrangements as may be sanctioned by the Ministry of Health for the treatment of tuberculosis. With this power, they decided to supply single beds in certain cases of tuberculosis, which were recommended by the Tuberculosis Medical Officer, with a view to providing the person suffering from tuberculosis with separate bed accommodation. Five beds have been provided for this purpose. In some of these cases the double bed, after disinfection by the Council, was disposed of by the owner who provided one single bed in its place, the double bed thus being supplanted by two single beds. In other cases the bedroom with the double bed is used by one parent and children, thus enabling the patient to have a single bedroom.

The Shelter, which was purchased by the Borough Council in 1913, has been used by suitable patients from time to time, and has been much appreciated.

*Home visiting of Ex-Service tuberculous men.*—The home visiting of tuberculous cases (which now includes that of ex-service men) has



been carried out for many years in Hampstead by Mrs. T. Fisher, M.A., one of the Borough Council's Lady Sanitary Inspectors.

The following information for the year 1920, required by the Ministry of Health in their circular letter dated 4th December, 1918, is submitted :—

1. Number of discharged men visited .. 91
2. Total number of visits of this kind .. 242
3. Proportion of number of visits to such cases to total number of visits to tuberculous cases .. 24 per cent.

### The Municipal Tuberculosis Dispensary.

Under the old arrangement for affiliating the Municipal Dispensary with the Hampstead General Hospital, Dr. A. J. Scott Pinchin, a member of the Staff of the Hospital, who was appointed in 1919, acted as Tuberculosis Medical Officer up to the close of the year. He was thus able to avail himself of facilities offered by the hospital such as consultations with Consulting Physicians, X-ray examinations, bacteriological examinations, etc., for which the Borough Council make a special payment.

The Borough Council possess the right to use two endowed beds at the Mount Vernon Hospital at Northwood; and two at the Hampstead General Hospital which latter would be available for cases of surgical tuberculosis.

In the following tabular statement some idea may be gained of the work done in connection with the Dispensary since its inception.

Year.	No. of New Applicants.	No. of New Applicants treated.	No. of Contacts examined.	Total Attendances of all kinds.	Total No. of Home Visits paid by Tuberculosis Medical Officer and the Nurse.
1913 1st Feb. to 31st Dec.	455	191	204	2808	1013
1914	455	118	195	1913	1269
1915	308	146	158	899	459
1916	230	165	100	1519	368
1917	383	183	113	1682	766
1918	371	105	124	1821	298
1919	296	85	57	1543	215
1920	384	221	112	2625	104

The number of patients being dealt with at any one time, varies of course; but from a return prepared in 1920 for the Ministry of Health it is seen that the number of patients who were examined or treated at, or in connection with the Dispensary during the period 1st April, 1919, to 31st March, 1920, was 595; while at the end of the year the number of patients being so dealt with was 606.



The following Report is submitted by A. J. Scott Pinchin, M.D. Lond.), M.R.C.P., Tuberculosis Medical Officer :—

**Report of the Tuberculosis Medical Officer for the year, 1920.**

*Return required by the Local Government Board, London County Council and London County Insurance Committee as to work carried out in connection with the Tuberculosis Dispensary for the period from 1st January—31st December, 1920.*

(This Return relates only to persons residing in the area served by the Dispensary in accordance with the scheme of the Metropolitan Borough Council.)

	Insured.		Non-insured.			Totals.
	M.	F.	Children under 16.	M.	F.	
1. (a) Number of persons examined for the first time during the above period at or in connection with the Dispensary	69	53	197	12	99	430
(b) Number included under 1 (a) who were found to be suffering from Pulmonary Tuberculosis	32	24	4	6	21	87
(c) Number included under 1 (a) who were found to be suffering from Non-Pulmonary Tuberculosis	8	5	33	—	2	48
(d) Number included under 1 (a) who were found to be non-tuberculous	26	17	135	5	67	250
(e) Number included under 1 (a) in whom the diagnosis was found to be doubtful	3	7	25	1	9	45

	Insured.	Non-insured.	Totals.
2. (a) Total attendances at the Dispensary (including attendances at the Dispensary of persons included under 1 (a))	650	1975	2625
(b) Number of the above attendances at which systematic physical examinations and records were made	412	728	1140
3. Number of visits to patients at their own homes by the Dispensary Medical Officer in connection with the supervision of home conditions	8	3	11
4. Number of visits to patients at their own homes by the Dispensary Nurse in connection with the supervision of home conditions and "following up"	35	58	93
5. Number of persons suffering from or suspected to be suffering from Tuberculosis referred to the Hospital to which the Dispensary is affiliated	2	14	16
6. Number of consultations with the—			
(a) Medical Adviser of the Insurance Committee	—	—	—
(b) Consulting Physicians at the Hospital to which the Dispensary is affiliated	5	6	11
(c) Practitioners at the homes of patients	1	—	1
7. Number of written reports concerning individual patients made to—			
(a) Public Authorities	137	74	211
(b) Practitioners	60	30	90
8. Number of specimens of sputum examined	274		274



*Examination of Contacts.*

Insured.			Children.			Non-Insured.			
Pos.	M. Neg.	Sus.	Pos.	F. Neg.		M. Neg.	F.		
					Pos. Neg. Sus.		Pos.	Neg.	Sus.
4	4	1	2	6	7 50 10	1	5	15	3
Pos. 18			Neg. 76		Sus. 14	Total 108.			

The above summary gives in detail the work which has been carried out at the Municipal Tuberculosis Dispensary during the past year; I think we may say that the Clinic has run smoothly and efficiently in the period under review. The close of 1919 saw the end from a practical point of view of new cases arising as a direct consequence of the war; and the period now under consideration more nearly approximates to the normal than any period since 1913; at the same time it has to be remembered that any condition causing a temporary increase of the cases in a district has its repercussion for some time in the number of contact cases arising in connection with them; the effect of such a temporary increase as occurred during the war and on demobilization is bound to have an influence on the numbers for some considerable period.

It will be noticed that there has been a very material increase in the patients attending the Dispensary compared with last year.

The total attendances at 2,625 are increased by 1,082, and systematic physical examinations at 1,140 show an increase of 357 in the same period.

New patients were 430 as compared with 296. Contact cases examined total 105; in addition to these a number of cases, "contacts of doubtful cases" have come at my request for examination.

Of the contact cases examined:—

18	were found to be tubercular
76	„ „ non-tubercular
14	„ „ doubtful

In connection with these cases we are fortunate in possessing the services of Mrs. Fisher, our Sanitary Inspector, whose long knowledge of the families and indefatigability in following them up is invaluable.

The large numbers dealt with have involved a great deal of extra work, which has fallen heavily on our Tuberculosis Nurse, her unfailing help even in times of greatest pressure has been of great assistance in carrying on the work.



I hope by means of the proposed extra services and redistribution of the nurse's work that the stress will be less, and I think that by a judicious reference of suitable cases for observation at the schools, as suggested by the London County Council, that the number of total attendances, and also the drug bill, may be reduced. More time will be left therefore for the examination of new cases and contacts.

The proposal mentioned above is as follows:—Children who are doubtfully positive and in delicate health shall be referred for periodic examination by the school doctor, and, if necessary, milk supplied at school; if their progress is not satisfactory they will be referred back, and in any case will be sent for examination every three months until discharged.

A considerable number of patients with various diseases have presented themselves for examination on their own initiative; one has considered whether it would be advisable to limit this freedom of attendance, as is done in some Boroughs, but inasmuch as a few of these cases have proved to be tubercular it would seem better not to do so. The term Dispensary is perhaps misleading to the poorer classes, who associate it with pre-existing Dispensaries for treatment of disease generally. Possibly the appellation Tuberculosis Clinic or Tuberculosis Consultative Centre would point the specific nature of our work more adequately.

Patients marked for Sanatorium and Hospital treatment under the London Insurance and London County Council schemes have been satisfactorily dealt with without undue waiting. We have kept in close touch with Dr. Mary Kidd, the Medical Officer in charge of the Borough Council's Pre-Maternity Clinics, both in the case of tubercular patients who have become pregnant, and in the case of patients attending her clinic in whom she has been suspicious of tuberculosis.

During the past year we have made considerable use of our agreement with the Hampstead General Hospital; 38 cases have been referred to the Out-Patient Department for treatment by the physicians or surgeons. The physicians to in-patients have also kindly taken in cases for observation and diagnosis, and I am grateful for their help.

Some 40 cases have been referred for radiographic observation, and the excellent radiogram supplied by the Radiologist have been of the greatest service. I am very glad that it is proposed to continue the use of this department.



The wave of prosperity amongst the poorer classes during and immediately succeeding the war, which did much to keep down the incidence of tuberculosis has passed away, and with the depression now ruling we are faced with further difficulties in the treatment of this disease. The head of the family is unwilling to give up his work to enter sanatorium and lose his occupation; the same applies to the wife; whilst the scarcity of work makes it increasingly difficult to transfer the patient and family to the country.

I may well conclude this report by some reference to the changes about to take place in the working of the Tuberculosis Dispensaries, Sanatoria, &c. The liason with general hospitals is to be dropped; nevertheless the not inconsiderable number of patients who come to the dispensary with disease other than tuberculosis, either because they have been said to have tuberculosis or they think they may have, and who are not able to afford a doctor, must still be referred to a general hospital in the district, as presumably must cases of surgical tuberculosis requiring operative treatment.

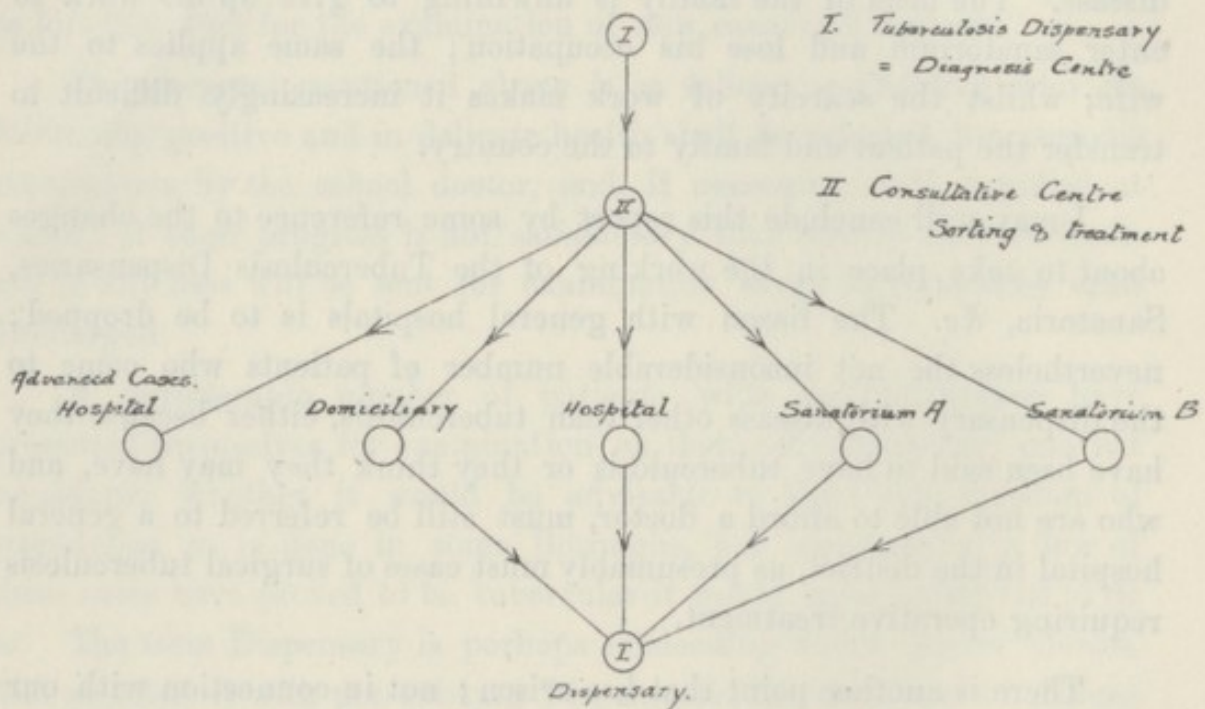
There is another point that has arisen; not in connection with our liason with the Hampstead General Hospital, as they have not yet the Finsen light installed, and that is in connection with cases of lupus.

Some of the hospitals are making a charge of 5s. a sitting for Finsen light. The treatments may be up to three a week, and are usually beyond the means of the patient. I believe this fee in some districts is being arranged for by the Borough Council in whose area the dispensary lies.

I have only had one case of lupus to refer for treatment, and this was kindly undertaken by the Dermatologist at University College Hospital, but as the cost of treatment is considerable to the hospital it is a point for consideration in future cases.

It would appear that the new suggestion may be rendered schematically, as follows:—





*Tuberculosis Dispensary.* Diagnosis Centre where a decision is made as to whether the patient is tubercular; the tubercular patient and the doubtful case where more detached observation is necessary to make a diagnosis if they are willing to accept sanatorium benefit will be sent to a Secondary Centre. Here they will be watched and a decision made as to the best form of sanatorium treatment in each case.

Inasmuch as the number of physicians sorting the cases will be much reduced, it is obvious that the selection will be to better advantage; therefore the early case of the disease will probably be able to make a longer stay and have a better chance of recovery.

But unless the number of beds available is materially increased we have to consider what will be the effect of this on the advanced cases: one can only think that it must mean reduced accommodation for them.

This is a serious matter, as is the general state of things as regards advanced cases. I am myself coming to regard an advanced case in a working-class house spreading a mass of infection at close contact, as a very serious matter for those in the home; and when we consider the number of definite cases that arise from this contact, and further the number of cases that one regards with grave suspicion but who appear to have sufficient resistance to conquer the infection, it is possible that the number of the family infected by such a state of things is larger than the ordinary figures would show.

I believe the only means of in any way combating this condition is in local hospital beds for advanced cases, where the relatives have easy access; which is not considered as a home for the dying; as the advanced case of tuberculosis is usually far more optimistic than their condition warrants, and where the suggestion of infirmary, carrying as it seems to the stigma of poor-law relief to the poorer classes, does not enter, even in this case the difficulties would be great as it is usually the wish of patients to end their days at home.

In conclusion I have to thank the Medical Officer of Health, Dr. Scrase, for his help and consideration on all occasions.

A. J. SCOTT PINCHIN,  
M.D. (Lond.), M.R.C.P.



## (2) Non-Notifiable Acute Infectious Disease.

*Chicken-pox.*

Cases of this disease are not now notifiable, the County Council's Order, made as a case of emergency, requiring the notification of cases of chicken-pox, having lapsed on June 30th, 1919.

*Influenza.*

In view of the possibility of a further definite epidemic "wave" being encountered, the Public Health Committee considered the matter, and, with the approval of the Council, constituted themselves an "Emergency Committee." Advisory leaflets were widely distributed and posters exhibited, and influenza vaccine was largely supplied to medical practitioners. The local members of the British Red Cross Society also volunteered assistance in nursing in the event of their services being needed. Various preliminary arrangements were made in other directions, but fortunately the disease did not assume epidemic proportions.

On the recommendation of the Public Health Committee, the Council informed the Ministry of Health and the London County Council that they were of opinion that an adequate system of ventilation of places of entertainment is very necessary, and urged that power should be given to impose proper conditions to attain that object.

During the year 18 deaths were recorded as being due to influenza. They occurred in the following Wards:—

No. 1 (Town), 2; No. 2 (Belsize), 3; No. 3 (Adelaide), 1; No. 4 (Central), 3; No. 6 (Kilburn), 7; No. 7 (Priory), 2.

The following table gives the deaths from Influenza in age periods in recent years:—

Year.	Under 1.	1—5.	5—15.	15—25.	25—45.	45—65.	65—.	Total.
1914 ..	—	1	—	—	—	3	9	13
1915 ..	1	—	—	—	3	8	11	23
1916 ..	—	—	—	—	1	2	17	20
1917 ..	—	—	—	—	1	4	10	15
1918 ..	1	7	11	31	62	29	21	162
1919 ..	3	2	—	9	45	17	19	95
1920 ..	—	—	—	4	2	5	7	18

The deaths of Hampstead "residents" from Influenza in 1920 occurred at ages and among sexes as follows :—

Age.	Sex.		Total.
	Male.	Female.	
Under 1 .. ..	—	—	—
1— 2 .. ..	—	—	—
2— 5 .. ..	—	—	—
5—15 .. ..	—	—	—
15—25 .. ..	1	3	4
25—45 .. ..	1	1	2
45—65 .. ..	2	3	5
65— .. ..	4	3	7
	8	10	18

These figures relate to Hampstead "resident" civilians only. Sailors, soldiers, airmen, and "non-residents" are not included.

#### Venereal Diseases.

Under the terms of the Public Health (Venereal Diseases) Regulations, 1916, the authority for the Administrative County of London (excluding the City of London) is the London County Council.

The only action that the Borough Council, therefore, is empowered to take, is in the nature of propaganda. The Public Health Committee appointed a special sub-committee to consider this subject, under the chairmanship of Mr. Councillor R. H. Hobart Cust, M.A. Among other action the Borough Council took was the displaying in several places of the posters of the London County Council, which give full information of the nearest treatment centres, and the distribution of special leaflets on the dangers of venereal disease.

Early in the year two lectures were arranged and were held in the Lecture Hall at the Central Library. The lecture for women was well attended, but the attendance at the men's lecture was disappointing.

The Venereal Diseases Sub-Committee and the Public Health Committee gave careful consideration to the divergent views of the two



Societies engaged in combating these diseases, and at the Committee's request, arrangements were made with the two Societies, viz. :—

The National Council for Combating Venereal Diseases, and  
The Society for the Prevention of Venereal Diseases,

each to send a representative to set out the views of his respective Society on the subject. The meeting was held at the Town Hall on the 24th November, and at the express desire of the Public Health Committee all members of the Council were specially invited to be present.

The National Council were represented by Mr. E. B. Turner, F.R.C.S., and the Society for Prevention by their Honorary Secretary, Mr. H. Wansey Bayly, M.C., M.A., M.R.C.S.

After carefully considering the methods and aims of the two Societies, the Council resolved, on 23rd December, to approve the aims and general policy of the National Council for Combating Venereal Diseases, and decided to inform the London County Council and both Societies accordingly.

During 1920 no death of a Hampstead resident was registered as being due to venereal disease; this cannot be regarded as an accurate indication of the facts. At present there seems to be no adequate means of obtaining this information. In any attack upon venereal disease it seems to me of the first importance to ascertain what is the mortality due to this disease, and I am of opinion that such information could be readily obtained by extending the system of notification of births to the notification of deaths. Thus, if the Medical Attendant were required to notify deaths to the Medical Officer of Health as they are required under the Notification of Births Act to notify births, a much more reliable guide to the death-rate from such causes as alcoholism and venereal diseases would be obtained.



## Section E.

### MATERNITY AND CHILD WELFARE.

The Borough Council's activities under this section are authorised by Section 1 of the Maternity and Child Welfare Act, 1918, which is as follows:—

“Any local authority, within the meaning of the Notification of Births Act, 1907, may make such arrangements as may be sanctioned by the Local Government Board for attending to the health of expectant mothers and nursing mothers and of children who have not attained the age of five years and are not being educated in schools recognised by the Board of Education . . . .”

Much work has been done, and steady progress achieved. During 1920 the number of births in Hampstead reached 1566 which is the highest figure since 1900. The infant mortality figure, 48, is especially gratifying; it is the lowest we have ever reached, and is easily the lowest in London, whilst in the whole Kingdom, of the 95 great Towns, Cambridge and Bournemouth alone show a lower figure. In my Report in 1919 on the Rosslyn Lodge Scheme I ventured to predict that it was within our power to reach an Infantile Mortality of 50 per 1000, and I think the accomplishment of this prediction is an achievement of which the Borough may be justifiably proud.

Various causes have operated to produce such a satisfactory result, among others the absence of marked epidemics of either Measles or Diarrhoea, and also the increased prosperity among the poorer inhabitants of the community. Although unemployment is now marked, during 1920 the economic condition of the working classes was good, whilst the wise policy of the Council under the Milk (Mothers and Children) Orders, &c., in supplying food and milk to expectant and nursing mothers and children under five years has undoubtedly largely helped in improving the general health of these classes of the community.

Although much has been done, the work must not slacken in any respect. This branch of a Borough Council's work, although carried out by Local Authorities, is in the main a national question, the saving of the on-coming race which at all times is a moral obligation and privilege, has now become a paramount national duty.

If the future race is to be raised to above the level of this present generation, then both the State and the Citizens must combine. It is



for the State to see that the people's food supply is pure and wholesome, and must strive for a high standard of sanitation; the important part played by food supply and environment on young life must ever be borne in mind. Children suffer to a greater degree than adults from impure air, absence of sunlight, underfeeding or unwholesome food. These conditions affect the infant before birth by lowering the health of the expectant mother, and again after birth of the infant, especially during the first four or six weeks, a period sometimes called the "neo-natal" period. A large part of the work of Medical and Sanitary Officers and Health Visitors to-day is of an educational nature, and there is much to be done in this direction in dispelling the prevailing ignorance upon such matters as domestic hygiene, the care and nurture of infants and children, and the need for fresh air and plain wholesome food. Our aim is not so much to do things for the mothers as to educate and to show them how to do things for themselves and for their children.

The citizens must actively support the State by a healthy public opinion. If only the populace could be led to strive for a higher standard of sanitary dwellings—internally no less than externally—and healthy environment with the same emphasis with which they insist upon other matters which really are of less importance, then we should hear less of such troubles as the "dirty tenant," and should see the beginning of a movement which would help us enormously in approximating to the ideal of an "A 1" population.

### ANTE-NATAL.

#### Ante-Natal Clinics for Expectant Mothers.

Two Clinics for expectant mothers have already been organised, one at 73, Dynham Road, Kilburn, and one at 59, South End Road.

**KILBURN CLINIC.**—This is held at the Municipal Dispensary, 73, Dynham Road, N.W. 6. It was started in June, 1917, and is open on Mondays from 2.30 to 4.30 p.m., and on Thursdays from 10 a.m. to noon. The average attendance at each clinic was 2 new cases and 10 old cases.

**SOUTH END ROAD CLINIC.**—This is temporarily housed in shop premises—59, South End Road—and has been approved as a temporary measure by the Ministry of Health. It was started in August, 1919, and is open on Thursdays from 3.30 to 5.30 p.m. The average attendance at each clinic was 2 new cases and 6 old cases.



Both these Clinics are staffed and managed entirely by the Borough Council. The report of the Medical Officer in Charge, Dr. Kidd, will be found on page 85.

### Maternity Hospital Beds to which complicated cases can be removed.

The Borough Council pays a subsidy per case for every Hampstead woman confined in Queen Charlotte's Hospital, and in return receives letters of admission. 63 Hampstead women were confined in Queen Charlotte's Hospital in 1920.

### NATAL.

#### Assistance to ensure the mother having skilled and prompt attendance during confinement at home.

*Skilled Maternity Nursing.*—By our agreements with the two Nursing Associations this can be obtained for cases in any part of the Borough. Both Nursing Associations now have fully trained nurses appointed to attend maternity cases.

By this arrangement any woman can have a fully trained nurse attend her together with her own doctor. A fee is charged the patient, which is in accordance with her means and may be nothing in very poor cases.

The number of cases thus nursed by the Associations during 1920 was :—

98 by the Kilburn and West Hampstead District Nursing Association ;

22 by the Hampstead District Nursing Association.

*Midwives.*—Arrangements have been made with both Nursing Associations for the provision of a properly skilled and registered midwife. The Borough Council guarantee each of the Associations against the loss on the working of a fully trained midwife. The conditions of this arrangement are as follows :—

1. That the midwives are competent and approved by the Council.
2. That their services are available for all women who need them.
3. That the ordinary fee of the district is charged, and that it is only reduced or remitted when the circumstances of the case justify this action.
4. That the Council may, if they desire, be represented upon the Committee of Management of the Nursing Associations.



5. That it be understood that their staff are to be subject to instructions from the Council.

The fees charged the patient have been carefully considered in reference to the midwives' fees prevailing in the district and have been graduated so as not to undercut the practising midwives. The number of cases attended by the Midwives of the Associations during 1920 was :—

- 100 by the Kilburn and West Hampstead District Nursing Association ;
- 12 by the Hampstead District Nursing Association.

### POST-NATAL.

#### Treatment in a Hospital of complications arising after Parturition, whether in the mother or in the infant.

The Borough Council has already endowed two beds in the Hampstead General Hospital, which can be utilised for the purpose of providing hospital accommodation for the mother.

As regards beds for infants, there are two classes of cases that may require treatment in a hospital :—

- (a) Children who are ill and have an ascertained definite disease.
- (b) Children who although not actually suffering from any nameable disease, yet are failing to thrive, and need to be placed somewhere where skilled and trained supervision can be exercised.

These latter beds have been designated by the name of "observation cots," to distinguish them from the beds for cases of well-defined illness.

The Borough Council has made arrangements with "Northcourt Hospital," College Crescent, whereby suitable cases may be admitted.

This Institution, lately the Northcourt Home for Incurables, has now become a General Childrens' Hospital, and the chief reason for the Borough's arrangement with Northcourt Hospital was for the purpose of providing observation cots and to put under regular trained observation those cases of infants who will not thrive although attending Welfare Centres. Some of these certainly are suffering from congenital disease, but some simply from bad feeding, either too much or too little food or food of an improper nature. A short time ought

to settle these points and a more appropriate *regime* laid down for the child if it is thus placed under skilled supervision.

The parents are assessed according to their means and up to the present little difficulty has been found in collecting their quota of the cost.

### **Systematic Home Visitation and Provision of Advice, etc., for Infants at Infant Welfare Centres.**

During the year the Borough Council has been at great pains to complete a scheme for Maternity and Child Welfare which would utilise the organisations and efforts of the voluntary bodies. This has not proved easy in all cases, but a scheme has at last been agreed upon which contains the following provisions:—

- (i.) The Borough Council's Health Visitors should be responsible for the whole of the Health Visiting. They should attend each consultation at the Centre and should be present when the Medical Officer of the Centre is advising the mothers in their district, so that they may hear the advice given and endeavour to get it carried out in the homes.
- (ii.) The organization and management of the Centres should continue in the hands of the Council of Social Welfare, who would appoint the Medical Officers and any other Officers needed for managing the educational classes, weighing of children, and the general direction of the Centre.
- (iii.) The Health Visitor whilst at the Centre should be under the control of the doctor only, and should, subject to the doctor's instructions, select the cases to be seen by the doctor.
- (iv.) The Health Visitor should report to the Medical Officer of Health on the visits paid by her to the children attending the Centre, and such reports should be communicated to the Council of Social Welfare.
- (v.) The Maternity and Child Welfare Committee and the Medical Officer of Health should have access to the Centres to satisfy themselves that they are properly conducted.
- (vi.) The Maternity and Child Welfare Committee should be consulted before a Medical Officer is appointed to any of the Centres.



I am hopeful that this arrangement may prove successful and beneficial to the mothers and children. It can only do so if animated by a spirit of self-sacrifice on the part of all concerned, and by the placing of the welfare of the women and children before any other consideration whatever.

### General.

*Crèche.*—There are two Crèches in the Borough, one in Pond Street and one in Hemstal Road.

Both are excellent institutions, and during 1920 have done good work. They are run entirely by voluntary bodies.

### Convalescent Homes.

Arrangements have been made by the Borough Council whereby beds are available in the Catherine Gladstone Home, Mitcham, for women recovering from confinement. Both mother and babe are admitted, or the mother alone if the baby did not survive.

### Dental Clinic.

On the 27th May the Council considered a report from the Maternity and Child Welfare Committee on the question of the establishment of a dental clinic for expectant and nursing mothers and children under 5 years, and resolved to enter into an agreement with the British Dentists' Hospital for the provision of a Dentist at the Ante-Natal Clinics.

The Dentists' Hospital agreed to provide a Dentist to attend at the Clinic one half-day (not exceeding 2½ hours) weekly, for the purpose of giving dental treatment and advice.

The Clinic was opened on 16th July, 1920, at 73, Dynham Road.

The following is a statement of attendances, etc. :—

		Women.	Children.	Total.
New applicants	..	37	2	39
Old cases	..	67	—	67
		<hr/>	<hr/>	<hr/>
Totals	..	104	2	106
		<hr/>	<hr/>	<hr/>

Number of free consultations, 47.

The Borough Council assists those persons who cannot afford to pay the whole cost of their dentures.

### Nursing Facilities.

By arrangements made with both Nursing Associations their nurses are available for cases of Measles, Whooping Cough, Epidemic

Diarrhœa, Ophthalmia Neonatorum, Acute primary or acute influenzal Pneumonia and Influenza.

During 1920, 66 of these diseases were nursed by the Kilburn and West Hampstead District Nursing Association, and 25 by the Hampstead Nursing Association under the agreement with the Borough. The Nursing Associations are paid 1s. per visit.

### Supply of Food (including Milk).

An account of the steps taken by the Borough Council to supply food and milk to expectant and nursing mothers and children under five years of age is given in the Section relating to Food.

### Staff.

The Borough Council has hitherto employed only one whole-time Health Visitor, but the Ministry have now agreed to the appointment of two more Visitors. Their duties will be as follows :—

- 1.—To perform the duties mentioned in Section 6 of the London County Council (General Powers) Act, 1908.
- 2.—To perform the duties mentioned in Article VIII. of the Health Visitors (London) Order, 1909.
- 3.—To be responsible for a District of the Borough.
- 4.—To attend Infant Welfare Centre, Dental Clinic, and Ante-Natal Clinic, and to organise the Voluntary Visitors associated with the Infant Welfare Centre.
- 5.—To carry out all home visiting in her District or to be responsible for that carried out by the Voluntary Visitors, if there is need of such.
- 6.—To investigate cases of infectious disease.
- 7.—To distribute application forms for assisted food or milk, and to investigate applications for same when required.
- 8.—To attend at the offices of the Department of the Medical Officer of Health every day from 9 to 10.30 a.m., for the purpose of interviewing callers, receiving instructions, making reports, &c.
- 9.—To perform all such other duties as may from time to time be allotted by the Maternity and Child Welfare Committee or the Medical Officer of Health.



These Health Visitors serve as the direct link between the Borough Council and the work of the centres. It is among their duties to attend consultations at the Centres, so as to hear the advice given by the doctor to the mother, and being the only officer visiting the mother in the home, she endeavours to see that the advice given at the Centres is carried out.

The rapid increase in the work involved by administering the provisions of the Act, especially in connection with the issue of milk and food orders, checking of accounts, &c., proved to be such that in February the Council decided to appoint a clerk in the Public Health Department to deal with the additional work, and Miss E. M. Blakeman (who had been a temporary clerk for over four years while the permanent clerical staff were on active service), was selected for the position. In addition, one of the temporary clerks was detailed to assist in the clerical work associated with this subject.

The following table gives some record of the work of the Borough Council's Health Visitor :—

Number of Visits paid :—

	First Visits. 1920.	Total Visits. 1920.
To Expectant Mothers ..	55	80
To Infants under one year of age	1185	1974

The Council's Health Visitor, Mrs. Roche, visits shortly after information of the birth has been received. By the Notification of Births Act, 1907, all births must be notified to the Medical Officer of Health within 36 hours of their occurrence. This is in addition to their usual registration with the Registrar of Births.

The following statement shows the source of information, &c., of live births notified during 1920. As births have to be notified much sooner than registered, the total number notified differs from the number registered :—

Notified by midwives ..	542
„ parents ..	439
„ doctors ..	394
„ nurses and others ..	227
	<hr/> 1602 <hr/>

In 144 cases the notification was not made until I had drawn the attention of the responsible person to the omission.

During the year 53 still-births were notified, as follows:—

Notified by midwives	..	..	13
„ parents	..	..	8
„ doctors	..	..	27
„ nurses and others	..	..	5
			—
			53
			—

In the following tables the 75 infantile deaths have been classified according to diseases in age-periods and in Wards:—

### INFANT MORTALITY, 1920.

#### NETT DEATHS FROM STATED CAUSES AT VARIOUS AGES UNDER ONE YEAR OF AGE.

CAUSES OF DEATH.	Under 1 Week.	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total under 4 Weeks.	4 Weeks and under 3 Months.	3 and under 6 Months.	6 and under 9 Months.	9 and under 12 Months.	Total Deaths under 1 Year.
1. Small-pox ...	...	...	...	...	...	..	..	..	...	...
2. Chicken-pox ...	...	...	...	...	...	...	...	...	...	...
3. Measles ...	...	...	...	...	...	...	...	...	1	1
4. Scarlet Fever ...	...	...	...	...	...	...	...	...	...	...
5. Whooping Cough ...	...	...	...	...	...	...	...	2	1	3
6. Diphtheria and Croup ...	...	...	...	...	...	...	...	...	1	1
7. Erysipelas ...	...	...	...	...	...	...	...	...	...	...
8. Tuberculous Meningitis ...	...	...	...	...	...	...	...	...	1	1
9. Abdominal Tuberculosis (a) ...	...	...	...	...	...	...	...	...	...	...
10. Other Tuberculous Diseases ...	...	...	...	...	...	...	...	...	...	...
11. Meningitis (not Tuberculous) ...	...	...	...	...	...	...	...	1	1	2
12. Convulsions ...	...	...	...	...	...	...	...	...	...	...
13. Laryngitis ...	...	...	...	...	...	...	...	...	...	...
14. Bronchitis ...	...	...	...	...	...	3	1	...	1	5
15. Pneumonia (all forms) ...	...	1	...	...	1	2	3	1	...	7
16. Diarrhoea ...	...	...	1	...	1	...	...	...	...	1
17. Enteritis ...	...	...	...	1	1	2	...	...	1	4
18. Gastritis ...	...	...	...	...	...	...	...	...	...	...
19. Syphilis ...	...	...	...	...	...	...	...	...	...	...
20. Rickets ...	...	...	...	...	...	...	...	...	...	...
21. Suffocation, overlying ...	...	...	...	...	...	1	...	...	...	1
22. Injury at Birth ...	3	...	...	...	3	...	...	...	...	3
23. Atelectasis ...	...	...	...	...	...	...	...	...	...	...
24. Congenital Malformations (b) ...	2	1	...	1	4	1	...	...	1	6
25. Premature Birth ...	10	2	1	3	16	1	1	...	1	19
26. Atrophy, Debility and Marasmus ...	2	2	1	...	5	4	...	...	...	9
27. Other causes ...	9	...	1	...	10	2	...	...	...	12
TOTALS ...	26	6	4	5	41	16	5	4	9	75

Nett Births in { legitimate, 1478  
the year { illegitimate, 88

Nett Deaths in { legitimate infants, 62.  
the year of { illegitimate infants, 13.

(a) Under Abdominal Tuberculosis have been included deaths from Tuberculous Peritonitis and Enteritis and from Tabes Mesenterica.

(b) Want of Breast Milk has been included and Atrophy and Debility.



## DEATHS FROM STATED CAUSES UNDER ONE YEAR OF AGE,

## ARRANGED IN WARDS.

CAUSES OF DEATH.				No. 1 (Town).	No. 2 (Belize).	No. 3 (Adelaide).	No. 4 (Central).	No. 5 (West End).	No. 6 (Kilburn).	No. 7 (Priory).	Total.
1.	Small-pox	...	...	...	...	...	...	...	...	...	...
2.	Chicken-pox	...	...	...	...	...	...	...	...	...	...
3.	Measles	...	...	...	...	...	...	1	...	...	1
4.	Scarlet Fever	...	...	...	...	...	...	...	...	...	...
5.	Whooping Cough	...	...	...	...	...	...	2	1	...	3
6.	Diphtheria and Croup	...	...	...	...	...	...	...	1	...	1
7.	Erysipelas	...	...	...	...	...	...	...	...	...	...
8.	Tuberculous Meningitis	...	...	...	...	...	...	...	...	1	1
9.	Abdominal Tuberculosis	...	...	...	...	...	...	...	...	...	...
10.	Other Tuberculous Diseases	...	...	...	...	...	...	...	...	...	...
11.	Meningitis (not Tuberculous)	...	...	...	...	...	...	1	1	...	2
12.	Convulsions	...	...	...	...	...	...	...	...	...	...
13.	Laryngitis...	...	...	...	...	...	...	...	...	...	...
14.	Bronchitis	...	...	2	...	...	...	1	1	1	5
15.	Pneumonia (all forms)	...	...	...	...	1	...	3	2	1	7
16.	Diarrhoea	...	...	...	1	...	...	...	...	...	1
17.	Enteritis	...	...	...	...	1	1	1	1	...	4
18.	Gastritis	...	...	...	...	...	...	...	...	...	...
19.	Syphilis	...	...	...	...	...	...	...	...	...	...
20.	Rickets	...	...	...	...	...	...	...	...	...	...
21.	Suffocation, overlying	...	...	...	...	1	...	...	...	...	1
22.	Injury at Birth	...	...	...	...	...	1	1	...	1	3
23.	Atelectasis	...	...	...	...	...	...	...	...	...	...
24.	Congenital Malformations	...	3	1	1	...	...	...	...	1	6
25.	Premature Birth	...	...	4	1	2	4	7	...	1	19
26.	Atrophy, Debility and Marasmus	...	1	...	1	3	...	3	3	1	9
27.	Other causes	...	1	3	...	...	...	2	2	4	12
TOTAL DEATHS				7	9	6	7	16	19	11	75
TOTAL BIRTHS				208	213	161	131	268	408	177	1566

TABLE SHOWING THE INFANTILE DEATH-RATES IN THE COUNTY OF LONDON, THE CITY OF LONDON, AND THE METROPOLITAN BOROUGHES DURING 1920.

DISTRICT.					Deaths under 1 year per 1000 Births.
<b>Hampstead</b>	..	..	..	..	<b>48</b>
Chelsea ..	..	..	..	..	52
Woolwich	..	..	..	..	60
Wandsworth	..	..	..	..	62
Holborn ..	..	..	..	..	64
Hammersmith	..	..	..	..	65
Lewisham	..	..	..	..	65
St. Marylebone	..	..	..	..	65
Lambeth	..	..	..	..	67
Camberwell	..	..	..	..	70
Islington	..	..	..	..	71
London, City of	..	..	..	..	71
Westminster, City of..	..	..	..	..	71
Greenwich	..	..	..	..	72
St. Pancras	..	..	..	..	72
Fulham ..	..	..	..	..	74
Finsbury	..	..	..	..	76
Paddington	..	..	..	..	78
Deptford ..	..	..	..	..	79
Stoke Newington	..	..	..	..	80
Hackney ..	..	..	..	..	81
Kensington	..	..	..	..	81
Poplar ..	..	..	..	..	82
Battersea	..	..	..	..	82
Bermondsey	..	..	..	..	84
Southwark	..	..	..	..	86
Stepney ..	..	..	..	..	87
Shoreditch	..	..	..	..	91
Bethnal Green	..	..	..	..	95
<b>County of London</b> ..	..	..	..	..	<b>75</b>



The infantile death-rate per 1000 births for each of the Wards, the Borough, London, and England and Wales is as follows:—

WARD.			Rate per 1,000 births
No. 1 (Town)	..	..	33
No. 2 (Belsize)	..	..	42
No. 3 (Adelaide)	..	..	37
No. 4 (Central)	..	..	53
No. 5 (West End)	..	..	60
No. 6 (Kilburn)	..	..	48
No. 7 (Priory)	..	..	62
<b>The Borough</b>	..	..	<b>48</b>
London ..	..	..	75
England and Wales ..	..	..	80

In considering these ward-rates the smallness of the figures concerned must be borne in mind, thus the actual number of infant deaths were as follows:—

Town Ward	..	..	7
Belsize	„	..	9
Adelaide	„	..	6
Central	„	..	7
West End	„	..	16
Kilburn	„	..	19
Priory	„	..	11

#### Mortality in the first four weeks of life.

In the following table is given an analysis of infantile mortality from (a) certain selected causes, and (b) all causes, in the first four weeks of life.

It will be noticed that deaths from Convulsions, Congenital Malformations, Premature Birth, Atrophy, Debility, and Marasmus, during the first four weeks of life, account for a large percentage of the total deaths of children under one year of age; and that about one half of the total deaths from all causes, of children under one year of age occur during the first four weeks of life.

The actual cause of death in these cases is often not clear, and I incline to the opinion that it is through the Ante-Natal Clinic that we must attack these causes of mortality. I wish the notification of birth was extended to notification of death; we might then get some information of how great a part venereal disease plays under this heading.

MORTALITY IN THE FIRST FOUR WEEKS OF LIFE FROM CERTAIN SELECTED CAUSES.

CAUSE OF DEATH.	1905	1906	1907	1908	1909 <sup>*</sup>	1910	1911	1912	1913	1914	1915	1916	1917	1918	1919	1920
Convulsions ... ..	—	3	—	1	—	2	1	1	2	1	—	1	—	—	—	—
Congenital Malformation ...	11	1	2	—	4	—	1	2	1	1	2	—	3	6	4	6
Premature Birth ... ..	13	12	10	13	10	13	12	10	13	9	13	9	16	7	15	19
Atrophy, Debility and Marasmus	2	1	—	—	2	1	2	4	1	6	8	4	4	3	5	9
Total of above-mentioned Causes	26	17	12	14	16	16	16	17	17	17	23	14	23	16	24	31
Percentage of Total deaths from Above Causes under one year	19·5	15·3	12·0	14·4	16·2	19·7	15·2	21·5	18·7	18·7	22·7	19·2	25·5	23·2	25·0	45·3
Total deaths from ALL CAUSES under one month ... ..	54	46	40	43	41	38	39	31	40	38	41	39	42	26	48	41
Percentage of Total deaths from ALL CAUSES under one year	40·6	41·4	40·8	44·3	41·4	47·0	37·1	39·2	44·0	41·7	40·6	53·4	46·7	37·8	50·0	54·7
TOTAL DEATHS FROM ALL CAUSES UNDER ONE YEAR ... ..	133	111	98	97	99	81	105	79	91	91	101	73	90	69	96	75
NETT BIRTHS .. .. .	1421	1437	1341	1400	1328	1340	1276	1281	1325	1273	1327	1164	1123	895	1156	1566



### Mortality among Young Children.

The following table shows the Infantile Mortality rate and the death rate among children under five years of age. The latter rate is calculated upon a period of five years:—

Year.	Deaths of Infants under 1 year of age.		Deaths of Children under 5 years of age.	
	No.	Rate per 1000 births.	No.	Rate per 1000 children born in the year and in preceding four years.
1910 ..	81	60	132	19·2
1911 ..	105	82	152	22·7
1912 ..	79	62	131	19·8
1913 ..	91	69	149	22·7
1914 ..	91	72	129	20·0
1915 ..	101	76	144	22·2
1916 ..	73	62	94	14·7
1917 ..	90	80	122	19·6
1918 ..	69	77	109	18·8
1919 ..	96	83	120	21·2
1920 ..	75	48	101	17·1

The average of the infantile mortality rates in Hampstead for the ten years, 1910-1919 was 72 per 1000 births, and of the children under 5 years of age 20·1.

### Deaths among Legitimate and Illegitimate Infants.

The following comparative tables indicate the great disproportion in the deaths of legitimate and illegitimate infants:—

Year.	Legitimate Infants.		Death rate per 1000 legitimate births.	Illegitimate Infants.		Death-rate per 1000 illegitimate births.
	Births.	Deaths.		Births.	Deaths.	
1908	1,326	87	66	29	10	345
1909	1,239	88	71	43	11	256
1910	1,233	71	57	36	10	278
1911	1,239	94	76	37	11	297
1912	1,207	68	56	74	11	149
1913	1,252	73	58	73	18	246
1914	1,218	77	63	55	14	254
1915	1,246	82	65	81	19	234
1916	1,088	65	59	76	8	105
1917	1,052	74	70	71	16	225
1918	797	56	70	98	13	132
1919	1,039	77	74	117	19	162
1920	1,478	62	42	88	13	148

It will be observed that the death-rate among illegitimate children is very high. In calculating this rate, only those infants definitely known to be illegitimate have been deemed to be such. All foundlings and babies found dead have been counted as legitimate. For the year under review the births of illegitimate infants represented a rate of 56 per 1,000 births, or, broadly speaking, one in every eighteen.

If the death rate among Hampstead illegitimate infants had only been as low as that of legitimate infants, our infant mortality would have been even lower than it is. Though the actual number saved would have been small, it should be remembered that the high mortality among illegitimate infants (which is understated rather than overstated) is occurring all over the country. The ultimate total loss of life to the community is very much greater than appears.

In the great majority of instances the illegitimate children have less maternal care than the children born in wedlock, and something to compensate for such maternal lack seems eminently necessary if the terribly high infantile mortality among illegitimate children is to be reduced.

Although there appears nothing that can completely compensate for the absence of maternal care it is evident that lack of such care is a very important factor in the high mortality among illegitimate babies, and this care of the illegitimate child is a matter calling for serious consideration, for it is necessary that every healthy life should be conserved and no unsympathetic consideration should be tolerated because of the bar sinister.

The following table shows the percentage of infant deaths occurring under one month of age, calculated on the total number of infants dying before completing one year :—

*Percentage of Infant deaths occurring under one month, calculated on the total number of Infants dying.*

YEAR.	Average of 5 years.	
1905	..	40·6
1906	..	41·4
1907	..	40·8
1908	..	44·3
1909	..	41·4
		41·7



Years.			Average of 5 years.	
1910	..	47.0	}	41.8
1911	..	37.1		
1912	..	39.2		
1913	..	44.0		
1914	..	41.7		
1915	..	40.6	}	45.7
1916	..	53.4		
1917	..	46.7		
1918	..	37.8		
1919	..	50.0		
1920	..	54.7		

Through the kindness of the Medical Officer of Health and School Medical Officer of the London County Council, I am enabled to submit the following highly interesting table showing the result of routine examination of school children in Hampstead during 1920. The children examined were those arriving at certain ages; the cases selected for special examination on account of a suspected defect have not been included.

## MEDICAL INSPECTION IN ELEMENTARY SCHOOLS IN HAMPSTEAD IN 1920.

			Entrants.		Intermedi- ates.		Leavers Age 12.		Children for Day Continu- ation Schools.		Total and per- centage of number examined.
			Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	
Number examined	..	..	315	293	361	295	302	297	68	49	1,980 Per cent.
Skin Disease	..	f	4	5	8	1	3	2	1	—	24 1.2
	..	(x)	3	4	4	1	2	2	1	—	17 0.9
Teeth	..	..	(x)	136	104	100	106	91	100	22	18 677 34.2
Tonsils enlarged	..	f	29	37	34	30	16	21	2	1	170 8.6
	..	(x)	13	15	10	7	8	8	—	—	61 3.1
Adenoids	..	f	6	2	2	1	1	—	—	—	12 0.6
	..	(x)	5	—	—	—	1	—	—	—	6 0.3
Tonsils and Adenoids	..	f	10	9	7	6	1	—	—	—	33 1.7
	..	(x)	8	6	6	5	1	—	—	—	26 1.3
Other Nose and Throat Defects	..	f	16	5	6	1	7	1	2	—	38 1.9
	..	(x)	5	1	—	1	2	—	1	—	10 0.5
Cervical Glands	..	f	12	12	8	8	5	2	—	—	47 2.4
	..	(x)	—	—	—	—	—	—	—	—	—
Eye Disease	..	f	9	9	8	5	4	3	—	—	38 1.9
	..	(x)	6	6	4	3	2	2	—	—	23 1.2
Defective Vision (1366 examined)	..	..	Not tested		39	41	36	37	7	10	170 12.4
Ear Disease or Defect	..	f	6	7	1	2	7	3	—	—	26 1.3
	..	(x)	2	5	1	2	7	2	—	—	19 1.0
Defective Hearing	..	f	5	6	3	5	10	6	—	—	35 1.8
	..	(x)	2	1	1	3	7	3	—	—	17 0.9
Defects of Speech	..	f	6	—	1	—	1	—	1	—	9 0.5
	..	(x)	—	—	—	—	—	—	—	—	—
Heart Disease	..	f	9	8	7	8	13	12	5	1	63 3.2
	..	(x)	—	—	—	—	—	—	—	—	—
Anæmia	..	f	14	10	13	11	20	12	1	1	82 4.1
	..	(x)	2	2	—	—	4	3	—	—	11 0.6
Lung Defects (non- tubercular)	..	f	16	9	3	1	2	—	—	—	31 1.6
	..	(x)	4	4	2	—	—	—	—	—	10 0.5
Nervous Diseases	..	f	2	2	2	2	—	5	1	—	14 0.7
	..	(x)	—	—	1	—	—	—	—	—	1 0.1
Phthisis	..	f	—	—	1	1	—	—	—	—	2 0.1
	..	(x)	—	—	1	—	—	—	—	—	1 0.1
Other Tubercular Disease	..	f	—	2	2	1	—	—	—	—	5 0.3
	..	(x)	—	—	—	—	—	—	—	—	—
Rickets	..	f	5	—	3	1	—	—	—	—	9 0.5
	..	(x)	—	—	—	—	—	—	—	—	—
Deformities	..	f	—	2	3	7	3	5	—	—	20 1.0
	..	(x)	—	1	1	—	2	2	—	1	7 0.4
Malnutrition	..	f	1	1	—	—	—	1	—	—	3 0.2
	..	(x)	—	—	—	—	—	—	—	—	—
Infectious Disease	..	f	—	1	—	—	—	—	—	—	1 0.1
	..	(x)	—	—	—	—	—	—	—	—	—
Other Defects	..	f	6	11	2	8	1	11	1	1	41 2.1
	..	(x)	4	3	—	5	1	1	1	1	16 0.8

f = defect found; (x) = requiring treatment.



# MEDICAL INSPECTION IN ELEMENTARY SCHOOLS IN HAMPTHEAD, 1920.

## Classification of Children examined as regards Clothing, Nutrition, Cleanliness, etc.

		Clothing & Boots.			Nutrition.				Cleanliness.						Teeth.			Vision.			
		1	2	3	1	2	3	4	Head.			Body.			1	2	3	1	2	3	
Entrants	B.	262	53	—	65	239	11	—	303	12	—	308	7	—	163	91	61	not	tested.		Clothing and Nutrition 1 = good, 2 = fair, 3 = poor (4 in nutrition = bad, mal-nourished.)
	G.	288	55	—	62	219	12	—	256	35	2	289	4	—	165	79	49	not	tested.		
Age 8	B.	296	65	—	38	293	30	—	350	10	1	354	7	—	226	90	45	121	187	53	Cleanliness 1=clean, 2=dirty. nits present, 3 = pediculi present.
	G.	258	37	—	29	247	19	—	264	31	—	292	3	—	166	93	36	96	146	53	
Age 12	B.	242	56	4	38	255	9	—	295	7	—	295	7	—	185	105	12	187	60	51	Teeth 1 = all sound, 2 = less than four decayed, 3 = four or more decayed.
	G.	242	55	—	52	236	8	1	262	35	—	289	8	—	152	133	12	158	83	54	
Age 14	B.	62	6	—	12	52	4	—	65	3	—	64	4	—	45	19	4	32	23	13	Vision 1 = 6/6 in both eyes, 2 = 6/9 in either or both eyes, 3 = 6/12 or worse in either or both eyes (Snellan Type test).
	G.	42	7	—	13	36	—	—	39	8	2	46	3	—	30	17	2	28	8	13	
Total	...	1642	334	4	309	1577	93	1	1834	141	5	1937	43	—	1132	627	221	622	507	237	
Percentage	..	82.9	16.9	0.2	15.7	79.7	4.7		92.6	7.1	0.3	97.8	2.2	—	57.2	31.6	11.2	45.5	37.1	17.4	

Dr. Mary Kidd submits the following report:—

**Annual Report of the Medical Officer in charge of the Pre-  
Maternity Clinics, from January 1st, 1920, to December  
31st, 1920.**

	Kilburn.	Southend Road.
Number of Clinics held .. ..	81	52
Number of new patients .. ..	176	89
Number of attendances of old patients ..	723	320
Total number of attendances. . .	899	409
Average attendance per diem ..	11	7
Number of patients sent to Dental Clinic	30	12
Number of patients referred to Tuberculosis Medical Officer as "suspects" ..	9	4

As the work at the Kilburn Clinic was so rapidly increasing it was decided by the Borough Council to have an extra session there on Thursday mornings from 10 to 12, commencing April, 1920. The numbers attending are satisfactory, and one now has more time for doing pathological work, such as taking blood tests, etc., when necessary.

Since the arrangement entered into between the Borough Council and the District Nursing Association, the nurses working under the latter body have been sending their patients to me, as far as possible, for advice and treatment during pregnancy. This explains the large increase in the number of normal cases coming to the Dispensary. I think this is all to the good, for one has been able to give much advice as to the hygiene of pregnancy to these expectant mothers. Then, too, in some of these normal cases, the mother has not been free from trouble in the post-natal period, and has returned to us for advice and treatment.

I have been developing the post-natal side of the work a great deal in the last year, and am encouraging the mothers to go on attending after the confinements until they really are quite fit again. In this way I think that one can prevent many cases of sub-involution developing into really bad cases of prolapse and chronic debility.

Also in cases where breast feeding is a difficulty owing to the mother's ill-health, one can treat her until she is well again, and thus enable the breast function to be satisfactorily established.



I should like to acknowledge my thanks to the District Nurses for the way in which they have collaborated with me in giving the necessary local treatment I have prescribed for some of these post-natal cases in their own homes. In several cases of ophthalmia neonatorum, and in babies with a septic condition of the cord, where I have called in their aid, the happiest results have also ensued from our collaboration.

In working amongst the post-natal cases I became more and more convinced that what is really wanted in the treatment of some of these debilitated mothers is a change of air and scene and a rest. Accordingly on my representing this to our Maternity and Child Welfare Committee, the Borough Council has arranged for treatment at the Catherine Gladstone Convalescent Home at Mitcham, to which our nursing mothers and babies can be sent for a change when necessary.

A charge is made to each mother according to her means to pay. In this way part of the Borough's expenditure on this purpose will be recouped. The Borough Council is not committed to an expenditure of more than £50 a year for this purpose.

Our Dental Clinic has been treating the expectant and nursing mothers for some months now. One is already beginning to see the good results of the work there in the improved health of these women. In many cases after the treatment is concluded they express to the Nurse or the Health Visitor their gratitude for the treatment, and say how beneficial it has proved to their health.

In conclusion, it is very gratifying to note in the Registrar-General's returns that the infantile mortality rate per thousand has fallen in Hampstead from 81 in 1919 to 47.9 in 1920. I attribute this largely to the excellent and thorough way in which the Milk (Mothers' and Children's) Order has been administered in this Borough in the last year. Under this Order of the Ministry of Health all necessitous expectant and nursing mothers can have a daily allowance of milk, either free or on part payment, and in very necessitous cases dinners and food may be given. The amount of milk supplied in this Borough to expectant and nursing mothers is a pint a day, either free or part payment. Milk is also supplied to necessitous children. I have seen the excellent results that have followed in the administration of this Milk and Food Order in a large number of cases last year. The



mother's general health improves during pregnancy when she has this milk, and she can suckle her baby much more satisfactorily afterwards. As it is a well known fact that breast-fed babies are more liable to survive the first year of life than bottle-fed babies, it will be readily appreciated that this increased capacity of the mothers of Hampstead to breast-feed their babies for the first nine months of life is resulting in a considerable lowering of our local infantile mortality rate.

Before the Milk (Mothers' and Children's) Order was passed in 1918, one had terrible up-hill work in Infant Welfare Clinics. One was always "up against" malnutrition on the part of the mother in endeavouring to get breast feeding carried out through the first nine months of an infant's life. Now, the work in these Maternity and Child Welfare Clinics is a completely different and more hopeful affair, as one can get the mother into a much better physical condition than formerly.

I earnestly hope that no schemes of false economy will be allowed to interfere with these excellent schemes of the Ministry of Health for the mothers' and babies' physical health.

(Signed) MARY KIDD,

March 11th, 1921.

M.B. (Lond.)

The following information concerning the diseases:—Puerperal Fever, Ophthalmia Neonatorum, Measles, Whooping Cough, Diarrhœa and Enteritis, and Polio-myelitis is asked for by the Ministry of Health in their Memorandum of February, 1921.

#### **Puerperal Fever.**

One case of puerperal fever was notified in 1920. The patient was removed to hospital, but the case proved fatal.

One other death of a Hampstead resident occurred outside the Borough. The occurrence of the case was notified to the Medical Officer of Health of the district concerned.

#### **Ophthalmia Neonatorum.**

Nine cases were notified: of these one occurred in a hospital in another district; and of the remaining eight the services of the nurses of the District Nursing Associations were utilised in five cases, while two patients were removed to hospital. In the other case a medical practitioner had the case under treatment.



Of the eight cases in Hampstead, both eyes were affected in 6 instances, and one eye in 2 instances. All the patients made a complete recovery.

### Measles.

Compulsory notification of Measles, which came into operation on January 1st, 1916, was rescinded at the end of 1919, by the Public Health (Measles and German Measles) Regulations, 1915, Rescission Order, 1919.

The Public Health Committee, in May, considered the desirability of re-instating the compulsory notification of Measles (excluding German Measles) and, in making formal application to the Ministry for an Order, expressed the opinion that it would be to the great advantage of the community if such compulsory notification were general in all districts. The Ministry granted the Order making Measles notifiable in Hampstead and the Regulations came into force on 1st August. These Regulations provide that a Medical Practitioner shall not be required to notify a case of Measles :--

- (a) if he has reasonable grounds for supposing that the case has already been notified under the Regulations, or
- (b) if a case of the disease which he is attending has to his knowledge occurred in the same household or institution and been notified within the period of two months immediately preceding the date on which he first becomes aware of the disease in the case he is attending.

On the subject of nursing facilities for cases of Measles, I took the opportunity of reminding the medical practitioners that under the terms of an arrangement entered into with the Borough Council, both Nursing Associations would render assistance, and that the services of a fully trained nurse could be obtained free of charge upon application to the Hampstead District Nursing Association, 25, Heathurst Road, N.W. 3., or the Kilburn and West Hampstead District Nursing Association, 34, Dynham Road, Kilburn, N.W., 6.

The total number of cases of Measles known to the Department in 1920 was 482, the principal source of information being the Head Teachers of Schools. Of these 482 cases, 87 occurred in well-to-do

families where all necessary medical and nursing needs were privately met. In 62 cases no doctor was found to be in attendance. In 73 cases the services of the nurses of the District Nursing Associations were made use of. 31 cases were removed to hospital. Eight deaths from Measles occurred during the year, six of these deaths being those of children under five years of age.

### German Measles.

Cases of this disease ceased to be compulsorily notifiable on 1st January, 1920.

### Whooping Cough.

Cases of this disease are not compulsorily notifiable, our chief source of knowledge is derived from the School Teachers' notifications.

Arrangements are in existence whereby the nursing facilities of the two Nursing Associations are available without cost to the parents, and in special circumstances cases are received into the isolation hospitals of the Metropolitan Asylums Board. The number of deaths from this disease in the year was six, all being children under five years of age.

### Diarrhœa and Enteritis.

During the year 5 deaths from Diarrhœa and Enteritis occurred among Hampstead children under 2 years of age. The following table gives a comparison in the death-rates from these diseases in Hampstead, London, and England and Wales during 1919 :--

	Death-rate per 1000 births.	
Hampstead	..	3.2
London	..	9.5
England and Wales	..	8.3

### Polio-myelitis, acute.

Two cases were notified; both were males aged 15 years. They were not nursed at home. One recovered, but the other case resulted in permanent paralysis of the legs.



## Section F.

## SANITARY ADMINISTRATION.

## Sanitary Inspectors.

A list of the staff, with the duties allotted to them, is detailed on page 3. The work of the staff is indicated in some measure in Section B.

During the year 6,790 visits were paid by the Sanitary Inspectors, and 11,492 re-visits made. 1,128 Intimation and 897 Statutory Notices were served.

The arrangements for chemical and bacteriological work are as follows :—

Chemical analysis is in practically all cases undertaken by the Borough Analyst, Mr. A. W. Stokes, and details of the work done in 1920 will be found in the section of this report relating to Food.

Bacteriological examinations are carried out by the Lister Institute of Preventive Medicine, excepting examinations of material for detection of tubercle bacilli, which are performed by the hospital to which the Municipal Dispensary is affiliated, who also make any necessary X-ray examinations.

The following is a summary of the bacteriological work carried out during the year :—

*At the Lister Institute.*

	Positive.	Negative.	Total.
Diphtheria .. ..	86	271	357
Enteric Fever .. ..	1	3	4

*At the Hampstead General Hospital*

(To which the Dispensary is affiliated.)

Number of specimens of sputum examined ..	274
---	-----

## REPORT OF THE PUBLIC ANALYST ON THE ANALYTICAL WORK OF THE YEAR.

---

ANALYTICAL LABORATORY,

TOWN HALL, PADDINGTON, W.

A short abstract of the analytical work of the year 1920 may be of interest.

The total number of samples analysed was 506.

These comprised milk, 320 samples; general groceries, 92; butter, 56; lard, 34; drugs, 4.

Marvellous to say, only 2 samples were found to be adulterated. One of these was a milk, the other a butter.

That is to say, less than 4 samples in a thousand proved to be adulterated.

This is, I believe, the highest point of purity attained by any London Borough taking so many samples.

Milk being so necessary for infants and invalids, it is very satisfactory to find that three-fifths of the samples purchased were milk, and that only one of these was adulterated.

Hampstead may certainly be congratulated on the honesty of its traders and the purity of its food supply.

I have the honour to remain,

Yours obediently,

ALF. W. STOKES,

*Public Analyst.*



Section G.  
HOUSING.



HAMPSTEAD: BOROUGH: COUNCIL: HOUSING: SCHEME:  
: SOUTH: END: GREEN:

## I.—General Housing Conditions in the District.

(1) *General Housing conditions.*—The urgency of the Housing problem has not diminished during 1920. Some signs were noticeable that the eagerness to purchase good class houses were abating, but the conditions as regards the poorer classes of the population remain the same. No new working class dwellings were erected during the year; and therefore I am of opinion that the figures for 1919 as regards overcrowding still pertain. Assuming that all persons living more than two in a room are overcrowded, then at least 6000 persons or 2000 families are living in overcrowding conditions. I know of no working class houses to let in the Borough; the letting of houses has ceased, and if one falls vacant it is put up to sale, and sells readily.

The density of the population is exemplified by the following figures, compiled from a group of streets usually described as the Netherwood Street Area. It is typical of what exists in all our working-class districts.

Name of Street.	No. of occupied premises.	Population.			Total population at all ages.	Average No. of persons per house.
		Adults.		Children under 10.		
		M.	F.			
Netherwood Street	71	302	400	285	987	14
Palmerston Road	63	303	388	234	925	14
Kelson Street ..	21	96	122	82	300	14
Linstead Street ..	17	73	71	24	168	10
Totals ..	172	774	981	625	2380	14

Area of above Streets, 10 acres or 238 persons per acre.

Area of Kilburn Ward, 195 acres or 64 ditto.

Area of Borough, 2265 acres or 32 ditto.

(2) (a) *Extent of Shortage or Excess of Houses.*—Of the cases of overcrowding, most are dealt with by re-arrangements of the inhabitants in their rooms; but some cannot be so dealt with; and in one case it was necessary to take the tenant before the Magistrates for an Order to abate the overcrowding. In this case the man and his wife and 3 children were living in one room with a cubic capacity of 930 feet—enough for the man and wife only. The Magistrate adjourned the



case in order to allow the man time to make other arrangements, but shortly after this, a not surprising event took place in an outbreak of Diphtheria, and one of the children was removed to a Metropolitan Asylums Board Hospital, and the overcrowding was thus materially reduced.

(b)—*Measures taken or contemplated to meet any shortage :—*

The year 1920 will be memorable as it was in that year that the foundation stone of the first building erected in the Borough under the Housing Acts, 1919, was laid. This, the South End Green Scheme, was the only one of the many proposed that fructified. The foundation stone was laid on November 4th, 1920, by His Worship the Mayor, Mr. Alderman J. I. Fraser, J.P., and the first block should be ready for occupation in May, 1921. The print at the beginning of this section gives the elevation of the first block, and the following are the main details of the accommodation provided.

*Site.*—Extent approximately  $3\frac{1}{2}$  acres. Situated on south side of Hampstead Heath Railway Station. It is easily accessible by train, tram and 'bus, and very suitable for the erection of dwellings under the Government Scheme.

*Kind of Dwellings.*—Owing to the extent and cost of the site it is not considered advisable to erect separate dwellings but blocks of tenements for which the site is admirably suited. The Ministry of Health agreed on this point, and further, in consideration of the large area of open space surrounding the site and the limited amount of available land for building in the Borough, will permit the Council to erect 5 storey buildings, this being one storey more than is usually sanctioned.

*Lay-out.*—The Scheme provides for the erection of 140 separate tenements in 4 blocks. The blocks are arranged to afford the maximum amount of light and air, and the aspect of all the principal rooms has been carefully considered, a large proportion facing due south and the remainder east and west. The Committee consider it desirable to provide 3 different types of dwellings and these 3 types are distributed amongst the 4 blocks.

*Accommodation.*—The accommodation in the 3 types is as follows :—

- |     |                                      |
|-----|--------------------------------------|
| (1) | Living Room, Scullery and 1 Bedroom. |
| (2) | „ „ 2 Bedrooms.                      |
| (3) | „ „ 3 „                              |



Of the 140 flats there are 20 of 1 Bedroom, 78 of 2 Bedrooms and 42 of 3 Bedrooms. This is thought to be a suitable proportion of each type, the 2 Bedroom flats predominating in anticipation of a larger demand for this size of dwellings. In each of the 3 types, in addition to the rooms above enumerated, is provided a large working scullery supplied with copper and gas cooker, also larder, coal cellar, a bath room and separate w.c. Good cupboard space is also arranged for in the various rooms.

*Lifts.*—Owing to the increased height of the building it has been decided to arrange for small hoists situated in the main staircase wells, these to be used exclusively as goods lift and for coal, also for the removal of dust. They are not intended or adapted for passenger traffic.

*Dust.*—Each flat will be provided with a small sanitary dustbin to contain about a day's accumulation. This dustbin is to be kept in a ventilated cupboard in the sanitary portion of the buildings opening off the connecting passage to the bathroom, &c. It is intended that these dustbins should be emptied periodically by the tenant into general receptacles outside, situated in the open courts between the various blocks.

*Cycles.*—Cycle and perambulator accommodation is also provided for in separate groups of low buildings attached to each tenement block.

*Balconies.*—In each flat there is to be a verandah or balcony, opening off the living room in every case. These are planned as far as possible with a southern aspect.

*Lighting, etc.*—It is proposed to instal electric lighting in the various rooms and on the staircase, and supplies of hot water either from a central system or separate installations in each flat, hot water being obtained from gas boilers connected with the living room range as an alternative source of supply.

*Construction.*—The general construction of the buildings follows the specifications laid down and approved by the Ministry of Health, the general treatment being of a simple character. It is proposed to face the exterior walls with bricks, the roofs to be covered with tiles or slates, according to the cost.

*Foundations.*—Owing to the nature of the subsoil it has been deemed advisable to provide for a system of reinforced concrete in



addition to which the dividing floors of the flats are to be of fireproof construction.

*Courts.*—It is proposed to lay out the courts and open spaces between the blocks in a suitable manner and to provide access roads and approaches, with certain modifications required by the Ministry of Health, on the lines laid down on the site plan. These in all cases to be adequately lighted.

When completed the tenements will house from 400 to 500 people.

No other buildings are proposed to be erected in the Borough.

(3) *Information as to any important changes in population during the year or anticipated in the future.*—The one important change in the population has been its rapid increase. This latter seems to be much greater among the middle class than among the working class. There has been, and still is, much dividing of large houses into maisonettes and tenements, which find tenants without difficulty.

## II.—Overcrowding.

(1) *Extent.*—In calculating this, all the population living more than two in a room are assumed to be overcrowded. Our investigations indicate that approximately 6,000 people or 2,000 families are living in overcrowded conditions.

(2) *Causes.*—The overcrowding is the direct result of the increased population with no corresponding increase in dwellings. Building of houses has been at a standstill for years, whilst our population has been growing rapidly and is now the highest ever known. As previously stated, I am of opinion the population is now over 100,000.

(3) *Measures taken or contemplated for dealing with overcrowding.*—The completion of South End Green scheme is fully described in the preceding pages, and this will relieve the pressure by about 400 to 500 persons. In addition, the Housing Committee has considered the question of building on other sites at Westbere Road and Kilburn Vale. I regret that since the termination of the year these schemes have been abandoned.

(4) *Principal cases of overcrowding during the year, and action taken.*—The majority of cases of overcrowding in 1920 proved capable of being remedied by a re-arrangement of the people in their rooms. The old tendency of too many persons sleeping in certain rooms whilst reserving one room as a best parlour is still common.

### (III.) Fitness of Houses.

(1)—(a) *General standard of housing in the district.*—The general standard of houses in Hampstead is very good. The bad areas are to be found in the remains of the old villages now submerged by the extension of London from the centre outwards. Thus, there exists single houses and blocks of houses, sometimes in narrow streets or courtyards; they are old and worn-out houses and cottages which can no longer be kept in a sanitary condition. Some of these old dwellings have quite a picturesque appearance and they have obtained consideration therefor, but sanitary laws and the picturesque often conflict, and when a house is admittedly worn out it should be pulled down and re-built. It may not be generally known that in Hampstead we have a number of houses entirely built of wood, some are hundreds of years old; whilst another old variety of house is the brick-fronted, but with back and sides of weather boards. I admit their appearance is "old world," but so is their sanitation.

Also there exists in the Borough certain streets which were built by speculative builders and these are a constant source of trouble to prevent them deteriorating into slum property.

(b) *General character of the defects found to exist in unfit houses.*—The general character of the defects found come under two main headings. Many of the old houses previously mentioned are so crowded for light and air that they can only be remedied by demolition and reconstruction. The chief defects found over the bulk of the Borough are due to general dilapidations, dampness and dirt.

(2) *General action taken as regards unfit houses under (a) the Public Health Acts.*—The general action has been limited to that prescribed under Section 1 and 2, Public Health (London) Act, 1891, followed by the service of nuisance notices.



(b) *The Housing Acts.*

(NOTE.—The detailed statistics as to action under these Acts will be given in the appendices).

The Housing Committee, after prolonged consideration, decided to deal with unfit houses under the Housing Acts by appointing one Special Inspector, who should take a comprehensive view of all houses deemed unfit, and a certain course of action was laid down whereby a schedule of defects in each house was prepared. These were submitted to the owners for their consideration. Personal interviews were arranged and negotiations initiated for remedying the defects; and although under the present exceptional conditions where labour and materials are dear and scarce it has been impossible to deal drastically with these cases, yet by these means compromises have been effected and much work has been done and defects remedied in consequence.

Statement showing steps taken in 1920, in connection with premises "represented in 1920 or previous years" by the Medical Officer of Health under the Housing Acts.

Premises.	Representation.			Closing Order.		Demolition Order.		Remarks.
	Date of Committee.	Whether (a) unfit for habitation, (b) an obstructive building.	Statute under which action taken.	Date of Council.	Statute under which action taken.	Date of Council.	Statute under which action taken.	
16, New End Square	—	—	—	—	—	—	—	Closing Orders determined by Borough Council 24/6/20.
49, Downshire Hill								
17, Maygrove Road								
14, Netherwood Street	5-7-20	(a)	Sec. 17 Housing, Town Planning, &c., Act, 1909.	29-7-20	Housing, Town Planning, &c., Act, 1909.	—	—	Closing Order on No. 14, determined by Borough Council 23/12/20
22, „								Proceedings authorised in respect of No. 22, under Sec. 32, Housing Act, 1919, the premises having been occupied while Closing Order operative
Kilburn Vale Area	—	—	—	—	—	—	—	Represented by Medical Officer of Health as suitable for dealing with by means of a scheme under Part II Housing Act, 1890. 25/7/20.
								Resolved by Council that a scheme be prepared under Part II 29/7/20
								Previously "Represented" on 9/6/03 under Part I, Housing Act, 1890, but L.C.C. did not consider the Area to be of general importance to the County and suggested it be dealt with under Part II.
								On 6/6/05 the Housing Committee referred the Area to Public Health Committee to be dealt with under Public Health (London) Act, 1891. Several houses since dealt with, <i>vide</i> page 95, Annual Report, 1919.
Halton Cottage, 8A, West End Lane	5-7-20	(a)	Do.	29-7-20	Do.	—	—	Part of Kilburn Vale Area which was subsequently represented under Part 2 Housing Act, 1890.
100, Abbey Road	6-1-20	(a)	Do.	21-1-20	Do.	—	—	—





(3) *Difficulties in remedying, unfitness, special measures taken, or suggested, including, for example, any special action taken to secure improved management of property by owners; the gradual carrying out of repairs according to agreed arrangements; or any special method of dealing with unfit back-to-back houses, or other types of insanitary property.*—Those encountered are chiefly the result at present of the dearth of housing accommodation. The special measures taken for remedying unfit houses has been described in the preceding paragraph. Difficulties, of course, arise from the populous condition of the dwellings at present, the legal complications as regards tenure, etc., rent restriction, and the cost of repairs. Thus, one of our most powerful weapons in dealing with insanitary property has been, heretofore, the Closing Order; but this weapon is now practically impotent. The natural sequel of a Closing Order is to dishouse the tenant of the condemned building. This at present is neither practicable nor desirable where no other accommodation exists. The Closing Order, therefore, becomes only practical on empty property, and of such there is none. Cases are also met with where the owners are willing to do the works asked for, but plead that they cannot do so unless the rooms are vacated. This is true, so that one has to be content with such works as can be done without disturbing the tenants.

(4) *Conditions, so far as they affect housing, as regards water supply, closet accommodation, and refuse disposal, together with measures taken during the year in these matters.*—The water supply of the Borough is good; but the sub-letting of houses originally built for occupation by one family has necessitated action by the Sanitary Authority in requiring the provision of water supply to tenements in houses that have been sub-let to several families. More difficulty is experienced in obtaining additional water closet accommodation to sub-let premises for reasons, *inter alia*, set out in the preceding paragraph.

Section 78 of the London County Council (General Powers) Act, 1907, provides that, for the purposes of section 48 (which contains provisions as to houses without a proper water supply) of the Public Health (London) Act, 1891, a tenement house is to be deemed a house without a proper and sufficient supply of water unless there is provided on the storey or one of the storeys in which the rooms or lodgings in the separate occupation of each family occupying the house are situate a sufficient provision for the supply of water for domestic purposes.



During 1920 water supply was provided to 143 tenements in 86 houses.

#### IV. Unhealthy Areas.

*Information as to complaints received or representations made and action taken in regard to unhealthy areas, under Part I. or Part II. of the Housing Act of 1890.*

*Kilburn Vale Area.* - This area, which had been considered in 1903 with a view to its being dealt with under Part I. of the Housing Act, of 1890, was "represented" 26th July, 1920, by the Medical Officer of Health as being suitable for dealing with by means of a Scheme under Part II. of the Act of 1890.

On 29th July, the Housing Committee presented a report to the Council in which they stated that the Medical Officer of Health had reported that survey and examination had been made of the houses and land comprising the Kilburn Vale Area, which included the following premises, viz.:—

Abbey Lane ; Lime Cottage and Ash Cottage, Nos. 1, 2, 3, 4, 5, 6, 9, 10, 11 and 12, together with the builders yard (and the vacant site of Nos. 7 and 8).

West End Lane ; Nos. 6, 6A, 6B, 8, 8A, 10, 12, 14, 16, and 18.

King's Cottages ; Nos. 1, 2, 3, 4, 5, and 6.

Kilburn Vale ; (Site of Nos. 1 and 2) 3, 4, 5, 6, 7, 8, 9, 10, 11 and 12 ; (vacant site of 13, 14, 15 and 16) Ebenezer Chapel and Cottage.

Munden Cottages ; Nos 1 and 2.

Edward Terrace ; Nos. 1, 2, 3, 4, 5 and 6.

William Terrace ; Nos. 1, 2, 3, 4, 5 and 6.

Providence Place ; Nos. 1, 2, 3, 4, 5, 6, 7, 8 and 9, and Providence Cottage.

Hermit Place ; (late Priory Mews) Nos 1, 2 and 3.

that such area comprised a collection of very old houses badly arranged, close and confined in their general condition and lacking in proper

conveniences and containing sanitary defects which could only be effectually dealt with by a reconstruction scheme.

The Council thereupon passed the following resolution in regard thereto, viz :—

“That it appears to us, the Mayor, Alderman and Councillors of the Metropolitan Borough of Hampstead, that the closeness, narrowness or bad arrangement or bad condition of any buildings or the want of light or ventilation or proper conveniences or any other sanitary defects in any buildings is dangerous or prejudicial to the health of the inhabitants either of the said buildings or the neighbouring buildings and that the demolition, reconstruction or re-arrangement of the said buildings and the yards, outhouses and appurtenances thereof and the site thereof is too small to be dealt with as an unhealthy area under Part I. of the Housing of the Working Classes Act, 1890, and we do therefore direct that a scheme be prepared for the improvement of the said area under Part II. of such Act.”

As previously stated, since the termination of the year the scheme for dealing with Kilburn Vale Area as an “Area” has been abandoned.

#### V.—Bye-laws relating to Houses, to Houses let in Lodgings, and to Tents, Vans, Sheds, Etc.

(1) *As to working of existing bye-laws, and* (2) *as to need for new bye-laws or revision of existing bye-laws.*—Bye-laws relating to houses let in lodgings have been the subject of much controversy in the Borough for many years. The Borough Council was unable to accept the Local Government's Board's Model Bye-laws, and the Local Government Board was unable to accept the Borough Council's proposals. The main point of difference was the actual fact of “registration” and the “exemption” clauses. This subject was still under review when the Housing Act, 1919, was passed, and placed the responsibility for framing the bye-laws upon the County Council. The draft bye-laws of the County Council were duly forwarded to the Borough Council, but the Borough Council still found itself unable to agree with them, and the County Council was consequently informed accordingly. The



bye-laws are, I understand, still under consideration by the London County Council, and I regard the need for new bye-laws, to be agreed upon, to be an important question as regards the unfitness of property.

The number of houses on the Register at the end of 1920 was 405.

During the year 663 inspections and re-inspections have been made, and 349 notices were served.

## VI.—General and Miscellaneous.

*Workhouse and Infirmary Buildings, New End.*—The Housing Committee, being of opinion that these premises might well be utilised for the purposes of housing, temporarily, families unable to find other accommodation, the London Housing Board were asked to receive a deputation on the subject. The deputation duly attended before the Board and submitted the views of the Committee. The proposals of the Borough Council were, however, opposed by the Board of Guardians, who were of opinion that the proposal to utilise the buildings as a general hospital should be adopted rather than for the purpose of housing. The Ministry of Health did not see their way to approve the suggestions of the Borough Council and the matter was, therefore, dropped.

**VII.—Appendices. Housing Conditions. Statistics for the 12 Months ended 31st December, 1920.**

**1.—GENERAL.**

(1) Estimated population .. ..	91,519
(2) General death-rate .. ..	9·4
(3) Death-rate from tuberculosis ..	0·60
(4) Infantile mortality, rate per 1000 births ..	48·0
(5) Number of dwelling-houses of all classes ..	11,187
(6) Number of working-class dwelling-houses ..	1833
(7) Number of new working-class dwellings erected ..	Nil.

**2.—UNFIT DWELLING-HOUSES.**

**I.—Inspection.**

(1) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts) .. ..	5,100
(2) Number of dwelling-houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910 .. ..	16
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation .. ..	16
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-heading) found not to be in all respects reasonably fit for human habitation .. ..	969

**II.—Remedy of Defects without Services of formal Notices.**

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers .. ..	—
---	---

**III.—Action under Statutory Powers.**

*A. Proceedings under Section 28 of the Housing, Town Planning, &c., Act, 1919.*

(1) Number of dwelling-houses in respect of which notices were served requiring repairs .. ..	—
---	---



(2) Number of dwelling-houses which were rendered fit—	
(a) by owners .. .. .	—
(b) by Local Authority in default of owners .. .. .	—
(3) Number of dwelling-houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close .. .. .	—

*B. Proceedings under Public Health Acts.*

(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied .. .. .	1128
(2) Number of dwelling-houses in which defects were remedied—	
(a) by owners .. .. .	1128
(b) by Local Authority in default of owners .. .. .	—

*C.—Proceedings under Section 17 and 18 of the Housing, Town Planning, &c., Act, 1909.*

(1) Number of representations made with a view to the making of Closing Orders ..	16
(2) Number of dwelling-houses in respect of which Closing Orders were made ..	14
(3) Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses having been rendered fit .. .. .	4
(4) Number of dwelling-houses in respect of which Demolition Orders were made ..	10
(5) Number of dwelling-houses demolished in pursuance of Demolition Orders ..	3

**3.—UNHEALTHY AREAS.**

Areas represented to the Local Authority with a view to Improvement Schemes under (a), Part I., or (b), Part II., of the Act of 1890 :—

(1) Name of area .. .. .	Kilburn Vale
(2) Acreage .. .. .	.. 2 $\frac{1}{4}$ acres

- |   |    |     |
|---|----|-----|
| (3) Number of working-class houses in area          | .. | 65  |
| (4) Number of working-class persons to be displaced |    | 313 |
- (See also paragraph IV., "Unhealthy Areas" preceding, for fuller details.)

#### 4.—SECTION 25, HOUSING ACT, 1919.

Number of houses not complying with the building byelaws erected with consent of the Local Authority under Section 25 of the Housing, Town Planning, &c., Act, 1919 .. .. . —

#### 5.—STAFF.

Staff engaged on housing work, with, briefly, the duties of each officer :—

- (1) Medical Officer of Health—General supervision and direction.
- (2) One Housing and Sanitary Inspector—Specially detailed for Housing work.

*Note.*—All the Sanitary Inspectors have been duly appointed as "Housing" Inspectors.

- (3) One Clerk, whose principal duties are connected with Housing work.



## Section H.

## VITAL STATISTICS OF THE BOROUGH.

## Vital Statistics of the Borough.

*In these Tables the Birth-rate and Death-rate for 1920 are calculated upon a Borough Population of 91,519.*

Number of ordinary dwelling houses	...	10,062	At Census 1911.
Population	...	85,495	
Average number of persons per house	...	8.4	

Year.	Population estimated to middle of year.	Births.		Deaths.		Infantile Deaths.		Pulmonary Tuberculosis.	
		Number.	Estimated rate per 1000 of the Population.	Number.	Estimated rate per 1000 of the Population.	Number.	Rate per 1000 Births.	Deaths.	Death-rate per 1000 of the Population.
1902	82,380	1,516	18.4	904	11.0	133	87.7	73	0.89
1903	82,730	1,453	17.6	837	10.1	126	86.7	66	0.80
1904	83,080	1,445	17.4	892	10.7	161	111.4	73	0.89
1905	83,430	1,421	17.0	823	9.9	133	93.6	73	0.87
1906	83,780	1,437	17.1	850	10.1	111	77.2	57	0.68
1907	84,130	1,359	16.1	817	9.7	98	73.1	61	0.72
1908	84,480	1,400	16.6	803	9.5	97	69.3	74	0.88
1909	84,830	1,328	15.6	839	9.9	99	74.5	53	0.62
1910	85,210	1,340	15.7	829	9.7	81	60.4	58	0.68
1911	85,599	1,276	14.9	847	9.9	105	82.3	56	0.65
1912	85,966	1,281	14.9	861	10.0	79	61.7	64	0.74
1913	86,346	1,325	15.0	951	10.8	91	68.7	49	0.56
1914	86,731	1,273	14.7	913	10.5	91	71.5	57	0.66
1915	81,760	1,327	15.3	994	12.1	101	76.1	48	0.58
1916	81,470	1,164	13.1	862	10.5	73	62.7	55	0.67
1917	75,649	1,123	13.3	922	10.8	90	80.1	69	0.91
1918	71,815	895	11.1	1,027	14.3	69	77.1	75	1.04
1919	88,012	1,156	12.6	1,036	11.8	96	83.0	56	0.64
1920	91,519	1,566	17.1	860	9.4	75	47.9	41	0.45

## Vital Statistics of No. 1 (Town) Ward.

Year.	Population estimated to middle of year.	Births.		Deaths.		Infantile Deaths.		Pulmonary Tuberculosis.	
		Number.	Estimated rate per 1000 of the Population.	Number.	Estimated rate per 1000 of the Population.	Number.	Rate per 1000 Births.	Deaths.	Death-rate per 1000 of the Population.
1902	12,120	192	15.8	163	13.4	20	104.1	17	1.40
1903	12,310	194	15.7	127	10.3	14	72.1	11	0.89
1904	12,500	195	15.6	125	10.0	20	102.5	13	1.04
1905	12,690	194	15.3	127	10.0	24	123.7	9	0.79
1906	12,870	205	15.9	131	10.2	21	102.4	5	0.39
1907	13,070	185	14.1	152	11.6	15	81.1	13	0.99
1908	13,250	225	17.0	108	8.1	11	48.8	7	0.53
1909	13,430	196	14.6	140	10.4	15	76.5	6	0.45
1910	13,610	199	14.6	118	8.7	15	75.4	6	0.44
1911	13,820	207	15.0	133	9.6	19	91.8	7	0.51
1912	14,040	183	13.0	135	9.6	12	65.5	5	0.36
1913	14,250	201	13.8	161	11.1	11	54.7	11	0.76
1914	14,400	152	10.5	130	9.1	14	92.1	5	0.35
1915	13,550	157	10.9	147	10.8	17	108.2	5	0.26
1916	13,510	132	9.7	140	10.3	7	53.0	13	0.96
1917	12,593	143	10.3	143	11.2	12	83.9	14	1.11
1918	13,000	115	8.8	157	13.5	13	113.0	11	0.95
1919	14,600	149	10.2	170	12.0	13	87.2	10	0.71
1920	14,600	208	14.2	112	9.7	7	33.6	4	0.27

## Vital Statistics of No. 2 (Belsize) Ward.

Year.	Population estimated to middle of year.	Births.		Deaths.		Infantile Deaths.		Pulmonary Tuberculosis.	
		Number.	Estimated rate per 1000 of the Population.	Number.	Estimated rate per 1000 of the Population.	Number.	Rate per 1000 Births.	Deaths.	Death-rate per 1000 of the Population.
1902	13,030	239	18.3	135	10.4	18	75.3	15	1.15
1903	13,110	211	16.1	121	9.2	13	61.6	13	0.99
1904	13,200	217	16.4	141	10.7	23	105.9	12	0.91
1905	13,280	209	15.7	131	9.9	13	62.2	10	0.75
1906	13,370	187	14.0	127	9.5	8	42.8	13	0.97
1907	13,450	205	15.2	114	8.5	13	63.4	10	0.74
1908	13,530	205	15.1	126	9.3	8	39.0	16	1.18
1909	13,610	204	15.0	130	9.5	16	78.4	8	0.59
1910	13,710	207	15.1	119	8.7	9	43.5	8	0.58
1911	13,780	189	13.7	135	9.7	17	90.0	10	0.72
1912	13,830	188	13.6	127	9.2	8	42.5	7	0.51
1913	14,000	214	15.0	126	8.8	16	74.7	5	0.35
1914	14,100	195	13.8	141	10.0	9	46.1	11	0.78
1915	13,250	317	22.4	144	10.8	12	37.8	6	0.45
1916	13,200	189	14.3	127	9.6	7	37.0	6	0.45
1917	12,283	185	13.6	132	10.6	13	70.2	11	0.89
1918	12,900	149	11.5	155	13.5	7	47.0	9	0.79
1919	14,500	196	13.5	159	11.3	20	102.0	9	0.64
1920	14,500	213	14.6	132	9.1	9	42.2	7	0.48

## Vital Statistics of No. 3 (Adelaide) Ward.

Year.	Population estimated to middle of year.	Births.		Deaths.		Infantile Deaths.		Pulmonary Tuberculosis.	
		Number.	Estimated rate per 1000 of the Population.	Number.	Estimated rate per 1000 of the Population.	Number.	Rate per 1000 Births.	Deaths.	Death-rate per 1000 of the Population.
1902	10,350	103	9.9	95	9.6	3	29.1	7	0.68
1903	10,310	95	9.2	101	9.8	9	94.7	1	0.10
1904	10,260	100	9.7	99	9.6	13	130.0	8	0.78
1905	10,220	96	9.4	92	9.0	4	41.7	4	0.39
1906	10,170	97	9.5	92	9.0	10	103.1	5	0.49
1907	10,120	75	7.4	86	8.5	8	106.7	2	0.20
1908	10,070	93	9.2	78	7.7	6	64.6	4	0.40
1909	10,040	83	8.3	88	8.8	4	48.2	3	0.30
1910	10,000	96	9.6	78	7.8	2	20.8	5	0.50
1911	9,950	82	8.2	99	9.9	6	73.2	3	0.30
1912	9,930	117	11.8	77	7.7	6	51.3	9	0.91
1913	9,780	97	9.7	99	9.9	9	92.8	4	0.40
1914	9,730	88	9.0	99	10.2	5	56.8	2	0.20
1915	9,150	77	7.9	104	11.3	5	61.9	2	0.21
1916	9,100	104	11.4	95	10.4	12	115.3	5	0.54
1917	8,383	114	11.9	109	13.1	7	61.4	6	0.71
1918	9,366	97	10.3	119	14.3	6	61.8	11	1.32
1919	10,982	97	8.8	130	12.8	10	103.8	6	0.39
1920	10,719	161	14.7	109	10.0	6	37.3	3	0.28



## Vital Statistics of No. 4 (Central) Ward.

Year.	Population estimated to middle of year.	Births.		Deaths.		Infantile Deaths.		Pulmonary Tuberculosis.	
		Number.	Estimated rate per 1000 of the Population.	Number.	Estimated rate per 1000 of the Population.	Number.	Rate per 1000 Births.	Deaths.	Death-rate per 1000 of the Population.
1902	9,190	110	12.0	71	7.7	11	100.0	5	0.54
1903	9,260	99	10.7	60	6.5	8	80.8	4	0.43
1904	9,330	90	9.6	62	6.6	11	122.2	1	0.11
1905	9,400	113	12.0	60	6.4	5	44.2	6	0.64
1906	9,470	95	10.0	83	8.8	3	31.6	2	0.21
1907	9,540	108	11.3	68	7.1	9	83.3	5	0.52
1908	9,610	104	10.8	82	8.5	6	57.7	7	0.73
1909	9,680	116	12.0	63	6.5	3	25.9	3	0.31
1910	9,770	105	10.7	82	8.4	8	76.2	3	0.31
1911	9,859	92	9.3	75	7.6	8	87.0	3	0.30
1912	9,876	97	9.8	76	7.7	4	41.2	6	0.61
1913	9,996	91	8.9	84	8.2	6	65.9	...	...
1914	10,061	84	8.3	76	7.5	4	47.6	6	0.60
1915	9,500	91	9.0	92	9.7	4	42.5	6	0.62
1916	9,450	93	9.8	97	10.2	4	43.0	3	0.31
1917	8,733	69	6.9	76	8.8	2	28.9	...	...
1918	9,200	69	7.5	99	11.9	5	72.5	7	0.84
1919	10,800	101	9.3	117	11.5	5	49.5	4	0.39
1920	10,719	131	12.2	91	8.5	7	53.4	2	0.19

## Vital Statistics of No. 5 (West End) Ward.

Year.	Population estimated to middle of year.	Births.		Deaths.		Infantile Deaths.		Pulmonary Tuberculosis.	
		Number.	Estimated rate per 1000 of the Population.	Number.	Estimated rate per 1000 of the Population.	Number.	Rate per 1000 Births.	Deaths.	Death-rate per 1000 of the Population.
1902	12,250	275	22.4	107	8.7	20	72.1	6	0.49
1903	12,320	243	19.7	111	9.0	21	86.4	12	0.97
1904	12,380	283	22.8	120	9.7	22	77.7	8	0.65
1905	12,450	250	20.1	131	10.5	23	92.0	11	0.88
1906	12,510	259	20.7	115	9.2	14	54.1	8	0.64
1907	12,580	250	19.9	114	9.1	16	64.0	9	0.71
1908	12,640	254	20.1	121	9.6	26	102.4	9	0.71
1909	12,700	239	18.8	118	9.3	13	54.1	6	0.47
1910	12,770	216	16.9	121	9.5	17	78.7	11	0.86
1911	12,850	216	16.8	102	7.9	15	69.4	10	0.78
1912	12,890	226	17.5	126	9.8	13	57.5	12	0.93
1913	13,050	240	18.0	145	10.9	11	45.8	7	0.53
1914	13,100	256	19.5	140	10.7	18	70.3	14	1.07
1915	12,390	218	16.6	151	12.1	13	59.6	11	0.88
1916	12,340	211	17.0	117	9.4	10	47.4	5	0.40
1917	11,473	221	17.3	137	11.0	13	58.8	13	1.13
1918	12,000	124	10.3	162	15.0	10	80.6	12	1.11
1919	13,600	175	12.9	139	10.5	12	68.5	12	0.83
1920	13,600	268	19.7	119	8.7	16	60.0	6	0.44

## Vital Statistics of No. 6 (Kilburn) Ward.

Year.	Population estimated to middle of year.	Births.		Deaths.		Infantile Deaths.		Pulmonary Tuberculosis.	
		Number.	Estimated rate per 1000 of the Population.	Number.	Estimated rate per 1000 of the Population.	Number.	Rate per 1000 Births.	Deaths.	Death-rate per 1000 of the Population.
1902	14,790	435	29.4	219	14.8	45	103.4	16	1.08
1903	14,800	417	28.2	184	12.4	39	93.5	18	1.22
1904	14,810	408	27.5	206	13.9	54	132.3	22	1.48
1905	14,820	426	28.7	171	11.5	50	117.4	26	1.75
1906	14,840	444	29.9	197	13.3	41	92.0	15	1.01
1907	14,850	391	26.3	179	12.5	28	71.6	16	1.08
1908	14,880	393	26.4	186	12.5	30	76.3	21	1.41
1909	14,890	341	22.9	182	12.2	37	108.5	17	1.14
1910	14,900	379	25.4	192	12.9	24	63.3	16	1.07
1911	14,920	347	23.2	179	12.0	31	89.3	16	1.07
1912	15,000	353	23.5	188	12.5	26	73.6	14	0.92
1913	15,200	354	23.8	213	13.7	25	70.6	18	1.16
1914	15,300	385	25.2	212	13.8	25	64.2	13	0.85
1915	14,440	329	21.5	230	15.8	40	121.5	11	0.76
1916	14,440	309	21.3	180	12.4	28	90.6	20	1.38
1917	13,472	280	18.9	208	15.2	37	132.1	17	1.26
1918	14,000	241	17.2	225	18.0	21	87.1	18	1.44
1919	15,700	296	18.8	201	12.9	24	81.1	11	0.70
1920	15,700	408	26.0	172	10.9	19	47.7	14	0.90

## Vital Statistics of No. 7 (Priory) Ward.

Year.	Population estimated to middle of year.	Births.		Deaths.		Infantile Deaths.		Pulmonary Tuberculosis.	
		Number.	Estimated rate per 1000 of the Population.	Number.	Estimated rate per 1000 of the Population.	Number.	Rate per 1000 Births.	Deaths.	Death-rate per 1000 of the Population.
1902	10,650	162	15.2	110	10.3	16	98.7	7	0.66
1903	10,620	194	18.3	116	10.9	21	108.2	5	0.47
1904	10,600	152	14.3	121	11.4	13	85.5	9	0.85
1905	10,570	133	12.6	103	9.7	14	105.3	7	0.66
1906	10,550	150	14.2	93	8.8	9	60.0	8	0.76
1907	10,520	127	12.1	94	8.9	7	55.1	6	0.57
1908	10,500	126	12.0	93	8.8	10	79.3	7	0.67
1909	10,480	149	14.2	111	10.6	11	73.8	8	0.76
1910	10,450	138	13.2	111	10.6	6	43.5	8	0.76
1911	10,420	143	13.7	115	11.0	9	63.0	5	0.48
1912	10,400	117	11.1	115	10.9	7	59.8	10	0.96
1913	10,070	128	12.5	117	11.4	12	93.7	3	0.29
1914	10,040	113	11.2	110	10.9	16	141.6	5	0.50
1915	9,480	138	13.7	126	13.2	10	72.4	7	0.73
1916	9,480	126	13.3	106	11.2	5	39.6	3	0.31
1917	8,712	111	11.2	117	13.6	6	54.0	8	0.91
1918	10,000	100	10.0	110	12.5	7	70.0	7	0.80
1919	11,500	142	12.3	120	11.1	12	84.5	5	0.46
1920	11,500	177	15.4	95	8.3	11	62.1	5	0.43



### Vital Statistics of Hampstead, compared with England and Wales.

Year.			Birth rate per 1000.		General death-rate per 1000.		Natural increase Hamp- stead.
			Hamp- stead.	England and Wales.	Hamp- stead.	England and Wales.	
1891	..	..	21.5	31.4	12.2	22.5	+ 670
1892	..	..	20.4	30.5	12.4	19.0	591
1893	..	..	20.5	30.8	12.9	19.2	547
1894	..	..	19.6	29.6	10.8	16.6	674
1895	..	..	19.8	30.2	13.4	18.7	452
1896	..	..	19.1	29.7	12.0	17.1	546
1897	..	..	20.2	29.7	11.6	17.4	568
1898	..	..	18.1	29.4	11.4	17.6	599
1899	..	..	19.7	29.3	11.4	18.3	650
1900	..	..	20.0	28.7	11.3	18.3	699
1901	..	..	18.3	28.5	10.6	16.9	633
1902	..	..	18.4	28.6	11.0	16.2	612
1903	..	..	17.6	28.4	10.1	15.4	616
1904	..	..	17.4	27.9	10.7	16.2	553
1905	..	..	17.0	27.2	9.9	15.2	598
1906	..	..	17.1	27.6	10.1	15.4	587
1907	..	..	16.1	26.3	9.7	15.0	524
1908	..	..	16.6	26.5	9.5	14.7	597
1909	..	..	15.6	25.6	9.9	14.5	489
1910	..	..	15.7	24.8	9.7	13.4	511
1911	..	..	14.9	24.4	9.9	14.6	429
1912	..	..	14.9	23.8	10.0	13.3	420
1913	..	..	15.0	23.9	10.8	13.7	374
1914	..	..	14.7	23.8	10.5	14.0	360
1915	..	..	15.3	21.8	12.1	14.8	333
1916	..	..	13.1	21.6	10.5	14.0	302
1917	..	..	13.3	17.8	10.8	14.4	201
1918	..	..	11.1	17.7	14.3	17.6	—132
1919	..	..	12.6	18.5	11.8	13.8	+ 120
1920	..	..	17.1	25.4	9.4	12.4	706

