

Annual report of the Medical Officer of Health for Chelsea, 1926.

Contributors

Chelsea (London, England). Metropolitan Borough.
McCarthy, W. H. Leslie.

Publication/Creation

London : Wightman, 1927.

Persistent URL

<https://wellcomecollection.org/works/cbdm69zv>

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
<https://wellcomecollection.org>

Metropolitan Borough of Chelsea.

Annual Report
OF THE
Medical Officer of Health
FOR
CHELSEA.

1926.

BY
W. H. LESLIE McCARTHY,
D.S.O., M.C.; M.A.; M.D., M.R.C.P., D.P.H.,
Barrister-at-Law.
MEDICAL OFFICER OF HEALTH.

Public Health, Maternity and Child Welfare Committee.

At 31st December, 1926.

HIS WORSHIP THE MAYOR (Mr. Alderman C. B. Clapcott, O.B.E., J.P.).

Councillor LADY PHIPP; (*Chairman*).

Alderman A. C. SETON CHRISTOPHER, J.P.

Councillors—

A. BAYES.	E. L. MEINERTZHAGEN.
F. G. CHAMBERS.	E. MILNES GASKELL.
H. A. DUNMORE.	Sir T. W. PARKINSON, M.D.
E. W. HALL.	Miss C. L. PATERSON.
Mrs. M. I. HEWITT.	Miss E. E. PLACE.
H. KENT.	G. M. STEVENSON.
A. F. LOVERIDGE.	Mrs. F. L. C. WALTER.

Housing Committee.

HIS WORSHIP THE MAYOR (Mr. Alderman C. B. Clapcott, O.B.E., J.P.).

Councillor E. B. BAGGALLAY (*Chairman*).

Alderman Sir A. GRAY, K.C.B., K.C.

Alderman F. W. PROCTOR.

Alderman A. C. SETON CHRISTOPHER, J.P.

Councillors—

J. ADAM.	Lady PHIPPS.
A. BLOMFIELD.	Mrs. F. M. SNOWDEN.
E. W. HALL.	Miss V. J. M. STEPHENSON.
Miss C. L. PATERSON.	F. J. SYNGE.
Mrs. F. L. C. WALTER.	

Milk and Welfare Sub-Committee.

HIS WORSHIP THE MAYOR (Mr. Alderman C. B. Clapcott, O.B.E., J.P.).

Councillor Miss C. L. PATERSON (*Chairman*).

Councillor LADY PHIPPS.

Councillor Miss E. E. PLACE.

Councillor Mrs. F. L. C. WALTER.



TABLE OF CONTENTS.

	PAGE
Public Health, Maternity and Child Welfare Committee	2
Housing Committee	2
Milk and Welfare Sub-Committee	2
Preface	5

I.—NATURAL AND SOCIAL CONDITIONS OF THE BOROUGH.

General Statistics	7
Physical Features and General Character of the Borough	7
Social Conditions, including Chief Occupations of the Inhabitants	7
Vital Statistics	8
(a) Births	8
(b) Marriages	10
(c) Deaths	10
(d) Deaths of Children, 1-5 years of age	16
(e) Infant Mortality	16
Poor Law Relief in the Borough	18
Utilization of Hospital and other forms of Gratuitous Medical Relief	18
Causes of Sickness in the Borough	19

II.—PROVISION OF HEALTH SERVICES IN THE BOROUGH.

Hospitals	20
Institutional Provision for Unmarried Mothers	20
Ambulance Facilities	20
Clinics and Treatment Centres	20
(a) Chelsea Health Society and School for Mothers	20
(b) Chelsea Day Nursery	21
(c) Chelsea Tuberculosis Dispensary	21
(d) Invalid Children's Aid Association	21
Public Health Officers of the Borough Council	22
Nursing Arrangements	24
(a) Professional Nursing in the Home	24
(b) Midwives	25
Laboratory Work	25
Public Health Legislation in Force in the Borough	26

III.—SANITARY CIRCUMSTANCES AND ADMINISTRATION.

Complaints	27
Closet Accommodation	27
Removal and Disposal of Refuse	27
Sanitary Inspection of the Borough	27
Smoke Abatement	31
Fouling of Foot-paths by Dogs	31
Rats	31
Pigeons	31
Factories, Workshops and Workplaces	32
Public Mortuary	34
Rag Flock Act	34
Offensive Trades	34

IV.—HOUSING.

Housing Statistics for the Year 1926	35
Housing Staff	36
General Housing Conditions in the Borough	36
Overcrowding	38
Fitness of Houses	39
Unhealthy Areas	40
Bye-laws relating to Houses and Houses Let in Lodgings	40
Housing Survey	41

V.—INSPECTION AND SUPERVISION OF FOOD.

	PAGE
Milk Supply	42
Ice-cream Vendors	43
Fried Fish Vendors	43
Bakehouses	44
Slaughter-houses	44
Other Premises where Food is Prepared or Sold	44
Public Health (Meat) Regulations, 1924	45
Unsound Food	45
Food Poisoning	45
Sale of Food and Drugs Acts	45
Milk and Cream Regulations, 1912-1917	46

VI.—INFECTIOUS DISEASES.

(a) Infectious Diseases Generally	47
Diseases notifiable in the Borough	47
Notifications during the Year 1926	47
Diphtheria	48
Scarlet Fever	50
Measles	51
Enteric Fever	51
Pneumonia, Malaria, Dysentery and Trench Fever	52
Puerperal Fever and Puerperal Pyrexia	52
Ophthalmia Neonatorum	53
Influenza	53
Encephalitis Lethargica	53
Smallpox and Vaccination	54
Disinfection	54
Infectious Diseases Shelter	55
Disinfestation	55
(b) Tuberculosis	56
Notifications and Mortality	56
Cases of Tuberculosis in the Borough	57
Public Health (Prevention of Tuberculosis) Regulations, 1925	57
Dispensary and Institutional Facilities for Treatment	58
Co-operation with Hospitals and I.C.A.A.	59
Co-operation with School Medical Service	60
Co-operation with Medical Practitioners	60
Home Contacts	60
Artificial Pneumothorax Treatment	60
Home Nursing	60
Extra Nourishment... ..	60
Non-pulmonary Cases	60
Orthopædic Treatment	61
Bacteriological Examinations	61
Care and After-care Work	61

VII.—MATERNITY AND CHILD WELFARE.

General Arrangements in the Borough	63
Health Visitors	63
Midwives	64
Home Help	65
Home Nursing	66
Clinics and Treatment Centres	67
Ormond Maternity Home	67
Convalescent Home Treatment for Nursing Mothers and Infants	67
Chelsea Branch of the Invalid Children's Aid Association	68
Chelsea Day Nursery	69
Puerperal Fever and Puerperal Pyrexia... ..	69
Other Diseases and Complications of Childbirth	69
Maternal Mortality	69
Ante-natal Work	70
Supply of Milk to Mothers and Young Children	70
Widows', Orphans' and Old Age Pensions Contributory Act, 1924... ..	71

APPENDIX.

Report of the Public Analyst for 1926	74
--	----

PREFACE.

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

MR. MAYOR, LADIES AND GENTLEMEN,

I have the honour to submit the Annual Report on the health of the Metropolitan Borough of Chelsea for 1926.

The report is an " Ordinary " report as defined in the appropriate circular of the Ministry of Health. The Ministry's programme stipulates that for each series of five years from 1925 onwards there shall be published one Survey and four Ordinary reports. Ordinary reports are expected to deal with the sanitary circumstances, the sanitary administration, and the vital statistics relating to the District for the year under review. Any further action of importance in the organization or development of public health services contemplated by the Local Authority or considered desirable by the Medical Officer of Health must also be dealt with.

The chief vital statistics relating to the year are as follows : The civil population is estimated by the Registrar-General at 64,820, a figure which is identical with that for last year. The birth rate (13·3) is lower than that for last year (14·4). The marriage rate (9·1) is higher than that for last year (8·9). The death rate (12·5) is higher than that for London generally (11·6) but compares with 13·6 last year. It is, perhaps, not generally realised that nearly 9 per cent. of the Chelsea population is made up of persons over 65 years of age—a much higher proportion than that obtaining in any other Metropolitan borough. The infant mortality rate was 64, as compared with 68 last year. These figures indicate that the general improvement in the public health of the Borough continues to be maintained.

The incidence of notifiable infectious diseases was somewhat higher last year owing to outbreaks of diphtheria, scarlet fever and pneumonia in the early months of the year. The numbers of cases of erysipelas and ophthalmia remain, approximately, the same. A considerable increase is recorded in the number of cases of measles.

At the end of the year there were 307 cases of pulmonary tuberculosis and 67 cases of non-pulmonary tuberculosis known to be living in the Borough. These figures represent a slight increase as compared with those for 1925.

Maternity and Child Welfare work has continued to grow in extent and usefulness during the year. The attendances at the welfare centres were 5,702 in 1926 and 8,600 visits to homes of patients were recorded. I continue to receive most valuable assistance from the Chelsea Health Society, and cannot speak too highly of the efficiency of the Society's work.

Section III. of the report deals with Sanitary Administration. The statistics indicate that constant attention is devoted to the improvement of housing accommodation in the Borough. Although to less extent than in other Metropolitan boroughs, this side of the work of the department is frequently hampered by the inadequate number of houses available. Your Housing Committee has been engaged for several months in examining possible sites which might be utilised for a Housing Scheme—a task rendered difficult by the fact that Chelsea is already largely built up. Fortunately, an area of about two acres, formerly occupied by Wimsett's Nurseries, and situated at the western extremity of King's Road, has now been acquired and will be utilised for the erection of buildings to house the working classes. In addition, an area comprising about seventy small houses and cottages, known as the World's End Passage area, has been officially represented under the Housing Act, 1925, with a view to an Improvement Scheme. As in former years, much attention has been given to the supervision of food supplies.

I have again to express my appreciation of the work of the staff of the Public Health Department, and to thank the members of the Public Health, Maternity, Child Welfare, and other Committees for the support and sympathetic consideration which they have extended to me, and for their keen attention to the problems which it has been my duty to lay before them.

Copies of this report are being transmitted to the Ministry of Health, the Home Office and the London County Council, in accordance with statutory requirements.

I am,

Mr. Mayor, Ladies and Gentlemen,

Your obedient Servant,

W. H. L. McCARTHY.

Annual Report

ON THE

Health of the Metropolitan Borough of Chelsea,

Year ending 31st December, 1926.

SECTION I.—NATURAL AND SOCIAL CONDITIONS OF THE BOROUGH.

GENERAL STATISTICS.

TABLE No. 1.

Area	...	...	...	...	...	...	...	(acres) 660
Population :—								
(Census, 1921)	...	...	...	...	...	...	...	63,700
(Estimated, 1926)	...	...	...	...	...	...	...	64,820
Number of Inhabited Houses, 1921	...	...	...	...	...	...	...	10,355
Number of families or separate occupiers, 1921	...	...	...	...	...	...	...	16,555
Rateable value, October, 1926	...	...	...	...	...	...	...	£1,057,739
Sum represented by a penny rate, October, 1926	...	...	...	...	...	...	...	£4,262

Physical Features and General Character of the Area.—The Metropolitan Borough of Chelsea, situated near the centre of the Metropolis, is bounded on the north by the Royal Borough of Kensington, on the west by the Borough of Fulham, on the east by the City of Westminster, and on the south by the river Thames. It is a small compact borough, less than two miles in length by about three-quarters of a mile in width.

Over nearly the whole area the soil consists of gravel and sand, highly permeable to water. In a small portion of the western side of the Borough there is a thin loamy deposit of brick earth resting upon the gravel. There is a narrow strip of alluvial deposit extending along the Embankment from Battersea Bridge westwards.

The northern portion of the area is largely built over. The central zone comprises a number of pleasant squares occupied by people in affluent circumstances. The grounds of the Royal Hospital, with the river Thames and Battersea Park beyond, render the southern zone unusually open.

Social Conditions.—The density of population (number of persons per acre), as shown by the 1921 Census, is 97, the corresponding figure for London, as a whole, being 60. The density of population of each

of the five Wards in the Borough is as follows:—Church Ward, 124; Stanley Ward, 122; Hans Town Ward, 93; Cheyne Ward, 83; Royal Hospital Ward, 59.

Analysis of the 1921 Census figures shows that there is a greater proportion of unoccupied and retired persons in Chelsea than in any other Metropolitan borough. There is, however, a considerable "working class" population. Thus, of a total of 21,000 adult males, about 17,000 are occupied. The chief occupations are transport work (2,990), personal service (1,971), metal work (1,144), and clerical work (1,017). Nearly one-half of the 32,000 adult females are occupied. Of these, domestic servants account for 9,900, dressmakers number 1,355, shop assistants 1,900, and clerks 1,200.

There are no dangerous or offensive trades carried on in the Borough. There is no evidence that any of the occupations of the inhabitants exerts a deleterious influence on the public health.

VITAL STATISTICS.

In accordance with the requirements of the Ministry of Health, the following extracts from the Vital Statistics of the year are shown below:—

TABLE No. 2.

Births—Legitimate ...	...	...	...	...	...	789	
„ Illegitimate ...	...	...	...	...	...	73	
Birth Rate ...	...	...	...	...	...	—	862
Deaths...	...	...	...	...	...	...	13·3
Death Rate ...	...	...	...	...	...	...	812
Number of women dying in, or in consequence of childbirth ...	...	...	...	...	...	...	12·5
(a) From sepsis...	...	...	...	...	...	...	3
(b) From other causes...	...	...	...	...	...	...	1
Deaths of infants under one year	...	...	...	...	...	...	2
(a) Legitimate ...	...	...	...	...	...	...	55
(b) Illegitimate ...	...	...	...	...	...	...	43
Infantile Mortality Rate ...	...	...	...	...	...	...	12
Deaths from Measles (all ages)	...	...	...	...	...	...	64
„ „ Whooping Cough (all ages)	...	...	...	...	...	...	16
„ „ Diarrhoea (under 2 years) ...	...	...	...	...	...	...	8
Zymotic Death Rate ...	...	...	...	...	...	...	14
Deaths from the Zymotic Diseases	...	...	...	...	...	...	0·7
Tuberculosis Death Rate ...	...	...	...	...	...	...	46
							0·9

BIRTHS.

During the year 930 births were registered in Chelsea, 483 being boys and 447 girls. Of these, births of non-parishioners account for 282, and must be deducted. In addition, there were 214 births amongst Chelsea mothers in Lying-in Hospitals and elsewhere outside the Borough, 104 boys and 110 girls. Thus the total number of Chelsea births for the year was 862, of which 447 were males and 415 females.

The following Tables are self-explanatory:—

TABLE No. 3.
BIRTHS AND BIRTH-RATES.

Year.	Births.	Birth-rate per 1,000.	Birth-rate London.
1925	935	14·4	18·0
1926	862	13·3	17·1

TABLE No. 4.
BIRTHS IN WARDS.

Year.	Hans Town.	Royal Hospital.	Church.	Cheyne.	Stanley.	Total.
1925 ...	131	108	163	126	407	935
1926 ...	121	91	132	122	396	862

TABLE No. 5.
NOTIFICATION OF BIRTHS.

	1925.	1926.
Living Children	645	610
Still-born Children	12	22
	657	632
Notified by Medical Practitioners	132	115
" " St. George's Hospital, Extern Department ...	20	15
" " Midwives	378	371
" " Chelsea Institution	99	90
" " Parents, etc.	28	41
	657	632
Less dual notifications	—	—
	657	632
Percentage of notified births of Chelsea residents registered in the Borough	93	94

TABLE No. 6.

INWARD TRANSFERS (1926).

Confinements in Hospitals outside the Borough	...	...	148
„ Nursing Homes outside the Borough	...	...	25
„ private residences outside the Borough	...	...	41
			<hr/> 214

It will be observed that the number of births of Chelsea Infants in Hospitals and elsewhere outside Chelsea accounted for 24·8 per cent. of the total births in 1926, which is identical with the corresponding percentage for 1925.

Chelsea births in Hospitals outside the Borough were distributed during 1926 as follows:—St. George's Hospital, 64; Queen Charlotte's Hospital, 30; Clapham Maternity Hospital, 8; General Lying-in Hospital, Lambeth, 16; Charing Cross Hospital, 6; Royal Free Hospital, 3; St. Thomas' Hospital, 4; Miscellaneous Hospitals, 17.

Chelsea births in Hospitals and Maternity Homes within the Borough during 1926 numbered 134. These were distributed as follows:—St. Luke's Hospital, 97; Ormond Maternity Home, 30; St. Stephen's Hospital, 5; Chelsea Hospital for Women, 1; Royal Avenue Maternity Home, 1.

Illegitimate Births. The following Table shows the number of illegitimate births and the illegitimate birth rate per 1,000 births. In 1926, 131 such births were registered in Chelsea, and 24 inward transfers and 82 outward transfers were made by the Registrar General. The nett figure for the Borough is therefore 73.

TABLE No. 7.

Year.		Number of Illegitimate births.		Illegitimate birth rate per 1,000 births.
1925	...	65	...	69
1926	...	73	...	85

MARRIAGES.

There were 602 marriages registered in the Borough in 1926 (578 in 1925). The marriage rate (number of marriages per 1,000 of population) was 9·1. For the year 1925 the marriage rate was 8·9.

DEATHS.

The total deaths registered in the Borough in 1926 were 1,664. Transferable deaths of non-residents registered in the Borough numbered 1,022 and are to be deducted. In addition, there were 170 deaths of Chelsea residents in Institutions and elsewhere outside the Borough. The nett Chelsea deaths were therefore 812 and the death rate was 12·5 per 1,000.

In 1926 the death rate for England and Wales was 11·6, for London 11·6, and the mean death rate for the 105 Great Towns was 11·6.

During the years 1925 and 1926 the number of nett deaths in the Borough and the corresponding death rates were as shown in the following table :—

TABLE No. 8.

Year.					Nett Deaths.	Death Rate.
1925	...	...	...	...	883	13·6
1926	...	...	...	...	812	12·5

The seasonal mortality in the four quarters of 1926 was as follows :—
First quarter, 13·4 ; second quarter, 12·5 ; third quarter, 9·6 ; fourth quarter, 14·5.

The 1921 Census Returns show that there is a considerably higher percentage of persons of advanced age living in Chelsea than in any other Metropolitan borough. In London generally 7·7 per cent. of the total population are included in the age-group 55-65, and 5·8 per cent. in the age-group 65 and upwards. In Chelsea 9·2 per cent. of the total population come within the age-group 55-65, while no less than 8·8 per cent. constitute the age-group 65 and upwards.

These facts must be borne in mind in any analysis of the Chelsea mortality rate, as they are naturally reflected in the death returns. Thus, in 1926 deaths of pensioners in the Royal Hospital, Chelsea, accounted for 60 deaths (equivalent to 0·92 of the death rate).

DEATHS IN PUBLIC INSTITUTIONS.

In tabular form is shown below the number of deaths of Chelsea residents which took place in various Institutions during the year. Of the 642 Chelsea deaths registered in the Borough, 367 occurred in Institutions within the Borough.

TABLE No. 9.

Hospitals or Institutions within the Borough.					Number of Deaths.
St. Luke's Hospital and Chelsea Institution	...	...	...	...	274
Royal Hospital for Pensioners	...	...	...	...	60
Cancer Hospital	...	...	...	...	11
Victoria Hospital for Children, Tite Street	...	...	...	...	7
St. Stephen's Hospital (Westminster Infirmary)	...	...	...	...	9
Brompton Hospital	...	...	...	...	3
Chelsea Hospital for Women	...	...	...	...	2
Cheyne Hospital for Children	...	...	...	...	—
Freemasons Hospital	...	...	...	...	1
St. George's Home for Tuberculosis	...	...	...	...	—
					<u>367</u>

Of the 1,022 deaths of non-residents registered in Chelsea, 938 occurred in the foregoing Institutions.

The deaths (170) of Chelsea residents in Institutions and elsewhere outside the Borough were distributed as under :—

General Hospitals	...	...	...	...	63
Mental Hospitals ...	...	...	...	...	18
Special Hospitals ...	...	...	...	...	20
Infectious Disease Hospitals	...	...	...	...	10
Tuberculosis Sanatoria, etc.	...	...	...	...	8
Nursing Homes ...	...	...	...	...	15
Poor Law Institutions	...	...	...	...	3
Private Addresses, etc.	...	...	...	...	33

The following Tables are self-explanatory :—

TABLE No. 10.

BIRTH RATE, DEATH RATE AND ANALYSIS OF MORTALITY DURING THE YEAR 1926.

(Provisional figures. The rates for England and Wales have been calculated on a population estimated to the middle of 1926, while those for the towns have been calculated on populations estimated to the middle of 1925. The mortality rates refer to the whole population as regards England and Wales, but only to civilians as regards London and the groups of towns.)

	BIRTH-RATE PER 1,000 TOTAL POPULA- TION.	ANNUAL DEATH-RATE PER 1,000 POPULATION.									RATE PER 1,000 BIRTHS.		PERCENTAGE OF TOTAL DEATHS.		
		All Causes.	Enteric Fever.	Small- pox.	Measles.	Scarlet Fever.	Whoop- ing Cough.	Diph- theria.	Influenza	Violence.	Diarrhoea and Enteritis (under Two years).	Total Deaths under One year.	Causes of Death certified by Registered Medical Practi- tioners.	Inquest Cases.	Uncertified Causes of Death.
England and Wales	17.8	11.6	0.01	0.00	0.09	0.02	0.10	0.07	0.22	0.47	8.7	70	91.8	7.2	1.0
105 County Boroughs and Great Towns, including London ...	18.2	11.6	0.01	0.00	0.12	0.02	0.10	0.10	0.22	0.43	11.8	73	92.0	7.5	0.5
158 Smaller Towns (1921 Adjusted Populations 20,000-50,000) ...	17.6	10.6	0.01	0.00	0.07	0.02	0.11	0.06	0.23	0.40	6.6	67	92.6	6.3	1.1
London	17.1	11.6	0.01	0.00	0.20	0.02	0.05	0.12	0.17	0.48	11.8	64	90.6	9.4	0.0
Chelsea	13.3	12.5	0.01	0.00	0.25	0.02	0.12	0.09	0.17	0.40	16.3	64	92.0	8.0	0.0

TABLE No. 11.
DEATHS OF CHELSEA RESIDENTS REGISTERED DURING THE YEAR 1926, CLASSIFIED BY AGE AND CAUSE.

CAUSES OF DEATH.	NETT DEATHS WHETHER OCCURRING WITHIN OR WITHOUT THE BOROUGH.								
	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 and upwards.
All Causes	812	55	19	23	14	20	77	218	389
1. Enteric Fever	1	—	—	—	—	—	1	—	—
2. Small-pox	—	—	—	—	—	—	—	—	—
3. Measles	16	1	7	7	1	—	—	—	—
4. Scarlet Fever	1	—	—	1	—	—	—	—	—
5. Whooping Cough	8	5	3	—	—	—	—	—	—
6. Diphtheria	6	—	—	4	1	—	—	1	—
6A. Encephalitis Lethargica	1	—	—	—	—	—	1	—	—
7. Influenza	11	1	—	—	—	—	—	3	7
8. Erysipelas	—	—	—	—	—	—	—	—	—
9. Pulmonary Tuberculosis	55	1	1	1	—	8	19	21	4
10. Tuberculous Meningitis	1	—	—	1	—	—	—	—	—
11. Other Tuberculous Diseases	4	—	—	1	—	—	—	2	1
12. Cancer, Malignant Disease	116	—	—	—	—	—	9	51	56
13. Rheumatic Fever	5	—	—	—	1	—	—	—	3
13A. Diabetes	3	—	—	—	—	—	2	3	—
14. Meningitis	27	—	—	1	—	—	1	—	1
14A. Arterio Sclerosis	123	—	—	—	—	—	—	5	22
15. Organic Heart Disease...	35	—	—	1	3	—	5	25	89
15A. Cerebral Hæmorrhage	72	2	—	—	—	—	2	8	25
16. Bronchitis	67	5	6	1	1	4	4	13	33
17. Pneumonia (All Forms)	2	—	—	—	—	—	1	—	1
18. Other Diseases of Respiratory Organs	14	14	—	—	—	—	—	—	—
19. Diarrhoea and Enteritis	2	—	—	—	—	—	—	2	—
20. Appendicitis and Typhlitis	6	—	—	—	—	—	3	3	—
21. Cirrhosis of Liver	21	—	—	—	2	—	2	10	7
22. Nephritis and Bright's Disease	1	—	—	—	—	—	1	—	—
23. Puerperal Sepsis	2	—	—	—	—	—	2	—	—
24. Other Accidents and Diseases of Pregnancy and Parturition	20	20	—	—	—	—	—	—	—
25. Congenital Debility and Malformation, including Premature Birth	26	2	—	—	—	—	—	—	—
26. Violent Deaths (excluding Suicide)	5	—	—	1	2	3	5	5	8
27. Suicide	156	4	2	1	3	3	18	53	72
28. Other Defined Diseases	1	—	—	—	—	—	1	—	—
29. Diseases Ill-defined or Unknown	—	—	—	—	—	—	—	—	—

CAUSES OF DEATH.

Table No. 11 shows that 123 deaths were due to Organic Heart Disease, 116 to Cancer, 72 to Bronchitis, 67 to Pneumonia, 55 to Pulmonary Tuberculosis, 27 to Arterio-sclerosis, 35 to Cerebral Hæmorrhage, 11 to Influenza and 20 to Congenital Debility and Malformation. These figures show a definite decrease in all cases, except those for Tuberculosis, the figure for which is approximately the same as that for the previous year. Forty-eight per cent. of all deaths occurred in persons over 65 years of age.

Organic Heart Disease. Of the 123 deaths from cardiac diseases in 1926, 89 were in persons over the age of 65 years. In 1925, there were 135 deaths from Heart Disease, 100 being persons over the age of 65 years.

Cancer and Malignant Disease. There were 116 deaths from Cancer during the year, as against 123 in 1925.

Nine of the deaths in 1926 were between the ages of 25 and 45; 51 between the ages of 45 and 65; and 56 above the age of 65 years.

There were 6,567 deaths from Cancer in London during 1926, as compared with 6,488 in 1925.

On request, rooms are disinfected after a death from Cancer, and arrangements made for the removal, fumigation or destruction of bedding. During 1926, 9 rooms were disinfected after deaths from Cancer.

Tuberculosis and the Infectious Fevers. These are reviewed in the section dealing with the notifiable infectious diseases.

Diarrhœa and Enteritis. There were 14 deaths from these diseases in 1926, as against 12 in 1925. All the deaths occurred in infants under the age of twelve months. Nine of the deaths took place in St. Luke's Hospital, one in the Infants Hospital, Vincent Square, Westminster, two in St. Margaret's Hospital, and two in the Children's Hospital, Holborn.

During the September quarter the mean temperature was 61.5° , as against 60.8° in 1925. The rainfall of the quarter in 1926 was 6.7 inches, as against 7.9 in 1925.

Violence and Suicide. 26 deaths occurred from violence apart from suicide. Suicide was responsible for 5 deaths.

Puerperal Deaths. Deaths from puerperal fever and from other causes associated with childbirth are reviewed in the section dealing with Maternity and Child Welfare.

Respiratory Diseases. Table No. 12 shows the number of deaths from respiratory diseases during the years 1925 and 1926. The annual death rate, the number of deaths under 5 years, and the percentage of deaths occurring in children under 5 years of age is also shown :—

TABLE No. 12.

Year.	Bronchitis.	Pneumonia.	Other Respiratory Diseases.	Total.	Death rate.	No. of deaths under 5 years.	Percentage under 5 years.
1925	84	74	3	161	2·5	20	12·4
1926	72	67	2	141	2·2	14	9·9

DEATHS OF CHILDREN 1-5 YEARS OF AGE.

The number of deaths of children between 1-2 years of age was 19, and between 2-5 years, 20. In 1925 these figures were 8 and 13, respectively. The causes of death are given in detail in Table No. 11. Table No. 13 shows the causes of death during the years 1925 and 1926.

TABLE No. 13.

CHILD MORTALITY (1-5 YEARS).

Period or Year.	Infectious Fevers.	Tuberculosis.	Respiratory Diseases.	Diarrhoeal Diseases.	All other causes.	Total Deaths.
1925	11	1	5	—	4	21
1926	22	4	7	—	6	39

INFANT MORTALITY.

There were 55 deaths of infants under one year of age in Chelsea during 1926. The corrected death rate is 64 per 1,000 births, as compared with 68 in 1925.

In London, in 1926, the rate of infant mortality was 64 per 1,000 births.

The causes of death in the various age groups are set out in Table No. 14 :—

TABLE No. 14.

	Under 1 week.	1-2 weeks.	2-3 weeks.	3-4 weeks.	Total under 4 weeks.	4 weeks and under 3 months.	3-6 months.	6-9 months.	9-12 months.	Total deaths under 1 year.
Measles ... ..	...	...	...	...	...	1	...	...	...	1
Scarlet Fever ... ..	...	...	...	...	...	...	...	...	...	...
Whooping Cough ... ..	...	...	...	...	...	2	...	2	1	5
Diphtheria ... ..	...	...	...	...	...	...	...	...	...	...
Influenza ... ..	...	...	...	...	...	...	...	1	...	1
Erysipelas ... ..	...	...	...	...	...	...	...	...	...	...
Tuberculous Meningitis ... ..	...	...	...	...	...	...	...	...	...	...
Abdominal Tuberculosis ... ..	...	...	...	...	...	...	...	...	...	...
Other Tuberculous Diseases ... ..	...	...	...	...	...	...	...	1	...	1
Meningitis ... ..	...	...	...	...	...	...	...	...	...	...
Convulsions ... ..	...	...	...	...	...	...	...	...	...	...
Laryngitis ... ..	...	...	...	...	...	...	...	...	...	...
Bronchitis	1	...	...	...	1	...	1	...	...	2
Pneumonia ... ..	...	...	...	...	...	1	2	2	...	5
Diarrhoea and Enteritis ... ..	...	...	...	...	...	2	7	2	3	14
Gastritis ... ..	...	...	...	...	...	...	...	...	...	...
Syphilis ... ..	...	...	...	...	...	...	...	...	...	...
Rickets ... ..	...	...	...	...	...	...	...	...	...	...
Suffocation	2	...	...	...	2	...	...	...	...	2
Injury at Birth ... ..	...	...	...	...	...	...	...	...	...	...
Atelectasis	1	...	...	...	1	...	...	...	...	1
Congenital Malformations	1	...	1	...	2	1	...	...	...	3
Premature Birth	7	2	1	...	10	1	...	...	...	11
Atrophy, Debility & Marasmus	2	...	...	...	2	...	1	3	...	6
Other causes	1	...	...	...	1	...	1	1	...	3
	15	2	2	...	18	8	12	12	4	55

Nett Births registered during the calendar year	{	Legitimate ...	789
		Illegitimate ...	73
Nett Deaths registered during the calendar year	{	Legitimate ...	43
		Illegitimate ...	12

The following Table gives the Infant Mortality Rate in Chelsea under various headings, for the years 1925 and 1926 :—

TABLE No. 15.

	1925.	1926.
Infectious Diseases	2.1	7.0
Diarrhoeal Diseases	12.8	16.3
Developmental Defects and Wasting	22.4	23.3
Other causes	31.0	17.4
Total Rate	68.3	64.0

TABLE No. 16.

INFANTILE MORTALITY RATES IN WARDS.

			1925.	1926.
Hans Town	...	...	46	24
Royal Hospital	...	...	28	88
Church	...	...	104	68
Cheyne	...	...	56	49
Stanley	...	...	76	73
			—	—
Chelsea Borough	...		68	64
			==	==

Illegitimate Deaths. The following Table No. 17 shows the number of deaths among illegitimate infants during the years 1925 and 1926.

TABLE No. 17.

	1925.	1926.
Total number of illegitimate births ...	65	73
Alive at end of year ...	48	47
Dead at end of year ...	4	7
Unaccounted for ...	13	19

Poor Law Relief. Through the courtesy of Mr. Shepherd, Clerk to the Chelsea Guardians, I am able to give below the figures as to the average daily number of persons chargeable to the Guardians during the year 1926.

TABLE No. 18.

	1926.
Numbers of persons who received medical relief only ...	52
Numbers of persons who received relief (indoor and outdoor) ...	1,876

Utilization of Hospital and Other Forms of Gratuitous Medical Relief. The Borough is singularly well provided with facilities for hospital treatment, both general and special. In addition, several important general and special hospitals are situated in the immediate neighbourhood.

Over 80 per cent. of the inhabitants suffering from serious illness or disease seek and obtain in-patient hospital accommodation.

In the case of all patients suffering from notifiable infectious disease, it is the practice of the Department to advocate admission to an appropriate hospital for isolation and treatment.

Reference has already been made to the numbers of persons in the Borough who utilised the arrangements for outdoor medical relief made by the Board of Guardians.

CAUSES OF SICKNESS IN THE BOROUGH.

The Ministry of Health directs that any causes of sickness and invalidity which have been specially noteworthy in the area during the year should be specified.

It is difficult to write definitely on this section of the Annual Report, as the Medical Officer of Health has no access to sickness returns such as those which are available to the officers of approved societies under the National Insurance Act. The information that can be given is therefore mainly based on impressions gleaned from local general practitioners, from deductions on the incidence of certain diseases in the death returns and from details as to persons who received medical relief from the Board of Guardians.

The year, generally, was an unfavourable one from a meteorological point of view. The weather was cold and damp, particularly in the early months. As a consequence, there was an abnormal amount of respiratory and rheumatic affections, but the deaths from diseases of this character were lower than in previous years. The number of deaths is, of course, no measure of the amount of sickness and can only be regarded as an index. Influenza, milder in type than that which has been experienced in preceding years, occurred in epidemic form in January, February and March, its distribution being general throughout the Borough. Judged by the notifications received, there was an increase in the amount of pneumonia, 136 notifications being received, compared with 102 in the previous year. This number probably under-estimates the incidence of the disease, as many cases still escape notification. During the year every medical practitioner in the Borough was supplied with a list of the notifiable diseases, and efforts were made to ensure prompt notification in every case.

There was an increase in the number of cases of infectious disease, especially in the case of diphtheria. Fortunately, this diphtheria epidemic was accompanied by a lower death rate than usual. The incidence of gastro-intestinal diseases was comparatively low.

SECTION II.—PROVISION OF HEALTH SERVICES IN THE BOROUGH.

HOSPITALS.

The Hospitals available for and situated within the Borough are enumerated on page 11. None of these Hospitals are supported wholly or in part by the Borough Council.

INSTITUTIONAL PROVISION FOR UNMARRIED MOTHERS, ILLEGITIMATE INFANTS AND HOMELESS CHILDREN.

The Day Servants Hostel, 29-33, Danvers Street, Chelsea, provides accommodation for 15 unmarried mothers and their infants. At the Hostel for Discharged Women Prisoners and Police Court Cases, 497, King's Road, Chelsea, unmarried mothers, but not illegitimate children, are received. There is accommodation for 15 cases in this Hostel.

Homeless children are cared for in the Guardians' Institution.

AMBULANCE FACILITIES.

(a) **Infectious Cases.** Under the Public Health (London) Act, persons in London suffering from certain notifiable diseases may be conveyed without payment to a hospital of the Metropolitan Asylums Board. The Board's ambulances are also available, on payment, for the conveyance of persons suffering from infectious disease to places elsewhere in the metropolitan area.

(b) **Non-infectious and Accident Cases.** The efficient ambulance service of the London County Council is available for cases of accident, sudden illness and also for maternity cases. The ambulances of the M.A.B. may also be utilized, on payment, for the removal of non-infectious cases to hospitals or homes.

CLINICS AND TREATMENT CENTRES.

(a) **Chelsea Health Society and School for Mothers.** Chairman of Executive Committee: Lady Mond. Hon. Sec.: Miss M. Bowden-Smith.

This voluntary Society, with headquarters at 1, Manor Street, adjoining the Town Hall, maintains the Maternity and Child Welfare Centres in the Borough. Clinics are held at the Society's premises (1, Manor Street and 484, King's Road, S.W.).

During the year 1926, four infant clinics were held weekly—three at Manor Street and one at King's Road. One ante-natal clinic was also held weekly at Manor Street. Details of the work carried out will be found on page 67.

Four part-time Medical Officers are employed by the Society—Dr. Nora Pinkerton, Dr. Muriel Radford, Dr. Kathleen Matthews and Dr. Margaret Rorke. Three whole-time trained Health Visitors are also employed, together with necessary clerical and domestic assistance. With the approval of the Ministry of Health, arrangements for the adequate treatment of lactation cases were adopted during the year and these have proved most satisfactory in their working and in the results achieved. Much valuable work is done by voluntary workers attached to the Society.

Three members of the Public Health Committee of the Borough Council and the Medical Officer of Health are members of the Executive Committee.

With the approval of the Ministry of Health, the Borough Council made a financial grant of £750 to the Society for the year commencing 1st April, 1926.

(b) **Chelsea Day Nursery**, 65, Sydney Street, S.W. 3. Chairman : The Hon. Mrs. Eustace Hills. Hon. Sec. : Mrs. Sandwith.

The Chelsea Day Nursery is conducted by a voluntary Association. The Nursery is ably administered and is much appreciated in the Borough. Details of work done by the Nursery during the year 1926 will be found on page 69.

Three members of the Public Health Committee and the Medical Officer of Health are members of the Day Nursery Committee.

With the approval of the Ministry of Health, the Borough Council made a financial grant of £100 to the Day Nursery for the year commencing 1st April, 1926.

(c) **Chelsea Tuberculosis Dispensary**. This Dispensary, located at Brompton Hospital, affords skilled diagnosis and efficient treatment for all cases of Tuberculosis within the Borough. By agreement with the Borough Council, adequate medical, nursing and other necessary services are provided. The Tuberculosis Officer (Dr. W. J. Fenton) is one of the Honorary Physicians to the Hospital and his services are available when required by any medical practitioner in the Borough. Social work in connection with the Dispensary cases is carried out systematically and well by a trained Social Worker.

Details of the work done by the Dispensary will be found on page 58.

With the approval of the Ministry of Health, the Borough Council made a financial grant of £1,000 to Brompton Hospital for the year commencing 1st April, 1926. An additional sum of £160 for Nurses' visits to homes of patients was also granted by the Council to the Hospital and approved by the Ministry of Health.

(d) **Invalid Children's Aid Association**. Chairman : Councillor F. J. Synge. Hon. Sec. : Mrs. Rathbone.

The Chelsea branch of the Invalid Children's Aid Association is located at 2, Glebe Place, King's Road, S.W. 3. The Association provides, for

children referred to them, treatment in Hospitals, Sanatoria and Nursing Homes, according to need; convalescence in the country or at the seaside; orthopædic appliances and surgical boots; massage, remedial exercises, surgical dressings and medical comforts; help in training for suitable work; additional clothing, etc.

Details of work done by the Association during the year 1926 will be found on page 68.

Three members of the Public Health Committee of the Borough Council and the Medical Officer of Health are members of the local Committee of the Association.

With the approval of the Ministry of Health, the Borough Council made a financial grant of £100 to the Association for the year commencing 1st April, 1926.

PUBLIC HEALTH OFFICERS OF THE BOROUGH COUNCIL.

The names and qualifications of members of the staff of the Public Health Department at 31st December, 1926, are tabulated below in the form required by the Ministry of Health. During the year Mr. W. Crandell was promoted Senior Sanitary Inspector in succession to Mr. G. R. Metzler, who was superannuated by reason of permanent infirmity of body. Messrs. J. C. Goodwin and A. P. T. Shelley were appointed Sanitary Inspectors to fill existing vacancies on the staff. The Council also resolved to appoint an additional Sanitary Inspector to deal, *inter alia*, with Housing duties. At the end of the year this appointment had not been filled. All appointments are whole-time except where otherwise indicated.

Year appointed.	Name.	Qualifications.	Appointment.
*1924	McCarthy, W. H. L.	M.D., M.R.C.P., D.P.H.	Medical Officer of Health, Administrative Tuberculosis Officer and Executive Officer under the Council's Maternity and Child Welfare Scheme (Part time)
1925	Gerrans, B. H. ...	F.I.C.	Public Analyst (Part time)
*1920	Crandell, W. ...	Cert. San. Insp. Exam. Board, Cert. Royal San. Inst., Cert. Meat and other Foods	Senior Sanitary Inspector
*1926	Goodwin, J. C. ...	Cert. San. Insp. Exam. Board, Cert. Meat and other Foods	Sanitary Inspector
*1926	Shelley, A. P. T. ...	Cert. San. Insp. Exam. Board	Sanitary Inspector

* Salary contributions made under Public Health Acts

Year appointed.	Name.	Qualifications.	Appointment.
*1909	Tettenborn, Miss F.	Cert. San. Insp. Exam. Board, Cert. Royal San. Inst., Cert. L.C.C. Adv. Home Nursing, C.M.B., Health Visitors and Nat. Health Diplomas, Cert. approved by Bd. of Education, Special Cert. for Tuberculosis	Sanitary Inspector and Tuberculosis Health Visitor
†1916	Brown, Miss M. ...	Cert. San. Insp. Exam. Board, Cert. Royal San. Inst., Health Visitors Diploma Cert. approved by Bd. of Education	Health Visitor

* Salary contributions made under Public Health Acts.

† Salary contributions made by Exchequer Grants.

Clerical Staff :

A. B. J. Hayden, Senior Clerk.

E. Bosley. Mrs. H. M. Kennedy† (Maternity and Child Welfare).

Other Staff :

Mortuary Keeper and Messenger	...	C. Leonard.
Chief Disinfector	...	E. Hancock.
Disinfector	...	G. Cowper.
Shelter Attendant	...	Miss M. Cowper.
Cleansing Attendant	...	Mrs E. Smith.
		(Mrs. Springett.
		Mrs. Bonny.
Home Helps	...	Mrs. Dawson.
		Mrs. White.

For convenience of reference, the names and qualifications of members of the staffs of the Chelsea Health Society and of the Chelsea Tuberculosis Dispensary are tabulated below. None of these officers are appointed by the Borough Council.

CHELSEA HEALTH SOCIETY.

Maternity and Child Welfare Centres.

MEDICAL OFFICERS (Part Time).

Dr. Muriel Radford.
Dr. Nora Pinkerton.

Dr. Kathleen Matthews.
Dr. Margaret Rorke.

HEALTH VISITORS (Whole Time).

Name.	Qualifications.	Appointment.
Hobart, Miss F. G. ...	Cert. San. Insp. Exam. Board, Health Visitors and National Health Diplomas, Cert. approved by Bd. of Education. C.M.B.	Health Visitor and Secretary
Shaw, Miss A. ...	Cert. General Hospital Training, C.M.B. and Cert. Mothercraft Training Society	Health Visitor
Harcourt, Miss G. E....	Cert. General Hospital Training, C.M.B. and Cert. Mothercraft Training Society	Health Visitor

Clerk ... Miss Godfrey.

CHELSEA TUBERCULOSIS DISPENSARY.

Name.	Qualifications.	Appointment.
Fenton, W. J. ...	M.D., F.R.C.P. ...	Borough Tuberculosis Officer
Hordern, Miss M. A. ...	Cert. Inst. of Hospital Almoners, Cert. Social Science (London School of Economics)	Secretary and Social Worker in connection with Tuberculosis
Workman, Miss V. ...	Cert. General Hospital Training and Tuberculosis	Tuberculosis Nurse to Dispensary

NURSING ARRANGEMENTS.

(a) **Professional Nursing in the Home.** This is carried out by the Chelsea District Nursing Association, located at 10, Sydney Street, Chelsea. The Borough Council makes an annual grant to the Association, in addition to a payment of 1s. 6d. per visit. For this remuneration the Association has undertaken the nursing of all cases of illness occurring in expectant and nursing mothers and, also on the requisition of the Medical Officer of Health, the nursing of all children in the Borough under five years of age suffering from any illness. Cases of ophthalmia neonatorum, measles, bronchitis, pneumonia and other diseases thus receive skilled attention. Acute cases are seen two or three times a day if necessary and are also visited on Sundays. Chronic bedridden patients receive a weekly blanket bath. When required, the nurses assist at minor operations in the patients' own homes.

Adult patients are expected to make payment to the Association according to their means, but no patient, on account of inability to do so, is refused the services of a nurse. The only stipulations are that the patient must be under medical supervision, require nursing and be unable to pay the fees of a private Nursing Institution.

Details of the work done by the Association during 1926 on behalf of the Borough Council will be found on page 66.

Three members of the Public Health Committee of the Borough Council are members of the Council of the Association.

With the approval of the Ministry of Health, the Borough Council made a financial grant of £50 to the Association for the year commencing 1st April, 1926. The total fees paid by the Council for nurses' visits during the year 1926 amounted to £143 13s. 0d.

(b) **Midwives.** Provision has been made by the Borough Council whereby necessitous women may obtain the services of a Maternity Nurse or Midwife at a reduced rate, the balance of the fee being paid by the Council.

The fees charged vary from £2 to £2 2s. 0d. for Primipara cases, and from £1 5s. 0d. to £1 10s. 0d. for Multipara cases.

Arrangements on this basis have been made with the Ormond Home for Midwives (Blantyre Street, Chelsea), St. Mary's Nursing Home (Fulham), and with Midwives Andrews and Cooke, who are practising midwives in the Borough. All cases must in the first instance be approved by the Milk and Welfare Sub-committee. The Sub-committee meets weekly to consider applications and assess cases according to the income of the family. Contributions by patients towards the cost of midwifery assistance are collected by the Maternity Nurse or Midwife who undertakes the case.

The cases dealt with by the Sub-committee during the past two years are summarized in Table No. 43 (page 65).

The London County Council is the Authority responsible for the supervision of midwives in the Borough. Through the courtesy of Dr. F. N. Kay Menzies, the County Medical Officer of Health, I have been able to ascertain that 7 midwives gave notice during the year of their intention to practise as midwives in Chelsea.

LABORATORY WORK.

Analysis of Food and Drugs. The Public Analyst is Mr. B. H. Gerrans, F.I.C., and the investigations in connection with food and drugs sold in the Borough are carried out in his laboratories. The detailed results of analyses made during 1926 will be found appended to this report.

Bacteriological Examinations. Routine bacteriological examinations are carried out at the Lister Institute of Preventive Medicine. Special investigations for the Ante-natal Clinic are carried out at the London Hospital and the Hospital for Diseases of the Skin (Blackfriars Road, S.E.). Arrangements have also been made with the Clinical Research Association for the bacteriological examination of samples of milk under the Milk (Special Designations) Order, 1923. No occasion has yet arisen for such investigation.

The number of bacteriological, bacterioscopic and other examinations made during the year was 409. Of these, 317 were for the bacillus associated with Diphtheria, 75 for the bacillus associated with Tuberculosis and 17 for suspected organisms in Ante-natal cases. Ten specimens of blood were examined for the Wassermann reaction and six for the Widal reaction. The total cost of these services to the Borough Council in 1926 was £81 13s. 0d.

The number of bacteriological examinations in 1925 was 439.

Anti-toxin. Diphtheria anti-toxin is available at the Town Hall daily during office hours. It may also be obtained at the premises of Messrs. Timmis and Richards, 432, King's Road, S.W., at any hour, day or night. It is supplied free of charge, both in prophylactic and in curative doses, to medical practitioners on application. The amount supplied during the year was 83,500 units. An anti-toxin syringe, needles and steriliser are also available on loan.

The total cost to the Council for anti-toxin supplied in 1926 was £5 13s. 0d.

PUBLIC HEALTH LEGISLATION IN FORCE IN THE BOROUGH.

The powers under which the Council work are those contained in the Public General Acts, the London County Council (General Powers) Acts, and the Byelaws under the Public Health Acts.

In addition, the Council, on 18th February, 1925, in pursuance of the provisions of Section 23 of the Municipal Corporations Act, 1882, Section 16 of the Local Government Act, 1888, and Section 5 of the London Government Act, 1899, made the following byelaw for the good rule and government of Chelsea, such byelaw being sealed and forwarded to the Secretary of State for the Home Department, and a copy being fixed to the Town Hall as required by Statute :—

NUISANCES BY DOGS.

“ No person being in charge of a dog in any street or public place and having the dog on a lead shall allow or permit such dog to deposit its excrement on the public footway.

Any person offending against this byelaw shall be liable to a penalty not exceeding forty shillings.”

A similar byelaw has been adopted by the metropolitan boroughs of Kensington, Hammersmith and Fulham. In all cases the byelaw was allowed by the Home Office as an experimental measure for a period of two years, unless a byelaw is made confirming and continuing its provisions before the expiration of that period. This byelaw has proved of considerable assistance in preventing serious nuisance and all necessary steps are being taken to continue and enforce its provisions.

SECTION III.—SANITARY CIRCUMSTANCES AND ADMINISTRATION.

Complaints. The number of complaints received during the year was 475, compared with 385 last year. The complaints are, in the majority of cases, from the occupiers of houses and deal with alleged nuisances. These complaints are investigated by the Sanitary Inspectors, who, when the circumstances justify, serve the necessary notices required for the abatement of the nuisances.

Closet Accommodation. The water-carriage system is general throughout the Borough.

Removal and Disposal of Refuse. House refuse is removed by the Works Department of the Council. A weekly collection is made. The refuse is conveyed to the Council's Wharf on the River Thames, whence it is barged away. Inoffensive trade refuse is removed by the Council on payment of a fee in accordance with the provisions of Section 33 of the Public Health (London) Act, 1891. Fish offal and other offensive trade products, which could be removed on application as trade refuse, are invariably removed and sold by the persons to whom this class of refuse belongs.

Sanitary Inspection of the Borough. Prepared by the Senior Sanitary Inspector and set out on the following pages is a summary of the work carried out by the Sanitary Inspectors during the year 1926.

During the year 1926, the number of intimation notices served was 826. The number of statutory notices was 214. These compare with 765 and 244, respectively, in 1925. In seven cases the owners neglected to comply with the statutory notices and in these it was found necessary to issue summonses. Details of these prosecutions are set out in tabular form in Table No. 19.

SUMMARY OF WORK CARRIED OUT BY SANITARY INSPECTORS DURING THE YEAR 1926.

Inspections.

On complaint of nuisances (from all sources)	1,211
On notification of infectious disease	385
House-to-house	105
Re-inspections made	4,220

Inspection of—

Bakehouses	38
Slaughter houses... ..	133
Milk Shops	183
Ice cream premises	65
Houses let in lodgings	—
Stables	55
Restaurant kitchens	55
Marine stores	47
Food premises other than above	194
Premises under Meat Regulations	160
Factories and Workshops	886
Outworkers premises	135
Other visits	257

Inspection of—

Verminous premises	...	...	...	...	...	...	...	15
Rat enquiries	...	...	...	...	...	...	...	57
Smoke observations	...	...	...	...	...	...	...	17
Total	...	...	...	...	...	...	...	8,218

Premises.

Walls and Ceilings cleansed :—

(a) Premises throughout	...	...	...	...	...	...	...	31
(b) " partially	...	...	...	...	...	...	...	364
(c) Verminous rooms cleansed	...	...	...	...	...	...	...	83
(d) Total number of rooms cleansed	...	...	...	...	...	...	...	773
Washhouse walls cleansed	...	...	...	...	...	...	...	90
Washhouse roofs repaired	...	...	...	...	...	...	...	22
Yard and area walls cleansed...	...	...	...	...	...	...	...	12
Defective roofs repaired	...	...	...	...	...	...	...	152
Defective gutters repaired	...	...	...	...	...	...	...	43
Defective rain water pipes repaired	...	...	...	...	...	...	...	45
Dampness abated	...	...	...	...	...	...	...	78
Miscellaneous repairs	...	...	...	...	...	...	...	273
Washhouse floors repaired	...	...	...	...	...	...	...	25
Yard surfaces repaired, paved, etc.	...	...	...	...	...	...	...	48
Ashpits demolished and sites made good	...	...	...	...	...	...	...	2
Ashpits cleansed	...	...	...	...	...	...	...	4
New and proper dust bins provided	...	...	...	...	...	...	...	154
Workrooms provided with light and ventilation, or light and ventilation improved	...	...	...	...	...	...	...	53

Drainage.

Reconstructed	...	...	...	...	...	...	...	25
Repaired	...	...	...	...	...	...	...	11
Cleansed	...	...	...	...	...	...	...	26
Inspection chambers and traps provided	...	...	...	...	...	...	...	25
Fresh air inlets provided	...	...	...	...	...	...	...	21
Fresh air inlets repaired	...	...	...	...	...	...	...	4
Gully traps provided	...	...	...	...	...	...	...	18
Drains ventilated	...	...	...	...	...	...	...	13
New soil pipes provided	...	...	...	...	...	...	...	21
New ventilation pipes provided	...	...	...	...	...	...	...	17
Soil and ventilation pipes repaired	...	...	...	...	...	...	...	10
Anti-syphonage pipes provided	...	...	...	...	...	...	...	1
Drains sealed off	...	...	...	...	...	...	...	3
Drains cleared	...	...	...	...	...	...	...	40
New covers provided to inspection chambers	...	...	...	...	...	...	...	12
Rain water pipes disconnected and caused to discharge over properly trapped gullies	...	...	...	...	...	...	...	6
Sink wastes provided with traps	...	...	...	...	...	...	...	39
Sink waste pipes ventilated	...	...	...	...	...	...	...	3
Sink waste pipes cleansed	...	...	...	...	...	...	...	5
New sinks provided	...	...	...	...	...	...	...	29
Bath and Lavatory wastes repaired or renewed	...	...	...	...	...	...	...	4
New lavatory basins fixed	...	...	...	...	...	...	...	27
New baths fixed...	...	...	...	...	...	...	...	11
" bidets "	...	...	...	...	...	...	...	1

Water Closets.

Improvements to sanitary conveniences (factories, workshops, etc.)	...	...	...	...	...	...	...	3
New water closet pans and traps provided...	...	...	...	...	...	...	...	63
New water closet pans provided	...	...	...	...	...	...	...	29
Water closet pans (foul) cleansed	...	...	...	...	...	...	...	13
Choked water closet pans unstopped and cleansed...	...	...	...	...	...	...	...	9
Water waste preventers repaired	...	...	...	...	...	...	...	44
Water waste preventers renewed	...	...	...	...	...	...	...	31
Overflows to water waste preventers provided	...	...	...	...	...	...	...	2
Walls and ceilings of water closets cleansed and repaired	...	...	...	...	...	...	...	66
Water closet roofs repaired	...	...	...	...	...	...	...	18
Ventilation and light provided or improved	...	...	...	...	...	...	...	4

Water Supply.

Water supply to premises reinstated	41
Water supply provided to upper storeys of tenement houses	...	...	...	...	1
Water closets provided with water supply to flushing apparatus	...	...	...	...	10
New drinking water cisterns provided	...	...	...	...	11
Drinking water cisterns cleansed	...	...	...	...	22
Drinking water cisterns repaired	...	...	...	...	6
Drinking water cisterns provided with new covers or covers repaired	...	...	...	...	14

Smoke Nuisances.

Number of observations	...	...	...	...	...	24
Number of nuisances and complaints	...	...	...	...	...	2
Number of Notices	...	...	...	...	...	—
Number of Summonses...	...	...	...	...	...	—

Nuisances Abated arising from—

Keeping animals in an improper manner or place	...	...	...	...	8
Defective manure cages	...	...	...	...	5
Accumulation of manure or refuse	...	...	...	...	47
Dead animals	...	...	...	...	3
Overcrowding	...	...	...	...	9

Food Condemned and Destroyed.

Pigs	...	...	...	...	...	2
Mussels	...	...	...	...	...	1 bag
Kippers	...	...	...	...	...	1 box
Condensed milk	...	...	...	...	...	5 cases
Eggs	...	...	...	...	...	1 case

Disinfection.

Premises disinfected after Zymotic diseases (Scarlet Fever, Diphtheria, etc)	...	...	...	...	...	323
Rooms disinfected after Tuberculous disease	...	...	...	...	...	105
Rooms fumigated for verminous and filthy conditions	...	...	...	...	...	104
Miscellaneous disinfection	...	...	...	...	...	30

Proceedings Taken.

Intimation Notices served	...	...	...	...	...	826
Statutory Notices under Public Health (London) Act, 1891	...	...	...	...	...	214
Statutory Notices under Section 3 of Housing Act, 1925	...	...	...	...	...	—
Statutory Notices under by-laws for provision of dustbins...	...	...	...	...	...	22
Total number of samples purchased for analysis under Sale of Food and Drugs Acts	...	...	...	...	...	385
Samples of Cream taken (Milk and Cream Regulations)	...	...	...	...	...	6
Samples of drugs taken	...	...	...	...	...	—
Samples (informal) purchased	...	...	...	...	...	15
Legal proceedings instituted in respect to defective sanitary conditions and nuisances	...	...	...	...	...	7
Legal proceedings under Sale of Food and Drugs Acts	...	...	...	...	...	5
Legal proceedings in respect to unsound food	...	...	...	...	...	—
Certificates issued in accordance with " Rents Restriction Act "	...	...	...	...	...	—

Correspondence.

Number of letters written in connection with Public Health matters	1,029
Entries in Inspectors' Report Books...	826
Entries in Inhabitants Complaint Book	60
Notifications of infectious disease sent to School authorities	232
Notifications on infectious disease sent to Metropolitan Asylums Board	253
Certificates of disinfection given	310
Certificates of infectious disease for removal cases	54
Notices sent to Public Library of premises where infectious diseases have occurred	130
Intimation Cards sent re Samples taken under Sale of Food and Drugs Acts	246

Cleansing and Disinfection.

Number of adults cleansed	...	...	...	...	...	...	—
Number of children cleansed	...	...	...	...	...	...	1,157
Number of rooms or premises cleansed and disinfected	...	...	...	...	...	...	562
Number of persons bathed for Scabies	...	...	...	...	...	...	—
Number of articles (bedding, etc.) disinfected	...	...	...	...	...	...	960
Number of articles (various) destroyed	...	...	...	...	...	...	235

Disinfection Station Shelter.

Persons accommodated :—

Adults	...	...	...	...	...	...	...	...	1
Children	...	...	...	...	...	...	...	...	—

Mortuary.

Number of bodies received	...	...	...	...	...	...	93
Number of infectious bodies received	...	...	...	...	...	...	—
Number of bodies removed to Public Mortuary for sanitary reasons	...	...	...	...	...	...	—

TABLE No. 19.

MAGISTERIAL PROCEEDINGS DURING 1926 UNDER PUBLIC HEALTH
(LONDON) ACT, 1891.

Situation of Premises.	Nature of Nuisance or Complaint.	Petty Sessions.	Date of Hearing.	Result.
49, Slaidburn Street	Dirty condition of room. Roof defective.	Kensington	16/3/26	Abatement Order—21 days.
51, Limerston Street	Defective condition of soil pipe and insufficient ventilation to drain.	Kensington	16/3/26	Abatement Order—14 days.
49, Slaidburn Street	Failing to comply with an Abatement Order.	Kensington	20/4/26	Fined £2 0s. 0d.
51, Limerston Street	Failing to comply with Abatement Order.	Kensington	20/4/26	Fined £2 0s. 0d.
31, Blantyre Street	Defective condition of drain at rear of premises.	Kensington	6/7/26	Adjourned 14 days.
31, Blantyre Street	Defective condition of drain at rear of premises.	Kensington	20/7/26	Abatement Order—1 month. Costs £3 3s. 0d.
73, Arthur Street	Illegal occupation of an Underground room.	Kensington	6/7/26	Adjourned till 28th September.
73, Arthur Street	Illegal occupation of an Underground room.	Kensington	28/9/26	Fined £1 0s. 0d.
9, Tedworth Gardens	Damp walls. Dirty condition of rooms, etc.	Kensington	19/10/26	Abatement Order—21 days.
48, Slaidburn Street	Defective condition of drain.	Kensington	16/11/26	Abatement Order—14 days. Fined £2 0s. 0d.
48, Slaidburn Street	Failing to comply with an Abatement Order.	Kensington	7/12/26	Fined £5 0s. 0d. Work carried out by Council.
51, Slaidburn Street	Dirty condition of room.	Kensington	7/12/26	Fined £1 0s. 0d.

Smoke Abatement. It is part of the work of a Sanitary Inspector to observe any nuisance arising from smoke and while there were only 24 recorded instances of observations during 1926 the chimneys in the Borough can be regarded as being subject to daily observation by the Inspectors. There were two complaints of smoke nuisances during the year and cautionary letters were sent to the offenders.

Fouling of Footpaths by Dogs. The Borough Council obtained sanction for a bye-law to deal with this nuisance during 1925. It has already been found useful, the condition of footpaths having improved considerably since the measure came into operation.

Rats and Mice (Destruction) Act. During the year the Council has provided rat catching varnish to applicants for the destruction of rats and 300 bait traps were prepared and issued. In conjunction with the Works Department, investigation was made of a number of old sewers likely to be infested with rats and a large number of baits were laid. During the year many persons were advised as to the best means of dealing with the rat nuisance so far as it affected their respective premises.

The cost to the Council of rat catching varnish during 1926 was £20 9s. 6d.

Nuisance caused by Pigeons. During the year a number of complaints were received from residents in the neighbourhood of Chelsea Embankment and Elm Park Gardens regarding nuisance arising from the large number of pigeons in the area.

On investigation, it was found that very serious nuisance is being caused by these birds. In addition to accumulation of excreta in rain pipes and gullies, pipes are blocked by the nests of the birds, and the areas and walls of houses concerned are in an insanitary state generally. Further, the birds pick out portions of mortar and cement from the structures, tending to cause dampness within the houses. The removal, cleansing and replacement of rain pipes; the cleansing of areas and walls; and other repair work involves the owners of such property in considerable and recurring expense.

At present a Sanitary Authority has no powers to deal with nuisance caused by pigeons, in fact there are restraining enactments which prevent steps being taken to reduce the nuisance, *e.g.*, under the Larceny Act, 1861, section 23, there is a penalty of £2 if pigeons are shot or trapped and this may be claimed by a common informer.

With the object of arranging concerted action, the Medical Officer of Health for the City of London was communicated with and it was ascertained that the question has been under consideration by the City Corporation for some time with a view to obtaining special parliamentary sanction to deal with the nuisance. Subsequently, the Borough Council resolved that the London County Council be requested to include a clause dealing with the matter in their next General Powers Bill.

Factories, Workshops and Workplaces. The Medical Officer of Health is required under Section 132 of the Factory and Workshops Act, 1901, to include in his annual report details of the administration of this Act in his district. The total number of factories, workshops and workplaces on the register at the end of the year was 293. The number of inspections of these premises was 886, which compares with 857 in 1925. Sanitary defects were found in 46 instances. The following Table No. 20 is in the form requested by the Home Office in order to ensure uniformity in the presentation of returns :—

TABLE No. 20.

FACTORIES, WORKSHOPS, WORKPLACES AND HOMEWORKERS'
PREMISES.

I.—INSPECTION OF FACTORIES, WORKSHOPS AND WORKPLACES.

(Including Inspections made by Sanitary Inspectors.)

Premises. (1)	Number of		
	Inspections. (2)	Written Notices. (3)	Occupiers prosecuted. (4)
Factories (including Factory Laundries)	29	—	—
Workshops (including Workshop Laundries)	835	43	—
Workplaces (other than Outworkers' premises)	22	2	—
Total	886	45	—

2.—DEFECTS FOUND IN FACTORIES, WORKSHOPS AND WORKPLACES.

Particulars. (1)	Number of Defects.			Number of offences in respect to which Prosecutions were instituted. (5)
	Found. (2)	Remedied. (3)	Referred to H.M. Inspector. (4)	
Nuisances under the Public Health Acts :—*				
Want of cleanliness	20	20	—	—
Want of ventilation	5	5	—	—
Overcrowding	7	7	—	—
Want of drainage of floors ...	—	—	—	—
Other nuisances... ..	7	7	—	—
Sanitary accommodation—				
Insufficient	1	1	—	—
Unsuitable or defective ...	2	2	—	—
Not separate for sexes ...	4	4	—	—
Offences under the Factory and Workshop Acts :—				
Illegal occupation of underground bakehouse (s. 101) ...	—	—	—	—
Other offences	—	—	—	—
(Excluding offences relating to outwork and offences under the Sections mentioned in the Schedule to the Ministry of Health (Factories and Workshops Transfer of Powers) Order, 1921.)				
Total	46	46	—	—

* Including those specified in sections 2, 3, 7 and 8 of the Factory and Workshop Act, 1901, as remediable under the Public Health Acts.

3.—HOME WORK.

	Outworkers' Lists, Section 107.					No. of Inspections of Out-workers Premises.	Outwork in Unwholesome Premises, Section 108.			Outwork in Infected Premises, Secs. 109, 110		
	Lists received from Employers.		Number of Addresses of out-workers received from other Councils.	Number of Addresses of out-workers forwarded to other Councils.	Prosecutions.		Instances.	Notices served.	Prosecutions.	Instances.	Orders made (Sec. 109).	Prosecutions (Sec. 109, 110)
	Lists.	Chelsea Out-workers.										
1925	27	23	75	432	—	115	1	1	—	—	—	—
1926	23	23	45	404	—	105	5	6	—	—	—	—

PUBLIC MORTUARY.

Under the Public Health (London) Act, 1891, section 88, every sanitary authority must provide and fit up a proper place for the reception of dead bodies before interment.

The Chelsea Mortuary is situated in Arthur Street.

Improvement in the existing lighting arrangements was carried out during the year.

Number of Bodies received in Mortuary during 1926	...	93
1. To await Inquests—		
(a) Infectious	... ..	—
(b) Non-infectious	... ..	88
2. To await burial	... ..	5
3. Sanitary grounds	... ..	—
Number of Post-Mortem examinations	... ..	52

Rag Flock Act. No samples of rag flock have been taken during the year.

Offensive Trades. At the present time there are no offensive trades in the Borough.

SECTION IV.—HOUSING.

In accordance with the instructions of the Ministry of Health, the following tabular statement has been prepared :—

TABLE No. 21.

HOUSING STATISTICS FOR THE YEAR 1926.

1. GENERAL.

Number of New houses erected during the year :—

(a) Total (including numbers given separately under (b)) ...	38
(b) With State assistance under Housing Acts :—	
(i.) By the Local Authority	—
(ii.) By other bodies or persons	—

2. UNFIT DWELLING HOUSES.

I.—Inspection.

(1) Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts)	1,426
(2) Number of dwelling houses which were inspected and recorded (House-to-house inspections)	105
(3) Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	34
(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	826

II.—Remedy of Defects without Service of formal Notices.

Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their officers (intimation only)	612
--	-----

III.—Action under Statutory Powers.

A. Proceedings under section 3 of the Housing Act, 1925.

(1) Number of dwelling houses in respect of which notices were served requiring repair	—
(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	826
(2) Number of dwelling houses in which defects were remedied after service of formal notices—	
(a) by owners	213
(b) by Local Authority in default of owners	1

C. Proceedings under sections 11, 14 and 15 of the Housing Act, 1925.

(1) Number of representations made with a view to the making of Closing Orders	6
(2) Number of dwelling-houses in respect of which Closing Orders were made	34
(3) Number of dwelling houses in respect of which Closing Orders were determined, the dwelling houses having been rendered fit	0
(4) Number of dwelling houses in respect of which Demolition Orders were made	0
(5) Number of dwelling houses demolished in pursuance of Demolition Orders	0

Staff. The staff engaged on housing work in 1926 consisted of three Sanitary Inspectors, each carrying out all the duties of a Sanitary Inspector in the district allocated to him.

General Housing Conditions. It is difficult to discuss the subject of housing in Chelsea without some understanding of the peculiar conditions which appertain to the district.

Probably in few London boroughs have there been so many alterations, consequent on demolitions and reconstructions, during the past 30 years, as in Chelsea. The process of reconstruction is still in progress, though largely suspended by the operation of the Rent Restriction Acts. The developments which have taken place have arisen from the fact that a very considerable proportion of Chelsea is comprised within the areas of two large estates—the Cadogan Estate and the Sloane Stanley Estate. Many of the building leases on these estates were granted early in the 19th century and a large number have already expired. A certain proportion of demolition of small property has been due to the acquisition of land by large trading corporations, but up to the present this has not been a factor of any great magnitude.

Owing to the proximity of the eastern boundary of the Borough to Hyde Park and Belgravia, and to the attractiveness of the Embankment forming the southern boundary, residential values in these neighbourhoods have greatly appreciated in recent years, the price of land has been correspondingly increased, and the old type of small house, accommodating the small trader and the artisan or labourer, has been replaced by modern houses and mansions let in flats commanding high rents.

The process of development has been largely in the hands of Estate Companies, who have purchased the reversionary interests of the ground landlords, and proceeded to carry out the demolitions and reconstructions, as soon as the property came into their possession. Until subsequent to the War, no restriction operated, nor did any liability attach to Estate Companies, conducting operations of this nature, to make any provision for rehousing the working classes displaced.

In this way, during the past 30 years, some 18,000 Chelsea inhabitants, chiefly of the working and small trader class, have been displaced and compelled to migrate into surrounding districts.

Despite the difficulties of the problem, in Chelsea a considerable amount of accommodation had been provided for the working classes during the years preceding the outbreak of War. This had been effected by municipal undertakings, by private enterprise and by the operation of benevolent agencies and trusts.

Municipal undertakings for the housing of the working classes carried out by the Borough Council prior to 1914 were as follows :—

	Population.
Sir Thomas More Buildings, Beaufort Street	770
Pond House, Pond Place	130
Onslow Dwellings, Pond Place	380
Grove Buildings, Manor Street	300
	<hr/>
	1,580
	<hr/>

Private enterprise, benevolent agencies and trusts had also made very important contributions to housing in Chelsea prior to 1914. These were as follows :—

	Population.
Sutton Model Dwellings, Cale Street	2,200
Lewis Trust Dwellings, Pond Place	1,390
Marlborough Buildings, Walton Street	500
Guinness Buildings, Draycott Avenue... ..	940
Peabody Buildings, Lawrence Street	200
Chelsea Park Dwellings, King's Road... ..	170
	<hr/>
	5,400
	<hr/>

It will be seen that in Chelsea at the outbreak of war there was available accommodation for 6,980 persons of the wage-earning class—an amount which, in proportion to population, was considerably higher than that obtaining in any other metropolitan borough.

Since the war, the economic situation and other factors, particularly the shortage of and greatly increased cost of building land in Chelsea have rendered an already difficult situation still more difficult. No new dwellings have been erected by private enterprise, benevolent agencies or trusts. Various schemes for making further provision for the housing of the working classes have been prepared by the Borough Council and

submitted to the Ministry of Health for approval. One such scheme—that of Hortensia Road site—has fortunately materialised, approval of the others not being obtained on the ground that the cost of the land was much higher than the price the Ministry could sanction for the purchase of land to be used for the erection of buildings to house the working classes.

Hortensia House, Hortensia Road, completed in May, 1925, and now fully occupied, provides accommodation for 250 persons in 56 flats, namely 35 three-room flats and 21 four-room flats. The total cost of site and buildings was £53,800, including Exchequer subsidies amounting to about £4,350. The total weekly rents, including hot water supply and electricity, vary from 25s. to £1 14s. 3d. This scale of rents was drawn up on an economic basis, on the instructions of the Ministry of Health, the Ministry's decision being based upon the high cost of the site and construction. The rents are obviously much higher than the working classes proper can afford to pay and indeed most of the tenants are classes in receipt of small salaries or earnings—a group not usually classed as "working classes."

Reviewing the history of the past twenty-five years, it would appear that the housing policy of the Borough Council has been firstly to preserve, where possible, in areas threatened with demolition, such working class accommodation as was of reasonably good type; and secondly, to provide accommodation by means of new buildings in an accessible position within the Borough for those persons of the working class who are average representatives of their class, and for whom the necessities of their trade or calling render residence within the Borough desirable or necessary.

It cannot be disputed that at the present time in Chelsea, as in other metropolitan boroughs, there is considerable dearth of accommodation both for the working classes and for the classes in receipt of small salaries or earnings and that, as elsewhere, this situation is primarily due to the restrictions imposed upon the building trades during the War and the economic disturbances which have succeeded it.

The provision of the Hortensia Road dwellings has been most valuable, but additional housing facilities are undoubtedly required to meet the needs of a large section unable to pay the rents at Hortensia Road. With this end in view, the Housing Committee has been actively engaged during the year in investigating possible sites in connection with a further Housing Scheme. Fortunately, as a result of these deliberations, the Council has now been successful in acquiring a very suitable site in King's Road, at a cost of £19,000. Approval of the Ministry of Health has been obtained. The area concerned is 1.98 acres in extent, and is admirably adapted for the erection of working class dwellings.

Overcrowding. Overcrowding, where it exists, is mainly confined to the western district of the Borough. There has been comparatively little improvement in its prevalence during the year. Many of the cases when approached as to the desirability of having their names submitted to the County Council, with a view to provision of housing on one of the Council's Estates, decline to consider the proposition, on the

ground that the distance of the County Council's Estates from their work is too great. Others have become attached to the district and will not contemplate forsaking existing interests and associations. Owing to the extreme difficulty of finding alternative accommodation it has not been found possible to deal with more than a few cases of overcrowding during the year. Whenever possible, arrangements are made with the London County Council for the provision of a house for the overcrowded family. Twenty-two such families obtained accommodation on the Council's Estates during the year. Further, when vacant tenements become available in the Borough Council's Dwellings, preferential treatment is as far as possible given to cases of overcrowding. With a view to preventing a recurrence of overcrowding in premises which are being vacated because of their overcrowded condition, a cautionary letter is always sent to the landlord concerned, warning him that action will be taken against him in the event of a recurrence of overcrowded conditions in the premises.

Fitness of Houses. The general standard of housing in the borough is satisfactory. In a portion of the western district the houses are old, worn out and require constant repairs and renovations. This area, comprising World's End Passage and courts abutting thereon, about three-quarters of an acre in extent, was during the year the subject of an official representation under the Housing Act, 1925, with a view to an Improvement Scheme. A larger area in the north-western district contains many houses of similar character. This area is already scheduled for reconstruction, but nothing has yet been done, owing to conditions prevailing in the building trade and the operation of the Rent Restriction Acts.

One of the most unsatisfactory features in this, as in other boroughs, is the presence of a large number of houses let in lodgings. These houses were not constructed for the purpose to which they are now put. The use of staircases, washhouses, yards, waterclosets, ashbins, etc., in common leads to misuse and neglect, and the general environment is not prone to the cultivation of habits of self-respect, morality or health. Many such houses are without adequate provision for the cooking or storage of food, and housework is carried on at great inconvenience.

While the great majority of these houses are structurally sound, a number of them are old, worn out and below the modern standards of sanitation and convenience. It is probable that only a minority of the tenants would be able to pay economic rents for alternative accommodation, having regard to the rents that require to be fixed for new dwellings owing to the greatly increased cost of land and construction during recent years.

Another problem is caused by certain old people, usually women. Many of these live alone in a single room with no one to look after them. Frequently they rely almost entirely on the Old Age Pension for sustenance. Gradually growing feebler with the passage of time, they eventually become unable properly to care for themselves or their homes. Although every means of persuasion is tried, these cases usually decline to enter a Poor Law Institution and the condition often persists for a

lengthened period. No solution of the problem presented by these people seems possible, apart from the granting of compulsory powers for their removal to a suitable institution.

While in the majority of cases the defects found to exist in unfit houses are due to the lack of proper management and supervision by owners, from time to time complaints are made by owners regarding the difficulties they experience in keeping their property in a reasonable state of repair because of the dirty and destructive habits of a number of their tenants. It is alleged that, through carelessness or wilful damage by tenants, repairs and cleansing have to be carried out with unreasonable frequency and that, as a consequence, it is impossible to maintain even the minimum requirements of the Local Authority without incurring financial loss.

Investigation has shown that these statements are often well-founded, especially in the poorer class tenement lodging houses where no responsible caretaker or landlord is resident. To lighten the difficulties of the owner in these cases, effort is made, as far as possible, to keep in view such powers as a Local Authority has of holding the tenant responsible for defects resulting from his neglect or default.

Action was taken during the year in respect of 34 dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation. Closing Orders were made in each of these cases. The total number of dwelling houses inspected for housing defects during the year was 1,426, the number found not to be in all respects reasonably fit for human habitation being 826. The number rendered fit in consequence of informal action by the Sanitary Inspectors was 612 and the number in respect of which statutory notices were served requiring defects to be remedied was 214. It came to the knowledge of the Department in the course of the year that two underground rooms were being illegally used for sleeping purposes. Appropriate action was taken in each case.

There were no applications under the Increase of Rent and Mortgage Interest (Restriction) Acts made by occupiers of dwelling houses that houses occupied by them were not in a reasonable state of repair. It is the usual practice when such an application is received to inspect the house and serve notices for the defects which exist. If these are amended promptly it is found unnecessary to take further action.

Unhealthy Areas. One representation, already referred to, was made under the Housing Act during the year. No complaints that areas were unhealthy have been received.

Byelaws relating to Houses and Houses Let in Lodgings. Existing byelaws relating to houses are, on the whole, found to be fairly satisfactory in their working. During the year new byelaws under Section 6 of the 1925 Housing Act, were issued by the London County Council. These will be of immense assistance in dealing adequately with present-day housing conditions.

Housing Survey. House-to-house inspection was continued on the same lines as in previous years. In the course of the year, 105 houses were inspected and recorded by the Inspectors.

During the year statements have again appeared in the Press making allegations as to the widespread existence of insanitary conditions and slum areas in the borough. It is of great assistance to a Local Authority to have an intelligent interest in sanitary matters taken by the inhabitants, but the object is defeated when exaggerated statements are made. Some of the statements appeared to be due to a misunderstanding of the facts upon which the statements were based ; others to conscious and deliberate exaggeration.

SECTION V.—INSPECTION AND SUPERVISION OF FOOD.

Milk Supply. In accordance with statutory enactments, the Council keeps a Register of persons carrying on the trade of dairymen or purveyors of milk and no person is permitted to carry on the trade in the Borough unless he is registered. The Council is empowered to remove the name from or refuse to enter upon the Register the name of any person selling or proposing to sell milk on premises which are for any reason unsuitable for the purpose.

The Milk and Dairies (Amendment) Act, 1922, further empowers the Council to refuse to enter the name of any person in the Register, or to remove the name of any person from that Register, if it is shown to the Council's satisfaction that the public health is or is likely to be endangered by any act or default of such person in relation to the quality, storage or distribution of milk.

The premises at which registered purveyors of milk carry on their business have been subject to frequent inspection. During the year ten applications were made for registration as purveyors of milk, all of which, after appropriate investigation, were approved by the Council. In tabular form below is shown the alterations which took place in the Register of Milk Purveyors during the year.

TABLE No. 22.

	Retail.	Wholesale.	Total.
On Register 31st December, 1925 ...	75	—	75
Vacated during the year	9	—	9
Added during the year	10	—	10
On Register 31st December, 1926 ...	76	—	76

There were 29 applications from 11 retailers under the Milk (Special Designations) Order for licences to sell special grades of milk. All these licences were granted. In each case the licence was granted for the purpose of authorising the dealer to sell specially designated milk from shops within the Borough. No application has been made for a licence giving authority to set up bottling or pasteurising establishments in the Borough. The following Table No. 23 shows the numbers of licences granted for the sale of milk under special designations during the years 1925 and 1926.

TABLE No. 23.

LICENCES GRANTED UNDER MILK (SPECIAL DESIGNATIONS) ORDER.

Licences granted under Milk (Special Designations) Order.	1925.	1926.
To sell " Certified " Milk	19	13
To sell " Grade A " Milk	—	—
To sell " Grade A (Tuberculin Tested) " Milk ...	13	8
To sell " Pasteurised " Milk	8	8
	40	29

No samples of graded or other milk were submitted for bacteriological examination during the year.

There were 183 inspections of dairies and milkshops made in the Borough. Notices were served requiring remedy of defects found on two of the premises visited. There are no cowsheds in the district.

Further reference to milk is made in the Public Analyst's Report for the year and details of magisterial proceedings taken in cases of adulterated milk will be found in the sub-section dealing with the Food and Drugs Acts.

Ice-Cream Vendors. At the end of the year, 59 premises were shown in the Register as places where ice-cream is prepared or sold. There were 65 inspections of these premises as compared with 42 in 1925. This trade is mainly regulated under the L.C.C. (General Powers) Act, 1902. It is an offence to store ice-cream in a sleeping room or in any shed or room in which there is an inlet to a drain. Vendors of ice-cream must notify the occurrence of infectious disease among their employees or persons living on their premises. The Act also provides that every itinerant vendor shall exhibit on his barrow the name and address of the person from whom the ice-cream has been obtained.

Existing legislation enables a Sanitary Authority to exercise adequate control where the vendors and premises are known, but, inasmuch as ice-cream may be made under unsatisfactory conditions on premises other than those where it is stored, some system of compulsory registration should be provided, applicable to all premises where the commodity is manufactured or stored or sold, and also to the itinerant vendors.

Fried Fish Vendors. At the end of the year there were 14 premises in which the frying of fish was carried on and 21 inspections of these premises were made. It is found that a reasonable standard of cleanliness is now being maintained, but it is necessary for the Inspectors to maintain a constant vigilance to impress upon the vendors the necessity for the systematic observance of cleanliness.

Bakehouses. There are 26 bakehouses in the Borough and 33 inspections of these premises were made during the year. Eight notices were served for the cleansing of walls and ceilings.

Slaughter-houses. There are now two private slaughter-houses in the Borough and 133 inspections of these premises were made during 1926. In compliance with the byelaws prescribing humane slaughtering, approved methods of slaughter are employed in each of the premises. There is no public abattoir in the Borough.

The following table shows, in the form required by the Ministry of Health, the number of private slaughter-houses in use in the Borough on the dates indicated:—

TABLE No. 24.

	In January, 1926.	In December, 1926
Registered	—	—
Licensed	3	2
Total	3	2

Inspection of Other Premises where Food is Prepared or Offered for Sale. The Inspectors keep under frequent observation all other premises where food is prepared for or exposed for sale. Included in this category are restaurants and premises used by provision dealers, butchers, fishmongers and greengrocers for the purposes of their trades.

The following Table No. 25 shows, for the years 1925 and 1926, the number of inspections of premises where food was prepared for or exposed for sale.

TABLE No. 25.

INSPECTION OF PREMISES WHERE FOOD WAS PREPARED OR SOLD
(1925-1926).

Nature of Premises.	1925.		1926.	
	No. on Register.	No. of Inspections.	No. on Register.	No. of Inspections.
Cowsheds	—	—	—	—
Slaughter Houses	3	71	2	133
Milk Shops	75	122	76	183
Ice Cream Premises... ..	40	42	59	65
Bakehouses	26	48	26	38
Restaurant Kitchens	32	34	32	55
Food Premises (other than above) ...	90	155	90	194

Public Health (Meat) Regulations, 1924. Meat inspection is carried out by the Sanitary Inspectors. Arrangements have been made whereby adequate notice of the time of slaughter is obtained. In 1926, the number of animals inspected at the time of slaughter was 574 (309 pigs, 250 sheep, and 15 bullocks and calves). No application for the marking of meat under the Regulations has been received.

Instructions under the Regulations have been formulated to deal with stalls, shops, stores and vehicles. These have been approved by the Council and circulated amongst traders concerned. No meat stalls exist in the Borough at the present time.

A deputation of the local Butchers Association has also been received and improvement has already taken place in the conditions under which meat is stored, exposed for sale and transported.

Unsound Food. On four occasions during the year unsound food was surrendered and destroyed. Included in the food surrendered was:—1 bag of Mussels, 1 box of Kippers, 5 cases of Condensed Milk and 1 case of eggs. The number of carcasses destroyed on account of Tuberculosis was two—both pigs.

Food Poisoning. No cases of food poisoning were brought to the notice of the Department during the year.

Sale of Food and Drugs Acts. Four hundred and seven samples, including 156 samples of milk and six samples of cream, were taken and submitted for analysis during 1926. These samples were investigated by the Public Analyst to the Borough, Mr. B. H. Gerrans, F.I.C., whose Report is set out in the appendix.

Each of the three male Sanitary Inspectors is appointed an Inspector under the Acts. Under their direction, the taking of samples is effected by individuals temporarily employed for the purpose, the services of persons outside the Borough being frequently utilised.

The samples procured are of two kinds—formal and informal. Formal samples are those taken strictly in conformity with the Sale of Food and Drugs Act, 1875. Informal samples are those taken without these strict formalities and afford useful indication of the conditions without disclosing to the vendor that the object of purchase is analysis.

No legal proceedings are possible in respect of an informal sample, but, when adulteration is discovered, formal samples are obtained immediately and necessary action taken on receipt of the analytical report regarding them.

In 1926, four samples of milk and one sample of vinegar were found adulterated to such a degree as to justify legal proceedings. These proceedings were instituted and four convictions were obtained. Details of these prosecutions are given in Table No. 26.

The work carried out under the Food and Drugs Acts during the year 1926 is summarized in the Public Analyst's Report in the appendix.

Milk and Cream Regulations, 1912-1917. All samples of milk and cream taken during the year were submitted to examination for preservatives. No evidence of the presence of preservatives was obtained sufficient to warrant legal proceedings.

TABLE No. 26.

MAGISTERIAL PROCEEDINGS UNDER SALE OF FOOD AND DRUGS ACTS DURING 1926.

Street where Purchased.	Offence.	Petty Sessions.	Date of Hearing.	Result.
Kings Road	For selling Vinegar 11 per cent. deficient in Acetic Acid.	Kensington	18/5/26	Conviction. Fined 10s. Costs 10s. 6d.
Milmans Street	For selling Milk from which 16 per cent. of Milk Fat had been abstracted.	Kensington	18/5/26	Conviction. Fined 10s. Costs 10s. 6d.
Cale Street	For selling Milk from which 25 per cent. of Milk Fat had been abstracted.	Kensington	6/7/26	Conviction Fined £5.
	For selling Milk from which 16 per cent. of Milk Fat had been abstracted.			Conviction Fined £5.
Cale Street.	For selling Milk from which 16 per cent. of Milk Fat had been abstracted.	Kensington	20/7/26	Withdrawn.

} Costs
£3 3s.

SECTION VI.—INFECTIOUS DISEASES.

(a) INFECTIOUS DISEASES GENERALLY.

DISEASES COMPULSORILY NOTIFIABLE IN THE BOROUGH

Acute Poliomyelitis.	Diphtheria.
Acute Polio-encephalitis.	Membranous Croup.
Acute Encephalitis Lethargica.	Dysentery.
Acute Primary Pneumonia.	Erysipelas.
Acute Influenzal Pneumonia.	Malaria.
Cerebro-spinal Fever	Puerperal Fever and Puerperal Pyrexia.
Plague.	Relapsing Fever.
Anthrax.	Small-pox.
Glanders.	Typhus Fever.
Hydrophobia.	Trench Fever.
Cholera.	Tuberculosis.
Continued Fever.	Scarlatina or Scarlet Fever.
Ophthalmia Neonatorum.	Typhoid or Enteric Fever.

NOTIFICATIONS DURING THE YEAR 1926.

The total number of notifications, excluding duplicates, was 669. Of this figure, 116 were notifications of Pulmonary Tuberculosis and 27 of Non-pulmonary Tuberculosis. In addition, 631 cases of Measles came to the knowledge of the Department, mainly through the School Authority.

Compared with 1925, there was an increase of 35 in the number of cases of Diphtheria. The number of cases of Scarlet Fever (114), represents an increase of 27 as compared with that for 1925. The notifications of Tuberculosis remain approximately the same as in the previous year. In 1925, there were 8 deaths from non-notified Tuberculosis, while in 1926 there were 9 such deaths.

Table No. 27 shows the total number of cases of infectious disease notified during the year, the distribution by age-groups and the number of cases treated in hospitals:—

TABLE No. 27.

CASES OF INFECTIOUS DISEASE NOTIFIED DURING THE YEAR 1926.

	Cases notified in Chelsea.								Re- moved to various Hos- pitals.
	At all Ages.	Under 1 Year.	1-5 Years.	5-15 Years.	15-25 Years.	25-45 Years.	45-65 Years.	65 and up- wards.	
Small-pox ...	—	—	—	—	—	—	—	—	—
Cholera ...	—	—	—	—	—	—	—	—	—
Diphtheria ...	207	8	72	76	32	12	5	2	202
Erysipelas ...	34	—	—	1	2	8	15	8	20
Scarlet Fever ...	114	—	32	70	5	6	1	—	109
Typhus Fever ...	—	—	—	—	—	—	—	—	—
Enteric Fever ...	2	—	—	—	—	1	1	—	2
Puerperal Fever	4	—	—	—	—	4	—	—	4
Puerperal pyrexia	4	—	—	—	—	4	—	—	3
Cerebro-Spinal Fever... ..	—	—	—	—	—	—	—	—	—
Ophthalmia Neonatorum...	9	9	—	—	—	—	—	—	6
Poliomyelitis ...	3	—	3	—	—	—	—	—	3
Encephalitis Lethargica ...	3	—	—	3	—	—	—	—	3
Polio-encephalitis	1	1	—	—	—	—	—	—	1
Malaria ...	—	—	—	—	—	—	—	—	—
Dysentery ...	—	—	—	—	—	—	—	—	—
Trench Fever ...	—	—	—	—	—	—	—	—	—
Acute Primary Pneumonia ...	136	17	48	20	10	16	18	7	109
Acute Influenzal Pneumonia ...	9	1	—	—	—	1	5	2	3
Total ...	526	36	155	170	49	52	45	19	465
Tuberculosis :—									
Pulmonary ...	116	1	7	7	20	50	29	2	
Non-Pulmonary	27	—	2	8	8	6	—	3	
Totals (Tubercu- losis)	143	1	9	15	28	56	29	5	
Totals ...	669	37	164	185	77	108	74	24	

No cases of Smallpox, Cholera, Typhus Fever, Cerebro-spinal Fever, Malaria, Dysentery, Trench Fever, Continued Fever, Relapsing Fever, Plague, Anthrax, Glanders or Hydrophobia were notified during the year.

DIPHTHERIA.

Notifications. During the year, 207 cases of diphtheria were notified, as compared with 172 in 1925. The incidence of the disease during the years 1925 and 1926 is shown in Table No. 28.

Deaths. Six deaths from the disease occurred in 1926, all in the M.A.B. Hospitals. Four of the cases were under five years of age.

Return Cases. Two return cases occurred during the year. In each case the primary case on discharge from hospital suffered from slight nasal discharge.

TABLE No. 28.
CASES OF DIPHTHERIA DURING THE YEARS 1925 AND 1926.

Year.	Cases Notified.	Percentage of Removals	Deaths	Case Fatality Rate.	Percentage of cases of School age (3-13 years).	Month of greatest prevalence.	Bacterioscopic Diagnosis, Lister Institute.				
							No. of Specimens submitted	Positive	Percentage Positive.	Negative.	Percentage Negative.
1925	172	98	7	4.1	50	Jan.	338	58	17.2	280	82.8
1926	207	98	6	2.9	55	Mar.	317	33	10.4	284	89.6

It will be observed that the number of cases notified in 1926 was abnormally high and that the percentage of removals to the M.A.B. Hospitals was also high. On the other hand, the case fatality rate was lower than that for 1925.

Information was received from the M.A.B. that 33 of the cases sent to Hospital in the course of the year proved not to be suffering from diphtheria. The incidence of the disease in London generally in 1926 was considerably higher than in previous years.

Of the 207 cases notified, 76 occurred in Stanley Ward, 73 in Church Ward, 31 in Cheyne Ward, 14 in Hans Town Ward, and 13 in Royal Hospital Ward.

Early in the year several cases were notified from the Infants' Ward of a Hospital in the Borough. A thorough examination of the drainage system of the Hospital was thereupon carried out and such defects as were found to exist were rectified by the Board of Management. Investigation for "carrier" cases was also made.

The following table shows the average annual case rate, case fatality rate, and percentage of cases removed to hospital in each of the quinquennial periods since 1911.

TABLE No. 29.

Quinquennial Periods.			Average Annual case-rate per 1,000 population.	Average Annual case-fatality rate.	Average Annual percentage of cases removed to hospital.
1911-15	...	...	1.24	5.8	89
1916-20	...	...	1.35	8.9	92
1921-25	...	...	1.81	7.2	93

Diphtheria Anti-toxin. Anti-toxin is supplied, in prophylactic and in curative doses, free of charge to any medical practitioner requiring it for Chelsea patients. An anti-toxin syringe, needles and steriliser are also available. Anti-toxin can be obtained at the Public Health Department, daily during office hours, or at any hour, day or night, at the premises of Messrs. Timmis and Richards, Chemists, 432, King's Road, S.W. 10. During 1926, seventeen bulbs of serum were supplied to medical practitioners, the cost to the Council being £5 13s. 0d. As yet no application of the Schick test or of artificial immunization against the disease has been made in the Borough.

SCARLET FEVER.

Notifications. During the year, 114 cases of Scarlet Fever were notified, the figure for 1925 being 87. Information was received from the M.A.B. Hospitals that fourteen of the cases proved not to be Scarlet Fever. Two "return" cases of the disease were discovered during the year and necessary action taken.

Table No. 30 shows the incidence of the disease during the years 1925 and 1926, while Table No. 31 cover the quinquennial periods since 1911.

Deaths. There was one death from Scarlet Fever in 1926.

TABLE No. 30.

Year.	Cases Notified.	Percentage of Removals.	Deaths.	Case Fatality Rate.	Percentage of cases of School-age 3-13 years.	Month of greatest prevalence.
1925 ...	87	90	—	—	59	Feb.
1926 ...	114	94	1	0·9	76	Mar.

TABLE No. 31.

Quinquennial Periods.	Average Annual case-rate per 1,000 population.	Average Annual case-fatality rate.	Average Annual percentage of cases removed to hospital.
1911-15 ...	2·69	1·8	91
1916-20 ...	1·95	1·0	92
1921-25 ...	2·23	0·9	91

No application of the Dick test or of artificial immunization against Scarlet Fever has yet been made in the Borough.

MEASLES.

Statistics. This disease is not notifiable. Information as to cases occurring in the Borough is derived from the School Authorities, Hospitals and medical practitioners. In addition, many cases are discovered by the Health Visitors in the course of their duties. All children suffering from the disease are visited by the Health Visitors at frequent intervals and advice is given as to the steps necessary to avoid complications.

The number of cases coming to the knowledge of the Department during the year was 631, as compared with 110 in 1925.

Deaths. The number of deaths was 16, fifteen of which were in children under five years of age.

Visiting and Nursing. During 1926, 691 visits and re-visits were made by the Health Visitors. Cases are also visited by the District Nurses whenever circumstances render this necessary. 217 nurses visits were required in 1926.

Removal to Hospital. Cases of Measles are received in the Hospitals of the Metropolitan Asylums Board on the certificate of the Medical Officer of Health. During the year 61 such cases were removed. In addition a large number were admitted to St. Luke's Hospital for treatment.

ENTERIC FEVER.

Notifications. During the year the number of cases of Enteric fever notified in Chelsea was 2.

A summary of the cases is given in Table No. 32.

TABLE No. 32.

Sex.	Age.	Notification.	Removed.	Nursed at Home.	Remarks.
F.	47	Typhoid ...	Nursing Home	—	Principal Infection on Riviera.
M.	29	Typhoid ...	St. George's Hospital	—	Footman. Fish taken regularly by all members of household with no ill effects.

Deaths. There were no deaths in the above cases. One fatal case occurred in Kensington of a Chelsea resident. The case had not been notified in this Borough.

A summary of Enteric and Para Typhoid B cases for the years 1925 and 1926 is given below :—

TABLE No. 33.

Year.	Enteric.			Para Typhoid B.		
	Cases.	Recovered.	Fatal.	Cases.	Recovered.	Fatal.
1925 ...	4	4	—	—	—	—
1926 ...	1	1	—	1	1	—

Six specimens of blood were examined during the year for the Widal reaction and proved negative.

PNEUMONIA, MALARIA, DYSENTERY AND TRENCH FEVER.

These diseases are compulsorily notifiable under the Public Health (Pneumonia, Malaria, Dysentery, etc.) Regulations, 1919.

During the year the following numbers of cases were notified :—

Pneumonia	...	...	...	...	...	145
Malaria	...	...	...	...	...	None
Dysentery	...	...	...	...	...	None
Trench Fever	...	...	...	...	...	None

Pneumonia. All primary pneumonias, lobar or lobular, are notifiable. The only secondary pneumonia which is notifiable is influenzal pneumonia.

The notifications and deaths from pneumonia during 1925 and 1926 :—

	Notifications.			Deaths.		
1925	107	...	...	74
1926	145	...	...	67

Nursing Provision. By arrangement with the Chelsea District Nursing Association, all cases of Pneumonia receive adequate nursing attention where the circumstances render this necessary.

Malaria. The Regulations provide that the Medical Officer of Health shall take all practical steps to ensure that persons suffering from malaria are supplied with sufficient mosquito netting ; receive adequate quinine treatment during the attack and subsequently ; and receive appropriate advice as to precautions necessary to prevent the spread of the disease.

No case of malaria was notified in 1926.

PUERPERAL FEVER AND PUERPERAL PYREXIA.

Four cases of Puerperal fever and four cases of Puerperal Pyrexia were notified during the year. Of these, seven were removed to hospital, one of which proved fatal.

OPHTHALMIA NEONATORUM.

Nine cases of ophthalmia neonatorum were notified during the year. Six of these cases were treated in hospital, including two cases born in hospital. In tabular form is shown below, as required by the Ministry of Health, the result of each case :—

TABLE No. 34.
OPHTHALMIA NEONATORUM.

Cases.			Vision Un- impaired.	Vision Impaired.	Total Blindness.	Deaths.
No. Notified.	Treated.					
	At Home.	In Hospital.				
9	3	6	9	—	—	—

Eleven cases of the disease were notified in 1925.

Nursing. By arrangement with the Chelsea District Nursing Association, home nursing is provided for infants suffering from this disease.

INFLUENZA.

Influenza caused 11 deaths in 1926, as against 30 in 1925. There was no serious epidemic prevalence of the disease in 1926 and no special action was called for in the Borough in regard to it.

Nursing Provision. By arrangement with the Chelsea District Nursing Association all severe cases of influenza receive skilled nursing attention.

POLIOMYELITIS AND POLIO-ENCEPHALITIS.

Three cases of Poliomyelitis were notified during 1926. Of these, two were notified from a hospital in the Borough, and to which they had been transferred from the Isolation Hospital, Grays, Essex. Both were children and non-parishioners. The remaining case was notified from the Victoria Hospital for Children. One case of Polio-encephalitis was notified during the year. This case was admitted to hospital and died shortly after admission.

ENCEPHALITIS LETHARGICA.

Three cases of encephalitis lethargica were notified during the year, and removed to the M.A.B. Hospital. As a result of subsequent observation and investigation, all three cases were definitely regarded as not cases of encephalitis lethargica. One death occurred, the case having been notified in 1925. Thirty visits to cases of encephalitis lethargica were made by the Woman Sanitary Inspector during the year. The origin of each case was thoroughly investigated but it was impossible to trace any connection between any two cases.

Encephalitis Lethargica is undoubtedly infectious but the infectivity is of very low nature. The sequelæ may be serious, as in most cases some permanent damage to the brain tissue occurs. The disease was made compulsorily notifiable from 1st January, 1919.

In the following Table No. 35, is shown the numbers of cases notified in London and in Chelsea during the years 1925 and 1926.

TABLE No. 35.

Year.	Cases Notified in Chelsea.	Removed to Hospital.	Deaths notified during year in Chelsea.	Cases notified in London.	Deaths notified in London.
1925 ...	4	3	1*	302	117
1926 ...	3	3	1†	229	87

* Case notified in 1924.

† Case notified in 1925.

SMALLPOX.

No cases of smallpox were notified in Chelsea during the year.

Vaccination. No vaccinations have been performed by the Medical Officer of Health under the Public Health (Smallpox Prevention) Regulations, 1917.

I am indebted to Mr. A. W. Horsnell, Vaccination Officer for Chelsea, for particulars of primary vaccinations which have been performed in the Parish during the years 1924 and 1925. These are shown in Table No. 36. The complete figures for 1926 are not yet available.

TABLE No. 36.

Year.	No. of Births in Chelsea.	No. of Primary Vaccinations performed.
1924	928	608
1925	935	586

In 1925, 44 infants died (unvaccinated), 24 removed to other Districts, 55 removed to unknown addresses, 18 vaccinations were postponed and 149 Certificates of Exemption were issued. Small numbers of cases were insusceptible and outstanding.

ARRANGEMENTS FOR DISINFECTION AND DISINFESTATION AND THE EXTENT OF THEIR USE.

The Borough Council maintains a Disinfecting and Cleansing Station situated at 9A, Lots Road, Chelsea, adjoining the river.

Disinfection. The disinfecting staff numbers two. A steam disinfecter is provided.

Disinfection in connection with the notifiable infectious diseases is carried out free of charge. Applications for special disinfection, not associated with the notifiable infectious diseases, are considered, and, if the work of the Department permits it, are carried out at the expense of the applicant. Sixty-three such disinfections were carried out in 1926, the total charges amounting to £34 4s. 0d.

The following Table No. 37 shows the work done by the disinfecting staff during the year.

TABLE No. 37.

Description.	Number.
Number of rooms or premises cleansed and disinfected	562
Number of Articles (bedding, etc.), disinfected ...	960
Number of articles (various) destroyed ...	235

Infectious Disease Shelter. Under the Public Health (London) Act, 1891, Section 60 (4), temporary house accommodation with necessary attendance is provided by the Borough Council free of charge at 9A, Lots Road, for families in which cases of dangerous infectious disease have appeared, and who have been compelled to leave their dwellings for the purposes of enabling such dwellings to be disinfected.

During the year, one family was accommodated at the shelter.

Disinfestation. A female cleansing attendant is employed by the Borough Council in connection with the work of the Cleansing Station.

In 1922, the London County Council entered into an arrangement with the Borough Council for the use of the Station on specified days during the school year for the purpose of cleansing the heads of verminous school children. Under the L.C.C. Scheme, the work of cleansing is supervised by the school nurses, who also make all arrangements for the attendances of the children. The children cleansed are those attending schools situated west of a line running down the centre of Sydney Street and Oakley Street. The Borough Council receives payment from the London County Council at the rate of 2s. per child attendance.

During 1926, the Station was opened for the entire day on 84 occasions.

The following Table No. 38 shows the number of attendances in each quarter :—

TABLE No. 38.

Quarter.	No. of days on which the Station was opened.	Attendances.	
		Verminous.	Impetigo.
March ...	22	264	—
June ...	20	320	1
September ...	17	295	1
December ...	25	274	2
	84	1,153	4

The amount recoverable from the London County Council, as the School Authority, for the cleansing for the year 1926 is £115 10s. 0d.

No adults were cleansed at the Station during the year. There were no adult attendances as a consequence of infection by Scabies or Impetigo in 1926.

(b) TUBERCULOSIS.

This part of the report deals with the work of the Department under the Public Health (Tuberculosis) Regulations, 1912, and under the Dispensary scheme approved by the Ministry of Health and the London County Council who contribute 50 per cent. and 25 per cent. respectively of the nett expenditure of that scheme.

Staff.—The staff of the Dispensary is set out in Section II. No change has taken place in the staff during the year.

Notifications. The total number of notifications received was 189, but 46 of these related to cases which had been previously notified, so that the total number of new notifications was 143. In 1925, the corresponding number was 135. The notifications received on forms C and D, *i.e.*, notifications from institutions regarding admission and discharge, are not included in the foregoing figures. In Table No. 39 are shown, in the form required by the Ministry of Health, the detailed figures relating to new cases and mortality during 1926. Included in this Table are nine new cases which came to the knowledge of the Medical Officer of Health during the year, otherwise than by notification on Form A or Form B under the Public Health (Tuberculosis) Regulations.

TABLE No. 39.
TUBERCULOSIS.
New Cases and Mortality during 1926.

Age Periods.	New Cases.				Deaths.			
	Pulmonary.		Non-pulmonary.		Pulmonary.		Non-pulmonary.	
	M.	F.	M.	F.	M.	F.	M.	F.
0—1...	1	—	—	—	1	—	—	—
1—5...	8	1	2	—	2	—	2	—
5—10...	3	—	—	3	—	—	—	—
10—15...	2	2	3	2	—	—	—	—
15—20...	5	5	4	2	—	1	—	—
20—25...	5	5	1	1	6	1	—	—
25—35...	18	10	2	1	6	6	—	—
35—45...	16	8	2	1	3	4	—	—
45—55...	16	—	—	1	7	1	1	1
55—65...	16	1	—	—	11	2	—	—
65 and upwards	—	2	2	1	—	4	1	—
Totals ...	90	34	16	12	36	19	4	1

The death rate in 1926 from all forms of Tuberculosis in Chelsea was 0.9 per 1,000. Of the total number of deaths (60) from all forms of Tuberculosis, nine died non-notified or prior to notification. The ratio of non-notified tuberculosis deaths to total tuberculosis deaths was therefore as one is to seven. The corresponding ratio for 1925 was 1 : 8. Making allowance for difficult and doubtful cases in which a diagnosis cannot be established until after death, the notification of tuberculosis is carried out fairly efficiently in the Borough. During the year, however, a communication was addressed to every medical practitioner in the area with a view to securing still more systematic and prompt notification, not only of tuberculosis but of the notifiable infectious diseases generally.

Cases of Tuberculosis in the Borough. The Public Health (Tuberculosis) Regulations, 1924, provide that the Medical Officer of Health shall furnish to the County Medical Officer, as soon as practicable after the end of each quarter, a statement showing :—

- (a) The number of cases of Tuberculosis on the register at the commencement of the quarter ;
- (b) The number of cases notified under the Regulations, 1912, for the first time during the quarter ;
- (c) The number of cases removed from the register during the quarter, giving the name and address of each such case and the reason for such removal ; and
- (d) The number of cases remaining on the register at the end of the quarter.

The returns made in accordance with these Regulations show that the number of cases of Tuberculosis in the Borough on 31st December last was as follows :—

	Males.	Females.	Total.
Pulmonary	189	118	307
Non-pulmonary	29	38	67
	<hr/>	<hr/>	<hr/>
	218	156	374
	<hr/>	<hr/>	<hr/>

Public Health (Prevention of Tuberculosis) Regulations, 1925. The Regulations provide, *inter alia*, that no person suffering from respiratory tuberculosis who is in an infectious condition shall be engaged in any form of dairy work involving the milking of cows, the treatment of milk, or the handling of milk containers. Investigations in connection with these Regulations have been made in the Borough but no case calling for action has thus far been discovered.

TABLE No. 40.
CHELSEA TUBERCULOSIS DISPENSARY, BROMPTON HOSPITAL.
Work done during 1926.

Diagnosis.	Pulmonary.				Non-Pulmonary.				Total.					
	Adults.		Children.		Adults.		Children.		Adults.		Children.			
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.		
A.—New cases examined during the year (excluding contacts)—														
(a) Definitely tuberculous ...	29	12	1	—	—	—	1	1	29	12	2	1	328	
(b) Doubtfully tuberculous ...	22	31	3	2	—	—	—	—	22	31	3	2		
(c) Non-tuberculous ...	40	65	62	59	—	—	—	—	40	65	62	59		
B.—Contacts examined during the year—														
(a) Definitely tuberculous ...	—	1	1	—	—	—	—	—	—	1	1	—	125	
(b) Doubtfully tuberculous ...	—	2	—	1	—	—	—	—	—	2	—	1		
(c) Non-tuberculous ...	13	30	45	32	—	—	—	—	13	30	45	32		
C.—Cases written off the Dispensary Register as—														
(a) Cured ...	1	—	—	—	—	—	—	—	1	—	—	—	640	
(b) Diagnosis not confirmed or non-tuberculous (including cancellation of cases notified in error) ...	101	155	196	187	—	—	—	—	101	155	196	187		
D.—Number of Persons on Dispensary Register on December 31st—														
(a) Diagnosis completed ...	104	64	2	1	1	1	10	9	105	65	12	10	222	
(b) Diagnosis not completed ...	7	20	2	1	—	—	—	—	7	20	2	1		
<hr/>														
1. Number of persons on Dispensary Register on January 1st ...	460				9. Number of patients to whom Dental Treatment was given, at or in connection with the Dispensary ...				—					
2. Number of patients transferred from other areas and of "lost sight of" cases returned ...	10				10. Number of consultations with medical practitioners:—									
3. Number of patients transferred to other areas and cases "lost sight of" ...	32				(a) At Homes of Applicants...				10					
4. Died during the year ...	29				(b) Otherwise ...				65					
5. Number of observation cases under A (b) and B (b) above in which period of observation exceeded 2 months ...	23				11. Number of other visits by Tuberculosis Officers to Homes ...				41					
6. Number of attendances at the Dispensary (including Contacts) ...	3,434				12. Number of visits by Nurses or Health Visitors to Homes for Dispensary purposes ...				3,531					
7. Number of attendances of non-pulmonary cases at Orthopædic Out-stations for treatment or supervision...	—				13. Number of—									
8. Number of attendances, at General Hospitals or other Institutions approved for the purpose, of patients for					(a) Specimens of sputum, etc., examined ...				374					
(a) "Light" treatment ...	—				(b) X-ray examinations made ...				49					
(b) Other special forms of treatment	—				in connection with Dispensary work.									
					14. Number of Insured Persons on Dispensary Register on the 31st December ...				134					
					15. Number of Insured Persons under Domiciliary Treatment on the 31st December ...				15					
					16. Number of reports received during the year in respect of Insured Persons:—									
					(a) Form G.P. 17 ...				12					
					(b) Form G.P. 36 ...				7					

Signed W. J. FENTON, Tuberculosis Officer.

Chelsea Tuberculosis Dispensary. This Dispensary, located at Brompton Hospital, provides highly efficient treatment for all cases resident in the Borough. An annual grant is paid to the Hospital by the Borough Council to provide for all necessary medical, nursing and other services. Table No. 40 shows the work done by the Dispensary during 1926, while Table No. 41 summarises, for the years 1925 and 1926, the number of persons examined at the Dispensary for the first time, the percentage of these cases in which definite tuberculosis was found, and the total attendances at the Dispensary.

TABLE No. 41.
WORK DONE AT THE DISPENSARY.

Year.	Number of Persons examined for the first time.	Definite Tuberculosis.	Total attendances at Dispensary.
1925 	357	13 per cent.	3,002
1926 	328	13 ..	3,434

In addition to the visits to homes of patients made by the Dispensary staff and recorded in Table No. 40, 47 new cases of Pulmonary and Non-Pulmonary Tuberculosis were visited by the Municipal Tuberculosis Visitor in the course of the year. The total number of visits paid by her in respect of all cases of Tuberculosis and suspected Tuberculosis was 724. This official also paid 776 visits in connection with the Public Health (Tuberculosis) Regulations, 1924.

Institutional Treatment. The London County Council is mainly responsible for the institutional treatment of Tuberculosis in London. No institution is maintained by the County Council in the Borough. The Metropolitan Asylums Board maintains St. George's Home, in Milmans Street, Chelsea, as a hospital for advanced pulmonary disease in women. There is accommodation for 50 cases, which are drawn from all parts of the metropolis. The majority of advanced cases of pulmonary tuberculosis in Chelsea are isolated and treated in St. Luke's Hospital under the Board of Guardians, while a smaller proportion receive treatment in other public institutions. Of the pulmonary cases which terminated fatally in 1926, 56 per cent. died in St. Luke's Hospital and 18 per cent. in other public institutions, that is to say 74 per cent. died away from their homes, the corresponding figure for 1925 being 70 per cent.

Co-operation with Hospitals and Invalid Children's Aid Association. Existing arrangements with general and special hospitals in the neighbourhood continue to give satisfaction. Cases under treatment at St. George's Hospital and St. Luke's Hospital are visited by the Municipal Tuberculosis Visitor. Arrangements are made with Brompton Hospital for the X-ray examination of difficult cases and for the provision of artificial pneumo-thorax refills. Many patients, both adults and children, who attend the Dispensary for examination, either as contacts or on their

own initiative, are found to be suffering from conditions, other than Tuberculosis, which require treatment. These cases are advised as to obtaining such treatment, either from private practitioners or at general hospitals. Many children are found to be suffering from anæmia, malnutrition and similar diseases and are referred to the Chelsea branch of the Invalid Children's Aid Association with a view to provision of convalescent home treatment.

Co-operation with the School Medical Service. The relationship with the School Medical Service continues to be satisfactory. The School Medical Authorities frequently afford valuable help in deciding what supervision is desirable in connection with children. Many children are referred direct to the School Clinic for the treatment of minor ailments and dental caries.

Co-operation with Medical Practitioners. During the year the Tuberculosis Officer examined 51 new cases at the homes of the patients, and 65 cases were referred to him at the Dispensary by medical practitioners in the Borough.

Insured persons under the care of local medical practitioners are visited by the Municipal Tuberculosis Visitor.

Home Contacts. The number of home contacts of tuberculous patients examined at the Dispensary during the year was 175, an increase of 81 compared with 1925. Special arrangements are made for following up patients in cases where the diagnosis is doubtful. Such cases are again examined at intervals and, when necessary, X-ray or other special investigation is made. The Social Worker at the Dispensary maintains regular observation in connection with these patients.

Artificial Pneumo-thorax Treatment. On the recommendation of the Tuberculosis Officer, three patients were supplied with 17 refills in connection with artificial pneumo-thorax treatment. Payments amounting to £8 18s. 6d. were made by the Borough Council for these refills.

Home Nursing. The Dispensary organization includes home nursing, which is much appreciated by such patients as are confined to bed. During 1926, the number of visits paid by Nurses to the homes of patients was 3,531, an increase of 713 over the number for the previous year. Fourteen cases of Tuberculosis were certified by the Tuberculosis Officer during the year to require extra nourishment as part of their treatment. These cases were supplied with foods such as milk, eggs, and butter. The total cost of extra nourishment (£14 4s. 0d.) was borne by the Borough Council. The Council lent bedsteads and bedding to two cases during the year.

Non-pulmonary Cases. All cases in which special treatment is indicated are assisted in obtaining admission to hospital. Others are sent to country or seaside convalescent homes through the agency of the Invalid Children's Aid Association.

Orthopædic Treatment. In appropriate cases surgical boots and appliances, splints, crutches, spinal carriages and wheeled chairs are supplied through the Invalid Children's Aid Association.

Bacteriological Examinations. During the year, 374 specimens of sputum were examined in connection with the work of the Dispensary. In addition, 75 specimens were sent by medical practitioners to the Lister Institute for examination. The corresponding number in 1925 was 78.

Care Work. The Chelsea Tuberculosis Care Committee constituted on the basis advised by the Ministry of Health in 1922 took over in that year the work of the former Interim Care Committee which had been formed by the Borough Council in 1917. The Committee now includes the following representation and membership :—

Chelsea Borough Council	...	Councillor Lady Phipps.
London County Council	...	Dr. A. W. Sikes (Divisional Medical Officer).
		Miss Paddon (District Organiser of School Care Committees).
		Miss Barff (After-Care Committee).
Chelsea Invalid Children's Aid Association		Mrs. Rathbone and Miss Barcroft (Vice-Chairman).
Chelsea Board of Guardians	...	Dr. E. T. Holland.
Chelsea Charity Organisation Society		Miss Larken.
Chelsea District Nursing Association		Miss Page.
Chelsea Health Society	...	Mrs. Melville Miller.
Brompton Hospital	...	Miss Marx.
Local Panel Committee	...	Dr. A. M. Gibson, and Dr. E. F. Thomas.
London Insurance Committee		W. E. Poole, Esq.
Local War Pensions Committee, and United Services Fund		Miss Forbes.
St. George's Hospital	...	Miss Seddon.
British Red Cross Society	...	Miss Trench and Brig.-Genl. D. S. Dodgson, C.B., C.M.G.
Ex-officio Members	...	Dr. Leslie McCarthy (Chairman).
		Dr. W. J. Fenton (Tuberculosis Officer).
		Miss Tettenborn (Sanitary Inspector and Tuberculosis Visitor).
Hon. Secretary	...	Miss Hordern, Chelsea Tuberculosis Dispensary, Brompton Hospital, S.W.

The duties of the Committee include enquiries into the economic position of the family of a patient suffering from tuberculosis as soon as the patient comes within the purview of the Tuberculosis Scheme. The Committee endeavours to ensure that as far as possible there shall

be no difficulties to prevent the patient from carrying out the recommendations made by the Dispensary. Such advice and assistance is given as the circumstances of the case dictate, e.g., assistance in the provision, where necessary, of clothing required by the institution to which the patient is sent; arrangements for the welfare of the family during absence of the father or mother; the securing of auxiliaries for domiciliary treatment which cannot be provided without charitable assistance, provision of extra nourishment and advising the Borough Council as to the extent to which assistance in this respect should be given; the rectification of unsatisfactory home conditions; recommendations to the London County Council as to the amount of payment, if any, by the patient towards the cost of institutional treatment and the collection of agreed amounts. The Committee also endeavours on the cessation of treatment to obtain suitable employment for the patient.

The Care Committee meetings are held monthly at the Town Hall. In addition, a Sub-Committee meets every alternate fortnight to deal with new cases and other urgent business.

During 1926, the Care Committee met 13 times.

Cases assessed	...	...	...	...	...	...	...	84
Reported admitted to L.C.C. Institutions	...	...	...	...	...	...	...	69
Temporary assistance arranged...	...	...	...	...	...	...	...	23
Extra nourishment granted	...	...	...	...	...	...	...	14
Work found	...	...	...	...	...	...	...	9
Housing conditions improved	...	...	...	...	...	...	...	8
Children admitted to Open Air School	...	...	...	...	...	...	...	7
Children boarded out through L.C.C. Contact Scheme and otherwise	...	...	...	...	...	...	...	29
Convalescence	...	...	...	...	...	...	...	65

The total cost of extra nourishment to appropriate cases was £14 4s. 0d.

SECTION VII.—MATERNITY AND CHILD WELFARE.

The statistics regarding births and deaths of infants will be found on pages 8 and 16 of this report. The maternal death rate is dealt with on page 69.

General Arrangements. The Borough Council's scheme for Maternity and Child Welfare includes the following activities:—

(a) The issue of pamphlets giving advice on various matters concerning the welfare of mothers and infants.

(b) The co-ordination of the work of the voluntary Maternity and Child Welfare agencies in the Borough.

(c) The home visitation of expectant and nursing mothers and infants by a staff of Health Visitors who work (a) from the Town Hall, and (b) from the Centres of the Chelsea Health Society.

(d) The subsidisation of the Chelsea Health Society's Maternity and Child Welfare Centres and Clinics for ailing mothers, infants and young children.

(e) The subsidisation of the local branch of the Invalid Children's Aid Association.

(f) The subsidisation of the voluntary Day Nursery in the Borough.

(g) The subsidisation of the Chelsea District Nursing Association for the home nursing of expectant and nursing mothers and young children.

(h) The provision of Home Helps.

(i) The provision of midwifery attendance, free or at reduced rates, for necessitous Chelsea women.

(j) The provision of Convalescent Home accommodation for nursing mothers and infants.

(k) The supply of milk, free or at reduced rates, for necessitous nursing and expectant mothers, infants and young children.

(l) The administration of the Widows', Orphans' and Old Age Contributory Pensions Act, 1925, in respect of deserted, abandoned or neglected children.

HEALTH VISITORS.

Duties. The duties allotted to the Health Visitors are as follows:—

1. To visit the homes of all newly-born children amongst the working classes within 21 days after birth, and subsequently as circumstances dictate.

2. To visit the homes and make investigations in regard to still-births and infant deaths.

3. To visit and give advice to parents in cases of ophthalmia, zymotic enteritis and other diseases causing deaths amongst infants.

4. To visit and report upon all cases of puerperal fever.

5. To investigate, when required, homes in which overcrowding is alleged to exist.

6. To investigate, when required, applications for the supply of milk free or below cost price.

7. To co-ordinate their efforts with those of the voluntary workers attached to the Maternity and Child Welfare organizations in the Borough.

8. To investigate cases under the Widows', Orphans' and Old Age Contributory Pensions Act where the children are under school age.

Work of the Health Visitors. The following tabular statement (Table No. 42) gives an outline of the work of the Health Visitors and of the Chelsea Health Society and School for Mothers during the years 1925 and 1926. The visits enumerated are those paid by the trained officer of the Borough Council (one whole-time Health Visitor) and the trained officers of the Chelsea Health Society and School for Mothers (two whole-time Health Visitors). It does not include work done by voluntary workers attached to the Society.

TABLE No. 42.

SUMMARY OF REPORTS OF HEALTH VISITORS.

	1925.	1926.
Number of homes visited (first visits), Infants	627	538
Number of revisits, Infants	2,227	2,323
Number of Infants' attendances at Infant Consultations	3,878	3,489
Number of visits to Children of one year to school age...	330	344
Number of revisits to Children of one year to school age...	3,026	3,587
Number of children of one year to school age, attendances at Medical Inspections	2,102	1,844
Number of ante-natal visits to Expectant Mothers:—		
Primi-para	78	87
Multi-para	240	208
Revisits	484	443
Total	802	738
Number of ante-natal case-attendances at ante-natal clinic	395	369
Number of visits to Diarrhoea cases amongst children ...	2	40
Number of visits to cases of Ophthalmia Neonatorum	11	9
General additional visits in connection with the work ...	992	954
Number of visits <i>re</i> Whooping Cough	—	67

MATERNITY NURSES AND MIDWIVES.

The arrangements made by the Borough Council for the provision of midwifery attendance have already been outlined in Sec. II. of this report. In the following Table No. 43 is shown, for the years 1925 and 1926 the number of applications for midwifery attendance, the number

provided with such attendance, the amount of assessment on cases attended and the nett expenditure by the Council for this service :—

TABLE No. 43.

Year.	(1) No. of applications for services of		(2) Total number provided with a		Amount of Assessment on cases attended.		(3) Nett Cost to Council.	
	Mater- nity Nurse.	Mid- wife.	Mater- nity Nurse.	Mid- wife.	Mater- nity Nurse.	Midwife.	Mater- nity Nurse.	Midwife.
					£ s. d.	£ s. d.	£ s. d.	£ s. d.
1925	10	51	10	38	5 15 6	25 18 6	9 14 6	32 6 6
1926	11	56	8	42	5 19 0	24 14 0	6 1 0	38 6 0

NOTE.—(1) Includes applications refused and cases subsequently withdrawn.
 (2) Includes cases assessed during former year.
 (3) Half the nett cost to Council is recovered as a grant from the Ministry of Health.

HOME HELP.

Whole-time Home Helps are employed by the Borough Council for service in the homes of necessitous women during confinement. A panel scheme is in operation under which selected women are placed upon a roster and their services utilised in rotation. This system is found to be very successful in its working. The following Table No. 44 shows, for the years 1925 and 1926, the number of applications received for Home Help service, the number of cases attended, the amount of assessment on cases attended and the nett expenditure by the Council for this service :—

TABLE No. 44.

Year.	No. of applications for services of Home Help, including extension over the usual period of 2 weeks.	Total number of cases attended by the Home Helps.	Amount of Assessment on cases attended.	*Nett Cost to Council.
			£ s. d.	£ s. d.
1925 ...	40	19 plus 13 extensions	28 12 0	62 8 0
1926 ...	37	16 plus 1 extension	20 3 0	48 8 5

* Grant from the Ministry of Health.

HOME NURSING.

The arrangement whereby the trained nurses of the Chelsea District Nursing Association undertake, when requested by the Medical Officer of Health, the home nursing of measles, german measles, whooping cough, ophthalmia, enteritis and any other disease for which nursing assistance is required, continues to give satisfaction. Medical practitioners in the Borough greatly appreciate the assistance they thus receive. No occasion has arisen where a request for nursing assistance has not been met promptly, even in times of pressure. The following Table No. 45 shows, for the years 1925 and 1926, the number of visits paid by the District Nurses to the homes of expectant and nursing mothers and children under five years of age, while Table No. 46 shows the conditions which necessitated attendance during the year 1926 :—

TABLE No. 45.

Year.	Visits.	Cases.
1925	1,673 ...	169
1926	1,953 ...	196

TABLE No. 46.

DISEASES NURSED BY DISTRICT NURSES DURING 1926.

	Visits.	Cases.
Bronchitis	105 ...	12
Burns	3 ...	1
Circumcision	16 ...	3
*Diarrhœa	51 ...	7
Eye trouble	77 ...	8
Ear trouble	149 ...	11
Influenza and Pneumonia (under 5)	252 ...	18
Influenza and Pneumonia (over 5) ...	113 ...	7
Impetigo	52 ...	4
Meningitis and Peritonitis	2 ...	1
*Measles	217 ...	25
*Ophthalmia Neonatorum	66 ...	7
*Poliomyelitis	— ...	—
*Puerperal State, including Breasts, Miscarriage, and Rise of Tempera- ture	214 ...	13
Rickets	— ...	—
Septic sores	198 ...	12
Tonsils and Adenoids	101 ...	26
*Whooping Cough	34 ...	2
Worms	169 ...	24
Miscellaneous	134 ...	15
	<hr/> 1,953 <hr/> ...	<hr/> 196 <hr/>

* Grant received from the Ministry of Health.

CLINICS AND TREATMENT CENTRES.

The Maternity and Child Welfare work carried on in the Borough by the Chelsea Health Society and School for Mothers has already been outlined in Section II. of this report and an account of the Society's activities during the years 1925-1926 has been included in Table No. 42.

The Society is controlled by a Voluntary Committee and is supported by (1) voluntary contributions, (2) financial grants from the Ministry of Health and from the Borough Council. During the year 1926 four infant clinics were held weekly and one ante-natal clinic weekly. One infant clinic was held weekly at 484, King's Road, the remaining three infant clinics and the ante-natal clinic being held at 1, Manor Street. The medical and other staff are appointed by the Voluntary Committee. All the medical officers are ladies.

ORMOND MATERNITY HOME.

The Ormond Maternity Home, situated at 29, Blantyre Street, Chelsea, is the only institution of its kind in the Borough. It provides accommodation for six cases, a seventh bed being available in emergency. The Home is controlled by a Voluntary Committee and is supported by (1) voluntary subscriptions, (2) payments by patients and by pupils. The Institution does excellent work in the neighbourhood, providing an intern and extern midwifery service, and, in addition, is a recognised school for the training of midwives. The Medical Officer of Health is a member of the Advisory Committee of the Home.

There is an ever-increasing demand for the Maternity beds, the number of in-patients dealt with having risen from 44 in 1925 to 48 in 1926.

I am indebted to Miss Child, the Superintendent of the Home, for the following information regarding the work done during 1926 :—

Total cases attended during the year	...	...	...	227
Cases admitted and attended in the Home	...	...	...	48
Cases attended in the district	...	...	...	179
Maternal Deaths	...	...	...	None.

CONVALESCENT HOME TREATMENT FOR NURSING MOTHERS AND INFANTS.

The amount of convalescent home treatment provided for nursing mothers and infants, during the years 1925 and 1926, is shown in Table No. 47. During 1926, four of the cases were sent to Homes free of charge. The remainder contributed according to their resources. Of applications made for convalescent treatment, it is found that over 40 per cent. are subsequently withdrawn, owing to domestic circumstances rendering it impossible for the mother to leave her home. The period of convalescence granted is two weeks.

TABLE No. 47.

Year.	No. of Applications.	Nursing Mothers and Infants sent away under Council Scheme.	Contributions by Mothers.	*Nett Cost to Borough.
			£ s. d.	£ s. d.
1925	45	27	11 18 6	44 7 0
1926	19	9	3 0 0	11 16 6

* Grant from the Ministry of Health.

CHELSEA BRANCH OF THE INVALID CHILDREN'S AID ASSOCIATION.

During the year 1926, the branch had 125 children under school age referred to them for assistance.

These children were suffering from marasmus and malnutrition, congenital deformities, rickets, and anæmia and debility following acute illness such as bronchitis, pneumonia, measles, diphtheria and scarlet fever.

Forty-two children were sent out of London for convalescence, for periods varying from six weeks to six months. Twelve children had hospital treatment arranged for them. Twenty-six infants were given medical aids ordered by a doctor, such as vitoleum, cream, phosphates, malt and cod liver oil, etc., which their parents, owing to unemployment, were unable to provide.

Ten children requiring surgical appliances, such as surgical boots, calliper splints, umbilical belts, etc., were provided with what was necessary. Fifteen children were given warm clothing, boots, etc., and fares for children and escorts were paid whenever necessary.

Twenty children were specially visited and friendly supervision and advice given. Perambulators and push-carts were loaned to enable children to be taken regularly to hospital.

The amount expended by the Association on these cases during the year 1926 was £204 3s. 9d., towards which sum parents contributed £59 17s. 9d., leaving a balance of £144 6s. 0d. to be raised by the Chelsea Branch.

CHELSEA DAY NURSERY.

The attendances at the Nursery during the years 1925 and 1926, were as shewn below :—

TABLE No. 48.

	1925.	1926.
Total number of children attending during the year	4,366	5,047
Average daily attendance (5 days a week)	20	20
Total number of individual children who attended	79	114

It will be noted that the total attendances during 1926 have increased. The Nursery was closed for 16 days early in the year owing to an outbreak of measles.

The health of the Nursery has been remarkably good. Sir Thomas Parkinson and Dr. Muriel Radford are the Medical Officers to the Nursery and make a fortnightly inspection of the children.

PUERPERAL FEVER AND PUERPERAL PYREXIA.

Four cases of puerperal fever and four cases of puerperal pyrexia were notified in 1926. Seven cases were removed to hospital from their homes as soon as the disease was diagnosed. One of these proved fatal.

PREGNANCY AND CHILDBIRTH.

Two deaths from other complications of pregnancy and childbirth occurred in 1926. Of these, one was due to post-operative shock and one to ante-partum hæmorrhage.

MATERNAL MORTALITY.

The following table shows the Maternal mortality in Chelsea during the years 1925 and 1926.

TABLE No. 49.

Year.	Death-rate per 1,000 Births.		Total Death-rate.
	Puerperal Fever.	Other complications of Pregnancy and Child birth.	
1925	2·13	6·42	8·54
1926	1·16	2·32	3·48

During the year further efforts were made to insure that in Chelsea still better results will accrue from the measures already in operation to diminish the risk involved in childbirth. The valuable report by Dame Janet Campbell issued by the Ministry of Health in 1924, has clearly shown the necessity for such increased effort. Neglect in the past of provision for the early diagnosis of conditions inimical to the health of mothers has resulted not only in a high mortality rate but also in a considerable, and largely avoidable amount of suffering and invalidity amongst the survivors.

Puerperal fever, in particular, is a disease requiring early, active and efficient treatment. The type of treatment and the highly-skilled nursing involved are quite out of reach of the poorer sections of the community in their own homes. These invariably consist of small flats and tenements entirely lacking in facilities for confinement. Wherever possible in such cases arrangements are made for the woman to be confined in a maternity hospital or home, and there can be no doubt as to the desirability of women entering an institution when the home conditions are not satisfactory. Many object to making use of the accommodation and efficient treatment provided by the Board of Guardians, and with a view to providing for the safe confinement of such cases, most of the Metropolitan Borough Councils have made special arrangements. The Ministry of Health has also provided for the admission of cases to certain of the M.A.B. Hospitals. Many patients, however, are unwilling to enter an institution situated at any considerable distance from their homes.

ANTE-NATAL WORK.

The work of ante-natal consultations is growing as it becomes better known amongst mothers in the Borough. Sound advice, based on the most recent scientific investigation, is provided by the medical officer of the Ante-natal Clinic. Every effort is being made to ensure that mothers will take full advantage of the excellent arrangements made by the Chelsea Health Society so that as far as possible all risk of disease and accident incidental to child-birth may be removed.

SUPPLY OF MILK AT LESS THAN COST PRICE.

Provision is made under the Maternity and Child Welfare Act, 1918, whereby milk is provided in necessitous cases free or at less than cost price.

The Milk and Welfare Sub-Committee meets weekly at the Town Hall to consider applications.

Free milk is supplied when the total income of the family, after deducting rent and insurance, does not exceed 5s. per head per week. Milk is supplied to other cases on the following basis :—

Nett available income 5s. to 6s. at the rate of 1d. per pint.					
"	"	6s. to 7s.	"	"	1½d. "
"	"	7s. to 8s.	"	"	2d. "
"	"	8s. to 9s.	"	"	2½d. "

The following table shows, for the years 1925 and 1926, the extent of this service :—

TABLE No. 50.

Year.	Milk Orders issued and taken up.					† Approx. Cost.
	March quarter.	June quarter.	Sept. quarter.	Dec. quarter.	* Total.	
						£
1925 ...	365	425	339	476	1,605	326
1926 ...	543	520	444	452	1,959	388

* These totals do not include orders subsequently cancelled or withdrawn, which average 150 or more during each year.

† The Borough Council receives a grant from the Ministry of Health of one-half the cost incurred.

The existing arrangements for the supply of milk in the Borough are working satisfactorily. In conjunction with the Board of Guardians, the Council's Milk Sub-Committee has formulated a scheme whereby milk is supplied to appropriate cases even when such cases are already in receipt of Poor Law relief. This scheme obviates the undesirable practice of an individual being granted a somewhat similar form of relief by two different authorities.

The supply of milk under the Borough Council Scheme has undoubtedly effected very marked improvement in the general health of both mothers and children.

WIDOWS', ORPHANS' AND OLD AGE CONTRIBUTORY PENSIONS ACT, 1925.

The powers and duties under this Act, in respect of deserted, abandoned or neglected children in the Borough, have been taken over by the Council, and a provisional scheme for the administration of the Act has been arranged. The Health Visitors investigate and exercise supervision over children under school age, while the Woman Sanitary Inspector carries out these duties in the case of older children, except where a Health Visitor is already in attendance on the family concerned. No case for enquiry under the Act has yet occurred in the Borough.

Metropolitan Borough of Chelsea.

Annual Report

OF THE

PUBLIC ANALYST

For the Year ended 31st December, 1926.

BY

B. HENRY GERRANS, F.I.C.,

Public Analyst.

TOWN HALL,

CHELSEA, S.W. 3.

25th March, 1927.

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

MR. MAYOR, LADIES AND GENTLEMEN,

1. During the year ended on the 31st December, 1926, four hundred samples of Food and Drugs were submitted to me for analysis by the Inspectors appointed under the Acts. Fifteen of these samples were submitted as "Informal samples." Seven samples were also taken by an officer of the Battersea Borough Council under the provisions of the Milk and Dairies Act, 1915.

2. The nature of the samples submitted and the general procedure in taking samples are not within the control of the Public Analyst.

3. Table I. shows the number and the names of the Genuine, Adulterated, and Inferior samples, both "Formal" and "Informal," reported upon during the year. The term "Genuine Composition" is to be understood to mean that the composition of the samples so described was in accordance with the scientific definitions which can at present be given to the various articles dealt with, and that adulteration could not be certified in regard to them. The term "Inferior" means that the samples so described were of low quality or of doubtful character and that actual adulteration could not be certified in regard to them.

TABLE I.

Name of Sample.	Genuine Composition or Not Adulterated.		Adulterated.		Inferior.		Total.
	"For- mal."	"In- formal."	"For- mal."	"In- formal."	"For- mal."	"In- formal."	
Milk ...	141	8	6	1	—	—	156
Butter ...	39	—	—	—	4	—	43
Margarine ...	28	—	—	—	4	—	32
Cocoa...	20	—	—	—	—	—	20
Coffee ...	15	—	—	—	—	—	15
Lard ...	13	—	—	—	1	—	14
Tea ...	13	—	—	—	—	—	13
Sausages ...	3	1	6	1	—	—	11
Sugar...	9	—	—	—	—	—	9
Flour ...	8	—	—	—	—	—	8
Pepper ...	8	—	—	—	—	—	8
Vinegar ...	6	—	1	—	—	—	7
Mustard Compound...	6	—	—	—	—	—	6
Cream ...	5	—	1	—	—	—	6
British Wines	4	—	2	—	—	—	6
Baking Powder	6	—	—	—	—	—	6
Custard Powder	—	—	—	—	5	—	5
Coffee & Chicory Mixture ...	4	—	—	—	—	—	4
Ground Almonds ...	3	—	—	—	—	—	3

Name of Sample	Genuine Composition or Not Adulterated.		Adulterated.		Inferior.		Total.
	" For-mal."	" In-formal."	" For-mal."	" In-formal."	" For-mal."	" In-formal."	
Ground Ginger	3	—	—	—	—	—	3
Ground Rice...	3	—	—	—	—	—	3
Arrowroot ...	3	—	—	—	—	—	3
Rice ...	3	—	—	—	—	—	3
Sardines ...	—	2	—	—	—	—	2
Apples ...	—	2	—	—	—	—	2
Syrup of Figs	1	1	—	—	—	—	2
Malt Vinegar...	2	—	—	—	—	—	2
Pea Flour ...	2	—	—	—	—	—	2
Shredded Beef Suet ...	1	—	1	—	—	—	2
Blancmange Powder ...	2	—	—	—	—	—	2
Lemonade Powder ...	1	—	—	—	—	—	1
Cornflour ...	1	—	—	—	—	—	1
Sponge Mixture	—	—	—	—	1	—	1
Tinned Peas...	—	—	—	1	—	—	1
Tinned Pine-apple ...	—	—	—	1	—	—	1
Herring in Tomato ...	—	—	—	1	—	—	1
Cheese ...	1	—	—	—	—	—	1
"Coffee Shape" Jelly ...	—	—	—	—	—	1	1
TOTALS ...	355	14	17	5	15	1	407
	369		22		16		

4. The percentages given by the data in Table I. are as follows:—

Genuine Composition	...	...	...	90.66 per cent.
Adulterated	...	...	...	5.41 "
Inferior	...	...	...	3.93 "

MILK.

5. The particulars relating to the seven samples of Milk reported as adulterated are given in Table II. :—

TABLE II.

No.	Percentage of Extraneous Water.	Percentage of required Fat deficient.	"Preservatives."	Remarks.
1	—	25	—	—
2	—	18	—	*
3	—	16	—	—
4	—	16	—	—
5	—	16	—	—
6	5	—	—	—
7	—	2	—	*

* Taken in the area of the Battersea Borough Council.

6. The remaining 149 samples submitted, of which 8 were "Informal samples," were found to have the normal composition of unadulterated milks, or of milks which must be regarded as unadulterated, and to be in accordance with the requirements of the "Sale of Milk Regulations, 1901," 50 "Formal" and 1 "Informal" being of "Good" quality, 60 "Formal" and 3 "Informal" of "Fair" quality, and 34 "Formal" and 1 "Informal" of "Poor" quality.

7. The application of the terms "Good," "Fair," and "Poor" to samples of Milk is based on the following analytical data :—

Non-fatty solids 8.5 per cent. or over :—

With from 3.0 to 3.35 per cent. of fat, Poor Quality.

„	3.35 to 3.8	„	„	Fair	„
„	3.8 and over	„	„	Good	„

BUTTER.

8. Actual adulteration could not be certified with respect to the 4 samples of Butter reported as inferior. (See paragraph 3.) Two of these samples contained Boric Acid.

9. The remaining 39 samples submitted were found to have the normal composition of unadulterated Butters, or of Butter which must at present be regarded as unadulterated, and they were therefore certified to be genuine.

10. Twenty-four of the samples contained Boric Acid, the amount being under 0.5 per cent. in each case. Samples of *Butter* containing Boric Acid preparations and not adulterated in other respects, are at *present* reported as "genuine" or "inferior" as the case may require, and not as "adulterated."

11. The use of Boric Acid in Butter is forbidden by the Preservatives Regulations which come into operation respecting this article in January next.

12. The four samples of Butter reported as inferior, contained 15.9, 15.43, 14.86 and 13.6 per cent. of water respectively; amounts below the extreme limit of 16.0 per cent. laid down by the "Butter and Margarine Act, 1907," and the "Sale of Butter Regulations, 1902."

MARGARINE.

13. Actual adulteration could not be certified with respect to the four samples of Margarine reported as inferior. They contained the following percentages of water :—15.3, 15.13, 14.83 and 14.26 respectively. (See previous paragraph.)

14. Seventeen of the remaining 39 samples of Margarine, reported as genuine, were found to contain Boric Acid, the amount in each case being under 0.5 per cent. In no case did the amount of Butter Fat in these samples exceed 10 per cent. (Section 8 of the Sale of Food and Drugs Act, 1899.)

SAUSAGES.

15. The seven samples reported as adulterated contained Boric Acid, the particulars being as understated :—

Boron Trioxide.	Equivalent to Boric Acid.	Equivalent to Boric Acid grains per pound.
0·140	0·2479	17·353
0·137	0·2420	16·982 (Informal)
0·135	0·2390	16·730
0·132	0·2337	16·359
0·131	0·2320	16·240
0·130	0·2302	16·114
0·124	0·2196	15·372

VINEGAR.

16. The sample of vinegar reported as adulterated was deficient in Acetic Acid to the extent of 11 per cent.

17. Genuine Vinegar of the lowest strength in Acetic Acid is regarded as containing 4 grammes of Acetic Acid in 100 cubic centimetres of the Vinegar—practically 4 per cent.

SHREDDED BEEF SUET.

18. The sample of Shredded Beef Suet, reported as adulterated, was found to contain 15·4 per cent. of Starchy matter, having the characters of Rice starch.

CREAM.

19. The sample of Cream reported as adulterated contained Boric Acid, the particulars being as understated :—

Boron Trioxide	Equivalent to Boric Acid	Equivalent to Boric Acid.
0·035 per cent.	0·0619 per cent.	4·333 grains per lb.

BRITISH WINES.

20. The following are the particulars relating to the two samples reported as adulterated :—

1. Ginger Wine ... 0·95 grains of Salicylic Acid per pint.
2. Raisin Wine ... 0·84 " " " "

TINNED PEAS.

21. The informal sample reported as adulterated was found to contain 0.005 per cent. of copper, equivalent to 1.38 grains of crystallised sulphate of copper per pound of the peas.

22. The "greening" of vegetables by the use of salts of copper is now prohibited by the new Regulations.

TINNED PINEAPPLE AND HERRING IN TOMATO.

23. The two informal samples reported as adulterated were found to be contaminated with tin in the amounts as understated:—

- | | | |
|------------------|-------------------|------------------------------------|
| 1. Pineapple ... | 0.0157 per cent., | equivalent to 1.099 grains per lb. |
| 2. Herrings ... | 0.0063 | " " " 0.441 " |

24. The presence of Salts of Tin in canned Foods is due to the solvent action of the natural acid of the fruit or vegetable upon the tinned surface of the containing vessel. These Salts are not added directly to the food material as is the case with Copper Salts, when the latter are used for the purpose of imparting a bright green colour to peas and other vegetables. Salts of Tin have an irritant action on the gastro-intestinal tract and their presence in a food would therefore tend to render such food injurious to health.

"COFFEE SHAPE."

25. This informal sample showed evidence of metallic contamination to a very slight extent, but the amount of the sample available was not sufficient to make it possible to identify the metal. It was reported as inferior.

CUSTARD POWDER.

26. Under existing circumstances adulteration cannot be certified with respect to the samples of "Custard Powder" reported as inferior.

27. They all consisted of starch containing a slight amount of colouring matter, and were practically devoid of egg or other proteid material.

28. At present there is no official or generally recognised definition respecting the composition of articles sold as "Custard Powder," and the sale of such preparations appears to have become established as a Trade Custom; the absence of egg material makes it necessary, however, to regard such samples as inferior.

COFFEE AND CHICORY MIXTURE.

29. The four samples submitted were all certified to be genuine. They contained the following percentages of Chicory—35, 32, 30 and 26.8, the descriptions applied to the articles were therefore justified.

LARD.

30. Actual adulteration could not be certified with respect to the sample of Lard reported as inferior.

COCOA, COFFEE, TEA, SUGAR, FLOUR, PEPPER, MUSTARD COMPOUND, BAKING POWDER, GROUND ALMONDS, GROUND GINGER, GROUND RICE, ARROWROOT, RICE, SARDINES, APPLES, SYRUP OF FIGS, PEA FLOUR, BLANCMANGE POWDER, LEMONADE POWDER, CORNFLOUR, CHEESE AND JELLY.

31. These samples were found to have the composition of unadulterated samples of the articles named, or of samples which must be regarded as unadulterated, and they were therefore certified to be genuine. One was submitted as an "Informal" sample. (See Table I.)

PUBLIC HEALTH (PRESERVATIVES, ETC., IN FOOD) AMENDMENT REGULATIONS, 1926.

These Regulations, as now amended, came into operation—*with the exceptions mentioned below*—with respect to all foods, and beverages, on the 1st January, 1927.

Until the 1st July this year, they will not apply to Bacon, Ham, Egg-yolk, and articles of food containing preservatives, necessarily introduced, by the use in their preparation, of Preserved Margarine.

Until 1st January, 1928, they will not apply to Butter, Cream, and those articles of food containing preservatives, introduced by the use of Bacon, Ham, Egg-yolk, or Preserved Cream.

Until 1st July, 1928, they will not apply to articles of food, containing preservatives introduced by the use of Preserved Cream.

Under these Regulations, the *only* preserving agents permitted are: Benzoic Acid and Sulphur Di-oxide, and these only in certain foods, and beverages, the amounts allowable being within the limits laid down in the Schedules of the said Regulations.

When these preservatives are employed the fact must be notified to the purchaser.

I have the honour to be,

Mr. Mayor, Ladies and Gentlemen,

Your obedient Servant,

B. HENRY GERRANS, F.I.C.,
Public Analyst.

