Annual report of the Medical Officer of Health for Chelsea, 1927.

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Metropolitan Borough of Chelsea.

Annual Report

OF THE

Medical Officer of Health

FOR

CHELSEA.

1927.

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.

London:

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Public Health, Maternity and Child Welfare Committee.

At 31st December, 1927.

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

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Report of the Public Analyst for 1927 ...

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 1927.

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 63,690, a figure which is below that for last year. The birth rate (13·4) is approximately the same as that for last year (13·3). The marriage rate (10·8) is higher than that for last year (9·1). The death rate (14·1) is higher than that for London generally (11·9) and compares with 12·5 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—and that one-half of all deaths in Chelsea occur in persons over 65 years of age. The infant mortality rate was 76, as compared with 64 last year. An unusually high proportion of these infants were born in Hospitals and Institutions and death occurred there shortly after birth.

The total incidence of notifiable infectious disease was diminished last year. The numbers of cases of diphtheria and erysipelas were much less, while those of pneumonia and scarlet fever remained, approximately, the same. At the end of the year there were 315 cases of pulmonary tuberculosis and 62 cases of non-pulmonary tuberculosis known to be living in the Borough—a total almost identical with that for last year. These figures indicate that the general improvement in the public health of the Borough continues to be maintained.

Maternity and Child Welfare work has continued to grow in extent and in usefulness during the year. The attendances at the welfare centres were 5,804 in 1927 and 8,430 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. An official inquiry by the Ministry of Health was held in October last, and it is hoped that sanction for the Borough Council's Scheme will be obtained in due course. 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, 1927.

SECTION I. NATURAL AND SOCIAL CONDITIONS OF THE BOROUGH.

GENERAL STATISTICS.

TABLE No. 1.

Area									(acres) 660
Popula	ation :-								
	ensus,					.4.			63,700
(E	Estimate	d, 192	7)		***			***	63,690
Numbe	er of In	habite	d Hou	ses, 19	21				10,355
	er of fa						1		16,555
Rateal	ole valu	e, Oct	ober, 1	1927					£1,070,666
Sum r	epresent	ted by	a pen	ny rat	e, Octo	ober, 1	927		£4,320

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:—

	TA	BLE N	10. 2.				
Births—Legitimate						770	
" Illegitimate						86	
							856
Birth Rate							13.4
Deaths							901
Death Rate							14.1
Number of women dying	in, or	in cons	sequenc	ce of cl	nildbirt	h	3
(a) From sepsis							2
(b) From other caus							1
Deaths of infants under							65
(a) Legitimate							49
(b) Illegitimate							16
Infantile Mortality Rate							76
Deaths from Measles (all							3
" " Whooping							6
" " Diarrhœa (5)				14
Zymotic Death Rate						***	0.4
Deaths from the Zymoti					***		28
Tuberculosis Death Rate							1.03

BIRTHS.

During the year 982 births were registered in Chelsea, 500 being boys and 482 girls. Of these, births of non-parishioners account for 308, and must be deducted. In addition, there were 182 births amongst Chelsea mothers in Lying-in Hospitals and elsewhere outside the Borough, 83 boys and 99 girls. Thus the total number of Chelsea births for the year was 856, of which 431 were males and 425 females.

The following Tables are self-explanatory:-

TABLE No. 3.
BIRTHS AND BIRTH-RATES.

Year.	Births.	Birth-rate per 1,000.	Birth-rate London.
1926	862	13.3	17 · 1
1927	856	13-4	16-1

TABLE No. 4.
BIRTHS IN WARDS.

Year.	Hans Town.	Royal Hospital.	Church.	Cheyne.	Stanley.	Total.
1926	121	91	132	122	396	862
1927	110	94	146	114	392	856

TABLE No. 5.

Notification of Births.

	1926.	1927
Living Children	610	618
Still-born Children	22	16
	632	634
Notified by Medical Practitioners	115	142
" St. George's Hospital, Extern Department .	15	12
,, ,, Midwives	371	339
,, ,, Chelsea Institution	90	117
,, ,, Parents, etc	41	24
	632	634
Percentage of notified births of Chelsea residents registered in the Borough	94	94

TABLE No. 6.

INWARD TRANSFERS (1927).

Confinements in Hospitals ou	itside the Borough		 117
,, Nursing Hor	mes outside the Borough		 40
., private resid	lences outside the Borough	1	 25
			. 182

It will be observed that the number of births of Chelsea Infants in Hospitals and elsewhere outside Chelsea accounted for 21·2 per cent. of the total births. In the preceding year the percentage was 24·8 per cent.

Chelsea births in Hospitals outside the Borough were distributed during the year as follows:—St. George's Hospital, 53; Queen Charlotte's Hospital, 21; Clapham Maternity Hospital, 5; General Lying-in Hospital, Lambeth, 9; Charing Cross Hospital, 3; Royal Free Hospital, 5; St. Thomas' Hospital, 3; Westminster Hospital, 5; City of London Maternity Hospital, 4; Miscellaneous Hospitals, 9.

Chelsea births in Hospitals and Maternity Homes within the Borough during the year numbered 159. These were distributed as follows:—St. Luke's Hospital, 122; Ormond Maternity Home, 33; St. Stephen's

Hospital, 4.

Illegitimate Births. The following Table shows the number of illegitimate births and the illegitimate birth rate per 1,000 births. In 1927, 135 such births were registered in Chelsea, and 29 inward transfers and 78 outward transfers were made by the Registrar General. The nett figure for the Borough is therefore 86.

TABLE No. 7.

Year.	Number of Illegitimate births.	Ill	egitimate birth rate per 1,000 births.
1926	 73		85
1927	 86	***	100 · 4

MARRIAGES.

There were 690 marriages registered in the Borough during the year (602 in 1926). The marriage rate (number of marriages per 1,000 of population) was $10 \cdot 8$. In the preceding year the marriage rate was $9 \cdot 1$.

DEATHS.

The total deaths registered in the Borough during the year were 1,698 Transferable deaths of non-residents registered in the Borough numbered 967, 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 901 and the death rate was 14·1 per 1,000.

The death rate for England and Wales was 12·3, for London 11·9, and the mean death rate for the 107 Great Towns was 12·2.

The number of nett deaths in the Borough and the corresponding death rates were as shown in the following table:—

TABLE No. 8.

	Y	ear.		Nett Deaths.	Death Rate.
1926			 	812	12.5
1927		6	 	901	14-1

The seasonal mortality in the four quarters of 1927 was as follows:— First quarter, $19 \cdot 2$; second quarter, $13 \cdot 2$; third quarter, $10 \cdot 3$; fourth quarter, $13 \cdot 9$.

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 1927 deaths of pensioners in the Royal Hospital, Chelsea, accounted for 67 deaths, inward transfers included (equivalent to 1.05 of the death rate).

DEATHS IN PUBLIC INSTITUTIONS.

In tabular form is shown b∈low the number of deaths of Chelsea residents which took place in various Institutions during the year. Of the 731 Chelsea deaths registered in the Borough, 412 occurred in Institutions within the Borough.

TABLE No. 9.

Hospitals or Institutions wi	thin t	the Boro	ough.	Number of Deaths.
St. Luke's Hospital and Chelsea	Insti	tution .		 331
Royal Hospital for Pensioners				 6)
Cancer Hospital				 7
Victoria Hospital for Children,				 6
St. Stephen's Hospital (Westmi	nster	Infirma	ary)	 2
Brompton Hospital				 3
Chelsea Hospital for Women				 1
Cheyne Hospital for Children				
Freemasons Hospital				
St. George's Home for Tubercu	losis			 . 2

Of the 967 deaths of non-residents registered in Chelsea, 890 occurred in the foregoing Institutions.

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

General Hospitals		 	54
Mental Hospitals		 	20
Special Hospitals		 	17
Infectious Disease Hospitals		 	7
Tuberculosis Sanatoria, etc.	*	 e	8
Nursing Homes		 	23
Poor Law Institutions		 	4
Private Addresses, etc		 	37

The following Tables are self-explanatory:-

TABLE No. 10.

BIRTH RATE, DEATH RATE AND ANALYSIS OF MORTALITY DURING THE YEAR 1927.

(Provisional figures. The rates have been calculated on a population estimated to the middle of 1927. 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-	Annual Death-rate per 1,000 Population.								RATE PER 1,000 BIRTHS.		PERCENTAGE OF TOTAL DEATHS.				
	PER 1,000 TOTAL POPULA- TION.	All Causes.	Enteric Fever.	Small- pox.	Measles.	Scarlet Fever.	Whooping Cough.	Diph- theria.	Influenza	Violence.	Diarrhœa and Enteritis (under Two years).	Total Deaths under One year.	Certified by Registered Medical Practi- tioners.	Inquest Cases.	Certified by Coroner after P.M. No Inquest.	Uncertified Causes of Death.
England and Wales	16.7	12.3	0.01	0.00	0.09	0.01	0.09	0.07	0.57	.0-51	6.3	69	91 · 7	6.6	0.7*	1.0
107 County Boroughs and Great Towns, including London 155 Smaller Towns (1921 Adjusted Populations 20,000-50,000)	17-1	12.2	0.01	0.00	0.12	0.01	0.10	0.08	0.49	0-46	8.3	71 68	91.9	6.6	0.9*	0.6
London	16-1	11.9	0.01	0.00	0-04	0.01	0.12	0.09	0+39	0.51	7.5	59	90-3	7.9	1.8*	0.0
Chelsea	13.4	14-1	0.01	0.00	0.05	0.00	0.09	0.06	0.60	0.34	16-4	76	90.2	7.1	2.7*	0.0

^{*} The Coroners' (Amendment) Act, 1926, which came into operation on the 1st May, 1927, provided for the registration of deaths on a certificate of the Coroner after P.M. without inquest. These percentages relate therefore to S months of the year only.

TABLE No. 11.

DEATHS OF CHELSEA RESIDENTS REGISTERED DURING THE YEAR 1927, CLASSIFIED BY AGE AND CAUSE.

				EATH:						
Causes of Death.	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 under 75 years.	75 and
All Causes	 901	65	7	13	10	28	75	262	200	241
1. Enteric Fever	 $ \begin{array}{cccccccccccccccccccccccccccccccccccc$	- 3 - 2 - 1 1 12 1 14 23 - 1 8						1		

CAUSES OF DEATH.

Table No. 11 shows that 176 deaths were due to Organic Heart Disease, 141 to Cancer, 32 to Bronchitis, 74 to Pneumonia, 59 to Pulmonary Tuberculosis, 47 to Arterio-sclerosis, 50 to Cerebral Hæmorrhage, 41 to Influenza and 23 to Congenital Debility and Malformation. Fifty per cent. of all deaths occurred in persons over 65 years of age.

Organic Heart Disease. Of the 176 deaths from cardiac diseases, 129 were in persons over the age of 65 years. In 1926, there were 123 deaths from Heart Disease, 89 being persons over the age of 65 years.

Cancer and Malignant Disease. There were 141 deaths from Cancer during the year, as against 116 in 1926.

Seven of the deaths were between the ages of 25 and 45; 70 between the ages of 45 and 65; and 64 above the age of 65 years.

There were 6,591 deaths from Cancer in London during the year, as compared with 6,567 in 1926.

On request, rooms are disinfected after a death from Cancer, and arrangements made for the removal, fumigation or destruction of bedding. During the year 6 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 16 deaths from these diseases as against 14 in 1926. Fourteen of the deaths occurred in infants under the age of twelve months.

During the September quarter the mean temperature was $59 \cdot 5^{\circ}$, as against $61 \cdot 5^{\circ}$ in 1926. The rainfall of the quarter in 1927 was $9 \cdot 8$ inches, as against $6 \cdot 7$ in 1926.

Violence and Suicide. Twenty-two deaths occurred from violence apart from suicide. Suicide was responsible for 20 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 past two years. 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.	Bron-chitis.	Pneu- monia.	Other Respiratory Diseases.	Total.	Death rate.	No. of deaths under 5 years.	Percentage under 5 years.
1926	72	67	2	141	2.2	14	9.9
1927	32	74	14	120	1.9	20	16.6

DEATHS OF CHILDREN 1-5 YEARS OF AGE.

The number of deaths of children between 1-2 years of age was 7, and between 2-5 years, 13. In the previous year these figures were 19 and 20 respectively. The causes of death are given in detail in Table No. 11. Table No. 13 shows the causes of death during the past two years.

TABLE No. 13.

CHILD MORTALITY (1-5 YEARS).

Period or Year.	Infectious Fevers.	Tuber- culosis.	Respiratory Diseases.	Diarrhœal Diseases.	All other causes.	Total Deaths.
1926	22	4	7	_	6	39
1927	6	2	7	_	5	20

INFANT MORTALITY.

There were 65 deaths of infants under one year of age in Chelsea during the year. The corrected death rate is 76 per 1,000 births, as compared with 64 in the previous year.

In London as a whole the rate of infant mortality was 59 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 weeks.	4 weeks and under 3 months.	3-6 months.	6-9 months.	9-12 months.	Total deaths under 1 year.
Measles											1	2	3
Scarlet Fever					***								
Whooping Cou	igh				***				1		1		2
Diphtheria													
Influenza													
Erysipelas													
Tuberculous M													
Abdominal Tu				***	***								
Other Tubercu					***								***
Meningitis				***	***				1		***		1
Convulsions					***								
Laryngitis													
Bronchitis			***	1	***			1			***		1
Pneumonia					***	***			4	2	1	5	12
Diarrhœa and	Enter								5	3	3	3	14
Gastritis													
Syphilis											***		
Rickets						***				***			
Suffication				1 11 11 11					1				1
Injury at Bir				2				2					2
Atelectasis	***			3		***		3	***				3
Congenital Ma				1			1	1	1			1	3
Premature Bir				11	1	2	***	14	1000			100	14
Atrophy, Debi			mus	2	_	1	***	3	***	3	***	***	6
Other causes				3	***	-	***	3	***		***	***	3
orner causes	***	***	***	0	***	***	***	3		***	***	***	.,
				23	1	3		27	13	8	6	11	65
				alo.	-			-	10	-			-

Nett Deaths registered during { Legitimate ... 49 the calendar year | Illegitimate ... 16

The following Table gives the Infant Mortality Rate in Chelsea under various headings, for the past two years:—

TABLE No. 15.

				1926.	1927.
Infectious Diseases		 	 	 7.0	2.9
Diarrhœal Diseases		 	 	 16.3	16.3
Developmental Defe and Wasting	ects	 	 	 23.3	30 · 4
Other causes		 	 	 17-4	23 · 4
Total Rate		 	 	 64 · 0	76.0

TABLE No. 16.

Infantile Mortality Rates per 1,000 Births in Wards.

				1926.	1927.
Hans To	wn			24	45
Royal H	ospital			88	53
Church				68	68
Cheyne				49	105
Stanley		***	***	73	84
				_	_
Chels	sea Bor	ough		64	76
				_	

Illegitimate Deaths. The following Table No. 17 shows the number of deaths among illegitimate infants during the past two years.

TABLE No. 17.

				1926.	1927.
Total number of illegitimat	te birt	hs	 	 73	86
Alive at end of year			 	 47	52
Dead at end of year			 	 7	8
Removed from Borough			 	 19	26

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.

TABLE No. 18.

	1927.
Numbers of persons who received medical relief only	 94
Numbers of persons who received relief (indoor and outdoor)	 5,169

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, 157 notifications being received, compared with 136 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 a decrease in the number of cases of infectious disease, especially in the case of diphtheria. 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.

- (a) The Day Servants Hostel, 29-33, Danvers Street, Chelsea, provides accommodation for 15 unmarried mothers and their infants. Cases are not received until after birth of the child. Daily work is provided by the Hostel and the mothers reside with their babies at night.
- (b) The Hostel for Discharged Woman Prisoners and Police Court Cases, 497, King's Road, Chelsea, provides accommodation for 20 women on discharge from prison or if found homeless. Unmarried mothers, but not illegitimate infants, are received. An expectant mother is retained until confinement approaches. Arrangements are then made for her admission to Hospital. If she is subsequently re-admitted to the Hostel, the infant is settled with a foster mother.
- (c) St. Theresa's Shelter, 43, Smith Street, Chelsea, is a Rescue Home which provides accommodation for nine girls. Cases are detained for some weeks until some suitable employment can be found. In the case of an expectant mother, arrangements are made for her transfer to an appropriate Home or Institution elsewhere in the Metropolis.

Homeless children in general 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 four infant clinics were held weekly—three a 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 66.

Four part-time Medical Officers are employed by the Society—Dr. Grace Nelson, 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 Hea'th, arrangements for the adequate treatment of lactation cases have been instituted. 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, 1927.

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

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 will be found on page 68.

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, 1927.

(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 57.

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, 1927. 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 will be found on page 67.

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, 1927.

PUBLIC HEALTH OFFICERS OF THE BOROUGH COUNCIL.

The names and qualifications of members of the staff of the Public Health Department at 31st December, 1927, are tabulated below in the form required by the Ministry of Health. During the year the Council appointed an additional Sanitary Inspector to deal, inter alia, with Housing duties. All appointments are whole-time except where otherwise indicated.

Year ap- pointed.	Name.		Qualifications.	Appointment.
*1924	McCarthy, W. H.	L.	M.D., M.R.C.P., D.P.H.	Medical Officer of Health, Administra- tive Tuberculosis Of- ficer and Executive Officer under the Council's Maternity and Child Welfare Scheme (Part time)
1925	Gerrans, B. H.	***	F.I.C	Public Analyst (Part
*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
*1927	Castley, J		Cert. San. Insp. Exam. Board, Cert. Meat and Other Foods	Sanitary Inspector, with special reference to Duties under Housing Act, 1925.

^{*} Salary contributions made under Public Health Acts.

Year ap- pointed.	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. Cert. C.M.B.	Health Visitor

^{*} Salary contributions made under Public Health Acts.

Clerical Staff:

A. B. J. Hayden, Senior Clerk.

E. Bosley.

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

Other Staff:

Mortuary Keeper	and	Messen	ger		C. Leonard.
Chief Disinfector		***	***	***	E. Hancock.
Disinfector			***		G. Cowper.
Shelter Attendant					Mrs. A. Hatch.
Cleansing Attenda	nt			***	Mrs E. Smith.
Home Helps					Mrs. Springett, Mrs. Bonny. Mrs. Dawson. Mrs. White. Mrs. Giles.

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. Kathleen Matthews.

Dr. Grace Nelson.

Dr. Margaret Rorke.

[†] Salary contributions made by Exchequer Grants.

HEALTH VISITORS (Whole Time).

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

Clerk ... Miss Godfrey.

CHELSEA TUBERCULOSIS DISPENSARY.

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

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 the year on behalf of the Borough Council will be found on page 65.

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, 1927. The total fees paid by the Council for nurses' visits during the year amounted to £115 15s. 6d.

(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 64).

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 11 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 the year 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 527. Of these, 418 were for the bacillus associated with Diphtheria, 71 for the bacillus associated with Tuberculosis and 10 for suspected organisms in Ante-natal cases. Twenty-six specimens of blood were examined for the Wassermann reaction, one for the Widal reaction, and one for Dysentery. The total cost of these services to the Borough Council was £105 9s. 9d.

The total cost of bacteriological examinations during the preceding year was 409.

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 114,000 units. An anti-toxin syringe, needles and steriliser are also available on loan.

The total cost to the Council for anti-toxin supplied during the year was £7 11s. 6d.

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 a confirming byelaw (approved by the Home Office) has now been made to continue and enforce its provisions. In addition, the assistance of the Metropolitan Police in reporting cases of breach of the byelaw has been authorised.

SECTION III.—SANITARY CIRCUMSTANCES AND ADMINISTRATION.

Complaints. The number of complaints received during the year was 482, compared with 475 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, the number of intimation notices served was 886. The number of statutory notices was 216. These compare with 826 and 214, respectively, in 1926. In four 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.

Inspections.								
On complaint of nuisa	nce (from	all s	sources)					720
On notification of infe			***		***			221
House-to-house	***				***			310
Re-inspections made	***		***		***			5,667
Inspection of-								
Bakehouses								27
Slaughter houses	***		***		***	***		62
Milk shops			***		***		***	88
Ice cream premises								33
Houses let in lodgings				***				140
Stables			***					15
Restaurant kitchens			***		***			36
Marine stores			***	***		***	***	10
Food premises other th			***	***	***		+++	102
Premises under Meat I		ns			***	***	***	62
Factories and Worksho	ops			***	***			898
Outworkers' premises	***							72
Other visits	***	***			***			357

Inspection of—								
Traminana meminan				***		***		27
Dot onquirios		***					***	68
Complex chargestions						***	***	17
Total .		***		***		***	***	8,932
								-
Premises.								
Walls and ceilings cleans								20
(a) Premises through			***	***	***	***	***	58
(b) ,, partial			***	***	***	***	***	378
(c) Verminous rooms				***	***	***	***	131
(d) Total number of		clea	nsed	***	***		***	1,389
Wash-house walls cleanse	-		***	***	***	***	***	219
Wash-house roofs repaire	-		***	***	***	***	***	56 84
Yard and area walls clear			***	***	***	***		212
Defective roofs repaired .			***	***	***	***	***	85
Defective gutters repaire		in d	***	***	***	***	***	65
Defective rain water pipe		ired	***	***	***	***	***	208
	**	***		***	***	***	***	485
	and a	***	***	***	***		***	47
Wash-house floors repaire		oto.	***	***	***	***	***	326
Yard surfaces repaired, p			mand				***	8
Ashpits demolished and s				***	***	***		
Ashpits cleansed			***		***			112
New and proper dust bin	s prov	abt	and w	ontilatio		light	and	112
Workrooms provided w			and v	rentilatio	on or	light	and	3
ventilation improved	1			***	***	***	***	
Drainage.								65
	**	***	***	***		***	***	18
	**	***	***	***		***		18
	trane	Dros	idad	***	***		***	95
Inspection chambers and	maps			***	***	***	***	44
Fresh air inlets provided				434		***	***	33
Fresh air inlets repaired		***			***		***	128
				***				44
		***	***		***		***	61
New soil pipes provided . New ventilation pipes pr			***	***	***		***	67
Soil and ventilation pipes			***	***	***			18
Anti-syphonage pipes pro								7
4 4 10	···			***				10
* ' '								30
New covers provided to i								24
Rain water pipes disconn								
1 111		***		***		 b		40
Sink wastes provided wit								101
Sink waste pipes repaired	_							17
Sink waste pipes cleansed								7
37 1 3 1 3 1						***		56
Bath and lavatory waste								6
New lavatory basins fixe								1
NT 1 11 6 1								1
1.7.1.4.						***	***	
Water Closets.								
Improvements to sanitar	v conv	renie	nces (fa	actories.	works	shops,	etc.)	12
New water closet pans ar								174
Water closet pans (foul)					***	***	***	12
Choked water closet pans								5
Water waste preventers							***	32
Waste water preventers				***		***		19
Overflows to water waste								2
Walls and ceilings of wa								191
Water closet roofs repair	4							39
Ventilation and light pro						***		10
Water closet floors relaid							***	13

Water Supply.										
Water suj										13
Water suj										10
Water clo New drin							ing ap	paratu	5	4
Drinking										45
Drinking	water	cisterns	repair	ed			***		***	2
Drinking	water	cisterns	provid	ed wit	th new	covers	or cov	ers rep	aired	29
Smoke Nuisan	ces.									
Number o			5			***		***		17
Number of			***	***		***	***	***		6
Number of			***							

Nuisances Aba Keeping a				er ma	nner o	r place				5
Defective										1
Accumula							***			41
Dead anii								***		. 8
Overcrow	ding		***		***			***	***	5
Food Condemi	ned an	d Destr	oyed.							
Pigs	***				***	***	***	***		1
Chicken Haddock			***			***		***	***	2 stones
Whelks								***		2 stones 1 bag
Eggs										4 boxes
Salmon		***				***	***		***	50 lb.
Disinfection.										
Premises						liseases	(Scar	rlet F	ever,	000
Diph	theria,	etc.)	Talan			***	***		***	293
Rooms di Rooms fu							ione		***	110 131
Miscellane	700			us and		condit				46
Certificate					***	***	***			229
School No	otices a	after dis	infection	on						191
Proceedings T										
Intimatio				***						886
Statutory									***	198
Statutory Statutory								15	***	18
Total nun									Food	
		Acts								311
Samples of										2
Samples of								***	***	- 00
Samples (Legal pr					respect		lefectiv	e san	itary	89
		and nuis						***		5
Legal pro										5
Legal pro	ceedin	gs in res	spect to	unso	und fo	od				_
Certificate			cordan	ce wit	h " Re	nt Res	triction	Acts	***	_
Cleansing and			-							
Number of				***	***		***	***	***	1,023
Number of				cleans	ed and	disinfe	ected			580
Number of							***			_
Number of						ed				572
Number o	of artic	les (var								266
Disinfection St										
Persons a		nodated-								
Adul: Child			***	***	***	***			***	1
	LUII			***	***			***	***	
Mortuary. Number of	of bodi	es receiv	ved							118
Number o										
Number of										-

TABLE No. 19.

MAGISTERIAL PROCEEDINGS DURING THE YEAR UNDER PUBLIC HEALTH (LONDON) ACT, 1891:

Situation of Premises.	Nature of Nuisance or Complaint.	Petty Sessions.	Date of Hearing.	Result.
Falstaff House, Dartrey Road	Premises without suffi- cient ashpits (dustbins)	Kensington	20/12/27	Fined £2. Costs 10s.
7, Smith Terrace	Defective wash-house roof	Kensington	20/12/27	Abatement Order— 14 days.
19 Seaton Street	Rooms dirty. Dampness. Defective drain.	Kensington	4/10/27	Abatement Order— 28 days.
31 College Place	Defective roof. Rooms dirty.	Kensington	27/9/27	Withdrawn on pay- ment of costs.
	Nuisances	BY Dogs.		
_	Failing to comply with Council's Bye-law re fouling of footway by dogs in King's Road.	Kensington	20/12/27	Fine 10s.

Smoke Abatement. It is part of the work of a Sanitary Inspector to observe any nuisance arising from smoke and while there were only 17 recorded instances of observations during the year the chimneys in the Borough can be regarded as being subject to daily observation by the Inspectors. There were six complaints of smoke nuisances during the year and cautionary letters were sent to the offenders.

Fouling of Footpaths by Dogs. The Borough Council have obtained sanction for a bye-law to deal with this nuisance. 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 180 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 the year was £11 14s. 0d.

Nuisance caused by Pigeons. During the year further 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.

Until recently a Sanitary Authority had no powers to deal with nuisance caused by pigeons; in fact, there were restraining enactments which prevented 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.

A recent London County Council (General Powers) Act now enables a Sanitary Authority to take necessary steps to reduce the number of pigeons within its area and it is hoped that the nuisance referred to will be abated expeditiously as a result of the measures shortly to come into operation.

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 280. The number of inspections of these premises was 898, which compares with 886 in 1926. Sanitary defects were found in 30 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.

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

		Number of	,
Premises.	Inspections. (2)	Written Notices. (3)	Occupiers prosecuted. (4)
Factories (including Factory Laundries)	72	4	-
Workshops (including Workshop Laundries)	789	24	_
Workplaces (other than Outworkers' premises)	37	2	-
Total	898	30	_

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

	Nu	mber of Def	ects.	Number of offences in		
Particulars.	Found.	Remedied.	Referred to H.M. Inspector.	respect to		
(1)	(2)	(3)	(4)	(5)		
Nuisances under the Public Health Acts :—*						
Want of cleanliness	6	6				
Want of ventilation	3					
Overcrowding	3	3 3				
Want of drainage of floors	1	1	_	_		
Other nuisances	8	8	_	-		
Sanitary accommodation—						
Insufficient	3	3	_			
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	30	30				

^{*} 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.

	0	No. of	in some es,	I P	k in ed ses.							
		from Employers, d		Number of Ad- dresses of out-	of Ad- dresses					Secs. 109, 110		
	Lists.	Chelsea Out- workers.		workers for- warded to other Councils.	cutions.	Out- workers Premises.	Instances.	Notices serv	Prosecutions.	Instances	Orders made (Sec. 109).	
1926	23	23	45	404	_	105	5	6	_	_	-	-
1927	22	26	36	185	_	72	_		-	_	-	-

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.

In the course of the year improvement was effected in the drainage system and sanitary arrangements. Additional equipment was provided and the premises were redecorated throughout.

Number of Bodies received in	Mor	tuary	during	1929		118
1. To await Inquests—						
(a) Infectious					-	
(b) Non-infectious					111	
2. To await burial					7	
3. Sanitary grounds					-	
Number of Post-Mortem exam	ninat	ions				54

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 1927.

1. General.	
Number of New houses erected during the year :-	
(a) Total (including numbers given separately under (b))(b) With State assistance under Housing Acts:—	144
(i.) By the Local Authority	0
(ii.) By other bodies or persons	0
2. Unfit Dwelling Houses.	
I.—Inspection.	
(1) Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts)	1,079
(2) Number of dwelling houses which were inspected and recorded (House-to-house inspections)	187
(3) Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human	
habitation	0
(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	886
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)	670
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	0
(2) Number of dwelling houses which were rendered fit—	
(a) by owners	0
(b) by Local Authority in default of owners	0
(3) Number of dwelling houses in respect of which Closing Orders became operative in pursuance of declarations	
by owners of intention to close	0

B. Proceedings under Public Health Acts.	
(1) Number of dwelling houses in respect of which notices were served requiring defects to be remedied	886
(2) Number of dwelling houses in which defects were remedied after service of formal notices—	
(a) by owners	216
(b) by Local Authority in default of owners	0
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	0
(2) Number of dwelling houses in respect of which Closing Orders were made	0
(3) Number of dwelling houses in respect of which Closing Orders were determined, the dwelling houses having	
been rendered fit	2
(4) Number of dwelling houses in respect of which Demo- lition Orders were made	0
(5) Number of dwelling houses demolished in pursuance of Demolition Orders	0

Staff. The staff engaged on housing work during the year consisted of four 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 artizan 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:—

			Popula	ation.
Sir Thomas More Buildings, Beaufe	ort Str	eet	 	770
Pond House, Pond Place			 	130
Onslow Dwellings, Pond Place		***	 	380
Grove Buildings, Manor Street			 	300
				1,580

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

0 45 10110115.		Popu	lation.
Sutton Model Dwellings, Cale Street	 		2,200
Lewis Trust Dwellings, Pond Place	 		1,390
Marlborough Buildings, Walton Street	 		E00
Guinness Buildings, Draycott Avenue	 		940
Peabody Buildings, Lawrence Street	 		200
Chelsea Park Dwellings, King's Road	 		170
			- 100
			5,400

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 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 proportion of the 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. Sixty 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 1926, 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.

No action was taken during the year in respect of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation. The total number of dwelling houses inspected for housing defects during the year was 1,079, the number found not to be in all respects reasonably fit for human habitation being 886. The number rendered fit in consequence of informal action by the Sanitary Inspectors was 670 and the number in respect of which statutory notices were served requiring defects to be remedied was 216. 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. No representation 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. The new byelaws under Section 6 of the 1925 Housing Act, issued by the London County Council, will be of immense assistance in dealing adequately with present-day housing conditions when they become fully operative.

Housing Survey. House-to-house inspection was carried out during the year, as provided by statute, 187 houses being inspected and recorded by the Inspector.

Statements have continued to appear 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 16 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,	1926		76	_	76
Vacated during the year			7	-	7
Added during the year		***	16	-	16
On Register 31st December,	1927		85	-	85

There were 25 applications from 10 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 past two years.

TABLE No. 23.

LICENCES GRANTED UNDER MILK (SPECIAL DESIGNATIONS) ORDER.

Order.	1926.	1927.
To sell "Certified" Milk	13	10
To sell "Grade A" Milk	_	1
To sell "Grade A (Tuberculin Tested)" Milk	-8	6
To sell " Pasteurised " Milk	8	8
	29	25

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

There were 88 inspections of dairies and milkshops made in the Borough. Notices were served requiring remedy of defects found on one 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, 28 premises were shown in the Register as places where ice-cream is prepared or sold. There were 31 inspections of these premises as compared with 65 in the previous year. 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 20 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 27 inspections of these premises were made during the year. Five notices were served for the cleansing of walls and ceilings.

Slaughter-houses. There are now two private slaughter-houses in the Borough and 62 inspections of these premises were made during 1927. 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, 1927.	In December, 1927
Registered	 	 	 _	_
Licensed	 	 	 2	2
Total	 	 	 2	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 past two years, 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.

				19	26.	192	27.
Nature of Pre	mises			No. on Register.	No. of Inspec- tions.	No. on Register.	No. of Inspec- tions.
Cowsheds				_		_	_
Slaughter Houses				2	133	2	62
Mills Chops				76	183	76	88
Ice Cream Premises		***	***	59	65	28	31
Bakehouses				26	38	26	27
Restaurant Kitchens				32	55	32	36
Food Premises (other than	above	e)		90	194	90	102

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. During the year the number of animals inspected at the time of slaughter was 453 (131 pigs, 320 sheep, and 2 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.

Unsound Food. On six occasions during the year unsound food was surrendered and destroyed. Included in the food surrendered was:—1 chicken, 4 boxes of eggs, 50 lbs. salmon, 2 stone of haddock, and 1 bag of whelks. The number of carcases destroyed on account of Tuberculosis was one—a pig.

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 two samples, including 161 samples of milk and two samples of cream, were taken and submitted for analysis during the year. 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 four 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.

During the year, five samples of milk were found adulterated to such a degree as to justify legal proceedings. These proceedings were instituted and four convictions were obtained. Details of these proceedings are given in Table No. 26.

The work carried out under the Food and Drugs Acts during the year 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 1927.

Street where Purchased.	Offence.	Petty Sessions.	Date of Hearing.	Result.		
Milmans Street	For selling Milk from which 7 per cent. of Milk Fat had been abstracted	Kensington	20/12/27	Conviction. Fine		
Kings Road 11/12/27	For selling Milk to which had been added 4 per cent. of Water	Kensington	6/3/28	Costs £2 2s.		
Stadium Street 12/12/27	For selling Milk to which had been added 4.2 per cent. of Water For selling Milk to which			Conviction. Penalty Conviction. inclu-		
	had been added 4 per cent. of Water	Kensington	6/3/28	ding		
	For selling Milk to which had been added 3.5 per cent. of Water			Conviction. £2 2s.		

PUBLIC HEALTH ACTS.

Where offence occurred.	Offence.	Petty Sessions.	Date of Hearing.	Result.
Christ Church Terrace	Carrying on trade of pur- veyor of Milk without being registered as such			Conviction. Fine £2 2s.
Christ Church Terrace	Delivering Milk in bottles not filled and closed on registered premises	Kensington	17/5/27	Conviction. £1 1s. Fine £2 2s.
Christ Church Terrace	Delivering Milk in bottles not filled and closed on registered premises	Kensington	17/5/27	Conviction. Fine £1.
Upper Manor Street	Carrying on trade of pur- veyor of Milk without being registered as such	Kensington	5/7/27	Conviction. Fine £4. Costs £1
Meek Street	Delivering Milk in bottles not filled on registered premises	Kensington	4/10/27	Conviction. Fine £1.
Anderson Street	Delivering Milk in bottles not filled on registered premises	Kensington	4/10/27	Conviction. Fine £1.
Cheyne Walk	Delivering Milk in a bottle not filled and closed on registered premises	Kensington	4/10/27	Conviction. Fine £2.
Cheyne Walk	Delivering Milk in a bottle not filled and closed on registered premises by his servant	Kensington	4/10/27	Conviction. Fine £2.
Stadium Street	Carrying on trade of dairyman without being registered as such	Kensington	4/10/27	Conviction. Fine 10s.

SECTION VI.-INFECTIOUS DISEASES.

(a) INFECTIOUS DISEASES GENERALLY.

DISEASES COMPULSORILY NOTIFIABLE IN THE BOROUGH.

Acute Poliomyelitis.

Acute Polio-encephalitis.

Acute Encephalitis Lethargica.

Acute Primary Pneumonia.

Acute Influenzal Pneumonia.

Cerebro-spinal Fever.

Plague.

Anthrax.

Glanders.

Hydrophobia.

Cholera.

Continued Fever.

Ophthalmia Neonatorum.

Diphtheria.

Membranous Croup.

Dysentery.

Erysipelas.

Malaria.

Puerperal Fever and Puerperal

Pyrexia.

Relapsing Fever.

Small-pox.

Typhus Fever.

Tuberculosis.

Scarlatina or Scarlet Fever.

Typhoid or Enteric Fever.

NOTIFICATIONS DURING THE YEAR.

The total number of notifications, excluding duplicates, was 616. Of this figure, 117 were notifications of Pulmonary Tuberculosis and 12 of Non-pulmonary Tuberculosis. In addition, 318 cases of Measles came to the knowledge of the Department, mainly through the School Authority.

Compared with the previous year, there was a decrease of 80 in the number of cases of Diphtheria. The number of cases of Scarlet Fever (135), represents an increase of 21 as compared with that for 1926. The notifications of Tuberculosis remain approximately the same as in the previous year. In 1926, there were 9 deaths from non-notified Tuberculosis, while in 1927 there were also 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.

			Cases 1	notified	in Che	elsea.			Re-
	At all Ages.	Under 1 Year.		5-15 Years.	15-25 Years.	25-45 Years.	45-65 Years.	65 and up- wards.	to variou Hos-
Small-pox	-	-	-	_	_	_	_	_	_
Cholera		-		-	-		-	-	-
Diphtheria	127	2	39	56	14	11	5	-	122
Erysipelas	18	-	-	-	1	5	7	5	12
Scarlet Fever	135	4	25	85	13	7	1	-	125
Typhus Fever	_	-	-	-		-	-	-	1
Enteric Fever	6	-	_	1	2	1	2	-	3
Puerperal Fever	7	-	-		2	5	-	-	7
Puerperal pyrexia	14	-		-	3	11	-	-	9
Cerebro-Spinal Fever	2	2	_	_		_	-	_	2
Ophthalmia									
Neonatorum	18	18		_	-	-	_	_	5
Poliomyelitis	-	-	-	-	-	-	-	-	-
Encephalitis Lethargica	_	_	_			_			-
Polio-encephalitis	_				_				
Malaria	2				_	1	1	_	
Dysentery	1	_			_	î			
Trench Fever	-	-	-	-	-	-	-	-	-
Acute Primary Pneumonia	132	15	27	14	3	34	25	14	103
Acute Influenzal									
Pneumonia	25	1	2	3	-	7	10	2	11
Total	487	42	93	159	38	83	51	21	399
Tuberculosis :— Pulmonary Non-Pulmonary	117 12	1		3 3	29 2	42 3	35 1	7	
Totals (Tubercu- losis)	129	1	3	6	31	45	36	7	
Totals	616	43	96	165	69	128	87	28	

No cases of Small-pox, Cholera, Typhus Fever, Poliomyelitis, Encephalitis Lethargica, Polio-encephalitis, Trench Fever, Continued Fever, Relapsing Fever, Plague, Anthrax, Glanders or Hydrophobia were notified during the year.

DIPHTHERIA.

Notifications. During the year 127 cases of diphtheria were notified, as compared with 207 in the previous year. The incidence of the disease during the past two years is shown in Table No. 28.

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

Return Cases. No return case occurred during the year.

TABLE No. 28.

Cases of Diphtheria during the Years 1926 and 1927.

Per- Cases cent-			Case	age of	Month of	Ва		copic D	iagnosis ute.	,			
Year.	Cases Noti- fied.		Deaths		l- of School	of School age (3-13	tal- y School age (3-13	est preva- lence.	No. of Speci- mens sub- mitted		Percentage Positive.	Nega- tive.	Per- cent- age Nega- tive.
1926	207	98	6	2.9	55	Mar.	317	33	10.4	284	89.6		
1927	127	96	4	3.1	56	Nov.	418	39	9.3	379	90.7		

It will be observed that the number of cases notified in 1927 was fairly low, and that the percentage of removals to the M.A.B. Hospitals was high. On the other hand, the case fatality rate was somewhat higher than that for 1926.

Information was received from the M.A.B. that 9 of the cases sent to Hospital in the course of the year proved not to be suffering from diphtheria.

Of the 127 cases notified, 43 occurred in Stanley Ward, 39 in Church Ward, 13 in Cheyne Ward, 19 in Hans Town Ward, and 13 in Royal Hospital Ward.

During 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 the year, eighteen bulbs of serum were supplied to medical practitioners, the cost to the Council being £7 11s. 6d. 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, 135 cases of Scarlet Fever were notified, the figure for 1926 being 114. Information was received from the M.A.B. Hospitals that nine of the cases proved not to be Scarlet Fever. One "return" case of the disease was discovered during the year and necessary action taken.

Table No. 30 shows the incidence of the disease during the past two years, while Table No. 31 cover the quinquennial periods since 1911.

Deaths. There was no death from Scarlet Fever during the year.

TABLE No. 30.

Ye	Year. Cases Notified.		Percentage of Removals.	Deaths.	Case Fatality Rate.	Percentage of cases of School-age 3-13 years.	Month of	
1926		114	94	1	0.9	76	Mar.	
1927		135	93	_	_	67	Oct.	

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 318, as compared with 631 in 1926.

Deaths. The number of deaths was 3, all of which were in children under one year of age.

Visiting and Nursing. During the year, 377 visits and re-visits were made by the Health Visitors. Cases are also visited by the District Nurses whenever circumstances render this necessary. Thirty nurses' visits were required in 1927.

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 54 such cases were removed. In addition a large number were admitted to St. Luise's Hospital for treatment.

ENTERIC FEVER.

Notifications. During the year the number of cases of Enteric fever notified in Chelsea was 6.

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

TABLE No. 32.

Sex.	Age.	Notification.	Removed.	Nursed at Home.	Remarks.
F.	30	Para-Typhoid B	Nursing Home	-	Infection. (? Abroad.)
F.	19	Para-Typhoid B	-	Yes	No cause suspected.
M.	14	Typhoid	St. George's Hospital	-	Very slight case.
F.	56	Para-Typhoid B	-	Yes	Fatal.
M.	58	Typhoid		Yes	Probably oysters.
F.	21	Enteric	-	Yes	Doubtful case. Two blood tests proved ne- gative.

Deaths. There was one death from Enteric Fever during the year.

A summary of Enteric and Para-Typhoid B cases for the past two years is given below:—

TABLE No. 33.

¥7		Enteric.		Para Typhoid B.				
Year.	Cases.	Recovered.	Fatal.	Cases.	Recovered.	Fatal.		
1926	1	1		1	1	-		
1927	3	3		3	2	1		

One specimen of blood was 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	 	 	 157
Malaria	 	 	 2
Dysentery	 	 	 1
Trench Fever	 	 	 None

(Notification of Trench Fever is to be discontinued as from 31/12/1927.)

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 the past two years were as follows:—

			Notification	is.	Deaths.
1926			 145		67
1927			 157		74

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.

Two cases of Malaria were notified during the year.

PUERPERAL FEVER AND PUERPERAL PYREXIA.

Seven cases of Puerperal Fever and fourteen cases of Puerperal Pyrexia were notified during the year. Of these, sixteen were treated in hospital.

OPHTHALMIA NEONATORUM.

Eighteen cases of ophthalmia neonatorum were notified during the year. Five of these cases were treated 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	Vision	Total		
No.	Tre	eated.	Un-		Blindness.	Deaths.	
Notified.	At Home.	In Hospital.	impaired.				
18	13	5	18	_	_		

Nine cases of the disease were notified the previous year.

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

INFLUENZA.

Influenza caused 41 deaths in 1927, as against 11 in the previous year. There was no serious epidemic prevalence of the disease 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, where circumstances render this necessary.

POLIOMYELITIS AND POLIO-ENCEPHALITIS.

No cases of Poliomyelitis and Polio-Encephalitis were notified during the year.

ENCEPHALITIS LETHARGICA.

No further case of Encephalitis Lethargica was notified during the year. Six visits to old cases of Encephalitis Lethargica were made by the Woman Sanitary Inspector during the year.

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 1926 and 1927.

TABLE No. 35.

Yea	r.	Cases Notified in Chelsea.	Removed to Hospital.	Deaths notified during year in Chelsea.	Cases notified in London.	Deaths notified in London	
1926		3	3	1*	229	87	
1927		_			149	77	

^{*} 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 past two years. These are shown in Table No. 36. The complete figures for 1927 are not yet available.

TABLE No. 36.

				1925.	1926.
No. of primary vaccinations performed	***	***	***	756	766
No. of infants died unvaccinated				44	52
To. removed to other districts				24	34
o. removed to unknown addresses				24 55	36
	***	***	***	18	17
lo. postponed by medical certificate	***	***	***		
No. of certificates of exemption issued				149	151

Small number of cases were insusceptible and outstanding in each year. (The above table is based on total births occurring in Chelsea and is not confined to parishioners.)

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 disinfector 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. Forty such disinfections were carried out during the year, the total charges amounting to £24 11s. 6d.

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	580
Number of Articles (bedding, etc.), disinfected	572
Number of articles (various) destroyed	265

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 the year, 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.

Overten	No. of days on which the Station	Attendances.			
Quarter.	was opened.	Verminous.	Impetigo		
March	22	244	_		
June	22	317	1		
September	18	244	_		
December	22	217	_		
	84	1,022	1		

The amount recoverable from the London County Council, as the School Authority, for the cleansing for the year is £102 5s. 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.

(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.

Notifications. The total number of notifications received was 191, but 62 of these related to cases which had been previously notified, so that the total number of new notifications was 129. In the previous year, the corresponding number was 143. 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 the year. 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 1927.

				New Cases.				Deaths.			
Age Periods.		Pulmonary.			Non- pulmonary.		onary.	Non- pulmonary.			
		M.	F.	M.	F.	M.	F.	M.	F.		
0— 1			_	1	_	_	_	_	_	-	
1-5	***	***	-	-	2	3	-	-	-	2	
5—10 10—15	***	***	2	1	2	1			_	1	
15—20			2	6		1		5		1	
20—25			4	17	_	1	2	4	-	-	
25—35			12	13	-	3	5	3	-	1	
35—45			13	7	-	1	6	3	-	1	
5-55	***		15	5	-	-	10	1	-		
5565			14	2	-	1	11	2	-	1	
35 and upwa	rds		3	4	-	-	5	2		-	
Totals			65	56	5	12	39	20	_	7	

The death rate from all forms of Tuberculosis in Chelsea was 1.03 per 1,000. Of the total number of deaths (66) 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 1926 was 1:7. 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	 	183	132	315
Non-pulmonary	 	30	32	62
		213	164	377

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 1927.

		Puln	nonary		Non	-Puli	monai	ry.		T	otal.		
Diagnosis.	Ad	ults.	Chil	dren.	Ad	ults.	Chil	dren.	Ad	ults.	Chile	dren.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
A.—New cases examined during the year (excluding contacts)— (a) Definitely tuberculous (b) Doubtfully tuberculous (c) Non-tuberculous	24 5	23 14 130	4				111		24 5 67	23 14 130	- 4 154	124	545
B.—Contacts examined during the year— (a) Definitely tuberculous (b) Doubtfully tuberculous (c) Non-tuberculous	-	1 21		_ 35			111	111	<u>-</u>		_ 54	_ 35	120
C.—Cases written off the Dispensary Register as— (a) Cured (b) Diagnosis not confirmed o non-tuberculous (including cancellation of case notified in error)	2	172	213	160	-	-		2	2 85	5	213	2	638
D.—Number of Persons on Dispensary Register on December 31st— (a) Diagnosis completed (b) Diagnosis not completed	108	70 12		1 _	1	1	9	8 -	109	71 12	10 1	9	215
1. Number of persons on Di Register on January 1st		ry	222	9.	Tre	eatme	of pat ent w	vas g	given,	at	or i	II sta	heme ust urted)
2. Number of patients transfer other areas and of "lo of" cases returned		ht	10		Num	ber o	f cons	sultat	ions v	with n	nedic		5
3. Number of patients transf other areas and cases "l of"	erred ost sig	to tht	21							by	Tube		
4. Died during the year		***	22	12.	12. Number of visits by Nurses or Health Visitors to Homes for Dispensary						th	131	
5. Number of observation case A (b) and B (b) above a period of observation 2 months	n whi	ich	4		Number of— (a) Specimens of sputum, etc., examined (b) X-ray examinations made in con-						.,	341	
Number of attendances at pensary (including Contact			3,307		nec	ction	with !	Dispe	nsary	worl	ε .		60
7. Number of attendances of monary cases at Orthopa stations for treatment of	edic O	ut-		14.	per	nsary	of Ins	gister	on	the	31	st	132
8. Number of attendances, at	Gene	ral		15.	Do	micil	of In	Trea		it o	n th		13
Hospitals or other In approved for the pur patients for (a) "Light" treatment (b) Other special forms of the purchase of the	pose,	of	53		Per (a) F	rsons form	of rear in G.P.	res			nsure		14 7

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 the year, while Table No. 41 summarises, for the past two years, 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.	
1926		 328	13 per cent.	3,434	
1927		 545	9 ,,	3,307	

In addition to the visits to homes of patients made by the Dispensary staff and recorded in Table No. 40, 50 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 1,001.

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 cases which terminated fatally during the year, 51 per cent. died in St. Luke's Hospital and 24 per cent. in other public institutions, that is to say 75 per cent. died away from their homes, the corresponding figure for 1926 being 74 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 72 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 120, a decrease of 5 compared with the previous year. 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, patients are supplied with refills in connection with artificial pneumo-thorax treatment. Payment is 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 the year, the number of visits paid by Nurses to the homes of patients was 3,131, an increase of 400 over the number for the previous year. Sixteen 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 (£19 1s. 7d.) was borne by the Borough Council. The Council lent bedsteads and bedding to one case 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.

Dental Treatment. During the year, with the approval of the Ministry of Health, arrangements were made with the British Dental Hospital, 235, Hammersmith Road, W., for the provision of adequate dental treatment, including dentures, if necessary, for patients attending the Chelsea Tuberculosis Dispensary. In each case the certificate of the Tuberculosis Officer is required and dental treatment must be shown as necessary to render other treatment more completely efficacious.

Bacteriological Examinations. During the year, 341 specimens of sputum were examined in connection with the work of the Dispensary. In addition, 71 specimens were sent by medical practitioners to the Lister Institute for examination.

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:—

London County Council

Chelsea Borough Council ... Councillor Lady Phipps.

... Dr. A. W. Sikes (Divisional Medical Officer).

Miss Paddon (District Organiser of School Care Committees).

Miss Barff (After-Care Committee).

Mrs. Rathbone and

Miss Barcroft (Vice-Chairman).

Dr. E. T. Holland.

Miss Larken.

Miss Page.

Chelsea Invalid Children's Aid Association

Chelsea Board of Guardians ... Chelsea Charity Organisation Society

Chelsea District Nursing

Association

Chelsea Health Society Brompton Hospital ...

Local Panel Committee

Mrs. Melville Miller.

... Miss Marx.

Dr. A. M. Gibson, and

Dr. E. F. Thomas. W. E. Poole, Esq.

Miss Forbes.

London Insurance Committee Local War Pensions Committee, and United Services Fund

St. George's Hospital ... British Red Cross Society Lady Almoner. 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 the year the Care Committee met 13 times.

Cases assessed		***						60
Reported admits	ted to	L.C.C.	Instit	tutions				70
Temporary assis				***				20
Extra nourishme	ent gr	anted		***				16
Work found								8
Housing condition								6
Children boarde	d out	through	n L.C	.C. Con	tact	Scheme	and	
otherwise								8
Convalescence								73

The total cost of extra nourishment to appropriate cases was £19 1s. 7d.

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 68.

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 past two years. 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 (three 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.

	1926.	1927
Number of homes visited (first visits), Infants	538	624
Number of revisits, Infants	2,323	2,427
Number of Infants' attendances at Infant Consultations	3,489	3,470
Number of visits to Children of one year to school age	344	379
Number of revisits to Children of one year to school age Number of children of one year to school age, attendances	3,587	3,296
at Medical Inspections	1,844	1,906
Number of ante-natal visits to Expectant Mothers:-		
Primi-para	87	82
Multi-para	208	206
Revisits	443	488
Number of ante-natal case-attendances at ante-natal	738	776
11 - 1	369	428
17 1 7 1 1 This I Think	40	
Number of visits to Diarrhea cases amongst children Number of visits to cases of Ophthalmia Neonatorum	9	5
General additional visits in connection with the work	954	27
Number of visits re Whooping Cough	67	813 83

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 past two years 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.	No.	of ations ices of	Total n prov with	umber ided	01	A	sses	unt	nt	ed.	(3) Nett Co to Counci		Cost			
rear.	Mater- nity Nurse.	Mid- wife.	Mater- nity Nurse.	Mid- wife.		Mate	7	М	Midwife.		Mater- nity Nurse.		Midwife.			
					£	s.	d.	£	s,	d.	£	S.	d.	£	S.	d.
1926	11	56	8	42	5	19	0	24	14	0	6	1	0	38	6	0
1927	2	49	1	42	0	10	0	24	5	9	1	0	0	39	6	3

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.

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 past two years, 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.		
1926	37	16 plus 1 extension	20 3 0	48 8 5		
1927	27	18 plus 5 extensions	25 14 0	61 5 10		

^{*} 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 past two years, 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 1927:—

TABLE No. 45.

Year.				Visits.	Cases.
1926		 	***	 1,953	 196
1927	1,,01	 		 1,573	 161

TABLE No. 46.

DISEASES NURSED BY DISTRICT NURSES DURING 1927.

	La .	Visits.		Cases.
Bronchitis		88		12
Burns	***	12		1
Circumcision		38		6
*Diarrhœa		. 15		1
Eye trouble		42		6
Ear trouble		6		1
Influenza and Pneumonia (under 5)	95		12
Influenza and Pneumonia (over 5)		332	-	22
Impetigo		70	10	4
Meningitis and Peritonitis		_		_
*Measles		30		5
*Ophthalmia Neonatorum		137		8
Pemphigus Neonatorum		134		11
*Poliomyelitis				_
*Puerperal State, including Breas	ts.		100	
Miscarriage, and Rise of Temper				
ture		267		23
Rickets				
Septic sores		70		5
Tonsils and Adenoids		51		15
*Whooping Cough		12		1
Worms		65		14
Miscellaneous		109		14
		1,573		161
				-

^{*} 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 past two years 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 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 48 in 1926 to 61 in 1927.

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

Total cases attended during the year	 		230
Cases admitted and attended in the Home	 		61
Cases attended in the district	 		169
Maternal Deaths	 	1	None.

CONVALESCENT HOME TREATMENT FOR NURSING MOTHERS AND INFANTS.

The amount of convalescent home treatment provided for nursing mothers and infants, during the past two years is shown in Table No. 47. During the year six 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.		
1926	19	9	3 0 0	11 16 6		
1927	32	13	7 12 6	24 12 0		

^{*} Grant from the Ministry of Health.

CHELSEA BRANCH OF THE INVALID CHILDREN'S AID ASSOCIATION.

During the year the branch had 132 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.

Fifty-eight children were sent out of London for convalescence, for periods varying from six weeks to six months. Three children had hospital treatment arranged for them. Forty-seven children 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.

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

Fifty-eight children were specially visited after convalescence 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 was £356 5s. 10d., towards which sum parents contributed £104 15s. 7d., leaving a balance of £251 10s. 3d. to be raised by the Chelsea Branch.

CHELSEA DAY NURSERY.

The attendances at the Nursery during the past two years were as shewn below:—

TABLE No. 48.

	1926.	1927.
Total number of children attending during the year	5,047	6,268
Average daily attendance (5 days a week)	20	24
Total number of individual children who attended	114	98

It will be noted that the total attendances during the year have considerably increased.

The health of the Nursery has been remarkably good. Dr. Grace Nelson is Medical Officer to the Nursery and makes a fortnightly inspection of the children.

PUERPERAL FEVER AND PUERPERAL PYREXIA.

Seven cases of Puerperal Fever and fourteen cases of Puerperal Pyrexia were notified during the year. Of these, sixteen were treated in hospital. One notified case of Puerperal Fever proved fatal. One case (unnotified) of Septicæmia, possibly puerperal, also proved fatal.

PREGNANCY AND CHILDBIRTH.

One death from other complications of pregnancy and childbirth occurred during the year, due to extra uterine gestation.

MATERNAL MORTALITY.

The following table shows the Maternal mortality in Chelsea during the past two years.

TABLE No. 49.

		Death-rate p	er 1,000 Births.	
	Year.	Puerperal Fever.	Other complications of Pregnancy and Childbirth.	Total Death-rate.
1926		 1.16	2.32	3.48
1927		 2.32	1.16	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 childbirth 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.

- ,, 8s. to 9s. ,, ,, 2½d. ,,

The following table shows, for the past two years, the extent of this service:—

TABLE No. 50.

Year.		Milk Orders issued and taken up.							
		March quarter.	June quarter.	Sept. quarter.	Dec. quarter.	* Total.	†Approx Cost.		
							£		
1926	***	543	520	444	452	1,959	388		
1927		450	398	305	393	1,546	310		

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

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.

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

Metropolitan Borough of Chelsea.

Annual Report

OF THE

PUBLIC ANALYST

For the Year ended 31st December, 1927.

BY

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

Public Analyst.

TOWN HALL, CHELSEA, S.W. 3.

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, 1927, four hundred and two samples of Food were submitted to me for analysis by the Inspectors appointed under the Acts. Eighty-five of these samples were submitted as "Informal samples."
- 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.

	Genuine Composition or Not Adulterated.		Adulterated.		Inferior.		Total
Name of Sample.	" For- mal."	" In- formal."	"Formal."	" In- formal."	" For- mal."	" In- formal."	Total.
Milk Tea Butter Cocoa Mustard Mixture Sausages Coffee Margarine Pepper Fish Paste Custard Powder Cornflour	146 19 18 18 11 5 10 7 8 — 5 6	9 4 3 4 -6 3 3 1 8	6				161 23 22 22 11 11 13 10 9 8 7 6
Jam and Marmalade Flour Lard Tinned Fruit Meat Paste Sponge Mixture Mustard Vinegar Coffee & Chicory Mixture Self-Raising Flour	-4 3 1 -3 3 1 3	5· 1 1 2 4 1 —————————————————————————————		- - 1 - - - -			5 5 4 4 4 4 3 3 3 3

Name of	Genuine Composition or Not Adulterated.		Adulterated.		Inferior.		T-4-1
Name of Sample.	" For- mal."	"In- formal."	"For- mal."	"In- formal."	" For- mal."	" In- formal."	Total.
Tapioca	3	_	_	_	_		3
Mincemeat		3		_		_	3
Sausage Meat	3	_	_	_		_	3
Honey	_	2	_	_	_	_	2
Dried Green Peas	1	1		_		_	2
Lemon Curd	1	1	_	_	-	_	2
Ground Rice	2	_	_	_	-	_	2
Tinned Peas		2	_	_	_		2
Rice	2 2	_	-	_		_	2
Jelly Crystals	2	_	-		-	_	2
Cheese	2	-	_	-	-	_	2 2 2 2 2 2 2 2
Soup Powder	2	-	_	-	_	_	2
Fruit in Syrup	_	2	-	-	-	_	2
British Wine	-	2	-	-	-	-	2
Tinned Salmon	1	1	_	-	-	-	2
Cream	1	-		-	_	-	1
Wood Vinegar	1	-		-		_	1
Flaked Tapioca	1	-	-	-	-	-	1
Curry Powder	1	_	-	_		-	1
"Cakeoma" Flour	1	_	_	-		_	1
Flaked Rice	1	-	-	-	-	-	1
Condensed Milk	-	1	_	-	-	_	1
Ground Spice	-	1	_	-	-	_	1
Sago	. 1	-	-	-	-	-	1
Blanc Mange							
Powder	1	-	-	-	-	-	1
Preserved Ginger	-	1	_	_	-	_	1
"Semolina"	1	-	-	-	-	-	1
Baking Powder	1	-	-	_	-	-	1
Lentils	1	-	_	-		_	1
Suet Mixture	1	-	-	-	-	-	1
Pea Flour	1	_	-	-	-	_	1
" Bisto	1	-	-	-		-	1
French Capers	-	1	-	-	_	_	1
Tomato Ketchup	-	1	-	-		-	1
Sugar	-	1	-	-	-	-	1
Dried Figs	-	1	-	-	-	-	1
Salad Cream	-	1	-	-	_	-	1
Chocolate	_	1	-	-		_	1
Tinned Cream	-	1	-	-	-	-	1
'Camp'' Coffee	_	1	-	-	-,	_	1
Sardines	-	1	-	-	-	_	1
Ground Ginger	-	1		-	777	-	1
Salt	1	-	-	-		-	1
Totals	308	84	6	1	3	0	402

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

Genuine Composition 97.5 per cent.

Adulterated 1.74 ,, Inferior 0.75 ,,

MILK.

5. The particulars relating to the six 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	_	7	_	_
2	4.2	_	_	-
3	4	_	_	_
4	4	-	_	-
5	3.5		_	
6	-	2	_	

- 6. The remaining 155 samples submitted 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," 56 "Formal" and four "Informal" being of "Good" quality, 69 "Formal" and four "Informal" of "Fair" quality, and 21 "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:-

TINNED FRUIT.

- 8. The informal sample reported as adulterated was found to be contaminated with tin as understated:—
 - 1. 0.0251 per cent., equivalent to 1.897 grains per lb.

Two of the remaining samples contained slight traces of tin, insufficient for determination.

9. 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.

BUTTER.

10. Actual adulteration could not be certified with respect to the sample of Butter reported as inferior. (See paragraph 3.)

It contained 15.97 per cent. of water, an amount 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."

- 11. The remaining 21 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.
- 12. Fourteen of the samples contained Boric Acid, the amount being under 0.5 per cent. in each case.
- 13. The use of Boric Acid in Butter is forbidden by the Preservatives Regulations which came into operation respecting this article in January last.

MARGARINE.

14. All the samples of Margarine were reported as genuine, and Boric Acid was not detected in them. 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.)

CUSTARD POWDER.

15. Under existing circumstances adulteration cannot be certified with respect to the 2 samples of "Custard Powder" reported as inferior.

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

At present there is no official or generally recognised definition respecting the composition of articles sold as "Custard Powder"; the absence of egg material makes it necessary, however, to regard such samples as inferior.

COFFEE AND CHICORY MIXTURE.

16. The three samples submitted were all certified to be genuine. They contained the following percentages of Chicory—30 and 25 (two samples)—the descriptions applied to the articles were therefore justified.

SAUSAGES.

17. One of the Informal samples of Sausages was certified to contain 192 parts per million of sulphur di-oxide, an amount which was well below the limit, and as the presence of preservative was declared at the time of purchase, as required by the Regulations, the sample was reported as genuine.

- 18. Four of the samples of Sausages were also found to contain very slight traces of sulphur di-oxide.
- 19. The remaining samples mentioned in Table I. 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.

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

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

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 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.