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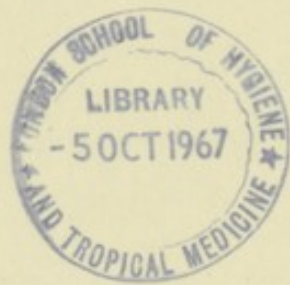
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The Royal Borough of Kensington:



SUMMARY OF STATISTICS
For the year 1929

THE

ANNUAL REPORT

ON THE

HEALTH OF THE BOROUGH

FOR THE YEAR

1929

BY

JAMES FENTON, M.D., D.P.H.,

Medical Officer of Health.

65944



SUMMARY OF STATISTICS

For the year 1929.

Population	176,000
Area of borough in acres	2,291
Density of population per acre	77
Separate houses or self-contained flats inhabited	31,686
Persons per house	5.5
Number of marriages	1,931
Number of births	2,544
Birth rate	14.4
Number of deaths	2,708
Death rate	15.4
Infantile mortality:—	
Deaths under 1 year	213
Infantile death rate per 1,000 births	84
Maternal Mortality:—	
Deaths of women from diseases or accidents associated with childbirth	16
Maternal death rate	6.3
Deaths from phthisis	120
Phthisis death rate	0.68
Deaths from all forms of tuberculosis	137
Tuberculosis death rate	0.78
Deaths from the zymotic diseases	138
Zymotic death rate	0.78
Product of a 1d. rate	(Gross) £12,338
Rateable value	£2,961,078

21st May, 1930.

**To the Mayor, Aldermen and Councillors of the
Royal Borough of Kensington.**

MY LORD, LADIES AND GENTLEMEN,

I have the honour to submit my annual report for 1929 upon the state of the public health in Kensington.

In the early months of the year extremely severe weather was experienced, and during that period there was an outbreak of influenza. As a result, there were in the first five months of the year 517 deaths from influenza, bronchitis and pneumonia, and these are mainly responsible for the high death rate for the year.

There was also at the same time an epidemic of whooping cough which accounted for 62 deaths.

An increase occurred in the maternal mortality rate. A very careful investigation has been made into every death and full details were supplied to the Ministry of Health in connection with an enquiry which is now being undertaken by a Departmental Committee at the Ministry into maternal mortality throughout the country.

Special attention is called to the section on rheumatism. When the results of the two years' work were presented to the Council, it was decided to ask the Minister of Health to extend the system of compulsory notification beyond the experimental period of three years expiring on the 30th September, 1930, and an intimation has been received that the Minister is prepared to agree to this proposal.

The presentation of this report affords me an opportunity of expressing my appreciation of the full measure of support which has been accorded to me by the Mayor, Aldermen and members of the Council, the Chairmen and Vice-Chairmen of the various Committees, and of thanking the chief officers of other departments for their willing help and the provision of much information contained in this report. In conclusion, I desire to thank the staff of the Public Health Department for their loyal and very efficient service throughout the year.

VITAL STATISTICS.

The Royal Borough of Kensington as constituted under the London Government Act, 1899, covers an area of 2,291 acres, and is co-extensive with the civil parish and registration district of the same name. The line of demarcation formed by Holland Park Avenue, High Street, Notting Hill Gate, and the Bayswater Road divides the borough into approximately equal halves described in previous years and in this report as North and South Kensington respectively. Each of these areas is co-terminous with the parliamentary division of the same name. The borough is further sub-divided into nine wards. North Kensington includes the wards of St. Charles, Golborne, Norland and Pembridge, whilst South Kensington is made up of the five other wards, namely, Holland, Earl's Court, Queen's Gate, Redcliffe and Brompton.

POPULATION.

The population of the borough as ascertained at the census in 1921 was 175,859, but for 1929 the Registrar-General has estimated it to be 176,000. From this latter figure the inhabitants in the different wards of the borough have been estimated to be as shown in the following table:—

The Borough	...	...	...	...	176,000
North Kensington	...	...	...	...	92,741
South Kensington	...	...	...	...	83,259
WARDS.					
St. Charles	...	...	...	...	24,282
Golborne	...	...	...	...	26,331
Norland	...	...	...	...	22,130
Pembridge	...	...	...	...	19,998
Holland	...	...	...	...	18,981
Earl's Court	...	...	...	...	17,925
Queen's Gate	...	...	...	...	13,776
Redcliffe	...	...	...	...	19,882
Brompton	...	...	...	...	12,774

In regard to the social status of the population, it may be said that the majority of the inhabitants in North Kensington belong to the poor class, whilst in South Kensington persons of that class constitute only a small proportion of the population.

The borough is peculiar in that there is no one occupation which absorbs a very large proportion of the male workers as is commonly found in many of the industrial areas.

MARRIAGES.

During the year, 1,931 marriages were registered, representing a rate of 22·2 per 1,000 of the population. The place of marriage is set out in the following table:—

Church of England	859
Roman Catholic Church.. ..	238
Nonconformist Church	44
Jewish Church	12
Register Office	778
Total	1,931

BIRTHS.

The number of births registered was 2,544, after correction for inward and outward transfers; and the birth rate for the borough was 14·4 per 1,000 population. Distributed according to sex and legitimacy the births were as follow:—

	Male.	Female.	Total.
Legitimate	1,191	1,137	2,328
Illegitimate	112	104	216
Totals	1,303	1,241	2,544

Table showing the number of births and the birth rates in England and Wales, London, Kensington, and the various districts in the borough in 1929, and the rates for the previous five years:—

District.	1929.		Birth-rates in previous years.				
	No. of births.	Birth-rate.	1928.	1927.	1926.	1925.	1924.
England and Wales	644,218	16·3	16·7	16·7	17·8	18·3	18·8
London	70,090	15·7	15·7	16·1	17·1	18·0	18·7
The Borough	2,544	14·4	14·3	15·0	15·1	15·8	16·2
North Kensington	1,790	19·3	18·7	19·8	18·7	20·6	21·7
South Kensington	647	7·7	8·0	7·9	8·9	8·3	9·2
WARDS.							
St. Charles	470	19·3	20·2	15·6	18·4	18·8	20·5
Golborne	576	21·8	20·8	23·7	21·8	22·2	25·2
Norland	477	21·5	19·3	22·9	21·1	26·0	24·8
Pembridge	267	13·3	13·5	16·5	12·2	14·5	14·9
Holland	156	8·2	10·1	10·5	9·6	8·8	10·8
Earl's Court	157	8·7	8·7	6·9	10·7	8·2	9·9
Queen's Gate... ..	86	6·2	5·7	5·7	7·8	8·5	6·9
Redcliffe	184	9·2	8·1	8·1	9·2	9·2	9·7
Brompton	64	5·0	6·3	7·7	5·9	6·3	7·5
Ward unknown	107	...	...	...	...	...	...

The effects of social status on the birth rate are illustrated by the fact that the rate for South Kensington is usually less than half the rate for North Kensington, whilst in 1929 the birth rate in each of the two wards in which the poorest inhabitants of the borough reside was more than four times as great as the rate for the ward of Brompton in the south.

The decline in the birth rate in Kensington since 1881, which is similar to that taking place throughout the country, is shown in the following table:—

Period.	Birth-rate per 1,000 population.
1881-1885	26.1
1886-1890	23.5
1891-1895	22.0
1896-1900	21.6
1901-1905	20.4
1906-1910	18.7
1911-1915	19.1
1916-1920	17.2
1921-1925	17.2
1926	15.1
1927	15.0
1928	14.3
1929	14.4

Notification of Births Act, 1907.—Parents are allowed a period of six weeks within which to register the birth of a child, but the fulfilment of this duty is so frequently postponed until the last few days of this period that the records of the registrars of births do not enable public health authorities to gain that early knowledge of the birth of children in their districts which is so essential to the success of the work of health visitors. This disadvantage arising from delay in birth registration has been met by the Notification of Births Act, which requires all live births and all still births occurring after the twenty-eighth week of pregnancy to be notified within thirty-six hours to the medical officer of health of the district in which they occur.

During the year, 2,544 births to Kensington mothers were registered, and of this number 2,424 or 95 per cent. were notified in accordance with the requirements of the Act. The number of stillbirths notified was 65, and the number of births notified as having occurred in Kensington but belonging to other districts was 54.

The following table indicates the source of notification and the kinds of births notified.

Source of notification.	Number of births notified.		
	Still births.	Live births.	Total births.
Number notified by midwives	18	1,219	1,232
„ „ „ parents	—	50	50
„ „ „ medical practitioners	7	314	321
„ „ „ other persons	31	459	490
Births in the borough	51	2,042	2,093
Notified from institutions outside the borough	14	317	331
Totals	65	2,359	2,424

Percentage of births in Kensington notified during the past five years, in accordance with the Notification of Births Act, 1907.

Year.	Percentage
1925	99
1926	96
1927	96
1928	94
1929	95

The importance of securing due compliance with the Notification of Births Act cannot be over-estimated, for the information obtained constitutes the starting point of the work of health visitors.

DEATHS.

The number of deaths registered in the borough during the year was 2,889, but this does not represent the true mortality among the population and, in order to obtain the corrected number of deaths which does so represent the true mortality, it is necessary to add the deaths of Kensington "residents" occurring beyond the district to the number registered as actually occurring in the borough, and to subtract from the total thus arrived at the deaths of "non-residents" taking place in the institutions provided in Kensington for the reception of sick or infirm persons.

Total deaths registered in the borough	...	...	2,889
Deaths of residents in public institutions, etc., beyond the borough	...	...	552
			<hr/> 3,441
Deaths of non-residents in public institutions, etc., within the borough	...	...	733
Corrected number of deaths belonging to the borough	...	...	<hr/>2,708

The corrected number of deaths gives a death-rate of 15·4 per 1,000 living.

The following table shows the number of deaths and the death-rates in England and Wales, London, Kensington and the various districts in the borough in 1929, and the rates for the previous five years:—

District.	1929.		Death-rates in previous years.				
	No. of deaths.	Death-rate.	1928.	1927.	1926.	1925.	1924.
England and Wales ...	532,525	13·4	11·7	12·3	11·6	12·2	12·2
London ...	61,710	13·8	11·6	11·9	11·4	11·7	12·1
The Borough...	2,708	15·4	13·0	13·8	12·8	13·2	13·0
North Kensington ...	1,430	15·4	13·4	13·8	12·9	13·4	14·0
South Kensington ...	1,210	14·5	12·1	13·4	11·8	12·2	11·4
WARDS.							
St. Charles ...	338	13·9	12·0	12·9	10·7	13·7	12·1
Golborne ...	421	16·0	13·2	13·8	13·0	12·6	13·4
Norland ...	388	17·5	15·3	14·5	15·0	14·7	12·5
Pembridge ...	283	14·1	13·4	14·1	12·8	12·7	13·4
Holland ...	275	14·4	13·2	13·4	13·5	14·1	12·1
Earl's Court ...	285	15·9	13·5	13·7	13·1	13·8	14·1
Queen's Gate...	176	12·7	10·0	13·2	8·5	9·4	9·2
Redcliffe ...	314	15·7	12·9	14·5	11·6	12·2	11·3
Brompton ...	160	12·5	9·5	11·3	11·5	10·1	9·2
Ward Unknown ...	68	...	...	...	...	...	...

From the above table, it will be seen that the 1929 death rates in England and Wales, London and in the borough show a considerable increase over the rates for the preceding year and, indeed, over the rates for any recent year. The following table shows the Kensington death-rates since 1896:—

Period.	Death-rate per 1,000 living.
1896-1900	16·4
1901-1905	14·4
1906-1910	13·8
1911-1915	14·3
1916-1920	15·6
1921-1925	13·2
1926	12·8
1927	13·8
1928	13·0
1929	15·4

The main cause for the increased rate throughout the country in 1929 was the severe outbreak of influenza in the early part of the year. In 1929, there were 153 deaths in Kensington from influenza as against 26 in the preceding year. Of these 153 deaths, all but seven occurred in the first five months of the year. Influenza frequently gives rise to bronchitis and pneumonia, which may be called influenzal bronchitis and influenzal pneumonia. The number of deaths in 1929

from bronchitis numbered 229 as against 102 in the preceding year, and of these 229, 179 occurred in the first five months of the year. Again, in the case of pneumonia, there were 257 deaths as against 191 in the preceding year, and all but 65 of these occurred in the first five months of the year. Thus, it will be seen that influenza, bronchitis and pneumonia were responsible for 639 deaths as against 319 in the previous year; and of these 639, 517 occurred in the first five months of the year, the period during which influenza was epidemic in Kensington.

There were 382 more deaths in 1929 than in the preceding year, and 320 of these can be accounted for by the increased number of deaths from influenza, bronchitis and pneumonia.

It is of interest to note that of the 153 deaths from influenza, 129 occurred in persons over the age of forty-five years; of the 229 deaths from bronchitis, 211 occurred in persons over the age of forty-five years; and of the 257 deaths from pneumonia, 156 occurred in persons over the age of forty-five years. Thus, the influenza epidemic of 1929 was one which fell heavily on the older members of the population, whereas in the epidemic of 1918, the incidence was high at all ages.

Of the 479 deaths from heart disease, 445 occurred in persons over the age of forty-five years. The number of deaths from heart disease was 46 more than in 1928 and it is probable that the epidemic of influenza was largely responsible for the increase, for this disease often affects the heart.

During the period when influenza was epidemic, whooping-cough was also prevalent in Kensington. There were 65 deaths from this disease in the year and 62 of these occurred in the first five months. In 1928 there were only 10 deaths throughout the year.

Another disease which appreciably contributed to the increased death rate for the year was enteritis. There were 59 deaths from this condition, whereas in the preceding year there were only 27. The enteritis responsible for most of these deaths was not zymotic enteritis or summer diarrhoea, for in the months of May, June, July, August and September, there were only 20 deaths from enteritis. Indeed, the deaths from this complaint were fairly evenly distributed throughout the year and the factors responsible are referred to in the sections of this report dealing with "Infantile Mortality" and "The Prevention of, and Control over, Infectious Disease."

There was a decrease in the number of deaths from measles, scarlet fever, diphtheria and cancer.

Causes of Death—The following list shows certain causes of death which are important in themselves or from the fact that they contributed a considerable share to the total mortality for the year:—

Cause of death.	Number of deaths.
Principal zymotic (or epidemic) diseases ...	138
Epidemic influenza	153
Phthisis	120
Other tuberculous diseases	17
Cancer	282
Bronchitis	229
Pneumonia	257
Heart disease	479
Bright's disease	108
Puerperal fever	10
Other diseases and accidents of parturition ...	6
Premature birth	43
Accidents	81
Old age	95
All other causes	690
	2,708

It will be seen that over one-third of the deaths, or 1,085, were due to diseases of the heart or the organs of respiration. Phthisis, an infectious or preventable disease, caused 120 deaths.

The diseases described in the above list as the "principal zymotic diseases" are small-pox, measles, scarlet fever, diphtheria, whooping-cough, enteric fever (including fever not otherwise defined) and diarrhoea.

The following table shows the zymotic death rate for Kensington and London in each of the last five years.

Period	Deaths from principal zymotic diseases per 1,000 persons living.		
	Kensington.		London.
1925	0.46	...	0.59
1926	0.61	...	0.63
1927	0.36	...	0.41
1928	0.64	...	0.69
1929	0.78	...	0.57

Cancer.—Cancer caused 282 deaths, and of this number 261 occurred in persons over the age of 45 years. Carcinoma was the form of cancer to which 247 deaths were attributed; sarcoma and epithelioma were the assigned causes of 13 deaths; 22 deaths were certified as due to cancer or malignant disease without further definition.

The parts of the body which were affected in each case are shown in the following table :—

DEATHS FROM CANCER, 1929.

PARTS AFFECTED.	Sex.		Total.
	Male.	Female.	
Buccal cavity - - -	7	1	8
Stomach, liver, etc. - -	42	36	78
Peritoneum, intestines, rectum -	22	47	69
Female genital organs - -	...	32	32
Breast - - - - -	...	32	32
Skin - - - - -	1	2	3
Other and unspecified organs -	23	37	60
Totals -	95	187	282

The deaths in the several wards, etc., are set out in the following table :—

The Borough	...	...	...	...	282
North Kensington	...	...	...	...	135
South Kensington	...	...	...	...	143

WARDS.

St. Charles	...	...	...	...	40
Golborne	...	...	...	...	29
Norland	...	...	...	...	39
Pembridge	...	...	...	...	27
Holland	...	...	...	...	32
Earl's Court	...	...	...	...	42
Queen's Gate	...	...	...	...	24
Redcliffe	...	...	...	...	28
Brompton	...	...	...	...	17
Ward unknown	...	...	...	...	4

The number of deaths from this disease was 36 less than in the previous year.

Heart Disease.—Heart disease is still the commonest cause of death, and last year 479 persons died from this complaint, this number being 46 in excess of the figure for 1928.

It has been estimated that probably about half the deaths from heart disease result from rheumatic fever contracted in the early years of life. This malady, which is common in children, has a great tendency to damage the valves of the heart and thus to handicap the patient throughout life, in addition to causing death from heart disease at a comparatively early age.

It is with a view to reducing the large amount of heart disease and the invalidity following rheumatic fever and to preventing many of the deaths from heart disease following rheumatic fever that the Council have established their Rheumatism Supervisory Centre at the Princess Louise Kensington Hospital for Children.

TABLE SHOWING THE NUMBER OF DEATHS IN 1929 FROM CERTAIN DISEASES OF PUBLIC HEALTH IMPORTANCE, ARRANGED IN FOUR WEEKLY PERIODS.

Four Weeks ending	Measles.	Scarlet fever.	Whooping-cough.	Diphtheria.	Influenza.	Phtbisis.	Cancer.	Bronchitis.	Pneumonia.	Diarrhoea and Enteritis.
January 26 .	—	—	5	1	17	4	17	20	31	—
February 23 .	1	—	18	3	52	19	21	68	63	6
March 23 .	—	—	20	1	53	17	22	62	64	3
April 30 .	—	—	16	—	19	9	30	15	16	4
May 18 .	—	1	3	2	5	10	18	14	18	—
June 15 .	1	—	2	—	2	10	21	11	12	4
July 13 .	—	—	1	1	—	12	19	5	8	8
August 10 .	—	—	—	1	—	4	24	3	3	4
September 7 .	—	—	—	—	—	8	20	4	7	2
October 5 .	—	—	—	—	1	6	15	3	6	9
November 2 .	—	—	—	1	1	9	23	7	10	12
" 30 .	—	—	—	1	1	6	24	9	14	7
December 28 .	—	—	—	—	2	6	28	8	5	5
Totals .	2	1	65	11	153	120	282	229	257	59

Infantile Mortality.

During the year 1929, there were 2,544 births and 213 deaths of children under the age of twelve months in the borough. These figures give an infantile mortality rate (deaths of infants under twelve months to each 1,000 births) of 84.

The following table gives the births and the infantile deaths and death rates in England and Wales, London, Kensington and the various wards of the borough for the year 1929, and the infantile death rates for the previous four years.

District.	1929.			Infantile mortality rates in previous four years.			
	No. of births.	No. of deaths of children under 1 year of age.	Infantile mortality rate.	1928	1927	1926	1925
England and Wales	644,218	47,601	74	65	69	70	75
London	70,090	4,936	70	67	59	64	67
The Borough	2,544	213	84	83	66	60	78
North Kensington	1,790	167	93	93	73	68	83
South Kensington	647	46	71	66	53	54	65
WARDS.							
St. Charles	470	28	59	58	86	55	91
Golborne	576	70	121	111	73	85	77
Norland	477	42	88	115	62	50	99
Pembridge	267	27	101	87	72	88	87
Holland	156	15	96	62	65	81	88
Earl's Court	157	11	70	75	31	41	66
Queen's Gate	86	4	46	87	25	54	25
Redcliffe	184	10	54	67	79	37	48
Brompton... ..	64	6	94	24	31	64	108
Ward unknown	107	—	—	—	—	—	—

In considering the above and subsequent tables it must be remembered that the deaths of infants at any temporary address (institution or private house) to which the mother went for her confinement, and deaths of infants in institutions to which they were transferred for treatment from the place of birth, are allocated to the district of the usual residence of the mother.

INFANTILE MORTALITY RATES, 1896-1929.

Period.	England and Wales.	London.	Kensington.
1896-1900	156	162	176
1901-1905	138	139	144
1906-1910	117	114	120
1911-1915	109	110	110
1916-1920	90	90	96
1921-1925	76	71	83
1926	70	64	60
1927	69	59	66
1928	65	67	83
1929	74	70	84

THE NUMBER OF DEATHS OF KENSINGTON INFANTS OCCURRING
IN EACH MONTH DURING 1929.

January	...	...	...	...	16
February	...	...	...	...	28
March	...	...	...	...	23
April	...	...	...	...	20
May	...	...	...	...	19
June	...	...	...	...	20
July	...	...	...	...	12
August	...	...	...	...	14
September	...	...	...	...	15
October	...	...	...	...	12
November	...	...	...	...	19
December	...	...	...	...	15

CAUSES OF, AND AGES AT, DEATH OF INFANTS UNDER ONE YEAR OF AGE IN
KENSINGTON DURING 1929.

Causes of death.	Under 1 week.	1-2 weeks.	2-3 weeks.	3-4 weeks.	Total 4 weeks.	1-3 months.	3-6 months.	6-9 months.	9-12 months.	Total infant deaths under 1 year.
1. Common infectious diseases (Whooping cough 21) (Diphtheria 1)	—	—	—	—	—	5	8	4	5	22
2. Tuberculosis	—	—	—	—	—	1	—	1	1	3
3. Pneumonia and bron- chitis	1	1	1	—	3	8	12	6	5	34
4. Enteritis	—	1	—	—	1	8	16	13	5	43
5. Complications of birth (Injury 4) (Atelectasis 9)	12	—	—	—	12	1	—	—	—	13
6. Congenital malforma- tion	6	1	—	2	9	6	3	2	—	20
7. Premature birth ...	31	3	—	3	37	6	—	—	—	43
8. Atrophy, debility and marasmus	—	—	1	1	2	5	10	1	1	19
9. Other diseases (Meningitis 2) (Convulsions 3) (Influenza 5) (Other conditions 6)	4	—	—	—	4	3	4	4	1	16
TOTALS	54	6	2	6	68	43	53	31	18	213
Death-rate in each age period per 1,000 births	21·2	2·4	0·8	2·4	26·8	16·9	20·8	12·2	7·1	84
Percentage of total infant deaths occurring in each age period	25·3	2·8	0·9	2·8	31·9	20·2	24·8	14·5	8·4	

It is a matter of regret to have to record that the infantile death rate remains high. The rate for Kensington for 1929 was practically the same as that for the previous year but, largely owing to various unfavourable climatic conditions in 1929, there was a definite increase in the rate in the country generally and in London. Indeed, in seventeen of the twenty-nine London boroughs, the infantile death rate was higher in 1929 than in the preceding year.

The tables show that there has been no increase in the actual number of infant deaths in the borough, the total (213) being the same as in the preceding year. The increase in the rate of one point from 83 to 84 arises from the reduction in the number of births in 1929.

A study of the infantile mortality statistics for 1929 shows that the high rate in that year can be mainly attributed to the epidemic of whooping cough and the large number of deaths from enteritis and premature birth.

In the early months of the year, a severe epidemic of whooping cough spread throughout London and this was responsible for the deaths of 21 children under the age of one year in Kensington, as compared with two deaths in the preceding year.

The increase in the number of deaths from enteritis gives cause for anxiety, especially in view of the fact that the Council for the past six years have taken very energetic measures in an attempt to reduce the high death rate from this disease. Zymotic enteritis in children under five years of age is compulsorily notifiable in the borough and the Council have introduced a scheme for the treatment of this condition. This scheme includes the employment of the services of Dr. Ronald Carter during the months of June, July, August and September, and attention is drawn to his report on page 71.

In the year, there were 59 deaths from enteritis in the borough and 43 of these were of children under the age of one year. These deaths occurred in the following months :—

January	—	July	4
February	4	August	2
March	5	September	5
April	3	October	6
May	—	November	5
June	5	December	4

From the above table, it will be seen that the deaths cannot entirely be attributed to summer diarrhoea, for they were fairly evenly distributed throughout the year. There is no doubt that improper or irregular feeding, lack of knowledge on mothercraft, and poverty, are factors largely responsible for these deaths from enteritis. Of the 47 deaths from enteritis of infants under the age of one year, only 22 of the cases were notified; this is explained by the fact that the doctors were probably satisfied that the patients were not suffering from the zymotic variety of this disease.

On investigating the 213 infant deaths, it was found that 68 were of children under the age of one month; fifty-four died in the first week of life, six in the second week and the remaining eight in the third and fourth weeks. The Council's health visitors, except in special circumstances, do not pay their first visit to the infant until fourteen days after the birth, as up to that time the midwife and doctor have been in regular attendance; therefore, welfare visits to the home after the birth can have but little influence in reducing the number of deaths in the early days of life. In order to reduce the number of deaths in early life, more attention must be paid to ante-natal supervision.

In only eighteen instances out of the sixty-eight infant deaths mentioned above, had the mother attended an ante-natal clinic before the birth of the child.

A serious feature in regard to infant mortality and one which should receive more attention is the increasing number of deaths from premature birth occurring year by year. The increase in Kensington during the past four years is shown in the following table.

Year.	No. of births.	No. of deaths under one year.	No. of deaths from premature birth.	Percentage of deaths of premature infants.
1926	2,717	164	22	13·4
1927	2,657	176	25	14·2
1928	2,559	213	40	18·3
1929	2,544	213	43	20·2

It has been mentioned to me by persons interested in child welfare that the increasing number of deaths from premature birth may to some extent be attributed to attempts made by mothers to cut short their pregnancy by artificial means. With a view to investigating this suggestion, I have interviewed a number of lady doctors and nurses and find that the majority have formed the impression that attempts to produce miscarriage are increasing in number, but I have been quite unable to secure any definite evidence in this direction.

Many factors may contribute to premature birth, but there is no doubt that if an improvement is to be effected mothers must receive adequate advice and care during pregnancy.

Every effort has been made to provide adequate ante-natal supervision for Kensington women and it is disappointing to find that, in the investigations made by the Public Health Department into infantile mortality, the fact is established that only a small proportion of the mothers whose babies have died received ante-natal care. This statement alone is sufficient to warrant more attention being directed to ante-natal work.

The number of illegitimate births in the year was 216 as against 241 in the previous year. This is a satisfactory decrease, but what is still more satisfactory is the reduction in the illegitimate infant deaths from 52 to 37. It is, however, unfortunate that whilst the infant death rate generally is 84, that for illegitimate children is 171.

The following table compares the legitimate and illegitimate births, infant deaths and infantile mortality rates in Kensington for 1929 :—

	Total.	Legitimate.	Illegitimate.
Births	2,544	2,328	216
Infant deaths	213	176	37
Rate per 1,000 births	84	76	171

Every effort is made at the infant welfare centres in the borough to convince mothers of the importance of breast feeding their infants ; but, although 164 of the 213 infants who died were under six months of age, thirty-five only were being breast fed on falling ill. The following table shows the causes of death and the number of those dying who were on the breast at the date the fatal illness commenced.

Cause of death.	No. died.	No. breast fed.
Enteritis	43	6
Premature birth	43	3
Pneumonia and bronchitis	34	14
Whooping cough	21	5
Debility	19	—
Tuberculosis	3	—
Other causes	50	7
	—	—
	213	35

These figures show that more can be done in educating mothers in the correct feeding of children. Without doubt, this lack of breast feeding is very largely responsible for the number of deaths from enteritis.

Sixty of the deaths occurred in the first fortnight of life, during which period it is impossible for the mother to attend the infant welfare centre, but of the remaining 153 deaths, in only thirty-six instances had the mother taken the child to a centre.

Voluntary workers have concentrated their attention on bringing the infant welfare centres and ante-natal clinics up to a high state of efficiency ; they have been very successful, but these institutions are not being used to the best advantage. Many of the mothers attending are women who, from regular attendances over long periods and a careful study of the rules of health, can well be left to take care of their children and be relied upon to seek medical aid when signs of illness appear. We can afford to pay less attention to these and to concentrate our efforts in inducing those mothers who are not so enlightened on matters of health and mothercraft to attend the centres regularly with their infants.

ABOVE STANDARD DEATHS.

In almost every area there is a number of infant births and deaths occurring in those better-class homes where it is reasonable to assume that the children receive every care and all requisite medical and nursing assistance. These are called "above standard" cases and, although it is difficult to make certain that none is included under this heading in which the attention of a woman health officer might prove beneficial, they are not generally visited because, in the first place, the health officer may not be welcomed and, in the second place, she can occupy her time more profitably in visiting homes in the poorer quarters.

In 1929 the "above standard" notified births numbered 480 and the deaths 18, giving an infantile mortality rate of 37.

The 1,944 notified births and 195 deaths not "above standard" in 1929 give an infantile mortality rate of 100.

The causes of death in the "above standard" cases were as follow :—

Premature birth	4
Congenital heart disease	2
Inanition	2
Asphyxia	2
Hydrocephalus	1
Mongolism	1
Cerebral convulsions	1
Spina bifida	1
Marasmus	1
Lobar pneumonia	1
Diarrhoea	1
Cerebral haemorrhage	1
Total	18

The wards to which the children belonged are :—

St. Charles	4
Pembridge	5
Holland	3
Earl's Court	4
Queen's Gate	1
Brompton	1
Total	18

Maternal Mortality.

In 1929 there were sixteen deaths of Kensington women from diseases or accidents directly connected with child-birth, and this figure represents a death rate of 6·3 mothers per 1,000 births. The rate for London for 1928, the last year for which figures are available, was 3·59, and for England and Wales 4·42.

The actual causes of death were :—

Puerperal fever	10
Accidents of pregnancy and parturition	6
	16

In 1929, there were 2,544 births in Kensington and of these 480 may be said to have occurred in families which are regarded as "above standard" financially and do not come within the scope of the Council's maternity and child welfare scheme. In respect of 1,483 of the 2,064 births in families regarded as coming within the scope of the Council's scheme, the expectant mothers received ante-natal advice at the special clinics held at the Queen Charlotte's Nurses' Home or the infant welfare institutions. The women who gave birth to the remaining 581 children may have received professional ante-natal attention from private medical men or at hospitals, but it is probable that the majority did not secure for themselves the advantages of that skilled advice which is now generally recognised to be of the greatest value.

Although 72 per cent. of the expectant women in Kensington received some form of ante-natal advice or care, there were unfortunately sixteen deaths of mothers in confinement during the year, which is a considerable increase in the number for the preceding year.

These sixteen deaths give a maternal mortality rate of 6·3, which is the highest figure for Kensington for many years past and well above the average for the country generally.

The high rate of maternal mortality which has been maintained in this country for many years has recently arrested considerable public attention. About two years ago, the Ministry of Health established a Departmental Committee to investigate the problem throughout the country and I have had the privilege of serving on the Public Health Sub-Committee of that Departmental Committee. In Kensington, there has been, in connection with the investigation, the closest co-operation between private doctors and midwives on the one hand and Dr. Remington Hobbs, the Council's consultant gynaecologist, and myself on the other. The doctors and midwives have submitted to us full details of the illness and the treatment given in each case and these have been sent to the Ministry of Health. I should like to be able to review all the facts in this report, but it would be a breach of confidence so to do, for, in order to be quite sure that every possible source of information was made available to the Public Health Department, it was necessary to give an assurance that the information obtained would be regarded as confidential.

It is possible, however, to give a brief summary. Of the sixteen women who died, twelve did not receive ante-natal attention and from the facts supplied it appears probable that the lives of five of these women might have been saved if they had enjoyed the advantage of that ante-natal advice and care which can be obtained either from the general medical practitioners or the ante-natal clinics in the borough. In five of the twelve, it is probable that no ante-natal advice would have sufficed to prevent death; indeed, the only precaution in these cases would have been the avoidance of pregnancy. In the other two, there was accidental infection at the time of birth which could not have been prevented by ante-natal care, and these deaths must be regarded as unfortunate accidents.

GENERAL PROVISION OF HEALTH SERVICES IN THE AREA.

STAFF OF THE COUNCIL'S PUBLIC HEALTH DEPARTMENT.

Medical Officers.—In addition to the Medical Officer of Health and the Tuberculosis Officer, who are whole-time officers, the Council retain the part-time services of several medical men. Dr. Remington Hobbs, Medical Superintendent of St. Mary Abbots Hospital, acts as Consultant Gynaecologist in cases of puerperal fever and puerperal pyrexia; and Dr. Ronald Carter serves the Council during the Summer months in connection with their scheme for the treatment of zymotic enteritis.

In 1928, Dr. T. S. Keith was appointed bacteriologist to the Council, he is also Pathologist to the Board of Guardians and Honorary Pathologist to the Princess Louise Kensington Hospital for Children.

Dr. Reginald C. Lightwood, an assistant physician on the staff of the Princess Louise Kensington Hospital for Children, is in charge of the Borough Council Rheumatism Supervisory Clinic. In the first half of the year, he had six months' leave of absence in order to undertake special work at another hospital and his position was temporarily filled by Dr. Francis Bach.

Male Sanitary Inspectors.—The normal staff is ten District Inspectors. For the purposes of sanitary inspection, the Borough is divided into ten districts, one of which is allotted to each of the ten inspectors, who carry out duties under the Public Health Acts, the Housing Acts, the London County Council (General Powers) Acts and, so far as men's factories and workshops are concerned, under the Factory and Workshop Act.

Mr. Henry Dawes, who is the Sanitary Inspector for No. 10 District (Brompton area), holds the position of Senior Sanitary Inspector in accordance with the requirements of Section 7 of the Public Health (Officers) Act, 1921.

Food Inspector.—Mr. H. W. Walters, who holds the Certificate of the London Sanitary Inspectors' Examination Board and the Certificate for Meat and Other Foods, has been appointed to carry out the duties under the Food and Drugs (Adulteration) Act, 1928, the Rag Flock Acts, 1911 and 1927, the Public Health (Meat) Regulations, 1924, and the various Acts and Orders dealing with milk. Recently there have been several Orders issued under the Agricultural Produce (Grading and Marking) Act, 1928, and the Merchandise Marks Act, 1926, and Mr. Walters has been appointed to enforce the requirements of these within the Borough.

Canal Boats Inspector.—For about half-a-mile of its length, the Grand Junction Canal runs through the Borough of Kensington, and under an agreement made over thirty years ago, the inspection and supervision of canal boats under the Canal Boats Acts 1877 and 1884, was carried out on behalf of the Kensington Borough Council by the Paddington Authority. During the course of the year, it was considered desirable that an officer of this Council should undertake this work, and in October, Mr. R. J. McCarthy, Inspector for No. 2 District, was specially appointed for the purpose. A report of this officer's activities during the year under review appears on page 31.

Women Health Officers.—There are nine ladies appointed as Women Health Officers. Seven are engaged in the work of visiting mothers of the poorer classes and advising them in the care and management of their infants, and in assisting with the work of the seven Infant Welfare Centres. They also devote a portion of their time to the inspection of factories and workshops where women are employed, and in visiting cases of ophthalmia, enteritis, measles, whooping cough and consumption. Two Women Health Officers (Miss Hargrave and Miss Haycock) are employed on in-door work at the Tuberculosis Dispensary.

Health Lecturer.—Mrs. Hayman commenced her duties as Health Lecturer in June, 1926. She is a fully trained hospital nurse. Her office is a part-time one occupying approximately five half-days a week.

Clerical Staff.—In addition to Mr. J. H. Wilson, the Chief Clerk of the Department, there are eight clerks, one of whom is attached to the Tuberculosis Dispensary

Other Staff.—There are :—

- (a) Five Disinfectors, including a man who acts as engineer.
- (b) A Mortuary Keeper.
- (c) Two Sanitary Labourers who assist in drain testing.
- (d) A Superintendent and Matron of the Medicinal Baths.
- (e) A Rat Officer.
- (f) A Caretaker and wife at the Tuberculosis Dispensary.

Particulars of the staff, as required by the Ministry of Health Circular No. 359, appear in Table vii. of the Appendix.

DISINFECTION.

*SUMMARY OF WORK CARRIED OUT BY THE DISINFECTING STAFF DURING 1929.

Nature of Infection.	Premises Disinfected.	Rooms Disinfected.	Disinfections at Wood Lane.	No. of Articles Disinfected.
Small Pox - - -	12	56	27	1,515
Scarlet Fever - - -	519	741	639	10,598
Diphtheria - - -	271	413	259	3,950
Enteric Fever - - -	10	13	14	257
Paratyphoid Fever - - -	10	13	55	438
Measles - - -	137	162	12	155
Consumption - - -	157	199	175	1,688
Cancer - - -	38	48	71	766
Vermin - - -	158	233	92	1,000
Other Diseases - - -	329	412	286	2,608
TOTALS - - -	1,641	2,290	1,630	22,975

* This table does not include the work carried out at Wood Lane on behalf of the Paddington Borough Council.

The total weight of the bedding, clothing, etc., of Kensington residents disinfected was 46 tons 7 cwts. 2 qrs. 13 lbs. The number of articles disinfected only was 21,923 and the number disinfected and washed, 1,052.

The laundry work for the Medicinal Baths is performed at the Disinfecting Station and this work involved in 1929 the washing of 9,517 towels, 278 sheets and 30 other articles.

The Paddington Authority have entered into an agreement with the Council for the disinfection of all articles removed from Paddington homes to be performed at the Kensington Disinfecting Station. As the Paddington Council require certain of the articles to be washed after disinfection, the charge was fixed at 20s. 0d. per cwt. of articles dealt with, but there is a proviso in the agreement that the minimum payment per annum is to be £600.

The weight of Paddington articles disinfected in 1929 was 25 tons. 9 cwts. 3 qrs. 9 lbs. The number of articles disinfected was 10,609 and the number disinfected and washed was 2,830.

DISINFECTION OF LIBRARY BOOKS.

In view of the difficulty of securing efficient disinfection of books, the Libraries Committee authorise the Medical Officer of Health to destroy all Public Library volumes removed from infected houses; this gives Kensington borrowers protection from infection from the Council's books.

The number of books from the Kensington Public Libraries destroyed during the year by the officers of the Public Health Department was 60. The number of private subscribing library books destroyed was 12; and the number disinfected by formalin and returned to the householders was 17.

BACTERIOLOGICAL WORK.

The work performed by the Council's Bacteriologist during the year 1929 was as follows:—

<i>Disease suspected.</i>	<i>Examinations.</i>	<i>Positive.</i>
Diphtheria	1941	112
" (virulence test)	1	-
Tuberculosis (Sputum)	272	48
" (ear swab)	1	-
Typhoid Fever (Blood)	29	4
" " (Faeces)	1	1
" " (Urine)	4	-
Gonorrhoea	42	2
Food Poisoning (Faeces)	28	23
" " (Urine)	5	1
" " (Meat Pies)	7	2
" " (Mice)	4	-
" " (Rat)	1	1
" " (Rat Poison)	1	-
" " (Sausages)	3	-
" " (Veal)	2	-
Ringworm	1	-

The following examinations were also carried out:—

Milk (bacterial count)	37
" (tubercle bacilli)	28
Swimming bath water (bacterial count)	6

In addition to these examinations at the Kensington Laboratory, 511 specimens of sputum were examined at the Tuberculosis Dispensary.

PUBLIC BATHS AND WASH-HOUSES.

The number of bathers using the Swimming Baths and Slipper Baths in the last five years is shown in the following table:—

<i>Year.</i>	<i>Bathers.</i>
1925	265,632
1926	241,349
1927	249,838
1928	257,703
1929	246,085

In the Wash-house or Laundry Department, there were 88 wash-tubs in use in 1929. In order to prevent the wash-tubs being used by professional laundry-women, to the exclusion of women doing their own family washing, the prices to be paid by a user of a wash-tub are as follow:—

- 2d. for each of the first four hours on any one day.
- 4d. for the fifth hour on any one day, and
- 6d. for the sixth and every succeeding hour on any one day.

The number of women using the wash-tubs in the last five years is shown in the following table:—

<i>Year.</i>	<i>Washers.</i>
1925	105,581
1926	106,568
1927	103,657
1928	97,110
1929	96,192

There are 8 washing machines and the charge for the use of one of these machines is 6d. for a period not exceeding half-an-hour, or 9d. per wash not exceeding a period of one hour with a fee of 6d. for every additional half-hour or less period. The number of women using these machines in 1929 was 18,889.

The water in the four swimming baths is filtered and aerated by pulsometer filters. In the two first-class baths all the water passes through the filters every 6 hours and in the 2nd-class baths every 4 hours. During the year the water in the four baths was subjected to bacteriological tests and the results proved entirely satisfactory.

MORTUARY AND CHAPEL OF REST.

During the year 266 bodies were deposited in the Public Mortuary under the following circumstances:—

At the request of relatives or friends of the deceased	-	30
At the request of undertakers	-	1
At the request of Coroner	-	229
By the police	-	6
		<hr/>
		266
		<hr/>

In 164 cases, post-mortem examinations were made under the Coroner's warrant.

Sixty-two bodies were deposited in the Chapel of Rest, Avondale Park. This building is of considerable convenience to those poor persons in Notting Dale who live in perhaps one or two rooms and have no satisfactory accommodation for the bodies of dead relatives pending the day of the funeral.

CLEANSING OF VERMINOUS PERSONS.

The cleansing of verminous persons is carried out at the Medicinal Baths, Blechynden Mews, and the record of work done during the year is as follows:—

	TOTAL CLEANSINGS.
SCABIES—	
Adults	167
Schoolchildren	201
Children under five years	40
VERMINOUS CONDITIONS—	
Adults	29
Schoolchildren	2,973
Children under five years	7
Common Lodging House Cases	12
OTHER CONDITIONS—	
Adults	2
Schoolchildren	56
Children under five years	5
	<hr/>
TOTAL	3,492
	<hr/>

In addition to the disinfection of the clothing worn by persons on their visit to the Medicinal Baths, 159 blankets and sheets, 161 articles of night clothing, and 3,516 other articles have been dealt with.

Of the 2,973 school children cleansed at the Medicinal Baths in 1929 only 225 were compulsory cases; the remainder attended voluntarily.

THE KENSINGTON POOR LAW AUTHORITY.

I am indebted to the Clerk to the Guardians who has kindly provided me with the following particulars in order that I might comply with the request made by the Minister of Health to supply information of the work, etc., done.

The Kensington Institution.—This Institution, which is situated in Marloes Road, provides indoor relief for the destitute and infirm.

Number of beds available for male adults ...	362
Number of beds available for female adults ...	434
Number of adult admissions during the year ended 31st December, 1929	1,857
(Elderly Male Casuals, chargeable to the Metropolitan Asylums Board, were also admitted to the Institution during the year, the total number of these admissions amounting to 2,180).	
Average daily number of adult admissions during the year ended 31st December, 1929	5·8
Average daily number of admissions of Casuals during the year ended 31st December, 1929	5·9
Number of beds available for children	45
Types of cases (children) admitted	(a) Remand children. (b) Children admitted with parents (c) Children for transfer to Schools, etc.
Number of children's admissions during the year ended 31st December, 1929	659
Average daily number of children's admissions	1·8
Last ascertained cost per head at the Institution	2s. 11·24d. per day.

St. Mary Abbots Hospital.—This Institution, which is also situated in Marloes Road, provides medical and surgical treatment for the sick and disabled.

Number of beds available for male adults ...	188
Number of beds available for female adults ...	306
Number of adult admissions during the year ended 31st December, 1929 (including 141 admissions under the Borough Council Maternity Scheme)	4,119.
Average daily number of adult admissions ...	11·3
Number of beds available for children	115
Types of cases (children) admitted	All types, except infectious cases which are passed on to the Fever Hospitals.
Number of children's admissions during the year ended 31st December, 1929	1,400
Births (including 124 births in the Borough Council Maternity Ward)... ..	402
	1,802
Average daily number of children's admissions ...	4·9
Last ascertained cost per head at St. Mary Abbots Hospital	6s. 2·24d. per day.

Out-door Relief.

Number of cases receiving out-door medical treatment during the year ended 31st December, 1929	North District (North of Notting Hill Gate and Holland Park Avenue) 491
	South District (South of Notting Hill Gate and Holland Park Avenue) 41
	Total 532

GENERAL HOSPITAL.

Although Kensington may be regarded as a central London Borough, it is curious that there is only one General Hospital within the Borough boundary, namely, the Kensington Fulham and Chelsea General Hospital. There are, however, the West London Hospital, St. Mary's Hospital and St. George's Hospital just outside the Borough.

The Kensington Fulham and Chelsea Hospital was closed to in-patients throughout the year owing to rebuilding operations being in progress. The first two sections of the Hospital will be completed by December, 1930, and the Hospital Authorities will be able to start 1931 with 78 beds. Although the lack of funds has prevented the erection of the third section, the first two sections will constitute a complete Hospital with a fully equipped out-patient department.

The work performed at the Hospital during the year 1929 is as follows :—

I.—Out-Patients.

(a) NUMBERS.

Total number of new Out-Patients	...	...	...	...	4,162
Total number of Out-Patient Attendances	...	...	...	...	20,466
Number of Casualty Patients	...	...	...	...	1,838

II.—Other Treatments.

Number of Operations	...	...	...	...	209
“ „ Dental Cases	...	...	...	...	1,265
“ „ Massages	...	...	...	...	1,014

THE PRINCESS LOUISE KENSINGTON HOSPITAL FOR CHILDREN.

The Princess Louise Kensington Hospital for Children was officially opened by Their Majesties the King and Queen on the 21st May, 1928.

The Hospital has 42 cots available for the use of poor children, and the fact that the general public appreciate the valuable services rendered by the Hospital may be gathered from the following figures for 1929 :—

(a)—IN-PATIENTS.

1. Total number of available Beds on 31st December, 1929	...	42
2. Average number of available Beds during the year	...	40.02
3. Average number of Patients resident daily throughout year	...	36.73
4. Number of In-Patients in the Hospital at beginning of year	...	41
5. Number of In-Patients admitted during year	...	1,113
6. Number of In-Patients in the Hospital at the end of year	...	34
7. Average number of days each Patient was resident	...	10.97
8. Number of Patients admitted and discharged during the year who were resident for		
(i) only 1 day	...	64
(ii) 2 and 3 days	...	564

(b)—OUT-PATIENTS.

1. Total number of new Out-Patients	...	11,620
2. Total number of Out-Patient Attendances	...	72,977
(a) Number of Patients on books at beginning of the year	...	677
(b) Number of Casualty Patients included in No. 1 above	...	1,244

In October, 1927, the Borough Council established a Rheumatism Supervisory Centre at the Princess Louise Kensington Hospital for Children for the supervision and treatment of children suffering from acute rheumatism. Further information in regard to this Centre will be found in the Section of this Report dealing with the Prevention of, and Control over, Infectious Disease.

The record of work carried out at the Centre during the year 1929, is as follows :—

Number of sessions held	...	48
Number of individual patients examined	...	...
Kensington patients	...	224
Other Boroughs	...	68
Total attendances of patients	...	829

SCHOOL MEDICAL SERVICE.

Dr. Menzies, the County Medical Officer, has kindly made it possible for me to give the following particulars of the routine medical examination of elementary school children carried out in 1929 in Kensington.

TABLE SHOWING NUMBER EXAMINED AND DEFECTS FOUND

Number examined ...	Boys.								Girls.							
	Entrants.		Age 8.		Age 12.		Age 14.		Entrants.		Age 8.		Age 12.		Age 14.	
	987		859		548		659		991		889		573		719	
Defect.	Cases.	Cases referred for treatment.	Cases.	Cases referred for treatment.	Cases.	Cases referred for treatment.	Cases.	Cases referred for treatment.	Cases.	Cases referred for treatment.	Cases.	Cases referred for treatment.	Cases.	Cases referred for treatment.	Cases.	Cases referred for treatment.
Malnutrition ...	4	2	8	3	2	...	2	1	7	5	8	5	3	2	...	...
Skin Disease ...	23	18	8	7	7	5	8	4	17	10	4	4	3	2	10	9
Defective Teeth ...	...	328	...	307	...	157	...	176	...	369	...	283	...	133	...	175
Enlarged Tonsils ...	165	51	94	28	49	8	35	7	184	54	113	37	45	16	40	14
Adenoids ...	11	7	5	5	3	3	1	1	9	4	6	3	2	2	1	1
Tonsils & Adenoids ...	63	45	38	25	3	3	12	10	70	45	28	21	12	10	11	11
Other Nose & Throat ...	16	7	8	4	3	1	4	1	12	9	7	3	5	2	5	2
Enlarged Glands ...	161	21	120	13	48	3	37	2	153	17	102	23	50	8	34	3
Eye Disease ...	36	26	30	16	20	11	10	4	37	18	26	14	15	4	9	2
Defective Vision ...	...	...	...	88	...	69	...	80	...	...	...	90	...	74	...	95
Otorrhoea ...	29	12	11	7	8	3	15	7	30	20	20	7	12	4	9	3
Other Ear Disease ...	12	7	5	3	6	4	3	3	11	4	12	5	4	4	3	2
Defective Hearing ...	3	3	2	1	1	...	3	...	1	1	...	...	4	2	1	...
Speech Defects ...	4	...	3	1	1	...	1	...	3	...	1	1	...	...	1	1
Heart Defects ...	48	3	39	...	19	2	18	2	43	3	38	2	23	1	26	3
Anaemia ...	28	9	14	2	15	4	7	3	21	5	17	6	9	...	17	5
Lung Defects ...	49	31	19	10	5	4	4	1	34	21	17	13	...	...	4	3
Nervous System ...	7	3	7	3	9	4	1	...	5	2	3	1	5	2	2	1
Phthisis ...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...
Other Tubercular Disease ...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...
Rickets ...	9	...	2	...	2	...	2	...	5	...	3	1	1	...	...	...
Spinal Deformities ...	...	...	4	2	4	4	11	7	...	...	3	2	4	4	6	3
Other Deformities ...	3	1	3	2	3	...	8	7	8	2	3	1	3	2	11	6
Other Defects ...	30	14	25	16	12	5	3	1	37	22	33	18	15	7	23	10
Number of children noted for treatment	471		433		242		262		487		422		224		295	

TABLE SHOWING THE CONDITIONS IN REGARD TO CLOTHING, NUTRITION, CLEANLINESS, TEETH AND VISION OF THE CHILDREN EXAMINED.

Age Group.	Number examined.	Clothing and Boots.			Nutrition.			Cleanliness of Head.			Cleanliness of Body.			Teeth.			Vision.			
		Good.	Fair.	Poor.	Good.	Average.	Below normal.	Bad.	Clean.	Nits.	Pediculi.	Clean.	Dirty.	Pediculi.	All sound.	Less than 4 decayed.	Four or more decayed.	6/6 in both eyes.	6/9 in either or both eyes.	6/12 or worse in either eye.
Entrants																				
Boys ...	987	240	731	16	94	880	13	-	937	50	...	929	57	1	531	322	134	-	-	-
Girls ...	991	282	704	5	103	862	25	1	935	50	6	949	41	1	519	341	131	-	-	-
Age 8.																				
Boys ...	859	271	574	14	70	768	21	-	821	33	5	816	43	-	490	272	97	477	209	146
Girls ...	889	311	574	4	94	778	17	-	843	36	10	870	19	-	546	242	101	532	203	135
Age 12																				
Boys ...	548	192	350	6	55	478	15	-	535	11	2	522	26	-	362	169	17	353	97	93
Girls ...	573	172	398	3	82	483	8	-	533	32	8	547	26	-	410	149	14	348	117	106
Age 14																				
Boys ...	659	202	448	9	110	533	16	-	644	14	1	621	38	-	457	175	27	416	109	127
Girls ...	719	257	459	3	122	584	13	-	684	30	5	701	18	-	520	179	20	424	145	148
Total ...	6,225	1,927	4,238	60	730	5,366	128	1	5,932	256	37	5,955	268	2	3,835	1,849	541	2,550	880	755
Kensington percentages		30.9	68.1	1.0	11.7	86.2	2.1		95.3	4.1	0.6	95.7	4.3	0.0	61.6	29.7	8.7	61.0	21.0	18.0
London percentages		57.8	41.3	0.9	19.7	75.5	4.8		94.4	5.1	0.5	97.4	2.5	0.1	64.8	27.5	7.7	56.3	25.5	18.2

SCHOOL TREATMENT CENTRES.

There is in Notting Dale a School Treatment Centre managed by a Sub-Committee of the Princess Louise Hospital Board of Management Committee and the work performed thereat during 1929 was as follows:—

	New Cases.	Total attendances.
Eye Cases	544	1,376
Aural Cases	637	1,360
Minor Ailment Cases	2,036	25,577
Dental Cases	1,130	1,436

A School Treatment Centre has also been established at the Baby Clinic premises in Tavistock Road and the record of work for the year 1929 is as follows:—

Minor Ailment Cases	3,358	24,819
Dental Cases	1,844	3,129

In addition there is a School Treatment Centre at the Princess Louise Kensington Hospital for Children and the particulars of the cases treated thereat during 1929 are as follows:—

Tonsils and Adenoids	472
Eyes (New Cases)	308
Dental Cases : (Gas, 537 ; Fillings, 150)	687
X-Ray Cases	20

PROFESSIONAL NURSING IN THE HOME.

The Borough is fortunate in having within its boundaries an excellent District Nursing Association which employs a Superintendent and twelve nurses to carry out the nursing of all diseases in the homes of the poor. The number of cases nursed during 1929 was 2,164 and the number of visits paid, 39,014.

The following is a table of cases attended and visits paid by nurses of the Kensington District Nursing Association on behalf of the Council from January 1st to December 31st, 1929:—

	Cases.	Visits.
Maternity Cases - - - -	31	298
Miscarriages - - - -	36	353
Pneumonia (5 years of age and over) - -	129	1,779
" (under 5 years of age) - -	105	1,494
Ophthalmia Neonatorum and other Inflammations of the Eyes of Newly-born Children -	18	230
Influenza (5 years of age and over) - -	90	850
" (under 5 years of age) - -	16	293
Zymotic Enteritis - - - -	107	841
Tuberculosis (5 years of age and over) -	25	1,244
" (under 5 years of age) - -	3	83
Measles (5 years of age and over) - -	7	75
" (under 5 years of age) - -	1	9
Whooping Cough (5 years of age and over) -	8	86
" (under 5 years of age) - -	6	63
Erysipelas - - - -	2	44
Puerperal Septicaemia - - - -	1	23
Pemphigus - - - -	7	99
Totals - - - -	592	7,864

For the splendid services rendered, the Council paid to the Association in 1929 a grant of £200.

A trained nurse is employed by the Golborne Infant Welfare Centre to undertake home nursing of expectant and nursing mothers and infants in the very poor area allocated to that Centre.

The cases attended and visits paid by the Golborne Home Nurse during the year are given in the following table :—

	Cases Attended.	Visits Paid.
Adults	54	283
Children under 5 years of age	330	2,224
Totals ...	384	2,507
Bronchitis	116	576
Ear Discharges	25	395
Minor Ailments	181	1,221
Measles	8	32
Totals ...	330	2,224

MIDWIFERY ARRANGEMENTS.

The Borough is well served in this respect. The Queen Charlotte's Hospital authorities maintain a District Nurses' Home in Ladbroke Grove, North Kensington, and during the year members of the staff thereat conducted 741 confinements, of which 650 were in Kensington homes. The Borough Council maintain a Maternity Home with ten beds and the Guardians also have a ward of ten beds for the confinement of poor women.

The number of confinements dealt with by these three organisations, together with those taking place in outlying hospitals, leaves but a comparatively small number to be attended by private doctors and midwives in the homes.

In addition to the nine ante-natal clinics at the Infant Welfare Centres and Baby Clinic, a similar clinic is maintained by the Queen Charlotte's Hospital authorities at their District Nurses' Home, which is situated a little to the north of Ladbroke Grove Railway Station—a point easily accessible to the majority of North Kensington mothers. The record of work at the Queen Charlotte's Clinic for 1929 is as follows :—

Number of individual expectant women who attended the ante-natal sessions	830
Number of Kensington cases	695
Number from other Boroughs	135
Total number of attendances of all ante-natal cases	2,373

The medical work at this ante-natal clinic is performed by the doctors of the Hospital.

AMBULANCE FACILITIES.

Ambulances for infectious, accident and maternity cases were provided by the Metropolitan Asylums Board, the Kensington Guardians and the London County Council, and during the year the service proved efficient.

HEALTH PROPAGANDA.

No Health Exhibition was held during the past year, but much good propaganda work was conducted. Lectures were given by the Council's Health Lecturer in Boys' and Girls' Departments in the London County Council Schools and at Infant Welfare Centres, Girls Clubs, Women's Clubs, etc., situated in Kensington. Films on health subjects, loaned by the Health and Cleanliness Council, have been shown at many schools and clubs within the Borough.

A tribute must be paid to the teachers in the elementary schools for their valuable co-operation in this work. It is largely owing to their splendid organisation and ready help that the lectures and film displays have proved successful.

The Health and Cleanliness Council throughout the year supplied, free of charge, for distribution, large quantities of excellent posters and publications, and these were greatly appreciated.

HEALTH CONCERTS.

A new kind of health propaganda was introduced during the year 1928, by the Kensington Public Health Department, in the form of health concerts, which were held at various halls in the Borough. During 1929 five of these concerts were given.

Items in the programmes included three health plays entitled: "The Sins of the Mothers"—dealing with tuberculosis, "Hiram's Baby"—illustrating Infant Welfare work, and "A Fly Fantasy"—showing the need for exterminating flies.

The first play was produced by the "Douglass Players," the second by mothers and fathers from the Raymede Infant Welfare Centre, and the third, written by the Council's Health Lecturer, was produced by children at "The Venture," in Portobello Road.

Experience has proved that this attractive form of health propaganda is very successful. Audiences from 300 to 800 attended the concerts.

HEALTH MAGAZINE.

The publication of the periodical called "Better Health," has been continued throughout the year. It is published monthly, and its general purpose is to set before the public information in regard to health matters in short and interesting articles. Each subject is dealt with by experts, and technical details are carefully avoided.

A special issue of this paper is printed for Kensington, and a section is reserved for articles of local interest. These are written by the Medical Officer of Health, Sanitary Inspectors, Women Health Officers, and ladies connected with the Infant Welfare Institutions. Topical photographs are also inserted, and various means used to stimulate local interest.

The magazine has proved a conspicuous success, and the demand exceeds the supply.

Two thousand copies of the magazine are issued monthly, and the channels of distribution are:—

- (a) The Infant Welfare Centres.
- (b) London County Council Schools in the Borough.
- (c) Various Clubs and Institutions.
- (d) Public Libraries.
- (e) Women Health Officers, etc.

The publication involves no charge upon the rates.

OTHER HEALTH SERVICES.

There are no fever hospitals within the Borough, but several provided by the Metropolitan Asylums Board are within easy reach.

The arrangements for the treatment of tuberculosis and the organisation for maternity and child welfare work are discussed further on in this report.

Kensington enjoys a great advantage in possessing a large number of ladies and gentlemen who give freely of their time and money to voluntary bodies interested in the health and welfare of the poorer members of the community. Not only are all the maternity and child welfare institutions in Kensington organised on a voluntary basis, but there are at work in the Borough two branches of the Charity Organisation Society, a branch of the Invalid Children's Aid Association, a branch of the British Red Cross Society, the Kensington Council of Social Service, School Care Committees, a Tuberculosis Care Committee and a number of other bodies managed and financed on voluntary lines by Kensington residents. The Council have endeavoured with marked success to work in close co-operation with these organisations and the relationship between them has always been a happy one.

SUBSCRIPTIONS BY THE BOROUGH COUNCIL TO VOLUNTARY HEALTH
ORGANISATIONS DURING 1929.

SUBSCRIPTIONS TO HOSPITALS, ETC.

	£	s.	d.
Cancer Hospital - - - - -	5	5	0
Chelsea Hospital for Women - - - - -	5	5	0
Kensington District Nursing Association - - - - -	5	5	0
Kensington, Fulham and Chelsea General Hospital - - - - -	10	10	0
Kensal Gospel and Medical Mission - - - - -	5	5	0
National Hospital for Diseases of the Heart - - - - -	5	5	0
Paddington Green Children's Hospital - - - - -	5	5	0
Princess Louise Kensington Hospital for Children - - - - -	26	5	0
St. Mary's Hospital - - - - -	10	10	0
West London Hospital - - - - -	10	10	0
Western Ophthalmic Hospital - - - - -	5	5	0
Princess Louise Hospital (Rheumatism Supervisory Centre) - - - - -	200	0	0
Charity Organization Society - - - - -	5	0	0
Invalid Children's Aid Association - - - - -	5	0	0

The sanction of the Ministry of Health is not applied for in respect of these subscriptions and no Government contribution is received.

PAYMENTS TO MATERNITY AND CHILD WELFARE INSTITUTIONS.

	£	s.	d.
Archer Street Infant Welfare Centre - - - - -	143	0	0
Bramley Road " " " - - - - -	243	0	0
Campden Hill " " " - - - - -	118	0	0
Earl's Court " " " - - - - -	193	0	0
Golborne " " " - - - - -	298	0	0
Kenley Street " " " - - - - -	168	0	0
Lancaster Road " " " - - - - -	218	0	0
Raymede " " " - - - - -	218	0	0
Evelyn Convalescent Home - - - - -	16	16	0
Hambledon Convalescent Home - - - - -	8	8	0
St. Mary's Convalescent Home - - - - -	5	7	0
George Whitlow Convalescent Home - - - - -	25	0	0
Kensington Board of Guardians (Maternity Home) - - - - -	751	10	0
Kensington District Nursing Association - - - - -	200	0	0
Ladbroke Road Baby Hospital - - - - -	200	0	0
Mutual Registration of Assistance Society - - - - -	10	0	0
National League of Health, Maternity and Child Welfare - - - - -	8	8	0
Princess Louise Hospital, (Massage and Electrical Treatment Centre) - - - - -	50	0	0

These grants have been sanctioned by the Minister of Health, with the result that 50 per cent. will be refunded to the Council by the Government in all except the £200 to the Kensington District Nursing Association in respect of which the Government contribution is £75.

Summary of Work Done under the Supervision of the Sanitary
Inspector during the Year

The following table shows the number of notices which have been issued in respect of nuisances, defects, etc., found in the various districts during the year :--

	NUMBER OF DISTRICT										GRAND TOTAL
	1	2	3	4	5	6	7	8	9	10	
Kind of Notices Issued.											
Public Health (London) Act, 1891.											
Intimations - - -	133	494	255	391	425	176	118	76	192	96	2,356
Statutory Notices - - -	25	109	32	103	163	21	27	8	33	24	545
Final Notices - - -	2	17	5	26	64	6	8	2	5	3	138
Summonses issued - - -	—	—	—	15	10	1	—	1	1	—	28
Housing Act, 1925.											
Sect. 3 (Repairs) - - -	1	43	—	29	3	7	10	1	—	—	94
Sec. 127 (Entry) - - -	4	205	—	212	11	49	62	4	—	—	547
Underground Room Habitation - - -	—	2	—	—	—	—	7	2	—	—	11
Removal of Manure - - -	6	—	2	2	—	—	—	—	69	4	83
Smoke Nuisance Notices - - -	—	—	—	—	—	—	—	—	—	—	—
Rent Restrictions Act Certificates - - -	—	—	—	—	—	1	2	3	—	1	7
Special Notices included under Public Health (London) Act, 1891, relating to Factories - - -	—	—	—	—	—	—	—	—	—	—	—
" Workshops - - -	—	—	—	—	—	—	—	1	—	—	1
" Bakehouses - - -	—	—	—	—	—	—	—	—	1	1	2
Other Notices - - -	10	—	—	13	—	—	—	—	—	11	34
Report of Waste of Water to M.W.B. " Dangerous Structures to L.C.C. - - - - -	13	4	3	21	10	8	2	19	64	3	147
	17	6	4	—	3	6	1	—	1	1	46

**Summary of Works completed under the supervision of the Sanitary
Inspectors during the Year.**

DESCRIPTION OF WORK, &c.	NUMBER OF DISTRICT.										GRAND TOTAL
	1	2	3	4	5	6	7	8	9	10	
House Drains re-constructed -	5	6	6	13	16	15	21	4	11	17	114
Defective Drains repaired -	15	—	18	21	22	7	15	19	19	45	181
House Drains cleansed -	34	14	37	22	18	10	7	28	81	52	303
Water-Closets re-constructed -	42	2	7	43	61	16	32	3	59	50	335
" repaired -	167	27	49	4	88	14	12	11	41	54	467
" supplied with water -	17	22	22	41	16	3	7	5	84	140	357
" new provided -	17	2	10	12	17	36	50	12	89	121	376
Soil Pipes ventilated, repaired, &c. -	8	8	5	13	16	7	13	6	63	51	190
" new provided -	13	4	5	19	23	20	23	9	56	58	230
Baths, new provided -	14	—	10	9	16	23	54	20	106	89	341
Sinks, " " -	17	17	13	21	27	63	54	26	71	76	385
Lavatory Basins, new provided	11	1	21	27	4	33	95	112	218	208	730
Cisterns cleansed -	—	—	—	6	43	—	2	14	29	15	109
" covered -	2	—	2	5	33	—	—	7	17	4	70
" abolished -	—	—	1	1	1	—	—	1	—	5	9
Taps fixed on rising main -	4	—	9	2	12	—	3	3	9	131	173
Yards, areas paved, drained, repaired -	49	37	13	32	60	5	9	1	39	62	307
Dustbins provided -	99	25	56	18	77	16	4	45	101	43	484
Ashpits abolished -	4	2	6	2	3	—	—	4	10	7	38
Accumulations of filth, &c., removed -	17	17	11	20	23	9	3	29	18	141	288
Animals removed -	9	—	—	10	1	2	—	1	12	2	37
Overcrowding abated -	14	6	5	10	1	1	—	—	1	—	38
Underground Rooms, illegal occupation discontinued -	1	—	8	—	4	3	2	—	3	—	21
Roofs repaired -	100	34	34	23	80	12	19	35	111	80	528
Houses provided with water above basement floor -	13	1	8	3	6	—	4	—	5	21	61
Dampness in Dwellings remedied	14	26	18	25	42	4	3	15	31	37	215
Closing Orders made under Sect. 11, Housing Act, 1925	—	—	—	—	—	—	—	—	—	—	—
Closing Orders made under Sect. 18, Housing Act, 1925	—	—	—	—	—	3	—	—	—	—	3
Closing Orders determined -	—	—	—	—	—	—	—	—	—	—	—
Repairs of Houses completed under Sect. 3, Housing Act, 1925 -	—	7	—	7	—	1	2	1	—	—	18
Infectious Disease Cases re- moved -	137	62	60	90	130	47	42	38	118	18	742
Houses disinfected after Infec- tious Diseases (including Bedding, Clothing, &c.) -	138	81	93	172	181	91	88	48	112	59	1063
Rooms in such Houses dis- infected after Infectious Disease -	213	81	100	180	184	142	180	79	240	73	1472
Houses cleansed under Houses Let in Lodgings By-laws -	169	121	134	61	170	32	61	2	17	16	783
Verminous Houses cleansed (in- cluding Bedding, Clothing, &c.) -	127	13	53	38	39	—	17	5	153	11	456
Verminous Rooms cleansed in such Houses -	284	15	127	48	44	—	19	8	213	11	769
Dirty Bedding cleansed -	—	2	—	2	40	—	3	5	41	8	101
Dirty Bedding destroyed -	—	1	—	1	—	—	—	1	3	1	7
Other Sanitary Works executed	58	24	103	85	117	51	104	1	22	167	732

SUMMARY OF LEGAL PROCEEDINGS.

Nature of Offence.	Number of Summons heard before the Magistrates.	Magistrates' Decisions.
Failure to abate a nuisance by carrying out sanitary repairs.	11	Order made for the abatement of the nuisance within 28 days in one case, within 21 in four cases and 14 days in one case. Summonses withdrawn, the work being completed in five cases.
Failure to comply with By-laws for Houses Let in Lodgings.	6	Fined £3 in one case. Order made for the abatement of the nuisance within 21 days in one case. Summonses withdrawn, work having been carried out in four cases.
Failure to provide a proper supply of water to the upper storeys.	2	Summonses withdrawn, proper supply of water being provided in both cases.
Failure to abate overcrowding.	3	Fined £2 in one case and £1 in two cases.
Failure to provide sufficient water-closet accommodation.	1	Summons withdrawn, the necessary accommodation being provided.
Willfully exposing a person suffering from a dangerous infectious disease.	1	Summons dismissed.
Failure to deposit plans in respect of drainage work.	1	Fined £1.
Failure to comply with an order made by the Justices to abate a nuisance.	1	Summons withdrawn, order having been complied with.
Allowing a dog to deposit its excrement on the public footway.	15	Fined 10s. 6d. in two cases and 10s. in thirteen cases.
Failure to pay expenses of work carried out by the Council under Section 3 of the Housing Act, 1925.	2	Order made for the payment of expenses with interest in each case.
Total	43	

In addition to the above, there were issued under the various Acts and Regulations dealing with milk, food, drugs, etc., 37 summonses, particulars of which are given on page 57.

DUST REMOVAL.

During the year, the Council considered the question of securing a more frequent collection and removal of house refuse, and approved a scheme for the re-organisation and modernisation of existing arrangements.

There is an improved daily collection in eight main streets where there is congestion of traffic, and a daily collection is undertaken before 9 a.m. in certain other streets and blocks of flats. In other cases, there is a thrice-weekly collection.

Throughout the entire northern part of the Borough, and in 78 per cent. of the premises in the southern half, the collection is not less frequent than twice-weekly.

A new type of cover, designed by the Cleansing Superintendent, has been fitted to all the Council's motor vehicles used in this service, and experiments are being conducted in regard to a new cover for horse-drawn vans. The new covers will, it is hoped, prevent the escape of refuse from the vehicles and decrease the annoyance caused by dust when the refuse is emptied into the vehicles.

A new portable container system is being installed at certain premises in the Borough and the Council have approved of the principle of standardising refuse bins.

Further improvements are under contemplation and it is anticipated that these, like those achieved in 1929, will be effected with little increase of expenditure.

REFUSE REMOVAL FROM MEWS.

The common dustbins installed by the Council in 1921, in 20 mews in North Kensington at the expense of the owners, have continued to prove a satisfactory arrangement for storing house refuse in these particular mews in which there are a number of dwellings, stables and costermongers' stores.

The problem of securing hygienic conditions in mews has been tackled with considerable success during past years as a result of close co-operation between the officers in the Public Health Department and the Borough Engineer's Department.

SEWERAGE AND DRAINAGE.

Every house in the Borough is connected with the water carriage system for the disposal of sewage and, generally speaking, house drainage in Kensington is very satisfactory.

The total number of house drains inspected during the year, including those inspections which may be described as routine and those made on complaint or after infectious disease, totalled 1031, and in 216 cases notices under the Public Health Act were served for either reconstruction or repairs. In many of these the repairs were slight in nature and the owners were not required to submit plans and applications. In addition to the above drainage work, 376 water closets were provided in order to supplement the accommodation already existing.

All house drainage work resulting from notices issued under the Public Health Acts and house drainage undertaken voluntarily by owners, except that in connection with new buildings, is dealt with by the Public Health Department.

The following table deals with (a) drainage work undertaken voluntarily by owners and supervised by the officers of the Public Health Department from January 1st to December 31st, and (b) all drainage work required by notices served under the Public Health (London) Act, and carried out under the supervision of the Sanitary Inspectors—

	Voluntary work.	Work under notice.
Plans and applications submitted	198	36
Plans approved by the Council	198	36
Total reconstruction of drainage of premises	38	32
Partial reconstruction of drainage of premises	41	3
Repairs to drains by "Economic Method"	18	4
Other sanitary works, such as new soil pipes, baths, sinks and lavatory basins	1578	298

PUBLIC CONVENIENCES.

The Council provide thirteen public lavatories containing water closets; two are for men only, two for women, two for boys and two for girls, and in five, accommodation is provided for both sexes. Part of this accommodation is provided in Avondale Park and the Barby Road Recreation Ground. In addition, there are eleven urinals for men under the charge of the Council. Free accommodation is provided in the men's and women's lavatories for those who are unable to pay. At eleven railway stations in the Borough there are also conveniences for men and women, and at 75 public houses there are urinals entered from the street and available to the public. The public conveniences for men in the Borough have been regularly inspected throughout the year by the male Sanitary Inspectors, and those for women in the railway stations and elsewhere have been kept under observation by the Women Health Officers.

CANAL BOATS ACTS, 1877 AND 1884.

The Grand Junction Canal runs through the extreme northern portion of the Borough for about half-a-mile of its length. There are three docks connected with this portion of the canal, in which there is accommodation for twenty to thirty boats. As is well known, many of these boats are used for dwelling purposes by the boatmen and their families.

Public health and sanitation in regard to canal boats used for dwelling purposes are controlled by the Canal Boats Acts, 1877 and 1884. Regulations under the 1877 Act were made by the Local Government Board in 1878 and provide for:—

- (a) the registration of canal boats, including certificates of registration, and the fees in connection with such registration;
- (b) the lettering, marking and numbering of such boats;
- (c) fixing the number, age and sex of the persons who may be allowed to dwell in a canal boat, having regard to the cubic space, ventilation, provision for the separation of the sexes, general healthiness, and convenience of accommodation of the boat;
- (d) promoting cleanliness in and providing for habitable conditions of canal boats; and
- (e) preventing the spread of infectious diseases.

Section 3 of the 1884 Act states that:—

“ It shall be the duty of every registration or sanitary authority within whose district any canal, or any part of a canal, is situate, to enforce within such district the provisions of the principal Act and this Act, and any Regulations made thereunder by the Local Government Board; and every such authority shall, within twenty-one days after the 31st day of December in every year, make a report to the Local Government Board as to the execution of the principal Act and this Act, and of the Regulations made thereunder as aforesaid, and as to the steps taken by such authority during the year to give effect to the provisions of the said Acts and Regulations.”

The Kensington Borough Council are, therefore, vested with authority to enforce the Canal Boats Acts and Regulations on all boats entering that portion of the Grand Junction Canal which is within the boundaries of the Borough.

Many years ago, an arrangement was made with the Paddington Authority, which received the approval of the Local Government Board, for the Paddington Canal Boats Inspector to undertake the small amount of work entailed in the Borough, Paddington having a much larger length of canal and greater dock accommodation.

During the year, it was discovered that this arrangement was not working very well and in October last, the Council appointed Mr. R. J. McCarthy, one of the District Sanitary Inspectors, to be Canal Boats Inspector and authorised him to carry out the necessary duties under the Canal Boats Acts, 1877 and 1884, and the Regulations made thereunder.

From the date of his appointment until the end of the year, the Inspector made fourteen inspections, thirteen of which were initial inspections and one re-inspection. In three instances, children of school age were found living on the boats. The vessels, however, were in a clean condition and no structural or other defects were found.

Of the thirteen boats inspected, two were not used for habitation owing to the defective conditions of the cabins.

No births or deaths occurred on boats lying at the wharves in Kensington and no cases of infectious disease were reported.

FOULING OF FOOTPATHS BY DOGS.

Towards the end of 1921, the Council succeeded in obtaining the approval of the following by-law for the good rule and government of the Royal Borough:—

“ 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 upon the public footway.

“ Any person offending against this by-law shall be liable to a penalty not exceeding 40s.

“ This by-law shall cease to be in force after the 31st day of December, 1923, unless a by-law confirming and continuing its provisions has been duly made and come in force before that date.”

This by-law was made in pursuance 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, 1889.

In 1923 the by-law was sanctioned without limit of time and the Council now have a permanent measure by which they can secure a considerable improvement in the cleanliness of the public footways.

The Council have issued leaflets which have been posted on lamp-posts and in various places in the Borough, and delivered by hand to a large number of dog-owners. Attention has been called to the by-law by slips attached to the rate demand notices and the matter has received notice in the local press.

Two officers in the Public Health Department make observations and during 1929 they reported fifteen breaches of the by-law to the Public Health Committee. Summonses were taken out and fines of 10s. 6d. on two occasions and 10s. in the others were imposed.

The number of convictions under this by-law during the past eight years is 49.

THE RATS AND MICE (DESTRUCTION) ACT, 1919.

A Rat Officer is employed to assist in the work of rat destruction under the supervision of the Sanitary Inspectors. He has carried out good work during the year as is evidenced by the following table:—

Number of individual premises visited by the Rat Officer on receipt of complaint	-	-	-	217
Total number of visits paid	-	-	-	2,441
Number of poison baits laid during the year	-	-	-	109,310
" " disappeared	-	-	-	99,260
" " removed by the Rat Officer	-	-	-	10,050
Number of premises where concreting of basement floors has been carried out under the direction of Sanitary Inspectors to prevent the ingress of rats	-	-	-	15
Number of premises where other repairs have been carried out under the direction of Sanitary Inspectors to prevent the ingress of rats	-	-	-	95
Number of sewer defects allowing egress of rats made good	-	-	-	5
Number of Statutory Notices served under the Rats and Mice (Destruction) Act, 1919	-	-	-	1
Number of premises cleared of rats	-	-	-	160

An account of the methods of destruction adopted by the Rat Officer appears in the report for 1923.

During the National Rat Week Campaign, held in November, the following special measures were adopted.

Sewers.

The Borough Engineer placed twelve flushers at the disposal of the Public Health Department, and these assisted by laying 30,000 barium poison baits in the entrances to sewers. In North Kensington, 120 entrances were baited daily and in the southern half of the Borough 114 entrances. The flushers report that the majority of the baits disappeared.

Wood Lane.

Special attention was given to the rubbish tips and 12,000 barium baits were laid in the various metal and other dumps adjoining. Wire cage traps were set and baited daily. Thirty-six rats were found dead in the Depot and adjoining ground during the Week.

Private Premises.

The number of private houses and business premises visited during the Week was sixty-three, and twenty rats were killed therein in break-back traps and on rat lime traps.

Railways.

During Rat Week, the railway companies whose lines run through the Borough are always very pleased to co-operate and special efforts are made by them to carry out extermination of rats. During the Week, gas and poison were used by the Underground Railway Company between the South Kensington and Notting Hill Gate Stations. The Great Western Railway baited their lines which run across North Kensington from Westbourne Park Station to Kensal Wharf. They placed baits in the West London Carriage Yard at the rear of Barlby Road and in their Locomotive and Traffic Departments, at the Uxbridge Road Depot, and at the Kensington (Addison Road) Station. All dumps, sheds, stores and railway embankments were also heavily baited.

Sidings in Warwick Road.

Every precaution is taken by the Great Western and London, Midland and Scottish Railway Companies (who control the majority of sidings) to keep them free from rats. Mice are seen occasionally in trucks but cats apparently keep the sidings from becoming infested. No complaint of rats was received from the Council's Depot in Warwick Road.

Canal and River Wharves.

The Council's Wharves at Lots Road, Chelsea, and Kensal Road, were inspected, but no evidence of rats was found and no complaint was made by the workmen who were questioned on the subject. The dogs on the barges help to keep the wharves free from rats.

Cinema Theatres.

Lantern slides calling the attention of the public to Rat Week were shown at the Imperial Playhouse, Portobello Road, and at the Coronet Theatre, Notting Hill Gate.

Press.

An advertisement was inserted in the local press bringing National Rat Week to the notice of the public.

VERMINOUS PREMISES CLEANSED.

Five hundred and forty verminous houses were cleansed during the year by landlords in response to notices served under the powers conferred by the London County Council (General Powers) Act, 1922. The Council's Rat Officer, in addition to his duties under the Rats and Mice (Destruction) Act, carries out disinfection of verminous premises in certain cases. The following is a summary of his activities in this direction:—

Number of premises visited	...	...	...	69
Number of rooms sprayed	...	...	...	80

REMOVAL OF AGED, INFIRM OR PHYSICALLY INCAPACITATED PERSONS.

Under Section 28 of the London County Council (General Powers) Act, 1928, the Borough Council have power to remove to a hospital, infirmary, institution or similar place aged, infirm or physically incapacitated persons living under insanitary conditions.

During the year under review, three cases were dealt with. The first was that of an old woman of 83 years of age whose sole income was the Old Age Pension. She was very feeble, dirty and verminous, and refused to enter the Kensington Institution. The second was that of an old woman of 80 years of age who was totally blind, suffering from rheumatism and refused to enter a hospital. Her husband was an inmate of Tooting Bec Mental Hospital and she had no other relatives or friends. She was in receipt of the Old Age Pension and supplemented that by begging in the streets. The room in which she lived was dirty and verminous. The third case was that of a woman of 74 years of age who occupied two basement rooms. This woman was poorly clad, in a very neglected condition and refused to enter the Kensington Institution. She wandered the streets in the night time collecting old rubbish and stored this in her rooms which, in consequence, were in a crowded and offensive condition. In 1925, this woman previously came under the notice of the Sanitary Inspector and after the instigation of legal proceedings he removed from her rooms nine cartloads of rubbish. Many complaints were received from other inmates of the premises in which she lived in regard to her practice of wandering up and down the stairs throughout the night and shifting the furniture from one position to another. When she was eventually moved in 1929, ten cartloads of rubbish were removed from her two rooms and this weighed 5 tons 1 cwt.

In each of the above three cases, the Public Health Committee gave authority for application to be made to the Court. In the first, the Court gave an Order for the old lady's removal to the Kensington Institution; in the second, the old lady consented to enter that institution on hearing that the application to the Court had been authorised; and in the third, an Order was obtained for removal to the same institution.

At the end of three months, the first and second cases were quite prepared to continue their life within the institution; in the third case, it was necessary to make application to the Magistrates for further detention for a period of three months.

There is no doubt that this Section confers considerable benefit on lonely old and infirm people, and particularly on other persons who are compelled to live in the same house and make use of the same sanitary conveniences, etc.

INSPECTION OF HOTELS, RESTAURANTS AND BOARDING-HOUSES.

In the latter part of 1928, an outbreak of food poisoning occurred in a hotel in South Kensington and the conditions found therein were so unsatisfactory that the Council appointed a temporary Sanitary Inspector for the purpose of making a routine inspection of all hotels, restaurants and large boarding-houses in the Borough.

The Inspector commenced work in December, 1928, and the following is a record of the work performed by him during that month and the early part of 1929:—

Premises inspected	{	Hotels	...	...	151
		Restaurants	...	...	141
		Boarding-houses	...	...	23
Written Intimation Notices served		...	...	65	

The defects discovered were for the main part in connection with dirty walls and ceilings and in every instance there was no difficulty in persuading owners and occupants to carry out the Council's requirements. Indeed, in many cases the work was put in hand forthwith and the service of a notice was not required. In no instance was it found necessary to serve a Statutory Notice.

Reviewing the work on completion, it is very pleasing to be able to record that the conditions found were much better than was anticipated. In no instance were any premises discovered which in any way approached the unsatisfactory conditions revealed in the hotel in South Kensington which gave rise to the decision of the Council in favour of wholesale inspection.

SMOKE ABATEMENT.

The Borough contains but few factories or other workplaces where there is a considerable fuel consumption and thus the problem of smoke abatement is not a very large one. Nevertheless, in a Borough which is essentially residential in character, it is very desirable that the nuisance from smoke should be reduced to a minimum, and during the year the Council's Sanitary Inspectors made 625 special observations with a view to ascertaining whether there were any breaches of the smoke provisions of the Public Health Acts. Five nuisances were discovered and without the service of notices these were abated.

INCREASE OF RENT AND MORTGAGE INTEREST (RESTRICTIONS) ACTS, 1920-23.

Applications made to the Council in 1929 for certificates under the Acts totalled 7, and 6 certificates were granted.

The comparative failure by tenants to attempt to make use of the provisions of the Acts is probably due to the fact that most houses in a defective state of repair come under the notice of the Sanitary Inspectors, who put the Public Health Acts into operation.

RAG FLOCK ACTS, 1911-1928.

Four samples of rag flock were analysed and reported upon during the year. They contained 2, 8, 10 and 18 parts of chlorine per 100,000, the limit set by the above Acts being 30 parts per 100,000.

NUISANCES FROM PIGEONS.

Section 52 of the London County Council (General Powers) Act, 1927, provides that, for the purpose of abating or mitigating any nuisance, annoyance or damage caused by the congregation at any place in the Borough of house doves or pigeons having, or believed by the Council to have no owner, or of preventing or minimising any such nuisance, annoyance or damage which might, in the opinion of the Council, be so caused, the Council may seize and destroy or sell any such house doves or pigeons in excess of such number as the Council may consider reasonable, and take such steps as they may deem necessary for such purpose. It is necessary, however, in the first place for the Council to obtain consent to the measures adopted by them from the person or body in whom the building or land upon which the birds congregate is vested.

In June, 1928, the Council entered into an agreement with a Mr. Anthony for the destruction of a number of pigeons, not exceeding 500, at a cost to the Council of 9d. for each pigeon.

In October, 1929, the Council terminated the contract with Mr. Anthony and engaged one of the Council's workmen to undertake the work after official working hours in the evenings and on Saturdays and Sundays. This man works under the supervision of Mr. Dawes, the Senior Sanitary Inspector.

Much difficulty has been experienced in carrying out pigeon destruction, owing to the opposition of the public. Indeed, it has been found almost useless to attempt to catch pigeons on a public highway owing to interference from neighbouring residents and other persons, and the obstruction caused to traffic by the fixing of pigeon traps.

The best results have been obtained at churches and other institutions where there are enclosed spaces in which the man can operate and to which the public cannot gain admission.

Up to the end of 1929, 462 pigeons have been trapped by the pigeon catchers.

FACTORIES AND WORKSHOPS.

The following table shows the various trades and occupations carried on in registered workshops and factories where men are employed :—

TRADE OR BUSINESS.	Workshops.	Factories.	Total.
Aerated water manufacturers ...	—	2	2
Bakers	68	32	100
Basket makers	2	1	3
Blacksmiths	7	—	7
Blind makers	2	—	2
Boot makers and repairers ...	71	16	87
Builders	45	11	56
Cabinet makers	18	4	17
Cigarette makers	2	1	3
Coach builders	9	3	12
Coal wharves	2	—	2
Cooked meat dealers	1	2	3
Cycle repairers... ..	6	1	7
Dyers	2	2	4
Electricity generating stations ...	—	4	4
Electric light fitting makers ...	2	3	5
Firewood choppers	3	2	5
Furriers	5	—	5
Gas works	—	2	2
Ice cream manufacturers	1	—	1
Instrument makers	—	3	3
Ironmongers	2	—	2
Ladder makers... ..	1	1	2
Lampshade makers	2	—	2
Laundries	6	17	23
Marine stores	3	—	3
Masons	2	1	3
Metal workers	9	8	17
Motor engineers and garages ...	38	31	69
Motor spirit dealers	3	—	3
Photographers	3	—	3
Piano makers	1	1	2
Picture frame makers	10	—	10
Pipe makers	—	2	2
Printers	3	7	10
Saddlers	3	—	3
Sausage makers	4	4	8
Sign writers	5	—	5
Steam pressers... ..	1	1	2
Sundry businesses	32	14	46
Sweet manufacturers	2	1	3
Tailors	73	2	75
Timber merchants	1	1	2
Trunk makers	4	—	4
Undertakers	11	1	12
Upholsterers	20	1	21
Washing machine manufacturers...	—	2	2
Watch makers	6	—	6
Wax figure manufacturers	1	1	2
Wheelwrights	7	1	8
Total	494	186	680

Factories and Workshops where women are employed.—The following table shows the various trades and occupations carried on in registered workshops and factories where women are employed :—

TRADE OR BUSINESS.	Workshops.	Factories.	Total.
Bakers	1	—	1
Blind makers	3	—	3
Blouse makers	3	—	3
Boot makers and repairers	5	1	6
Corset makers	9	—	9
Dressmakers and ladies' tailors	325	1	326
Dyers	7	1	8
Embroidery workers	6	—	6
Florists	12	—	12
Furriers	15	1	16
Hairdressers	19	—	19
Invisible menders	4	—	4
Jewellers	3	2	5
Knitted goods	2	—	2
Lace workers	3	—	3
Lampshade makers	4	—	4
Laundries	40	44	84
Milliners	47	—	47
Outfitters	5	—	5
Photographers	9	—	9
Picture frame makers	3	1	4
Restaurants	4	—	4
Sundry businesses	23	8	31
Toy makers	2	—	2
Umbrella makers	2	—	2
Upholsterers	10	—	10
Weavers	2	—	2
Total	568	59	627

Home Work.—Of the 207 outworkers registered, some are employed on premises which are factories or workshops within the meaning of the Factory and Workshop Act, 1901, others work in domestic workshops, whilst the remainder are the genuine "Home Workers" engaged in their homes on the work given out to them by various firms and contractors in Kensington and other districts.

The number of outworkers belonging to each of these three classes is shown in the following table :—

Outworkers in Workshops or Factories	53
Outworkers in Domestic Workshops	23
Outworkers in their own Homes	131
Total number of Outworkers	207

The factories and workshops referred to in the above list are included in the tables which show the trades carried on in the factories and workshops on the Council's Register.

The nature of the work given out to the 131 home workers on the register is as follows :—

Tailoring	70
Dressmaking	30
Bootmaking	12
Outfitting	4
Drapery	3
Linen working	3
Blouse making	2
Fancy goods	2
Underwear	1
Collar making	1
Confectionery	1
Embroidery	1
Box making	1

One instance of infectious disease occurring in premises where home work is carried on was reported during the year. In this case a child was notified as suffering from diphtheria and upon investigation the patient's father was found to be a tailor working at home. The child was removed to hospital and all necessary precautions were taken.

The appended table summarises the work for the year of the Women Health Officers under the Factory and Workshop Acts, so far as it is capable of being expressed in this form :—

1.	No. of Factory Inspections	...	...	...	...	124
2.	" Workshop	"	...	...	...	296
3.	" Home Workers' Inspections	...	...	...	...	175
4.	" Work Place	"	...	...	...	21

Home Office Tables.

The following tables contain a summary of the inspections made and the defects found and remedied in workshops and factories within the Borough, where men, women, or young persons are employed :—

I.—Inspections.

PREMISES.	Number of		
	Inspections.	Written Notices.	Prosecutions.
FACTORIES (including Factory Laundries) ...	320	33	—
WORKSHOPS (including Workshop Laundries) ...	716	42	—
WORKPLACES (other than Outworkers' premises) ...	163	4	—
Total	1199	79	—

II.—Defects Found.

PARTICULARS.	Number of Defects.			Number of Prosecutions.
	Found.	Remedied.	Referred to H.M. Inspector.	
<i>Nuisances under the Public Health Acts :—*</i>				
Want of cleanliness	85	85	—	—
Want of ventilation	5	5	—	—
Overcrowding	1	1	—	—
Want of drainage of floors	1	1	—	—
Other nuisances	21	21	—	—
Sanitary accom- modation { insufficient	1	1	—	—
{ unsuitable or defective	32	32	—	—
{ not separate for sexes	6	6	—	—
<i>Offences under the Factory and Workshop Act :—</i>				
Illegal occupation of underground bakehouse (S. 101)	1	1	—	—
Breach of special sanitary requirements for bakehouses (SS. 97 to 100)	—	—	—	—
Other Offences	5	4	1	—
(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	158	157	1	—

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

III.—Outwork in Unwholesome Premises (Section 108).

No case came to my notice during the year of outwork being carried on in unwholesome premises.

MATERNITY AND CHILD WELFARE.

The Borough Council's Scheme of Maternity and Child Welfare work includes the following amongst other activities :—

- (a) Home visiting of expectant and nursing mothers and children by the Council's staff of Women Health Officers.
- (b) Co-ordination of the work of the voluntary maternity and child welfare institutions in the Borough.
- (c) The subsidisation of the voluntary infant welfare institutions.
- (d) The provision of "home helps."
- (e) The provision of hospital accommodation for infants.
- (f) The provision of convalescent home accommodation for mothers and infants.
- (g) The provision of home nursing for sick mothers and infants.
- (h) The supply of milk and meals free or at a reduced price to necessitous mothers and infants.
- (i) The provision of a maternity home.
- (j) Arrangements for the treatment of ophthalmia neonatorum and zymotic enteritis.
- (k) The subsidisation of a massage and electrical treatment centre for cases of infantile paralysis, etc.
- (l) Addresses on health and the prevention of disease by a Health Lecturer.
- (m) The distribution of pamphlets and booklets giving advice on various matters concerning the welfare of mothers and infants.

WOMEN HEALTH OFFICERS.

The work performed by the Women Health Officers in 1929 in regard to Maternity and Child Welfare is summarised in the following table :—

Description of Work.	Health Officers.							Total.
	No. 1.	No. 2.	No. 3.	No. 4.	No. 5.	No. 6.	No. 7.	
Visits to Infants under the age of 21 days. (First Visits) - -	258	293	283	330	370	30	285	1,849
Re-visits to Infants under the age of 12 months - - -	913	527	518	609	1,065	180	393	4,205
Visits to Children between 1 and 5 years	1,395	1,530	1,274	1,047	745	377	874	7,242
Still-birth Enquiries - - -	5	9	7	—	16	2	1	40
Visits to Ophthalmia Cases - - -	4	6	7	5	11	—	4	37
Return Visits to Ophthalmia Cases - -	7	15	2	15	52	—	5	96
Visits to Measles Cases - - -	46	18	35	14	67	7	99	286
Visits to Whooping Cough Cases - -	61	124	104	33	101	11	52	486
Visits to Puerperal Fever Cases - -	1	—	—	1	4	1	3	10
Visits to Puerperal Pyrexia Cases - -	7	3	11	10	7	—	6	44
Visits to Enteritis Cases - - -	42	29	56	18	27	2	9	183
Infantile Death Enquiries - - -	16	33	25	37	43	3	31	188
Investigations <i>re</i> Milk Applications -	66	31	97	76	122	14	17	423
Ante-natal Visits - - -	40	61	62	122	183	62	131	661
Half-days at Welfare Centres - - -	138	142	148	121	265	38	94	946
Special Visits - - -	159	144	285	280	238	228	330	1,664

The visiting in connection with tuberculosis and factories and workshops is dealt with in the sections of this report dealing with those subjects, and a complete record of the work performed by each Woman Health Officer during the year appears in Table 5 of the Appendix.

INFANT WELFARE CENTRES.

There are eight Voluntary Infant Welfare Centres in Kensington, and the Borough has been mapped out into a similar number of areas with one Centre in each, an attempt having been made to place each home in the area of that Centre most accessible to the mother.

During the years 1928 and 1929, the Council have purchased the premises of four of the Infant Welfare Centres, with the result that all the Infant Welfare Centres in the Borough are now under satisfactory ownership. The premises acquired are those of the Bramley Road, Earl's Court, Lancaster Road, and Raymede Centres. Kenley Street Infant Welfare Centre was built by the Council on land purchased by them; the Golborne Infant Welfare Centre is conducted on premises owned by the Paddington Borough Council; the Archer Street Infant Welfare Centre premises have been given by Mrs. Sidney Brown for permanent use as an Infant Welfare Centre, and have been vested in three trustees, one of which is the Medical Officer of Health of Kensington; and the Campden Hill Infant Welfare Centre premises were specially built by Mr. Booth, the husband of one of the principal ladies at this Centre.

These institutions are mainly supported by (1) voluntary contributions, (2) grants from the Ministry of Health, and (3) grants from the Borough Council. The medical and nursing staffs are engaged by the Voluntary Committees. A Woman Health Officer is attached to each Welfare Centre and, except at Campden Hill, has an office on the premises where she keeps her records and in which she arranges home visiting work in consultation with the staff and the Voluntary Committee.

The principal duties of a Welfare Centre are those of an educational institution—providing advice and teaching for the mothers in the care and management of little children with a view to maintaining them in good health.

The work done at the Infant Welfare Centres during the year 1929 is shown in the following table:—

Particulars of Work done.	Archer Street.	Bramley Road	Campden Hill.	Earl's Court.	Golborne.	Kenley Street.	Lancaster Road.	Raymede.	TOTALS.
1—No. of births occurring in the area of the Centre suitable for Welfare attention...	109	315	78	251	299	220	385	287	1944
2—No. of sessions at which doctor attended for infant consultations ...	93	151	89	99	148	100	138	148	966
3—No. of sessions at which doctor attended for special ante-natal consultations ...	21	51	12	12	21	49	21	51	238
4—Total number of individual mothers who attended during the year ...	413	482	140	141	477	221	631	631	3136
5—Number of individual mothers who attended ante-natal sessions during the year ...	54	89	32	98	46	66	97	106	588
6—Total number of individual children who attended during the year... (Old)	203	275	80	226	360	96	372	315	1927
" " " (New)	189	271	83	174	293	177	325	237	1749
7—Total attendances at Centre of mothers for all purposes. (Excluding the accompanying of children and for the purpose of buying dried milk or other article) ...	797	1502	684	1800	2009	2299	3381	3226	15698
8—Total attendances at Centre of children for all purposes ...	3215	5986	2075	4248	6808	2453	8090	8129	41004
9—Total attendances at dinners (Included in Nos. 7 and 8 above)—									
1. Mothers ...	—	—	—	—	639	—	1446	—	2085
2. Children ...	—	—	—	—	—	—	1724	—	1724
10—Total attendances at doctors' consultations—									
1. Ante-natal mothers ...	151	420	71	237	111	243	255	297	1785
2. Post-natal mothers ...	95	166	—	549	588	195	89	271	1953
3. Children ...	2143	4181	1524	3337	4405	1808	3504	4118	25020
11—Average attendances at doctors' consultations—									
1. Ante-natal mothers ...	7	8	6	19	5	5	12	6	8
2. Post-natal mothers ...	1	1	—	5	4	2	1	2	2
3. Children ...	23	28	17	34	30	18	25	28	26
12—Number of individual children weighed during the year ...	392	546	163	378	653	273	697	525	3627
13—Total weighings ...	2816	5825	1549	4030	6472	2306	6284	7253	36535
14—Number of first visits paid by salaried workers to—									
1. Expectant mothers ...	35	41	22	6	113	164	135	112	628
2. Children ...	42	3	64	28	—	—	260	—	397
15—Total number of home visits paid by salaried workers to—									
1. Expectant mothers ...	101	102	42	65	243	374	160	201	1288
2. Children ...	1464	1136	661	1927	4261	369	1059	2318	13195
16—Number of home visits paid to children by voluntary workers —									
1. First visits ...	—	—	—	—	—	—	—	—	—
2. Total visits ...	—	172	—	—	—	—	—	—	172

The old premises at No. 127, Ladbroke Road, which contained three wards accommodating twenty beds, were unsuitable for the purposes of a hospital. No. 1, Ladbroke Square is a large non-basement corner-house, and is detached on three sides; it provides an isolation room, good staff accommodation, a kitchen on every floor, an operating theatre, and sunny wards which are capable of taking thirty-four beds.

In the Autumn the Committee of the Hospital made application to the Council for additional grant in view of the increase in expenditure entailed in maintaining the new and larger institution. The Council decided, however, to defer consideration of this request until the Ministry of Health had determined the relationship between the Council and the Hospital under the Local Government Act, 1929.

The transfer of the Hospital to the new premises took place in October, and the following figures include the work conducted on both the old and new premises :—

Records for the year 1929 :—

Number of infants in residence at commencement of the year	...	...	...	13
Number of admissions during the year	...	...	...	177
Number of discharges during the year	...	...	...	148
Number of deaths during the year	...	...	...	24
Number in residence at end of the year	...	...	...	18
Average duration of stay in hospital	...	...	...	69 days

As in previous years the Council made a grant of £200 to the Authorities of the Hospital towards the maintenance for a further period of twelve months of two beds therein, to be placed at the disposal of the Infant Welfare Centres serving the Borough.

ARTIFICIAL SUNLIGHT TREATMENT.

(THE BABY CLINIC AND HOSPITAL).

During the past year, 4,948 treatments were conducted in the Light Department of the Baby Clinic and Hospital, and the average weekly attendance was ninety-five. One hundred and fifty new cases were treated.

In the Department, there are two Mercury Vapour Lamps, two Radiant Heat Lamps, and one Long-Ray Red Lamp.

It has been found in most cases beneficial to have massage and rhythmic exercises carried out together with the light treatment, and in a number of cases electrical treatment is given with definite remedial exercises.

Several children, resident in Kensington, have been referred from Great Ormond Street Children's Hospital, and from the Orthopaedic Department of Westminster Hospital for light treatment and exercises, as well as a considerable number of children from the Infant Welfare Centres serving the Borough.

Instruction to the mothers on the value of sunlight in general, has been given throughout the year, and during the Summer months effective use was made of the excellent roof garden at the Clinic.

The cases treated have been mostly children suffering from rickets, bronchitis, abdominal tuberculosis, undernourishment and general debility following measles and whooping-cough.

The cases of rickets and debility following measles and whooping-cough have shown the most marked improvement.

The usual course of treatment has been increased to an average of four months with exposures twice a week, and it has been found more beneficial to have very short ultra-violet ray exposures during the first half of the course. There is then an interval of four to six weeks and frequently a second course of three months is given.

MASSAGE AND ELECTRICAL TREATMENT CENTRE.

Massage and electrical treatment is undertaken at the Princess Louise Kensington Hospital for Children and the following is a record of the work conducted thereat during the year 1929:—

New Cases—				
Under 5 years of age	...	...	...	20
Over 5 years of age	...	...	...	140
				160
Discharged—				
Under 5 years of age	...	...	...	10
Over 5 years of age	...	...	...	108
...	...	...	...	118
...	...	...	...	118
Transferred to other Hospitals because over age	...	...	...	21
Total cases treated	...	...	...	219
Total treatments given...	...	...	...	3756

The Borough Council make a grant of £50 per annum to the authorities of the Hospital for this treatment.

Massage treatment for children is also provided at the Archer Street and Campden Hill Infant Welfare Centres. Trained masseuses voluntarily attend these institutions.

KENSINGTON MATERNITY HOME.

The Kensington Maternity Home was opened in 1924 and consists of a detached ward of ten beds in the southern portion of the grounds of St. Mary Abbots Hospital. The Home is available for married women of all classes whose home conditions are not suitable for their confinement and who cannot afford to pay the fees charged in private nursing homes.

Statement of Work done during last five years.

	1925.	1926.	1927.	1928.	1929.
No. of applications for admission	112	135	143	185	177
No. of applications accepted	111	134	137	170	162
No. of applications withdrawn after acceptance	5	4	10	14	17
No. of women confined during the year ...	108	123	126	143	141

The gross cost of the scheme to the Council during the year was £751 10s. 0d.

The assessments made in respect of patients whose applications were accepted and not withdrawn during the year amounted to £526 10s. 0d. Payments made by patients totalled £523 2s. 0d.

The Council make an additional payment to the Guardians of £30 per annum on condition that this money is used to enable Dr. Remington Hobbs, the Medical Superintendent, to retain the services of an assistant for the purpose of carrying out the treatment of inflammatory conditions in women confined in the Kensington Maternity Home.

DAY NURSERIES.

The following table shows a record of children's attendances at the four Day Nurseries in the Borough in the year 1929 :—

	Gol- borne.	Lan- caster Road.	Notting Hill.	St. Cle- ment's.	Totals.
1. Whole day attendances of children under 3 years of age	6092	2074	8531	2299	18996
2. Whole day attendances of children over 3 years of age	2275	2947	2862	921	9005
3. Total whole day attendances	8367	5021	11393	3220	28001
4. Charges made for each attendance of a child	10d.	9d.	8d.	1/-	—
5. Half-day attendances of children under 3 years of age	—	—	—	330	330
6. Half-day attendances of children over 3 years of age	—	—	—	117	117
7. Total half-day attendances	—	—	—	447	447
8. Charges made for each attendance of a child	—	—	—	6d.	—
9. Average daily attendance of children ...	37	23	49	20	—

HOME FOR DESERTED, WIDOWED OR UNMARRIED
MOTHERS AND THEIR CHILDREN,
466, UXBRIDGE ROAD.

A record of work done in 1929 is shown in the following table :—

Expectant and Nursing Mothers.

No. in residence at the commencement of the year ...	10
No. admitted during the year	9
No. remaining in residence at the end of the year ...	10
Average duration of stay after confinement (in days) ...	685

Infants.

No. in residence at the beginning of the year	10
No. admitted during the year	9
No. remaining in residence at end of the year	10
Average duration of stay (in days)	685

NATIONAL CHILDREN'S ADOPTION ASSOCIATION HOSTEL.

(TOWER CRESSY, CAMPDEN HILL).

This institution is situated in the Borough, but the work is national rather than local. Unwanted infants are received from various parts of the country and are cared for until adopted by some reputable person.

RECORD OF WORK DONE IN 1929.

Number of children in the institution at the commencement of the year	16
Number admitted during the year - - - -	158
Number discharged during the year - - - -	152
Number in residence at the end of the year - - - -	22
Average duration of stay of each child in the institution - - - -	37 days.

THE CREAGH NURSERY TRAINING SCHOOL.

(No. 38, HOLLAND VILLAS ROAD).

This institution was opened in 1923, and has accommodation for 24 infants and 19 students. The children received are those whose mothers are unable to look after them at home; the majority of the mothers reside in London.

RECORD OF WORK DONE IN 1929.

Number of children in the institution at the commencement of the year	-	-	-	-	-	24
Number admitted during the year	-	-	-	-	-	58
Number discharged during the year	-	-	-	-	-	58
Number in residence at the end of the year	-	-	-	-	-	24
Average duration of stay of each child in the institution	-	-	-	-	-	12 months.

CONVALESCENT HOMES.

The Council, under their Maternity and Child Welfare scheme, provide convalescent home treatment for mothers with babies under the age of six months. The following table shows the institutions to which mothers and infants were sent during 1929, together with the number of cases admitted. Each mother and baby stays in the home for a period of fourteen days.

St. Mary's Convalescent Home, Birchington-on-Sea, Kent.

No. of mothers admitted with babies	-	-	-	5
No. of mothers admitted without babies	-	-	-	1

Evelyn Convalescent Cottage Home, Wargrave, Berkshire.

No. of mothers admitted with babies	-	-	-	8
No. of mothers admitted without babies	-	-	-	5

Hambleton Cottage Home, Surrey.

No. of mothers admitted with babies	-	-	-	3
No. of mothers admitted without babies	-	-	-	2

George Whitlow Convalescent Home, Taplow, Bucks.

No. of mothers admitted with babies	-	-	-	10
No. of mothers admitted without babies	-	-	-	2

The total cost to the Council for convalescent treatment during the year was £62 19s. 6d.

The St. Mary's Convalescent Home is open for the reception of patients throughout the year, but the Evelyn, Hambleton, and George Whitlow Homes are closed during the Winter months.

HEALTH LECTURER.

A new feature in connection with Maternity and Child Welfare work was introduced by the Borough Council during the year 1926 by the appointment of a part-time Woman Health Lecturer. This lady gives addresses in the afternoons at the Infant Welfare Centres and the Baby Clinic, and lectures in the evenings at women's and girls' clubs, etc. Nearly all the latter institutions have been eager to reserve definite dates for further lectures.

The following statistics show the work done by this officer during the year under review:—

No. of persons attending lectures	...	...	...	11,143
No. of lectures given	...	...	...	333
No. of visits paid to Centres	...	...	...	296
No. of special visits	...	...	...	175

HOME HELPS.

Seven applications were received during the year for the provision of Home Helps under the Council's Scheme. The assistance requested was granted in six cases for a period of fourteen days each; the remaining application was refused. The gross cost of the Scheme to the Council during the year was £9.

SUPPLY OF EXTRA NOURISHMENT FOR EXPECTANT AND NURSING MOTHERS AND FOR INFANTS.

In the year 1929 there were 430 grants of milk made by the Council's Milk Sub-Committee. One hundred and forty-six of the grants were in response to new applications, and the remaining 284 were renewals of grant.

Six applications for dinners were granted; 4 of these were new applications, and 2 were renewals.

Particulars of Fresh Milk supplied under the Council's Scheme.

No. of pints of Milk granted.	Price per pint paid by Recipients.	Estimated Cost to Council.
12,040	Free	£ s. d. 168 16 0

Particulars of Dried Milk supplied Free or below Cost Price under the Council's Scheme.

No. of packets of Milk granted.	Price per 1 lb. packet paid by Recipients.	Estimated Cost to Council.
71	Free	£ s. d. 5 6 6

Particulars of Dried Milk supplied at Cost Price under the Council's Scheme.

Name of Welfare Centre at which the dried milk was distributed.	No. of 1lb. packets sold.	Value of milk sold.
		£ s. d.
Archer Street - -	1,984	148 16 0
Bramley Road - -	1,342	100 13 0
Campden Hill - -	605	45 7 6
Golborne - - -	441	33 1 6
Kenley Street - -	109	8 3 6
Lancaster Road - -	3,931	296 16 6
Raymede - - -	2,273	170 9 6
—	10,685	803 7 6

Particulars of Dinners supplied under the Council's Scheme.

No. of dinners granted.	Price per Dinner paid by Recipients.	Estimated Cost to Council.
120	Free	£ s. d. 3 0 0

The Mutual Registration of Assistance Society (a branch of the Charity Organization Society) has been of considerable help to the Council's Milk Sub-Committee in providing information of the assistance being given by other bodies to applicants for milk at a reduced price or free of cost, and the Council acknowledge the value of the work by making an annual grant of £10 to the Society.

The Council's Milk Sub-Committee work in close co-operation with the Board of Guardians and a scheme has been formulated whereby milk and dinners recommended by the Milk Sub-Committee are supplied by the Board to certain nursing mothers who are already in receipt of Poor Law relief. This scheme obviates the undesirable practice of a person being granted a somewhat similar form of relief by two different authorities.

The number of dinners supplied during the year by the Board of Guardians under this scheme was 358 and the cost of these dinners to the Guardians was £8 19s. 0d.

NOTE—The figures for fresh milk supplied by the Guardians after recommendation by the Milk Sub-Committee cannot be given separately.

THE WORK OF THE ADVISORY COMMITTEE TO THE MATERNITY AND CHILD WELFARE COMMITTEE.

This Committee was formally constituted by the Council in 1920, and is composed of two representatives appointed by each of the eight Infant Welfare Centres, with two appointed by the Baby Clinic.

On the re-election of the Committee in January, 1929, the membership was as follows :—

<i>Centre.</i>	<i>Representatives.</i>
Archer Street Infant Welfare Centre	Mrs. Hillis and Mrs. Jacobs.
Bramley Road " " "	Mrs. Carnegie and Mrs. Graham Campbell.
Campden Hill " " "	Mrs. Nisbet and Mrs. Arnold.
Earl's Court " " "	Lady Trustram Eve, L.C.C., J.P., and Mrs. Leveson.
Golborne " " "	Mrs. Swan and Miss Fraser.
Kenley Street " " " " " " "	Mrs. Pott and Miss Brooke.
Lancaster Road " " "	Mrs. Burne, M.B.E., and Mrs. Webb.
Raymede " " "	Mrs. Fox and Mrs. Sedgwick.
The Baby Clinic " " " " " " "	Lady Maurice and Dr. E. Bentham, M.P., J.P.

Mrs. Burne was re-appointed Chairman and Mrs. Swan Vice-Chairman.

Various matters in connection with the work of the Infant Welfare Centres and maternity and child welfare generally were considered by the Committee at their meetings during the year. The members of the Advisory Committee possess expert knowledge in regard to many branches of Maternity and Child Welfare work, and it is owing largely to this fact that the Council's scheme operates so smoothly and successfully.

HOUSING.

In previous annual reports, various questions in regard to housing have been considered on the basis of figures obtained from the last census returns, which have been brought up to date in regard to population by the addition of the births taking place in the borough and the various wards thereof and the subtraction of the deaths.

Owing to the volume of inward and outward migration of persons, both in regard to the borough and the various wards, which has taken place since the census year of 1921, the figures for population cannot be relied upon, with the result that any deductions made therefrom may be erroneous. In these circumstances, it is probably wise to limit this year's report to a consideration of the work in regard to housing carried out recently and to await the next census returns before attempting to arrive at conclusions based on statistics.

STEPS TAKEN BY THE COUNCIL TO SECURE AND MAINTAIN A HIGHER STANDARD OF HABITABILITY IN HOUSES.

Every house in the borough is inspected after a case of infectious disease has been reported therefrom and on receipt of a complaint. The number of houses so inspected in 1929 was 3,552 and the total number of inspections paid to these houses was 14,264.

Each of the ten district sanitary inspectors attempts to make a routine inspection of ten houses every month, but owing to pressure of other work, the number of these inspections in 1929 was only 675. This inspection or survey includes the ascertainment of the cubic capacity of all the rooms, the testing of the drainage system and the preparation of a list of all defects found and improvements required.

In addition to this routine work, special efforts have been made in recent years and those for 1929 may be described briefly under the following headings :—

Inspections of Houses Let in Lodgings.—Registration of houses let in lodgings commenced in 1886 and at the beginning of the year 1929 there were 3,402 on the register. During the year, three houses were added to and fifty were removed from the register owing to the number of families therein having changed; therefore at the end of 1929, the number remaining on the register was 3,355.

For many years past, the district sanitary inspectors have endeavoured to visit every registered house in the borough at least once a year but, as a result of the increase in the number of houses on the register and the volume of other work, it has been found impossible to make an inspection of all registered houses during a period of twelve months. In the year 1929, the number of registered houses inspected was 1,192, and the visits paid to these houses numbered 7,668.

Inspections of Mews Dwellings.—There are just over two thousand mews dwellings in the borough and in 1925 the sanitary inspectors commenced the work of inspecting and bringing these habitations up to a reasonable standard of habitability. By the end of the year 1928, 1,189 had been dealt with; during the year 1929, forty-seven were inspected, and thirty-four written intimation notices were served.

The routine inspections may be considered to be completed as far as is necessary, for most of the mews dwellings remaining uninspected are in South Kensington and are in a satisfactory condition or have in recent years been converted into private houses which are let at good rentals to people of the professional or semi-professional classes.

Closing Orders.—Seventy-nine underground rooms were submitted to routine inspection; three of these were reported to the Public Health Committee as not complying with the Council's regulations and in each case a Closing Order was issued.

Work under Section 3 of the Housing Act, 1925.—Section 28 of the 1919 Act (now repealed) provided that if the owner of a house suitable for the working classes failed to keep it in all respects reasonably fit for habitation, the Council could require him to execute such works as were necessary. The owner could appeal and might, in certain circumstances, close the house; but if he neither exercised his rights nor carried out the repairs, the Council could do the work and recover the cost thereof with interest.

Section 28 has been replaced by Section 3 of the Housing Act, 1925, which, in addition to giving powers similar to those under Section 28, grants to the Council the powers and remedies of a mortgagee under the Conveyancing Acts, 1881-1922, for the purpose of recovering their expenses.

In the early part of 1929, it was found that the staff could not, owing to the complicated procedure laid down in the Section, deal with more than several cases at one time and, in consequence of arrears of work accumulating, an additional clerk was appointed to attend to the volume of clerical work on hand. The clerk commenced duty in the beginning of August and a general speeding-up in the service of Section 3 notices has resulted.

Before the new clerk entered upon his task, nineteen notices had been served in the first seven months of the year. From August to the end of the year, a further seventy-five notices were served. The following table gives a statement of the action taken and the results obtained during the year:—

Number of houses in respect of which Section 3 notices were served	...	94
Number of houses in which repairs were completed satisfactorily during the year by the owners	... ..	16
Number of houses in which the Council carried out the repairs in default of the owners	... ..	2
Number of houses where the work was in satisfactory progress by the owner at the end of the year	... ..	54

In eight cases where the owners had failed to comply with the notices during the time allowed, tenders were invited with a view to the work being carried out on behalf of the Council; in all but two of these the owners finally carried out the work themselves. The majority of the notices were served in the latter part of the year and the time allowed had not expired in a number of these on the 31st December.

During 1929, there were no appeals made by owners to the Ministry of Health in respect of notices served in the year; but in 1928, an owner appealed to the Minister in respect of notices served on four of his houses, and in January, 1929, the Minister issued an order confirming the Council's action and ordering the appellant to pay costs. The Council eventually accepted a tender for the work to be carried out on their behalf and subsequently made application to the owner for payment of their expenses. In December, 1929, the owner appealed to the Minister of Health in respect of the amount charged for the work and on the 7th April, 1930, the Minister dismissed this appeal.

On the introduction of Section 3 of the 1925 Act, the Council's position was rendered more secure and they felt justified in using this section more frequently. Up to the end of 1929, the houses in regard to which notices have been served under Section 28 of the 1919 Act or Section 3 of the 1925 Act numbered 242. In only eighteen cases has it been necessary for the Council themselves to carry out the repair work on failure by the owner, and in these the total expenditure by the Council has been £2,333. Of this amount, £1,339 has been recovered and the remaining £994, with interest, is now being received in instalments. There is no reason to believe that the Council will not be fully reimbursed in all cases.

The careful checking of schedules of repairs, the numerous interviews with owners and the daily supervision of the repair work in progress has proved a greater task than was contemplated, and at the end of the year it appeared that the work might have to be curtailed. It would have been a matter of regret if the satisfactory progress in the reconditioning of working class houses in the borough had to be checked owing to the inadequacy of the Council's staff for the purpose of supervision, therefore the Council, early in 1930, decided to appoint a temporary sanitary inspector to take charge of one of the districts in order to allow an experienced officer to undertake the work of preparing notices and schedules, interviewing owners and builders, and supervising repair work carried out by owners.

A very good standard of work is being obtained under the operation of Section 3, and recently it has been noted that there has even been an improvement in this standard and that owners are responding more readily to the notices served upon them.

Thus there appear to be good grounds for believing that the procedure under Section 3 will prove of considerable value in improving the working class houses generally within the borough.

Inspections of Hotels, Boarding-Houses and Restaurants.—The report dealing with the work carried out under this heading will be found on page 33 in the section "Sanitary Circumstances of the Area."

MEASURES TAKEN TO DEAL WITH INSTANCES OF OVERCROWDING AND INDECENT OCCUPATION DISCOVERED.

The following table shows the number of cases of overcrowding and indecent occupation detected in the last five years and the effectiveness of the action taken can be deduced therefrom.

	1925	1926	1927	1928	1929
OVERCROWDING :—					
Intimation notices served	75	103	88	72	33
Statutory notices served where the intimation notice was not complied with	60	38	28	10	13
Summonses issued	8	6	9	3	3
INDECENT OCCUPATION :—					
Intimation notices served	40	79	92	84	23
Statutory notices served where the intimation notice was not complied with	21	12	2	6	1
Summonses issued	1	—	—	1	—

As only 29 summonses were eventually issued in 371 cases of overcrowding, and only two summonses in regard to 318 cases of indecent occupation in the five years, it will be seen that 658 families were able to improve their accommodation without the Council having to resort to extreme measures. Moreover, the figures for 1928 and 1929, when compared with those for the preceding years, suggest that those on whom notices were served for overcrowding had less difficulty in securing alternative accommodation than was experienced in previous years.

At the commencement of 1925 a new step was adopted for the purpose of relieving cases of overcrowding. The Public Health and Special Housing Committees arranged that immediately a new house provided by the Council had been let, the Town Clerk should supply me with information as to the name and address of the future tenant. This information has enabled officers of the Public Health Department to know several weeks in advance of rooms which would become vacant, with the result that they have been able to approach the owners of these rooms and urge that they might be let to Kensington families known to be living under overcrowded conditions. The results obtained in the five years have been as follow :—

Number of Council houses let by Town Clerk and reported to the Medical Officer of Health	65
Number of instances in which the rooms vacated by the 65 tenants have been let to Kensington families whose previous accommodation was unsatisfactory or overcrowded	45

In 1925, the Housing Department of the London County Council commenced to send me information of all Kensington persons accepted as tenants for County Council houses in order that a similar procedure could be adopted in regard to rooms vacated by tenants leaving the borough for such houses. This practice has been continued and the following are the results for the five years 1925-1929 :—

Number of County Council houses let and reported to the Medical Officer of Health	...	...	...	...	...	...	...	...	...	207
Number of instances in which the rooms vacated by the 207 tenants have been let to Kensington families whose previous accommodation was unsatisfactory or overcrowded	...	...	...	...	...	...	...	...	...	106

During 1929, Miss Alexander furnished the Public Health Department with a list of the twenty-eight Kensington families for whom she had obtained accommodation on the Cleverly Estate at Hammersmith and in eighteen instances the rooms vacated in Kensington were used for the purpose of relieving congestion in other families living in the borough.

The secretary of the Sutton Trustees has undertaken to supply me with the name and address of each person to whom one of the 540 flats on the Dalgarno Gardens estate will be allotted ; and in the early part of 1930, the procedure adopted when families leave for County Council or Borough Council houses was put into operation in respect of families going to the Sutton Trustees Estate.

Several families living under overcrowded conditions have been provided with suitable accommodation by the voluntary housing associations in the borough.

Overcrowding can be and is dealt with by the Council under the Public Health Act and under the by-laws for houses let in lodgings made under the Housing Act, but the Council always hesitate to take proceedings and Magistrates have been loath to give full effect to the provisions of the law during the post-war period of shortage of housing accommodation. But the Public Health Committee have felt that when tenants have gone to municipal houses, or to houses owned by voluntary housing associations, the Council would be justified in taking more stringent measures in the event of overcrowding being allowed in the vacated rooms. They, therefore, have given instructions that on receipt of information in the Public Health Department that a new house has been allocated to a Kensington family, a communication should be sent to the owner of the rooms which will become vacant, warning him that the Council will take action at once if he allows them to become overcrowded again.

COMMON LODGING HOUSES.

Seven years ago, there were in the borough five women's common lodging houses and a Dr. Barnardo's Home for Women. One was situated in Sirdar Road, one in Bangor Street, three in Crescent Street and the Home was in Penzance Place. Curiously enough, these houses were situated within a stone's throw of one another and were located in the Notting Dale area of the Norland Ward. The total number of ordinary dwelling houses taken up by these common lodging houses was nine. All but one were houses of the ordinary basement type commonly found in that district and were originally built as single family houses ; they were ill adapted for their use and made probably the poorest kind of common lodging house in London. Perhaps the worst feature was the fact that in three cases the basement was used as a common kitchen and living room. Apart from the common lodging houses maintained by the Church Army and other philanthropic bodies, the women's common lodging houses in Kensington were the cheapest in London, the charge per woman per night for bed and use of kitchen and cooking utensils being 8d. It will be seen that they provided accommodation for the poorest of these unfortunate women who had drifted to a common lodging house life. There were also three common lodging houses for men, one in the Golborne Ward and two in Notting Dale.

In 1923, Dr. Barnardo's Home for Women was closed. In 1926, the women's common lodging house in Sirdar Road was purchased by the Improved Tenements Association and converted into two tenement houses. In 1928, the common lodging house situated at Nos. 18-20, Bangor Street was purchased by Miss A. M. Alexander and eventually converted into flats for seven families. In the same year, Miss Alexander purchased the common lodging house at Nos. 25-27, Crescent Street ; baths and additional water closets have been installed and many improvements made ; it has now been named " The Torch " and is carried on under the direction of Miss Alexander as a common lodging house for respectable women, the charge per night being one shilling. In the same year, the men's common lodging house in Kensal Road changed ownership and has now been converted by a voluntary body of ladies and gentlemen into an improved common lodging house for women under the name of " Cecil House."

These changes have effected a very considerable improvement in the district ; there are now only six common lodging houses in the borough, and two of these, namely, the one in Kensal Road and Nos. 25-27, Crescent Street, are under enlightened management and control.

The following table shows details of the accommodation available in the common lodging houses in the borough :—

Ward.	Name of registered keeper.	Address of common lodging house.	No. of lodgers for which licensed in 1929.		
			Male.	Female.	Total.
Golborne	Chesterton, Ada Elizabeth	194, Kensal Road	—	71	71
Norland	Woodhouse, Jane E. ...	10, Crescent Street	—	25	25
"	Hankins, John W. ...	28 & 30, do.	54	—	54
"	Woodhouse, Jane E. ...	40, do.	—	25	25
"	Alexander, Agnes Mary ...	25 & 27, do.	—	43	43
"	Cooper, Sagle	66, St. Ann's Road	66	—	66
		Totals	120	164	284

HOUSES LET IN FURNISHED ROOMS.

Houses let in furnished rooms constitute the most unsatisfactory and undesirable form of housing accommodation. In 1912, there were 187 of these houses in the borough, but year by year the number has so diminished that at the end of 1929, there remained only 29. These 29 are situated in the following parts of the borough :—

Norland Ward	13
Golborne Ward	11
Pembridge Ward	5
	—
	29
	—

HOUSING STATISTICS FOR 1929.

1.—UNFIT DWELLING-HOUSES.

Inspection—

(1) Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts)	5,513
(2) Number of dwelling houses which were inspected and recorded under the Housing Consolidated Regulations, 1925	675
(3) Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation ...	—
(4) Number of dwelling houses (exclusive of those referred to under the preceding heading) found not to be in all respects reasonably fit for human habitation	2,883

2.—REMEDY OF DEFECTS WITHOUT SERVICE OF FORMAL NOTICES.

No. of defective dwelling houses rendered fit in consequence of informal action by the local authority or their officers ...	433
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3.—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 repairs	94
(2) Number of dwelling houses which were rendered fit :—	
(a) By owners	16
(b) By local authority in default of owners	2
(3) Number of dwelling houses in respect of which closing orders became operative in pursuance of declarations by owners of intention to close	N

B.—Proceedings under Public Health Acts.

(1) Number of dwelling houses in respect of which notices were served requiring defects to be remedied	...	...	...	...	...	...	2,356
(2) Number of dwelling houses in which defects were remedied :—							
(a) By owners	...	...	...	...	...	...	2,287
(b) By local authority in default of owners	...	...	...	...	...	...	Nil

C.—Proceedings under Sections 11, 14, 15 and 18 of the Housing Act, 1925.

(1) Number of representations made with a view to the making of closing orders—							
Dwelling-houses	...	...	...	...	...	...	Nil
Underground rooms	...	...	...	...	...	...	24
(2) (a) Number of dwelling houses in respect of which closing orders were made	...	...	...	...	...	...	Nil
(b) Number of underground rooms in respect of which closing orders were made	...	...	...	...	...	...	3
(3) (a) Number of dwelling houses in respect of which closing orders were determined, the dwelling houses having been rendered fit	...	...	...	...	...	...	—
(b) Number of underground rooms in respect of which closing orders were determined, the rooms having been rendered fit	...	...	...	...	...	...	Nil
(4) Number of dwelling houses in respect of which demolition orders were made	...	...	...	...	...	...	Nil
(5) Number of dwelling houses demolished in pursuance of demolition orders	...	...	...	...	...	...	Nil

The principal improvements secured in carrying out the work indicated in the above table are as follow :—

Houses cleansed	...	...	...	...	...	...	1,239
House drains re-constructed	...	...	...	...	...	...	114
Defective drains repaired	...	...	...	...	...	...	181
House drains cleansed	...	...	...	...	...	...	303
Water closets re-constructed, repaired, &c.	...	...	...	...	...	...	802
" " supplied with water	...	...	...	...	...	...	357
" " new provided	...	...	...	...	...	...	376
Soil-pipes ventilated, repaired, &c.	...	...	...	...	...	...	190
" new provided	...	...	...	...	...	...	230
Cisterns cleaned, covered, &c.	...	...	...	...	...	...	188
Yards, areas paved, drained, repaired	...	...	...	...	...	...	307
Dustbins provided	...	...	...	...	...	...	484
Ashpits abolished	...	...	...	...	...	...	38
Accumulations of filth, &c., removed	...	...	...	...	...	...	288
Animals removed	...	...	...	...	...	...	37
Overcrowding abated	...	...	...	...	...	...	38
Underground rooms, illegal occupation discontinued	...	...	...	...	...	...	21
Roofs repaired	...	...	...	...	...	...	528
Houses provided with water above basement floor	...	...	...	...	...	...	61
Dampness in dwellings remedied	...	...	...	...	...	...	215
Other important repairs	...	...	...	...	...	...	1,529

HOUSING ACCOMMODATION OWNED AND MANAGED BY THE BOROUGH COUNCIL AND VOLUNTARY HOUSING ASSOCIATIONS.

Although it is impossible to give satisfactory housing statistics based on population figures, it will be interesting to give particulars of the housing accommodation owned and managed by the Borough Council and various voluntary housing associations operating in the borough.

Accommodation owned by the Council.—At the beginning of 1929, the Council were the owners of the following property :—

Cottages	54
Flats and tenements	388
Flats and maisonettes provided by conversion of large houses	102
	<hr/>
	544
	<hr/>

Of the above, 120 houses and flats were built by the Council prior to the War ; the remainder have been built or acquired since the War. The total expenditure by the Council in the provision of the above accommodation has amounted to £371,445.

No property was actually purchased by the Council during 1929, but two schemes received their approval, particulars of which are set out hereunder :—

(a) Over twenty years ago, the Council acquired the freehold interest of Nos. 10 to 24 (even numbers), Hesketh Place, and the site of certain properties at the rear of Runcorn Place ; and those leases which had not already expired were surrendered early in 1929. The Council thereupon approved a scheme for the erection upon the site of a block of eighteen flats, each containing a living room, three bedrooms, scullery with bathroom and W.C., and six flats, each containing a living room, two bedrooms, scullery with bathroom and W.C. Each tenant will have the use of the common washhouse on a portion of the roof of the building and also the use of the common drying ground on the remaining portion of the roof. The estimated cost of this scheme is £14,100 and, at the time of writing, the work is well advanced.

(b) In December, 1929, the Public Health Committee recommended the Council to buy Nos. 1, 3 and 5, Adair Road and Nos. 86, 88 and 90, Southam Street. The purchase took place in the early days of 1930. The houses are old, they have been subjected to rough usage and are in a very dilapidated state. The Council have not yet decided what they will do in regard to this property.

Accommodation provided by Housing Associations.—There are at work within the borough several voluntary housing associations which are carrying out good work. The principal objects of these bodies are—

- (a) the provision of new dwellings at reasonable rents,
- (b) the purchase and re-conditioning of defective houses,
- (c) the awakening of public opinion in regard to unsatisfactory housing conditions.

(A) The Kensington Housing Trust, of which Lord Balfour of Burleigh (Chairman of the Council's Public Health Committee) is Chairman, had, prior to 1929, purchased the following properties :—

- (a) Wornington Road area (48 houses—leasehold),
- (b) Thresher's Place (2 flats—freehold),
- (c) Walmer Road (1 house—leasehold),
- (d) Talbot Grove area (18 houses—leasehold),
- (e) Barandon Street (2 houses—leasehold).

During the year 1929, the Trust increased their activities. In Mary Place, Notting Hill, they erected Crosfield House, a large building containing thirty-six flats and maisonettes. The rents charged to tenants of these flats are low, thus the Trust have been able to provide accommodation for a number of families unable to pay the rents charged by other bodies. Crosfield House provides accommodation for nine families displaced by the clearance of the site, nine families transferred from basements, seven families which had previously been living in one room each ; the remaining eleven families accommodated at Crosfield House were selected from the worst-housed of the many applicants who had applied to the Trust for accommodation. The first tenants moved into Crosfield House in June, 1929, and the building was formally opened by H.R.H. The Duchess of York in July.

During the year, the Trust acquired the freehold interest of a block of properties in the Kensal Road district. Some of these properties are held on leases which will not expire for some time, but the Trust can secure the possession of four houses and three cottages which will enable them to clear an area of about a quarter of an acre on which it is proposed to erect a block of twenty-one flats, together with a shop for a disabled ex-Service man who is living on the site. Two vacant plots of land in Silchester Road have been purchased and plans are being completed for the erection of a block of flats on each site.

The Trust now house 257 families, comprising 1,280 persons, and their total expenditure has reached £48,500, of which £34,709 was incurred in 1929.

(B) Prior to 1929, the Wilsham Trust Company owned 222 houses and flats; during the year, they purchased seven single family houses, one tenement house and one flat, thus the total number of premises owned by this association at the end of the year under review was 231.

(C) The Improved Tenements Association, on the 1st January, 1929, owned the following :—

Freehold houses	100
Leasehold houses	38
Freehold ground rents	32
Total	<u>170</u>

During the year, the association acquired the freeholds of sixteen houses, the leaseholds of thirteen and the freehold ground rents of seven others.

(D) One or two small associations, closely associated in regard to management with the Wilsham Trust Company, own thirty-six houses and nine flats.

The following table shows the housing accommodation (freehold and leasehold) in North Kensington owned and managed by the Kensington Borough Council and voluntary housing associations at the end of 1929 :—

	Single family houses.	Self-contained flats.	Tenement houses let in lodgings.	TOTALS.		
				No. of houses or flats	No. of families.	No. of persons.
Kensington Borough Council.						
Owned before 1929	54	490	—	544	544	2,660
Acquired during 1929	—	—	—	—	—	—
Kensington Housing Trust.						
Owned before 1929	—	4	49	53	187	935
Acquired during 1929	3	36	22	61	70	345
Wilsham Trust Company.						
Owned before 1929	124	49	49	222	358	1,785
Acquired during 1929	7	1	1	9	11	44
Improved Tenements Association.						
Owned before 1929	42	16	80	138	369	1,845
Acquired during 1929	6	—	19	25	81	405
Others.						
Owned before 1929	2	9	33	44	115	411
Acquired during 1929	—	—	1	1	5	18
Totals	238	605	254	1,097	1,740	8,448

The Council's properties in Kenley Street, Hesketh Place, Runcorn Place, Sirdar Road, St. James' Place and Bosworth Road, and those owned by the Kensington Housing Trust, the Wilsham Trust Company, and the Improved Tenements Association, are managed by a group of women house property managers working under the direction of Miss Dicken. These ladies manage these properties on the "Octavia Hill" system and have given considerable assistance to the Council in dealing with cases of overcrowding and indecent occupation.

In addition to the accommodation referred to in the above table, the Sutton Trustees were building, during 1929, 540 flats on a site of about eight acres in Dalgarno Gardens, North Kensington. Particulars of the flats are as follow :—

38 one room and scullery bathroom.		
127 two rooms	"	"
275 three rooms	"	"
100 four rooms	"	"
<hr/>		
540		
<hr/>		

The rents of these flats will range from 6s. to 15s. per week. Several blocks have been completed and the first flats were occupied in January, 1930. The total cost of the scheme will be £301,136.

HOUSING ACCOMMODATION PROVIDED OUTSIDE THE BOROUGH FOR KENSINGTON FAMILIES.

The Borough Council have made special arrangements with the London County Council by which ninety-nine Kensington families have been placed in new housing accommodation on the County Council's Wormholt estate adjacent to North Kensington, and have agreed to pay the sum of £7 per house per annum for a period of twenty years in respect of this accommodation.

It may be mentioned further that the London County Council, in connection with their large housing estates, allocate fifty per cent. of the accommodation to applicants nominated by the Borough Councils and reserve the remaining fifty per cent. for applicants on their own general list. The following table shows the number of Kensington families accommodated on the London County Council housing estates up to December, 1929.

Families nominated by the Borough Council	...	...	...	...	242
Families selected by the London County Council	477
Families accommodated as special hardship cases	15
<hr/>					
Total	734
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In the 734 families leaving Kensington, there were 4,240 persons.

In 1929, Miss R. F. Alexander, who had secured an interest in the Peabody Buildings which have been erected on the Cleverly estate at Hammersmith, obtained accommodation in these buildings for twenty-eight Kensington families.

FOOD SUPPLY.

The Food and Drugs (Adulteration) Act, 1928—This Act, which came into operation on the 1st January, 1929, has for its object the consolidation of the Sale of Food and Drugs Acts. Being a consolidating measure only, it does not alter the law relating to the sale of food and drugs, but it incorporates into one enactment, the legislation relating to the subject hitherto provided in eleven separate Acts of Parliament. This action by Parliament has very much simplified the valuable legislation for protecting the public food supply.

The Council's Food Inspector is the Sampling Officer under the Act, and he is instructed to take samples in any place within the Borough. The samples procured are of two kinds, namely, formal and informal.

(a) *Formal Samples*.—These are samples which are taken strictly in conformity with the requirements of the Food and Drugs (Adulteration) Act, 1928, and during the year the Food Inspector collected 746, of which 35 or 4.7 per cent. were adulterated. Particulars of formal samples collected are as follow :—

Nature of sample.	Number taken.	Number adulterated.
Almonds, Ground	6	—
Arrowroot	6	—
Bacon	6	—
Beef	3	—
Brawn	3	—
Butter	54	4
Cakes, Sponge	14	—
Cheese	12	—
Cocoa	5	—
Coffee	9	—
Coffee and Chicory	2	—
Cornflour	3	—
Cream	27	—
Flour	3	—
Fish, Potted	12	—
Fruit, Dried	12	—
Ginger, Ground	3	—
Ham	10	—
Honey	6	—
Ice Cream	6	—
Lard	12	—
Lemon Cheese	6	—
Lemon Squash	5	—
Margarine	32	—
Meat, Potted	11	—
Milk	343	27
Mincemeat	6	—
Mustard	4	—
Mustard Mixture	2	—
Pepper	6	—
Powder, Licquorice	4	—
Prescription, Medical	2	—
Rice	9	—
Sago	1	—
Sausages	42	1
Semolina	2	—
Sweets	9	—
Tea	3	—
Vinegar	36	2
Whisky	6	1
Wine, British	3	—
Totals	746	35

(b) *Informal samples.*—These are taken without compliance with the strict formalities of the Food and Drugs (Adulteration) Act, and serve to show the conditions obtaining without disclosing to the vendor the fact that samples are being taken for analysis. Particulars of informal samples collected are as follow :—

Nature of sample.	Number taken.	Number adulterated.
Bacon	1	—
Butter	25	2
Cakes, Sponge	3	—
Cheese	6	—
Cream	13	—
Dripping	4	—
Fish, Potted	3	—
Fruit, Canned	9	2
Ham	4	—
Honey	6	—
Lard	3	—
Lemon Cheese	3	—
Magnesia, Citrate of	3	—
Margarine	16	1
Meat, Potted	9	—
Milk	182	8
Milk, Condensed	7	—
Milk, Dried	4	—
Mince-meat	3	—
Oil, Olive	3	—
Sausages	21	1
Sausage Colouring	1	—
Sausage Seasoning	1	—
Sweets	4	—
Vinegar	18	—
Wine, British	2	—
Totals	354	14

The following is a summary of the results of analysis of the 49 adulterated formal and informal samples, together with a record of the action taken by the Council :—

Article analysed.	Nature and amount of adulteration.	Action taken.
Butter	100 per cent. margarine.	Vendor cautioned.
"	100 " "	Proceedings. Fined £5 and 10s. 6d. costs.
"	100 " "	" " "
"	100 " "	Informal sample.
"	16 " foreign fat.	Proceedings. Fined £5 and 10s. 6d. costs.
"	2.06 " excess of water.	Informal sample.
Fruit, Canned ...	0.44 grains of tin per lb.	" "
" "	0.65 " "	" "
Margarine	0.73 per cent excess of water.	" "
Milk	40 " of the required fat deficient.	" "
"	12 " " "	Proceedings. Fined £1 and 10s. 6d. costs.
"	10 " " "	Proceedings. Summons dismissed on defendant paying £2 2s. 0d. costs.
"	8 " " "	Proceedings. Fined £2 and 10s. 6d. costs.
"	8 " " "	Proceedings. Summons dismissed on defendant paying £3 3s. 0d. costs.
"	7 " " "	" " "
"	7 " " "	Informal sample.
"	5 " " "	Vendor cautioned.
"	4 " " "	" "
"	4 " " "	Informal sample.
"	3 " " "	Vendor cautioned.
"	2 " " "	" "
"	2 " " "	No action taken.
"	2 " " "	Informal sample.
"	13.3 " extraneous water.	Proceedings. Summons dismissed on defendant paying £3 3s. 0d. costs.
"	7.5 " " "	" " £2 2s. 0d. "
"	7 " " "	" " £3 3s. 0d. "
"	7 " " "	Proceedings. Fined £1 and 10s. 6d. costs.
"	5 " " "	Proceedings. Summons dismissed on defendant paying 10s. 6d. costs.
"	4.7 " " "	Informal sample.
"	4 " " "	Proceedings. Fined £5 and 10s. 6d. costs.
"	4 " " "	Proceedings. Fined £2 and 10s. 6d. costs.
"	3.6 " " "	Proceedings. Summons dismissed on defendant paying £3 3s. 0d. costs.
"	3.5 per cent. extraneous water and 3.8 per cent. of the required fat deficient.	" " "
"	3 per cent. extraneous water and 4.1 per cent. of the required fat deficient.	Proceedings. Summons dismissed on defendant paying £2 2s. 0d. costs.
"	3 per cent. extraneous water.	Proceedings. Summons dismissed on defendant paying 10s. 6d. costs.
"	3 " " "	Informal sample.
"	2.5 " " "	" " "
"	2 " " "	Vendor cautioned.
"	2 " " "	" " "
"	2 " " "	" " "
"	1.5 " " "	Proceedings. Fined £1 and 10s. 6d. costs.
"	1.5 " " "	Vendor cautioned.
"	1.5 " " "	" " "
"	1.5 " " "	Informal sample.
Sausages	233.4 parts of sulphur per million (presence of preservative not disclosed).	" "
"	135 " " "	Vendor cautioned.
Vinegar	3 per cent. of the required acetic acid deficient.	" "
"	1.5 " " "	" "
Whisky	35.68 degrees under proof.	" "

In addition to the above prosecutions, proceedings were instituted in two cases for selling margarine in a wrapper not properly marked. A penalty of 5s. was imposed on each occasion.

The total number of prosecutions under the Food and Drugs (Adulteration) Act was twenty-two, the fines and costs amounting to £58 9s. 6d.

Composition of Milk supplied in Kensington.—It is well known that the "limits" of 3 per cent. of fat and 8.5 per cent. of non-fatty solids, which are taken by the Ministry of Agriculture as the primary criteria of genuineness of milk, are figures very much below those found in normal cow's milk.

The following may be taken as the average composition of cow's milk :—

Water	...	...	...	...	...	87.4 per cent.
Fat	...	...	...	...	...	3.7 " "
Non-fatty solids	...	...	...	...	...	8.9 " "

Of 343 formal samples of milk taken under the Food and Drugs (Adulteration) Act in 1929, 27 were certified by the Public Analyst as adulterated, i.e., containing less than 3 per cent. of fat or 8.5 per cent. of non-fatty solids. These particulars, however, do not give any indication of the general quality of the milk supplied in Kensington, therefore, it will be interesting to note the average composition of the samples taken in the Borough during the year. These figures are given in the following table :—

Average Composition of Formal Milk Samples taken in 1929.

Months.	Number of Formal Samples Taken.	Average Composition of all Samples Submitted, Genuine and Adulterated.		Average Composition of Genuine Samples.		Ministry of Agriculture Standard.	
		Percentage of Milk Fat.	Percentage of Solids not Fat.	Percentage of Milk Fat.	Percentage of Solids not Fat.	Percentage of Milk Fat.	Percentage of Solids not Fat.
January ...	18	3.52	8.70	3.52	8.70	3.0	8.5
February ...	38	3.56	8.66	3.63	8.70		
March ...	40	3.38	8.72	3.40	8.81		
April ...	30	3.31	8.67	3.44	8.79		
May ...	31	3.56	8.82	3.56	8.82		
June ...	26	3.34	8.76	3.41	8.78		
July ...	12	3.39	8.80	3.39	8.80		
August ...	26	3.64	8.64	3.66	8.65		
September ...	28	3.61	8.76	3.61	8.76		
October ...	24	3.74	8.83	3.74	8.83		
November ...	36	3.75	8.79	3.78	8.30		
December ...	34	3.69	8.78	3.75	8.83		
Average for the Year ...	343	3.54	8.71	3.58	8.74	3.7	8.9

It is interesting to note that the average fat content of Kensington samples exceeded the Ministry of Agriculture standard by approximately 20 per cent. or, in other words, the samples would have been returned as genuine by the Public Analyst even though about 20 per cent. of the fat might have been removed by a fraudulent vendor.

The table shows that the average fat and non-fatty solid content for each month of the year is well above the legal standard and makes it clear that suspicion should fall on every sample which at any time of the year shows a fat content as low as 3 per cent.

Milk and Dairies (Consolidation) Act, 1915.—This Act has for its main object the prevention of the sale of milk from tuberculous cows. It enables County Councils and County Borough Councils to make Orders which will prohibit the sale of infected milk in any area.

When the Act came into operation the Council decided that a number of samples of milk should be taken each year for the purpose of examination for the presence tubercle bacilli. In the year 1929, twenty-six samples were so taken, and all were certified as being free from tubercle bacilli.

On the 1st January, 1929, the third schedule of the Milk and Dairies (Consolidation) Act, 1915, was repealed and the provisions relating to the warranty defence, hitherto contained therein, were incorporated in the Food and Drugs (Adulteration) Act, 1928.

Milk and Dairies (Amendment) Act, 1922.—Section 2 of this Act empowers the Council to refuse to enter any person's name on the Register of Dairymen and Dairies, or to remove his name from that Register, if they are satisfied that the public health is, or is likely to be, endangered by any act or default of his in relation to the quality, storage or distribution of milk.

In this connection, it should be mentioned that the Council have resolved that the presence upon any premises of such articles as (1) paraffin, (2) loose pickles, (3) vinegar (except in sealed bottles), (4) meat of all forms (except when in sealed tins or glass), (5) fruit, (6) vegetables, (7) coal and coke, and (8) wood (except in bundles, provided the same be not kept in the milk store) would constitute a source of contamination rendering the said premises unsuitable for the sale of milk; and the registration of persons entitled to carry on the trade of purveyor of milk in Kensington is subject to compliance with the resolution.

In one case where there had been several convictions under the Food and Drugs Acts, the Public Health Committee considered the question of removing the retailer's name from the Register of Dairymen, but decided to postpone immediate action. Two samples of milk were taken from the same retailer shortly after this decision and were found to be adulterated. In January, 1930, the Council removed this dairyman's name from the Register.

A summary of the alterations made in the Register during the year 1929 and the number of persons and dairies registered at the end of the year is shown in the following table:—

	Purveyors of milk in sealed bottles.	Dairymen.	Dairies and Milkshops.
Transfers	—	12	12
Added to Register	4	5	4
Vacated and removed from Register	—	—	—
Dairymen with premises outside the Borough added to Register	—	—	—
On Register January 1st, 1929	29	154	149
On Register December 31st, 1929	33	159	153
(+) Increase. (—) Decrease.	+4	+5	+4

The total number of inspections of dairies and milkshops in the Borough during the year 1929 was 731.

Special attention has been given to enforce Article 31 of the Order which requires that bottling of milk shall be carried out on registered premises. In the past, it has been frequently observed that milk roundsmen have left their depots in the morning with fewer bottles on their barrows than they had customers, with the inevitable result that towards the end of their rounds some customers must be supplied with milk from bottles which had been taken by the roundsmen from houses earlier the same day. It will be appreciated that many of these bottles would be dirty and that in certain instances this practice might result in serious danger to health.

During the year 1929, proceedings were taken in respect of milk being bottled in streets in five cases. In two cases, a fine of £2 was imposed, in two a fine of £1 was imposed, and in one a fine of 10s.

Milk (Special Designations) Order, 1923.—Under the Order the Council are authorised to grant licences to persons other than a producer to sell milk under special designations. Every licence granted is valid for a period ending on the 31st day of December in the year in respect of which it is granted. The Order lays down a schedule of fees to be paid by applicants for licences.

The licences granted in 1929 were as follow:—

(a) Dealers' licences to use the designation "Certified Milk" ...	20
(b) Dealers' licences to use the designation "Grade A (Tuberculin Tested) Milk"	22
(c) Dealers' licences to use the designation "Pasteurised Milk" ...	35

In each case the licence has been 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 to set up a pasteurising establishment within the Borough.

During the year, six samples of "Certified Milk," four of "Grade A (Tuberculin Tested) Milk," and twenty-three of "Pasteurised Milk" were taken for the purpose of ascertaining whether they complied with the bacteriological standards laid down in the Milk (Special Designations) Order, which are as follow:—

Special Class of Milk.	Maximum number of bacteria permitted per c.c.	Standard for bacillus coli.
"Certified Milk"	30,000	Must not be found in one-tenth c.c.
"Grade A. (Tuberculin Tested) Milk" ...	200,000	Must not be found in one-hundredth c.c.
"Pasteurised Milk"	100,000	No standard provided.

The results of the examinations are shown in the following tables :—

Sample collected on.	Bacteria per 1 c.c.	Coli per 1/10th c.c.
<i>" Certified Milk."</i>		
16th April	10,360	Nil.
31st July	1,270	"
2nd October	1,100	"
7th "	7,000	"
7th "	1,430	"
17th December	1,350	"
<i>" Grade A. (Tuberculin Tested) Milk."</i>		
14th May	1,550	"
14th "	2,110	"
14th September	105,000	"
25th "	12,700	"

The vendor of the sample taken on the 14th September was cautioned by the Council. All the remaining samples complied with the standards laid down in the Order and could be classed as very pure milks.

" Pasteurised Milk."

Sample collected on.	Bacteria per c.c.	B Coli.	Action taken (if any.)
30th July ...	156,000	Present in 1/1,000 c.c.	Proceedings. Fined £3 and £5 5s. 0d. costs.
30th " ...	150,000	" 1/100 "	" " "
6th August ...	34,500	Absent in 1/10 "	" " "
7th " ...	91,200	" 1/10 "	" " "
21st " ...	83,000	Present in 1/1,000 c.c.	Vendor cautioned.
14th September ...	118,000	Absent in 1/100 "	" " "
25th " ...	4,144,000	Present in 1/33.3 "	Proceedings. Fined £5 and £5 5s. 0d. costs.
30th " ...	330,000	" 1/1,000 c.c.	" " "
30th " ...	362,000	" 1/660 "	" " "
9th October ...	33,200	Absent in 1/10 "	" " "
9th " ...	5,320	Present in 1/3 "	" " "
22nd " ...	342,000	Absent in 1/10 "	Proceedings. Fined £5 and £5 5s. 0d. costs.
22nd " ...	125,000	" 1/10 "	" " "
30th " ...	15,700	" 1/10 "	" " "
30th " ...	212,000	" 1/10 "	Proceedings. Fined £5 and £5 5s. 0d. costs.
31st " ...	9,100	" 1/10 "	" " "
31st " ...	24,000	" 1/10 "	" " "
12th November ...	22,000	" 1/10 "	" " "
12th " ...	25,000	" 1/10 "	" " "
20th " ...	26,200	" 1/10 "	" " "
20th " ...	31,000	" 1/10 "	" " "
11th December ...	185,000	" 1/10 "	Vendor cautioned.
11th " ...	222,000	" 1/10 "	" " "

The Public Health (Condensed Milk) Regulations, 1923-1927, and Public Health (Dried Milk) Regulations, 1923-1927.—During the year, seven samples of condensed milk and four of dried milk were taken and each was found to comply with the Regulations in every respect.

Public Health (Preservatives, etc., in Food) Regulations, 1925-1927.—Only two contraventions of these Regulations occurred during the year out of 1,100 samples taken.

London County Council (General Powers) Acts, 1902, 1908 and 1928. Control of Ice Cream.—The ice cream trade in the past has been mainly regulated under the London County Council (General Powers) Act, 1902, which makes it 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. This Act also requires vendors to notify the occurrence of infectious disease amongst their employees or persons living on their premises, and provides further that every itinerant vendor shall exhibit on his barrow the name and address of the person from whom the ice cream has been obtained. The London County Council (General Powers) Act of 1908 lays down certain sanitary requirements for all premises used for the preparation or the sale of food, and this Act has been used for controlling ice cream shops.

The Council have, however, since 1921, pressed for some system of compulsory registration of premises where the commodity is sold, manufactured or stored; and this was granted under the London County Council (General Powers) Act of 1928, which requires that any premises used for the sale or manufacture or storage of ice cream shall be registered by the owner or occupier with the Council and prohibits any premises being used for these purposes unless they are registered. This new legislation does not apply to premises occupied as a factory or workshop or to hotels, restaurants or clubs. The number of premises entered upon the Council's register is 110.

During the past year 173 visits to ice cream premises were made by the Inspectors.

Public Health (Meat) Regulations, 1924.—These Regulations provide that no person may slaughter any animal without first giving verbal or written notice to the Council of his intention. Upon receipt of such notice, the Council's Food Inspector attends during the slaughtering process whether by day or night, and examines all carcasses immediately afterwards. During the year three hundred and nine slaughterhouse inspections were made.

The following table shows the number of animals slaughtered in the Borough in 1929 :—

Month.	Beasts.	Animals Slaughtered.	
		Swine.	Sheep.
January	7	45	17
February	9	62	23
March	8	250	36
April	8	260	73
May	10	273	68
June	12	247	69
July	4	114	117
August	—	118	79
September	3	331	74
October	1	475	53
November	5	225	76
December	5	470	59
Totals	73	2870	744

Diseased meat condemned during this period was as follows :—

Carcases (including organs)	16
Forequarters	13
Hindquarters	18
Plucks	135
Heads	161
Livers	56
Lungs	128

The Regulations prescribe for the protection of meat from contamination by dirt and flies in shops, on stalls and during transit.

Of the 114 butchers' shops within the Borough, 112 have been provided with glass fronts, whilst in the two shops remaining precautions have been taken which would probably satisfy the Magistrates that the Regulations have been adequately observed; at the present time there is not one shop in the Borough where the Council could, with any prospect of success, issue a summons for non-compliance with the Regulations and the Council have every reason to feel satisfied with the way in which the butchers have responded to the demands made upon them.

It should, however, be pointed out that in many cases the glass fronts are kept open at times of the day when trade does not require this. It is significant that in the better-class areas in the Borough it is usual for the windows to be kept closed at all times, probably because traders recognise that the customers in their areas appreciate the necessity of care being taken to keep meat free from contamination. With the advance of public opinion on the question of clean food, it is hoped that the officers of the Public Health Department will be able to persuade all butchers to keep their shop windows closed much more than is the case at the present time.

The precautions taken by those traders who retail meat from street stalls may now be considered to be adequate.

Slaughter Houses.—These are licensed annually by the London County Council in the month of October and the five Kensington licences granted in 1928 were renewed in 1929. These premises are kept in a cleanly condition, and from a structural point of view are not open to objection.

By-laws prescribing humane slaughtering came into operation in London in 1924, and approved methods have been adopted at each of the slaughterhouses in the Borough. The Council's Food Inspector makes frequent inspections to satisfy himself that these humane methods of slaughtering are applied satisfactorily.

Bakehouses.—There are eighty-five bakehouses in the Borough, and of this number sixty-two are underground. As a result of two hundred and twenty-three inspections which were made during the year, two notices were served for the cleansing of walls and ceilings.

Other Places where Food is Prepared.—In addition to the premises dealt with above, other places in the Borough where food is prepared or exposed for sale are required to be kept in accordance with the provisions of the London County Council (General Powers) Act, 1908. There were, in addition to inspection of dairies, ice cream premises, etc., mentioned above, 1,296 inspections of food premises.

Sale of Food Order, 1921.—Article 8 of this Order provides that eggs imported into the United Kingdom shall not be sold, offered or exposed for sale under any description of which the words "fresh" or "new laid" form part unless the description includes the word "imported" or a word or words disclosing the country of origin.

In February, 1929, proceedings were taken against a shopkeeper for a breach of this requirement and a fine of £2, together with three guineas costs, was imposed.

On the 21st April, 1929, Article 8 of the Sale of Food Order, 1921, was revoked by the Sale of Food (Revocation) Order, 1929.

Merchandise Marks Acts, 1887-1926.—Under Section 2 of the Act of 1926, Orders in Council may be made prohibiting the sale or exposure for sale in the United Kingdom of imported goods specified, unless such goods bear an indication of origin.

The Orders which have so far been made in regard to imported foodstuffs are :—

Order.	Relating to :—
Merchandise Marks (Imported Goods) No. 3 Order, 1928.	Honey and fresh apples.
Merchandise Marks (Imported Goods) No. 5 Order, 1928.	Currants, sultanas, raisins, eggs in shell, dried eggs and oat products.
Merchandise Marks (Imported Goods) No. 4 Order, 1929.	Raw tomatoes.

These Orders prescribe the manner of marking the imported foodstuffs indicated above, on importation, on exposure for sale wholesale or retail, and on sale. The first two Orders became operative during the year 1929, but that relating to raw tomatoes did not come into force until 17th March, 1930. The requirements of the first two Orders were brought to the notice of Kensington traders by means of a circular letter, but owing to the amount of clerical work involved and likely to arise as a result of further Orders being made, the Public Health Committee gave instructions for the requirements of future Orders to be brought to the notice of Kensington dealers through the agency of the local press and the Kensington Chamber of Commerce. Frequent inspections were made throughout the year to ensure that the requirements of these Orders were observed.

Agricultural Produce (Grading and Marking) Act, 1928.—This Act empowers the Minister of Agriculture and Fisheries to make Orders for the grading and marking of agricultural produce of England and Wales. The following Regulations have been made by the Minister under the Act :—

- Agricultural Produce (Grading and Marking) (General) Regulations, 1928.
- Agricultural Produce (Grading and Marking) (Apples and Pears) Regulations, 1928.
- Agricultural Produce (Grading and Marking) (Eggs) Regulations, 1928.
- Agricultural Produce (Grading and Marking) (Broccoli) Regulations, 1929.
- Agricultural Produce (Grading and Marking) (Cucumbers and Tomatoes) Regulations, 1929.
- Agricultural Produce (Grading and Marking) (Wheat Flour) Regulations, 1929.
- Agricultural Produce (Grading and Marking) (Beef) Regulations, 1929.
- Agricultural Produce (Grading and Marking) (Potatoes) Regulations, 1929.

These Regulations provide grade designations to indicate specific standard qualities of the various foodstuffs mentioned, but it is not compulsory for all such foodstuffs to be so marked. When, however, the goods are marked, they must conform with the standards laid down in the Regulations. Special provisions are contained in the Agricultural Produce (Grading and Marking) (Eggs) Regulations, which provide for the marking of eggs which have been preserved by immersion in lime-water, water-glass or oil.

If and so long as any Order in Council made under Section 2 of the Merchandise Marks Act, 1928, is in force prohibiting the sale or the exposure for sale in the United Kingdom of imported eggs unless they bear an indication of origin, any British eggs which have been kept in cold storage or chemical storage shall, in the former case, be marked conspicuously and legibly on the shell with the word "chilled" or with the words "cold stored," and in the latter case with the word "sterilised."

The Regulations also provide for the manner of registration of premises used for the purpose of cold storage or chemical storage of eggs.

Inspections are made from time to time by the Food Inspector to ensure that the requirements of these Regulations are complied with, but during 1929 no contraventions were observed.

Artificial Cream Act, 1929.—This Act came into operation on the 1st June last, and has for its object the regulation of the manufacture and sale of artificial cream.

Under the Act it is an offence to sell, or expose for sale, artificial cream under any designation which includes the word "cream" unless that word is preceded by the word "artificial." Every vessel containing artificial cream, whether in transit or exposed for sale, must bear the words "artificial cream" in large and legible type, either on the receptacle or on a label securely attached thereto.

The Council are required to keep a register of all premises where artificial cream is manufactured, sold, exposed or kept for sale except those premises where,

- (a) artificial cream is manufactured by any person solely for his domestic purposes,
- (b) it is used in the manufacture or preparation on the premises of some other article of food,
- (c) it is not supplied otherwise than in the properly closed and unopened receptacles in which it was delivered.

Provision is made in the Act for the inspection of registered premises by an authorised officer of the Council.

In 1929, only one application for registration was received.

Unsound Food.—Under the provisions of Section 47 of the Public Health (London) Act, 1891, any persons having in their possession food intended for sale which is diseased or unsound, or unfit for human consumption, may surrender it to the Council for destruction as trade refuse. The unsound food surrendered and destroyed during the year is shown in the following list :—

Black Currants	...	...	...	...	(pounds)	28
Fish	...	...	...	...	(stones)	9
Fish (canned)	...	...	...	...	(tins)	154
Fruit (canned)	...	...	...	...	(tins)	681
Jam	...	...	...	...	(tins)	27
Meat (canned)	...	...	...	...	(tins)	81
Meat (Sheep heads)	...	...	...	...	—	20
Milk and Cream (canned)	...	...	...	...	(tins)	113
Onions	...	...	...	...	(pounds)	150
Pickles	...	...	...	...	(jars)	26
Soup (canned)	...	...	...	...	(tins)	11
Strawberries	...	...	...	...	(pounds)	168
Tomatoes	...	...	...	...	(boxes)	84

In one instance only was unsound food seized by the Council's Food Inspector under the Public Health (London) Act, 1891. In this case one hundredweight of bacon, found in a provisions shop, was seized by the Inspector, taken before a magistrate and subsequently destroyed.

The proprietor of the shop was on holiday at the time of seizure and, after careful consideration, the Council decided to caution him instead of instituting proceedings.

Proceedings under various Food Measures.

The number of proceedings referred to in this section of the report total 38. Fines or costs were imposed in all the cases and the amount totalled £153 7s. 6d.

Food Poisoning.—Early in the year under review there occurred an outbreak of food poisoning resulting from persons partaking of meat pie bought from a shop in the Borough.

Food poisoning may be divided into two kinds, namely, chemical and bacteriological.

"Chemical food poisoning" may result from the deliberate addition of poison to food with criminal intent or the accidental addition of poison. It is readily distinguishable from bacteriological food poisoning.

The term "bacteriological food poisoning" is used by public health workers to describe outbreaks of illness characterised by nausea, vomiting and diarrhoea, sometimes associated with fatal results, caused by the consumption of food or drink contaminated by germs belonging to a family or type known as the Salmonella Group. Bacteriologists have not much difficulty in discovering the presence of the Salmonella Group of organisms in infected foodstuffs and bowel discharges, but it is a highly technical and painstaking proceeding to differentiate the various members of the family.

Food animals may be infected with these organisms during life, and in the process of slaughtering the contents of the bowels may escape and contaminate the flesh, with the result that the infection may be conveyed to human beings who eat the meat.

During preparation for consumption, meat foodstuffs may be contaminated in the factory or in the home with organisms of the Salmonella Group.

Course of the Outbreak.

Information was received in the Public Health Department that persons in three different Boroughs had been taken ill and were suffering from abdominal pains, sickness and diarrhoea after partaking of meat pies which had been purchased from a shop in the Borough of Kensington. Later, other persons residing in different districts were reported to be suffering from similar symptoms after partaking of pie obtained from the same shop. Altogether 20 persons were reported to be suffering from symptoms suggestive of food poisoning. In every case pie obtained from the same shop had been eaten and the interval between the consumption of the pie and the onset of the symptoms was approximately the same in all cases. Only one person was known to have eaten the pie without falling ill.

Medical men are not required by law to notify persons suffering from food poisoning; and, therefore, it is possible that there were other cases. Of these there is no evidence; but the facts stated are sufficient to justify the conclusion that the pie was responsible for the outbreak.

The attack of illness was acute and in several cases quite severe, but all the patients recovered.

Bacteriological Investigation of the Outbreak.

With the help of other Medical Officers of Health and general practitioners, specimens of bowel discharges were secured from all the patients except three.

The specimens were examined by the Council's bacteriologist, who discovered in every instance an organism belonging to the Salmonella Group. Duplicate specimens were sent to the Ministry of Health bacteriologist, and the examinations made by him gave similar results. Much difficulty was experienced, however, in recognising which particular organism it was. Eventually, after the epidemic had subsided, it was discovered that the organism was a member of the third or diphasic series of the Salmonella Group, and was of the type named "Thompson." This bacillus has been isolated in at least four other outbreaks of food poisoning.

As the illness appeared so soon after the consumption of the pie, it was fortunately possible to secure portions of uneaten pie from the homes of three of the patients. The unconsumed pie was examined by a private bacteriologist, the Ministry of Health bacteriologist, and by the Borough bacteriologist. In each case an organism of the Salmonella Group was discovered and at a later stage it was proved to be the B. Thompson. Thus, the germ found in the discharges of the patients was also found in the pie.

Epidemiological Investigation of the Outbreak.

Inspections were made of the premises where the pie was baked, stored and sold but no fault could be found in regard to the general sanitary conditions. There had been some trouble from rats and mice in neighbouring premises. It was thought that there might have been some migration of the vermin, and attempts to catch rats were made, but were unsuccessful.

Three mice were trapped and one rat was caught in the neighbourhood. These four rodents were submitted to exhaustive examination by the Council's bacteriologist, but no evidence of the presence of organisms of the Salmonella Group was discovered.

All persons handling the pies were medically examined immediately the circumstances were brought to notice and on subsequent occasions. It was discovered that a woman pie-maker had been absent from work for two days, and had submitted a medical certificate stating that she had suffered from influenza. It was ascertained that during her absence she had suffered from diarrhoea and vomiting. Specimens of her faeces and urine were taken and in each case the bacteriologist discovered

an organism of the Salmonella Group, which eventually proved to be the B. Thompson. Thus, this person who handled the pies before they were sold, was infected with the organism which was found in the pies and in those who ate the pies. She might have conveyed the infection to the pies; or she might have been infected by them, although she stated that at no time did she taste them.

Three other workers in the bakehouse were found to be infected with the same organism. In these three there was no evidence of any recent illness and they were possibly "carriers."

An examination of the constituent parts of unconsumed pie secured from the three houses showed that the meat was more heavily infected than the other parts. As the particular kind of flesh is known to be capable of carrying this infection, this foodstuff was traced back to the slaughterhouse in Northamptonshire. No further evidence could be obtained that this article was responsible.

Precautionary Measures.

Before all the facts were known it appeared that the most important step to take with a view to terminating the epidemic was to stop selling the pies, and the proprietor of the food shop adopted my recommendation. The pies already made and unsold were voluntarily surrendered and destroyed. It should be added that bacteriological examination of these pies before destruction failed to show any of the Salmonella Group of organisms.

The employee who had suffered from diarrhoea and vomiting and the three others found to be infected were excluded from work until certified free from infection.

Conclusions as to the Cause of the Outbreak.

A full consideration of the facts, of which this report contains only a brief outline, led to the conclusion that the meat was infected before it arrived at the shop and that the woman worker and the other three workers became infected by handling the pies; also that the twenty customers were infected by consuming them.

THE PREVENTION OF, AND CONTROL OVER, INFECTIOUS DISEASE.

NOTIFIABLE INFECTIOUS DISEASES.

The following diseases are compulsorily notifiable in Kensington:—

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

Table showing Notifications of certain Infectious Diseases received in 1925-29.

Year.	Small Pox.	Scarlet Fever.	Diphtheria.	Enteric Fever.	Erysipelas.	Ophthalmia Neonatorum.	Puerperal Fever.	†Puerperal Pyrexia	Pneumonia.	Malaria.	Encephalitis Lethargica.	Polio-encephalitis.	‡Acute Rheumatism.	Cerebro spinal Meningitis.	Dysentery.	*Enteritis.	Total.
1925	—	224	259	25	53	14	5	†	138	2	12	1	‡	8	1	122	864
1926	—	264	391	28	69	15	9	11	145	2	5	4	†	2	—	97	1042
1927	—	251	356	10	59	17	8	44	241	2	5	2	48	5	2	41	1086
1928	—	365	274	75	59	11	7	33	154	7	4	1	153	1	—	99	1221
1929	5	483	297	15	75	22	13	41	260	2	5	1	81	2	2	114	1418

Cases of mistaken diagnosis are excluded from the above table.

†Puerperal Pyrexia became notifiable on October 1st, 1926.

‡Acute Rheumatism in children under 16 years of age became notifiable in Kensington on October 1st, 1927.

*Zymotic Enteritis in children under 5 years of age became notifiable in Kensington on July 1st, 1924. The other London Boroughs in which this disease is notifiable are Fulham, Finsbury, Poplar, Southwark, Deptford, Greenwich, Woolwich and Paddington.

Table showing Cases of Infectious Diseases occurring in 1929, arranged in Four-Weekly Periods (January 1st to December 31st).

Four Weeks ending	Small Pox.	Scarlet Fever	Diphtheria.	Enteric Fever.	Erysipelas.	Ophthalmia Neonatorum.	Puerperal Fever.	Puerperal Pyrexia.	Pneumonia.	Malaria.	Encephalitis Le-thargica.	P. M'itis & Polio-Encephalitis.	Acute Rheumatism.	Cerebro spinal Meningitis.	Dysentery.	Enteritis.	Total.
January 28	—	54	21	1	6	—	2	6	24	—	—	—	8	—	—	1	123
February 25	—	34	46	—	5	2	—	6	48	—	—	—	3	1	—	1	146
March 25	—	18	17	—	6	1	3	4	65	—	1	1	8	—	—	1	125
April 22	2	27	20	1	5	—	1	3	23	—	2	—	—	—	—	1	85
May 20	3	28	15	2	10	—	—	2	17	—	—	—	8	—	1	—	86
June 17	—	36	17	2	5	2	3	5	9	—	—	—	18	—	—	1	98
July 15	—	23	23	2	5	5	2	2	8	—	1	—	2	—	1	4	78
August 12	—	21	14	4	7	2	—	2	9	—	—	—	6	—	—	9	74
Sept. 9	—	26	21	2	5	2	—	3	3	1	1	—	4	—	—	7	75
October 7	—	45	13	—	3	2	—	5	13	—	—	—	7	—	—	56	144
November 4	—	46	45	—	3	3	2	—	12	—	—	—	4	—	—	18	133
December 2	—	62	21	—	6	1	—	—	14	1	—	—	9	—	—	6	120
December 31	—	63	24	1	9	2	—	3	15	—	—	—	4	1	—	9	131
Totals	5	483	297	15	75	22	13	*41	260	2	5	1	81	2	2	114	1418

Cases of mistaken diagnosis are excluded from the above Table.

* Four cases of Puerperal Pyrexia were subsequently notified as Puerperal Fever and are included in this table under both headings.

Small-Pox.—During the year 1929, one thousand one hundred and sixteen cases of small-pox occurred in the London area and of these six cases proved fatal. Twenty-six of the twenty-nine London Boroughs were affected.

Five cases of this disease occurred in Kensington, one at a residential hotel and four in private houses. Four of the cases were of the mild type similar to that which was prevalent in London during the year and one, which was contracted on board a ship returning from the East, was very severe in character. Particulars of the cases are as follow.

Case A.—A female, aged seventeen years, fell ill the day after returning from a holiday in the country, and the disease proved to be small-pox. It was of the mild type and the patient was not confined to her bed. The patient recovered. Most of the contacts were re-vaccinated at once; one, who refused, later contracted the disease.

Case B.—A female, aged twenty-one years, travelled from Bombay on the s.s. "Tuscania." Several cases of small-pox occurred on board this boat and many cases developed in England after the passengers had landed. The disease was of a very severe type and many patients died. The Kensington patient came to a hotel in this Borough, developed small-pox and was removed to hospital. The patient was very ill but recovered. All the staff and the majority of the residents at the hotel were re-vaccinated.

Cases C and D.—A girl, aged six years, was found to be suffering from small-pox of a mild type and removed to hospital. Enquiries made by the Public Health Department elicited the fact that a youth in the same house had been ill two weeks previously and that his illness had been diagnosed as chickenpox. A message was sent to the City where the youth was at work; he was examined by a medical man, found to be suffering from small-pox and promptly removed to hospital. Both patients recovered. All the Kensington contacts were re-vaccinated.

Case E.—A female, aged seventy-three years, was removed to hospital suffering from small-pox. This case was the contact referred to under Case A. The disease was of a mild type and the patient recovered. All the contacts were re-vaccinated.

The total number of contacts of the above five cases and those cases which occurred elsewhere numbered 455. These were kept under daily observation for eighteen days. The object of repeatedly visiting these contacts is to secure prompt isolation before the patient becomes infectious in the event of small-pox developing.

In the case of every small-pox contact, vaccination or re-vaccination was recommended as a precautionary measure, if it had not already been carried out.

Scarlet Fever.—The number of cases notified during the year was 526, of which 472 were removed to hospital.

The following table shows the number of cases notified in the various Wards in each four-weekly period during 1929 :—

District.	Period No. 1.	Period No. 2.	Period No. 3.	Period No. 4.	Period No. 5.	Period No. 6.	Period No. 7.	Period No. 8.	Period No. 9.	Period No. 10.	Period No. 11.	Period No. 12.	Period No. 13.
London	1098	1084	1097	1019	1059	918	955	949	973	1417	2003	1809	1571
The Borough ...	58	38	34	31	32	36	28	26	25	48	46	62	62
North Kensington	25	26	24	23	22	27	23	19	15	41	33	52	51
South Kensington	33	12	10	8	10	9	5	7	10	7	13	10	11
WARDS.													
St. Charles ...	4	3	5	5	7	6	8	8	1	10	7	11	16
Golborne ...	9	12	10	6	10	9	9	9	10	24	20	21	17
Norland ...	8	7	5	10	2	7	3	1	2	6	3	8	8
Pembridge ...	4	4	4	2	3	5	3	1	2	1	3	12	10
Holland ...	4	3	1	1	1	3	4	4	3	4	2	2	3
Earl's Court ...	6	3	—	1	2	2	—	1	1	2	2	3	3
Queen's Gate ...	10	1	3	1	—	1	—	1	2	—	1	1	1
Redcliffe ...	12	2	4	2	7	3	1	—	4	1	8	4	3
Brompton... ..	1	3	2	3	—	—	—	1	—	—	—	—	1

Cases of mistaken diagnosis are not excluded from the above Table.

Forty-three patients notified as suffering from scarlet fever were found, after admission to hospital, not to be suffering from any infectious illness at all, with the result that they were returned home.

During the last two years there has been an increase in the number of scarlet fever cases, but it can hardly be said that the disease existed in what might be described as epidemic form. Throughout the year scarlet fever was mild in type, as is reflected in the fact that there was only one fatal case. The deaths in the preceding years were four, none and two.

Four of the 526 cases of scarlet fever notified were patients in the same family as a person who had within the previous 28 days returned from hospital after having been treated for this disease. In addition, one of those developing the disease was a member of another family living in the same house as a person who had been discharged from hospital less than 28 days previously upon recovery from scarlet fever.

Cases of this kind are called "return" cases and very careful investigation was made in each of the five, with a view to ascertaining the source of infection. No direct evidence that the disease was contracted from the primary patients could be obtained in any of these "return" cases.

The importance of proper isolation being effected is shown in the following case. A child contracted scarlet fever and it was treated at home against advice. Subsequently, all the family (four) developed the disease and had to be removed to hospital.

Diphtheria.—Three hundred and twenty-six cases of diphtheria were notified during the year, 290 of which were removed to hospital.

The following table shows the number of cases notified in the various Wards in each four-weekly period during 1929:—

District.	Period No. 1.	Period No. 2.	Period No. 3.	Period No. 4.	Period No. 5.	Period No. 6.	Period No. 7.	Period No. 8.	Period No. 9.	Period No. 10.	Period No. 11.	Period No. 12.	Period No. 13.
London - - -	902	840	805	815	680	682	803	662	640	1092	1353	1365	1219
The Borough - -	24	43	32	20	17	21	22	15	19	16	49	25	23
North Kensington -	16	21	23	14	13	9	14	13	14	12	34	18	15
South Kensington -	8	22	9	6	4	12	8	2	5	4	15	7	8
WARDS.													
St. Charles - - -	3	5	7	3	3	1	4	4	3	2	9	10	4
Golborne - - -	2	6	7	6	6	5	5	5	5	6	11	5	7
Norland - - -	7	5	3	3	2	1	4	3	6	1	5	1	2
Pembridge - - -	4	5	6	2	2	2	1	1	—	3	9	2	2
Holland - - -	1	3	—	1	1	4	5	—	3	—	—	—	1
Earl's Court - - -	2	1	—	1	—	2	1	—	2	1	7	1	1
Queen's Gate - -	1	8	7	—	2	5	—	—	—	1	1	—	2
Redcliffe - - -	3	4	1	2	1	1	2	1	—	1	6	6	4
Brompton - - -	1	6	1	2	—	—	—	1	—	1	1	—	—

Cases of mistaken diagnosis are not excluded from the above Table.

Twenty-nine patients notified as suffering from diphtheria were found after admission to hospital not to be suffering from any infectious disease at all, with the result that they were returned home.

The number of Kensington deaths was eleven, representing a case mortality of 4 per cent. In the three preceding years the deaths were 22, 11 and 15.

During the year, 1,941 throat swabs were examined at the Council's Laboratory at St. Mary Abbots Hospital, and of these 112 gave a positive result.

It is well established that outbreaks of diphtheria may originate from persons who have the germs of the disease in the throat or nose, but show no signs of illness. Such persons are called "carriers" and with a view to discovering the possible existence of any of these in connection with limited outbreaks where the source of infection was unknown, numerous throat and nose swabs were taken by medical men at my request or by myself. These swabs are included in the 1,941 referred to above.

There were sixteen instances where more than one case occurred in the same house and the following are worthy of special mention.

A case of diphtheria occurred and nineteen days afterwards another case developed in a family in the same house. The sister of the latter case, who was at work during the day, was reported to be suffering continually from a sore throat. On examination by a doctor she was found to be a "carrier" and was removed to hospital.

Two girls and their brother were admitted to hospital in October, 1928. The girls were discharged in due course but the brother was kept in hospital until January, 1929. Two weeks after the boy's discharge the mother fell ill and subsequent investigation showed that the boy was a "carrier." He was again removed to hospital and no further case developed.

A girl, aged four years, had diphtheria in 1928 and again contracted the disease on the 2nd February, 1929. On 23rd February another child in the family developed the disease. The remaining members of the family were swabbed and the mother was found to be a "carrier." She was removed to hospital and no further case occurred.

A boy of two years was removed to hospital with diphtheria. His brother was examined and found to have a nasal discharge. A swab taken from the nose proved positive and he was removed to hospital. No further case occurred.

A child was removed to hospital suffering from diphtheria. It was found that another child in the same family, who had been ill with a sore throat the previous week, had a nasal discharge. This child proved to be a "carrier" and was removed to hospital.

There were four small outbreaks in hospitals in the Borough during the year, one in the Princess Louise Kensington Hospital for Children, one in the Baby Hospital, No. 1, Ladbroke Square and two in the St. Mary Abbots Hospital, Marloes Road.

In consequence of the first outbreak at St. Mary Abbots Hospital, it was made the practice to swab all patients admitted to the Hospital who showed the least suspicious symptom such as sore throat, nasal discharge, etc., and to place them in the isolation ward until a result had been obtained. In this way fourteen patients who had been admitted were, within two days, proved to be "carriers" and removed to Metropolitan Asylums Board Hospitals. These prompt measures have no doubt been the means of preventing other cases developing.

Under the Anti-toxin Order, 1910, the Council are empowered to supply diphtheria anti-toxin for administration to patients who are too poor to pay, and on signing the necessary declaration that the patient cannot afford specific treatment, a medical man can obtain a free supply from Mr. Evans, Chemist, at No. 138, Ladbroke Grove, W.11, Mr. W. Reeves, Chemist, at No. 81, Cornwall Road, W.11, or from the Public Health Department at the Town Hall. The anti-toxin is obtainable at all hours of the day and night from Mr. Evans' and Mr. Reeves' premises, and during office hours from the Town Hall. When the Town Hall is closed, applications for anti-toxin can be made to Mr. Sutton, an Officer of the Department, who lives at No. 1, Hornton Place, Hornton Street (only a few yards from the Town Hall).

The Council loan syringes with portable sterilizers to doctors for the purpose of administering the anti-toxin. Medical men administering the Council's anti-toxin to poor persons are, on application to the Medical Officer of Health, paid a fee of 5s. per patient treated.

In 1929, the Borough Council supplied 161,000 units of anti-toxin for 28 patients at a cost of £12 4s. 6d.

Enteric Fever.—Seventeen cases of this disease were notified, eleven being removed to hospital and one to a nursing home. The cases notified in the three preceding years were 10, 17 and 80. There were no deaths from this disease against 2, 0 and 1 in the preceding years.

Two of the notified cases were afterwards certified not to be suffering from enteric fever or any other notifiable disease. Of the remaining fifteen cases, fourteen were notified from the southern division of the Borough and one came from North Kensington. This heavier incidence in South Kensington is not usual with other infectious diseases, and it is probably accounted for by the facts that the water supply and sanitary arrangements in London generally are very good and that a large number of persons contracting typhoid fever are infected outside the Metropolis. It will be admitted that the residents in the southern portion of the Borough leave the London area more frequently than those in the north and, consequently, are more exposed to infection by reason of the fact that many districts outside London do not enjoy the same sanitary efficiency.

In two cases there was evidence that the disease had been contracted abroad. Three patients had paid visits to the country a short time before the date of attack, but the remaining ten had not been out of London for some time prior to the illness. One patient had lived in India, but returned to England in 1924. In this case there was no history of previous illness. Another patient was reported to have lived in the East twenty years ago and since that date had had recurrent attacks of an illness which was described as malaria.

Seven of the cases were notified as paratyphoid fever.

Erysipelas.—Seventy-five cases were notified during the year, 39 of which were removed to hospital. There were 2 deaths from this cause, the deaths in the three preceding years being 5, 4 and 4.

Ophthalmia Neonatorum.—The following table gives particulars of ophthalmia cases notified in 1929 and the results of treatment.

Case No.	Cases.			Vision unimpaired.	Vision impaired.	Total Blindness.	Death.
	Notified.	Treated.					
		At home.	In hospital.				
1	Feb. 2	—	Yes	Yes	—	—	—
2	Feb. 15	Yes	—	Yes	—	—	—
3	March 11	—	Yes	Yes	—	—	—
4	May 25	—	Yes	Yes	—	—	—
5	June 13	—	Yes	Yes	—	—	—
6	" 13	—	Yes	Yes	—	—	—
7	" 21	—	Yes	—	—	—	Yes (from another cause)
8	" 21	—	Yes	Yes	—	—	—
9	" 21	Yes	—	Yes	—	—	—
10	" 27	—	Yes	Yes	—	—	—
11	" 27	Yes	—	Yes	—	—	—
12	July 18	—	Yes	Yes	—	—	—
13	" 19	—	Yes	Yes	—	—	—
14	Aug. 29	Yes	—	Yes	—	—	—
15	Sept. 19	Yes	—	Yes	—	—	—
16	" 27	—	Yes	Yes	—	—	—
17	" 27	—	Yes	Yes	—	—	—
18	Oct. 11	Yes	—	Yes	—	—	—
19	" 18	Yes	—	Yes	—	—	—
20	" 31	—	Yes	Yes	—	—	—
21	Dec. 14	Yes	—	Yes	—	—	—
22	" 19	—	Yes	Yes	—	—	—

It will be seen that all the cases except one occurring in 1929 recovered without any injury to sight. In the case which proved fatal the cause of death was in no way associated with ophthalmia neonatorum.

Since the year 1920 there has occurred only one case resulting in blindness. This very gratifying result is largely due to the efforts made by the Council's Health Officers to secure hospital treatment, and to the excellent arrangements which the Borough Council have entered into with the Kensington District Nursing Association for the home treatment.

It is the duty of midwives to report all forms of inflammation of the eye, even when the condition is not ophthalmia neonatorum, and these cases, in addition to pure ophthalmia cases, are dealt with by the Kensington District Nursing Association. In 1929, the ophthalmia neonatorum and inflammation of the eye cases attended by the nurses numbered 18 and the number of home visits paid in connection with these cases was 230. These visits average 13 to each of the 18 patients, and indicate the great amount of trouble taken with this disease. The visits paid by the Council's Women Health Officers are not included in the 230.

Puerperal Fever.—During the year thirteen cases of this disease were notified. Two were admitted to St. Mary Abbots Hospital after confinement, where they died. Nine were cases of women confined in that Institution, seven of whom made satisfactory recoveries and two died. Two were admitted after confinement to the North-Western Metropolitan Asylums Board Hospital, where they made satisfactory recoveries.

Three cases were brought to the notice of the Public Health Department for the first time after death had occurred.

Puerperal Pyrexia.—Forty-one cases of puerperal pyrexia were notified during the year. Three occurred in maternity homes and one in a nursing home, twenty in hospitals to which the patients had been removed previous to their confinements, and seventeen in the homes of the patients; of these seventeen, eleven were subsequently removed to hospital for treatment, whilst the remaining six received medical attention in their own homes.

Three of the notified cases of puerperal pyrexia proved fatal. Two of these were confined at home and subsequently removed to St. Mary's Hospital, Paddington, and the North-Western Metropolitan Asylums Board Hospital, respectively. The third case was confined in St. Mary Abbots Hospital and died therein.

During the year, the Council retained the services of Dr. Remington Hobbs as their consultant gynaecologist under the Public Health (Puerperal Fever and Puerperal Pyrexia) Regulations, 1926. Dr. Hobbs was consulted by local practitioners in thirty cases and visited four patients in their homes. Twenty-one cases of puerperal sepsis were admitted from their homes to St. Mary Abbots Hospital for treatment by him. For these services, Dr. Hobbs receives a remuneration of fifty guineas per annum. Owing to the large amount of excellent work being carried out at St. Mary Abbots Hospital by Dr. Hobbs for the benefit of Kensington women in connection with the prevention of disability following puerperal sepsis, the Council have made a grant to him of £30 per annum, in addition to his remuneration as consultant gynaecologist, in order that he may obtain medical assistance in the treatment of these patients.

Pneumonia and Influenzal Pneumonia.—There are many forms of pneumonia but the only kinds notifiable are acute primary pneumonia and influenzal pneumonia. Two hundred and sixty notifications were received, one hundred and fourteen patients being certified as suffering from acute primary pneumonia and one hundred and forty-six from influenzal pneumonia. It is certain that many cases escaped notification.

The number of deaths from pneumonia during the year was 257, and 153 deaths were certified to be due to influenza.

Malaria.—Two cases of this disease were notified and investigations revealed that in both cases the disease was contracted in India.

Encephalitis Lethargica.—This disease, commonly known as "sleepy sickness," was prevalent throughout the country in the year 1924, but since that year there has been a reduction in the number of cases notified. In 1929, there were only five cases reported in Kensington and the following table gives details:—

No.	Sex.	Age.	Date of Notification.	Result.
1.	M.	40	8th March.	Still attending hospital.
2.	M.	33	25th March.	Died.
3.	F.	17	9th April.	Died.
4.	F.	42	18th June.	Still in hospital.
5.	F.	25	26th August.	Moved from Borough.

Poliomyelitis and Polio-encephalitis.—One case of poliomyelitis was notified on February 26th to the Public Health Department. The patient was a boy of two and a half years, who made a complete recovery.

Cerebro Spinal Meningitis.—There were two cases of this disease notified during the year. Particulars are subjoined:—

No.	Sex.	Age.	Date of Notification.	Result.
1	M.	9	9th February.	Recovered completely.
2	F.	5 mths.	17th December.	Died.

Zymotic Enteritis or Summer Diarrhoea.—The Borough Council's scheme for control and treatment has now been in operation for six years—the first year, namely, 1924, from 1st July to 30th September, and in subsequent years from the 1st June to 30th September.

The preventive work under the scheme is carried out by the staff of the Public Health Department assisted by the voluntary and paid workers at the Infant Welfare Centres. For the purposes of treatment, Dr. Carter is appointed to render medical assistance during the Summer months and an arrangement has been made with the Kensington District Nursing Association under which the services of the nurses can be requisitioned for home nursing at any time of the year.

During the year 1929, one hundred and fourteen cases of enteritis were notified and of these fifty were removed to hospital.

The following is a report by Dr. Carter giving particulars of cases of enteritis dealt with during the year under review.

Zymotic Enteritis, 1929.

The Council's scheme for the treatment of this disease has now been in operation for six years. Last Summer was particularly hot and dry, both conditions favouring the appearance of this disease. My report includes all cases of gastro-enteritis which occurred during the period January 1st to December 31st.

I attended twenty cases in their own homes and paid eighty-four visits. At the Infant Welfare Centres, I saw thirty cases of enteritis, each of which attended at least on four occasions. At St. Mary Abbots Hospital, I attended fifty-two cases.

None of the cases treated by me outside hospital proved fatal. The Council's scheme has worked quite smoothly and no complaints have been received. Many of the mothers expressed their gratitude for the prompt treatment provided for their children.

Health Visitors' Notes.

The number of cases notified was one hundred and fourteen; of these seventy-three were under one year of age and forty-one were one year and over.

The number of families in which the patient was the only case was one hundred and two, and the number of families where more than one case occurred was six.

Food on which the children were fed.

Mixed diet	...	...	...	...	...	36 cases.
Cow's milk	...	...	...	...	...	35 "
Dried milk	...	...	...	...	...	15 "
Breast only	...	...	...	...	...	12 "
Condensed milk	...	...	...	...	...	8 "
Breast and cow's milk	...	...	...	...	...	5 "
Breast and condensed milk	...	...	...	...	...	3 "

"Mixed diet" means gravy and bread, or gravy and potatoes with custard or milk pudding at mid-day meal. The other meals usually consist of cow's milk.

Amongst the notified cases which recovered, forty-seven were of the mild type and thirty-seven were of a severe type. Twenty-three of these latter cases received the routine treatment in their homes and fourteen did not.

The date of onset of the disease and the date when treatment began has been carefully recorded, and it was found that if treatment commenced within three days after the initial onset, no death occurred. When treatment began on the fourth day after onset, there was one death, on the fifth day one death, on the sixth day one death and on the ninth day one death.

The notes by the Health Visitors have been very carefully recorded.

Kensington District Nursing Association.

The Queen's nurses under Miss Eales have shown great enthusiasm in their work. They attended fifty-two notified cases and fifty-five cases of diarrhoea which had not been notified, making a total of one hundred and seven cases in all. Out of the one hundred and seven cases, sixteen children were sent to hospital. Only one death occurred in the home whilst the nurses were attending and in this case the routine treatment was discontinued owing to circumstances over which the nurse had no control.

Three of the sixteen cases admitted to hospital died. In one of these, the nurses were only called in when a relapse had taken place; the initial attack received no routine treatment. There have, therefore, been only four deaths out of the one hundred and seven cases attended by the nurses.

Deaths from Diarrhoea.

There were forty-three deaths from Diarrhoea during the year under review. Seventeen deaths occurred amongst cases which were not notified or not attended by the District Nurses, and twenty-two deaths amongst notified cases which also had not received treatment from the nurses. Nineteen out of the twenty-two notified cases died in various hospitals and three in their own homes.

It will be seen that thirty-nine deaths occurred amongst children who had not received routine treatment in their own homes or prior to removal to hospital.

St. Mary Abbots Hospital.

During the year, we treated fifty-two cases of gastro-enteritis, of which thirty-eight recovered and fourteen died. In an analysis of the deaths, I find that three were admitted in a moribund condition and died in a few hours. All the deaths were in children under one year of age except three.

Most of the cases which died were very ill on admission, suffering from toxæmia and dehydration and collapse. On taking a careful history of some of these cases, it was often found that they had been four or five days without food, that is to say, they had been living on albumin water. This long period of starvation made it impossible for the child to hold its own. In some cases of dehydration saline was injected subcutaneously and sometimes intraperitoneally. I saw one very acute "fulminating case" which had only been ill two days. On the third day the temperature was 105°F and death occurred on the fourth day.

When a child continued to have fever, however slight, for over a week, the stools were examined bacteriologically. This practice was also adopted outside the hospital. Morgan No. 1, bacillus Coli, proteus etc. were the usual organisms present; no paratyphoid was discovered. In one case of chronic diarrhoea and wasting in a child nine months old with no fever, the Shiga (dysenteric) bacillus was isolated. This is a very rare condition in a child of this age. The father had been stationed in the tropics whilst in the Navy but the agglutination test with his blood proved negative. A daily wash out of the bowel with saline removed the bacillus in ten days' time and the child made a good recovery.

Amongst those which recovered, there were many cases of vomiting which was so severe that hourly injections of glucose and water per rectum and drops of brandy by the mouth had to be given every four hours for some days. Food was then gradually added, but these cases were often two or three months in hospital. In most of the severe cases that recovered, the problem resolved itself into finding a food which was well tolerated and in testing the digestive capacity of the infant by changing the quality of the food very gradually. Only the mild cases were given routine treatment as a rule; in the severe types much would depend on the general condition of the child, the length of time the illness had lasted and the previous treatment it had received.

Post Mortem Examinations.

I have been present at most of the post mortems and have been struck by the fact that all cases without exception showed fatty degeneration of the liver and only in two or three cases was there any evidence of inflammation in the intestine or enlargement of Peyer's patches. The pathology of this disease is clearly an absorption of toxin from the bowel which makes its way through the portal vein directly into the liver cells. The shock to the liver is so great that it ceases to store glycogen, the child therefore cannot obtain sufficient sugar to live.

It is obvious that the good results obtained by routine treatment in the home are due to removing the toxin as soon as possible by washing out the bowel daily and giving the child plenty of water to drink, thereby helping the excretion of toxin and the prevention of dehydration. The malted milk given on the second day is an easily digested food, containing dessicated milk, wheat flour, barley malt, bicarbonate of soda, hardly any fat, and the mixture contains no unaltered starch, and a large amount of sugar. This food helps the liver at the earliest possible moment to recover its capacity of storing glycogen, and so the child can obtain the sugar which is so necessary to life.

Several doctors during the Summer asked me to see their cases.

(Signed) RONALD CARTER.

Dysentery.—Two cases of dysentery were notified during the year in the Holland and Earl's Court Wards respectively. One patient contracted the disease during a voyage in the Mediterranean and the other whilst on a holiday in the Austrian Tyrol.

Acute Rheumatism.—Under the Kensington (Acute Rheumatism) Regulations, 1927, acute rheumatism, as defined in these regulations, was made a notifiable disease for three years from 1st October, 1927. The regulations define acute rheumatism as denoting the following conditions, occurring separately and together in a child under the age of sixteen years.

- (a) Rheumatic pains and arthritis, if accompanied by a rise of temperature;
- (b) Rheumatic chorea;
- (c) Rheumatic carditis.

Before sanctioning these regulations, the Ministry of Health required to be satisfied that:—

- (1) Efficient machinery existed for investigating the cases notified.
- (2) There was accommodation for institutional treatment.
- (3) The local authority was well organised in regard to health administration and had good housing records.

The first of these conditions was provided by setting up a Rheumatism Supervisory Centre and by arranging that on the receipt of a notification a health visitor should visit the home of the rheumatic child to make certain enquiries and observations. The second was complied with by making special arrangements with the Poor Law Authorities of Kensington, whereby in-patient accommodation was set aside at St. Mary Abbots Hospital, and by making a grant towards the provision of convalescent treatment. The third condition was already satisfied.

During the year 1929, 81 cases of this disease were notified, 50 of which were removed to hospital for treatment.

The following is the Second Annual Report on the working of the Rheumatism scheme during the period October 1st, 1928, to September 30th, 1929, prepared by the Physician-in-charge of the Centre and the Medical Officer of Health.

The Rheumatism Scheme of the Royal Borough of Kensington, incorporating, as it does, a trial of compulsory notification of acute rheumatism in a Metropolitan Borough, is an important experiment in public health organisation. The First Annual Report of the Rheumatism Scheme discussed at some length the place and value of notification in schemes for the supervision of rheumatic children. The experience of the Second Year of the Scheme has placed us in a surer position in putting forward our views. The results of notification in the Second Year may now be discussed.

The Response to Notification in the Second Year.

The total number of notifications under the Kensington (Acute Rheumatism) Regulations, 1927, for the second year (October, 1928—September, 1929) show a reduction of 34 per cent. Some diminution in the notifications coming in was expected because there was an accumulation of cases which immediately became due for notification on October 1st, 1927, when notification first operated. These cases may have developed their rheumatism months or years previously. Again, any children developing fresh attacks of rheumatism in the first year would be notifiable, but if after recovery they developed fresh attacks in the second year, no additional notifications would be required.

Further, the tendency of practitioners to forget to notify a disease not usually notifiable would be accentuated after the first interest in it had subsided. It should be mentioned that circular letters have been addressed to medical practitioners reminding them of their duty to notify. Nevertheless, it is probably true that the tendency to overlook notification was more marked in the second year.

An analysis of the sources of the notifications shows a general reduction under all headings except that of the Rheumatism Supervisory Centre itself, whose medical officers notified rather more cases than in the first year.

Analysis of (First) Notifications of Acute Rheumatism.

	First Year, 1927-1928.	Second Year, 1928-1929.
Private Medical Practitioners...	53	40
Rheumatism Supervisory Centre	32	37
School Medical Officers	28	1
Hospitals and Institutions other than St. Mary Abbots Hospital	27	15
St. Mary Abbots Hospital	19	12
	<hr/>	<hr/>
	159	105

The reduction in the number notified by the School Medical Officers from twenty-eight to one is a noteworthy feature. It should be remembered that children suffering from rheumatism of a character severe enough to come within the restricted definition of the regulations would be unlikely to attend school or school inspections, and the small number notified by the School Medical Officers is probably to be explained in this way; but the difference between the School Medical Officers' notifications in the first and the second years cannot be so explained. The number of cases referred to the Supervisory Centre by the School Medical Officers has not fallen and it is clear that the School Medical Officers are potentially in a position to bring to light the majority of the children suffering from rheumatism. Perhaps the reduced number of notifications from School Medical Officers may be ascribed to the fact that these officers are beginning to make use of the Centre and to send cases there for opinion and diagnosis rather than to take the bolder step of notifying, and the increase of the notifications by the Centre is probably accounted for by the fact that cases coming from the schools had not previously been notified.

Value of Notification.

In the First Annual Report, it was stated that the work of the Rheumatism Supervisory Centre was of primary importance and notification should only be regarded as a means of feeding the Centre. Of the 105 cases notified in the second year (1928-1929) seventy-seven attended the Centre, but of these 37 were notified by the Medical Officers attached thereto. All the notified cases have been visited by the Health Visitors and many of them by the voluntary workers of the Invalid Children's Aid Association as well, and the non-attendance of the remainder has been due to one or other of the following reasons: admission to a hospital or attendance as an out-patient at a hospital; the regular supervision of the family doctor; or the parents not wishing to take advantage of the Rheumatism Supervisory Centre.

From the fact that the number of new Kensington cases seen at the Centre was 151 in the first year and 145 in the second, it will be seen that the drop in the notifications has been reflected but little in the attendances of new cases there.

In the Borough of Hammersmith, where there is no provision for the notification of rheumatism, the Invalid Children's Aid Association were anxious that the rheumatic children of Hammersmith should be able to take advantage of the Centre established in Kensington. At the end of the second year, sixty-five cases of rheumatism from Hammersmith were under our supervision and this number is increasing. It follows that a rheumatism supervisory centre, backed by an energetic Invalid Children's Aid Association (or a corresponding organisation) can go a long way without any scheme of compulsory notification. Further, supported by the local authority and a keen school medical service, it is conceivable that the assistance of notification would be unnecessary.

Although it is apparent that material can be found for the Centre without notification and that notification is not providing the bulk of the work, nevertheless it is important to realise that the work of the Public Health Department cannot be measured in terms of the notified cases attending the Centre. A close liaison between the staff of the Centre and the Public Health Department is perhaps the most important factor in the success of the Rheumatism Scheme.

So far, we have given facts which tell against the general introduction of compulsory notification: what is there to be said in its favour?

Though notification provides but a small proportion of the cases under supervision at the Centre, we have found that there are cases of rheumatism brought to our notice by its agency of whose existence we would otherwise be ignorant. It is true that in order to be notified they must have come under medical care on at least one occasion, but unfortunately private medical practice in this country, even at its best, has but little opportunity to concern itself with the supervision of persons not actually ill. There is enormous scope for preventive work and for the supervision of the healthy in private practice, but as yet medical evolution has not accomplished any considerable development along these lines. The supervision of rheumatic children, between attacks, nearly always falls to the lot of hospital outpatient departments and rheumatism clinics. The larger the number of cases notified to the Medical Officer of Health by private practitioners the greater will be the benefits of notification in revealing those rheumatic children who, after recovery from an acute attack, are not kept under their doctor's supervision.

The time has come to answer a pertinent question: could a Rheumatism Scheme such as the Kensington one be efficiently organised and successfully conducted without compulsory notification?

Basing our view on the experience of two years' work and on the figures which have been presented, we have come to the conclusion that the Rheumatism Supervisory Centre could be kept busy without any scheme of compulsory notification; and the truth of this is apparent when we recall the numbers of rheumatic children from the Borough of Hammersmith seeking advice and supervision at the Kensington Centre. To this conclusion must be added our opinion that if the Rheumatism Supervisory Centre is to be successful it must have enthusiastic support from such recognised public bodies as the local authority and the education authority.

As an alternative to notification there is another solution which we put forward for the consideration of authorities concerned with the problem of juvenile rheumatism. It is agreed that in this country juvenile rheumatism occurs for the most part (a) in children of school age and (b) in the social strata below that of the well-to-do. Juvenile rheumatism is a rare disease in the private practice of doctors in good class residential areas, in private schools, and in the public schools of the well-to-do. In the adult, it is comparatively uncommon except in cases when it originates in childhood. From these considerations, it follows that the school medical service should be in a position to deal very effectively with the problem of the control of rheumatism, though we are not convinced that they can do so with their present organisation. The setting up of rheumatism supervisory centres is essential, and we believe that they should be fed chiefly by the school medical service, other bodies being encouraged to refer children to the Centres even though they are below school age. We would like to see rheumatism centres in number sufficient to cope with the disease in each area, set up in close association with the existing hospitals, and staffed by physicians of general experience.

While taking this view, we also wish to make clear that the notification of juvenile rheumatism has been of value outside the sphere of the supervision and treatment of rheumatic children. Environmental research can be greatly aided by a well-conducted scheme of notification, and we believe that it would be advantageous to continue in existence three or four municipal schemes of notification in the London area in order that these environmental investigations may be allowed to mature.

RESIDENTIAL TREATMENT.

St. Mary Abbots Hospital—Limitation of the Number of Beds Occupied.

The inpatient accommodation for rheumatic children at St. Mary Abbots Hospital (Kensington Infirmary) has been of great value in the second as in the first year. Nevertheless, we take the view that the prolonged treatment required for severe rheumatic cases is more suitably provided at convalescent hospitals and specially organised convalescent homes out of London, the proper function of the hospital beds in London being to accommodate cases awaiting transfer to the special institutions for the treatment of rheumatism.

Pressure on the beds at St. Mary Abbots Hospital has been at times so great that the Medical Superintendent was forced to suggest that the number of beds allotted for rheumatic cases should be reduced. This suggestion was agreed to and at present accommodation is provided for twelve cases.

Two beds are now reserved at the Princess Louise Kensington Hospital for Children.

Convalescent Treatment: Recommendations.

Under the present arrangements in this Borough, all rheumatic children developing heart disease immediately before coming under supervision, or while under supervision, or children in whom relapses of rheumatism or chorea have occurred, are put on waiting lists for one or other of the special residential institutions for the treatment of rheumatism. At certain times, and for certain children, the period of waiting has been excessive, the accommodation for the residential treatment of rheumatic children being quite inadequate. Owing to the pressure on this limited accommodation we have to pick our cases very carefully before recommending them, choosing only those cases for whom any less elaborate treatment is out of the question. This practice, forced on us as on other physicians responsible for the care of rheumatic children, leaves no provision for a large number of rheumatic children for whom home treatment is not sufficient.

For such children, it has been our practice to arrange that an opportunity is provided for them to go to a convalescent home out of London for a period of a few weeks. During the year 1928-1929, twenty children were sent away by the Invalid Children's Aid Association working through the Centre. All children bad enough to be admitted to hospital were afterwards either placed on the waiting lists for the special residential institutions or offered convalescent treatment as outlined above.

Expert opinion regarding the duration of the treatment required in cases of severe rheumatism in general, and rheumatic heart disease in particular, is becoming almost unanimous that a period, comparable in length to the time recognised as necessary for the treatment of tuberculosis of bones and joints, should be spent in a suitable institution, always excepting the cases in which home conditions make domiciliary treatment possible for a corresponding period. A term of a few weeks as a hospital inpatient, followed by four to eight weeks at a convalescent home (which accommodates other children recovering from a variety of illnesses) is inadequate. Often such a course of treatment is all that can be provided and in such circumstances relapsing cases are frequently encountered, each relapse adding to the danger of cardiac involvement. Therefore, we urge that adequate residential accommodation organised on proper lines should be provided. The expense of such provision will be great, but without it our efforts will be little more than a scratching on the surface. Progress on these lines during the last five years under the London County Council and the Metropolitan Asylums Board has been considerable,* and the Invalid Children's Aid Association have also been developing similar plans. The establishment of a country hospital at Tadworth by The Hospital for Sick Children provides for a number of their rheumatic cases, while others are treated at a special convalescent home at Lancing.

Experience has shown that the Kensington Rheumatism Supervisory Scheme could be very considerably enhanced in value as a measure of public health organisation if arrangements were entered into with a suitable institution outside London, and it would be advantageous if such arrangements could be made in concert with the Princess Louise Kensington Hospital for Children. If several of the neighbouring Boroughs combine for the purpose, even more satisfactory arrangements could be made.

THE RHEUMATISM SUPERVISORY CENTRE.

During the two years (1927-1929) that the Centre has been in existence, 370 cases of rheumatism or potential rheumatism have been supervised. Although the Centre was primarily established to deal with cases from Kensington, it has been our custom to accept cases from other Boroughs whenever our advice was required.

*A large number of new beds will be available when the extension of Queen Mary's Hospital, Carshalton, is completed and it is hoped that these will be ready before next winter.

Cases Attending the Centre 1927-1929,

Kensington	...	...	...	...	296
Hammersmith	...	...	...	...	65
Hounslow	...	...	...	...	3
Fulham	...	...	...	...	3
Putney	...	...	...	...	2
Paddington	...	...	...	...	1
					<hr/>
					370
					<hr/>

Of these cases, forty have been discharged because they were not found to be suffering from rheumatism, six have moved out of the locality, four have passed beyond our age limit, and three have died.

During the year 1928-1929, forty-nine sessions have been held at the Princess Louise Hospital and the average attendances have been as follows:—

Kensington	...	...	...	...	12.6
Other Boroughs	...	...	...	...	3.6
					<hr/>
					16.2
					<hr/>

An attempt is made to equalise the numbers attending on any given day by giving appointments for each case. This is done by sending a post-card requesting attendance on a particular date; if the child sent for fails to attend the parents are visited by voluntary workers of the Invalid Children's Aid Association. In spite of these endeavours the numbers attending are subject to very considerable fluctuations and the seasonal prevalence of rheumatic exacerbations during the winter months appears to be the main determining factor.

Sources of Material.

The new cases attending the Centre are referred by a number of different persons and institutions. From the Boroughs other than Kensington, the Invalid Children's Aid Association, the school medical service and the Medical Officers of Health send the larger portion. The sources of the Kensington cases can be seen by referring to the following table:—

Sources of Kensington Cases in attendance 1927-1929.

Invalid Children's Aid Association	...	...	...	...	75
School medical officers...	...	...	...	...	65
Princess Louise Hospital	...	...	...	...	49
Other Hospitals	...	...	...	...	27
Private practitioners	...	...	...	...	37
Notifications	...	...	...	...	18
Public Health Department	...	...	...	...	10
Parents	...	...	...	...	15
					<hr/>
					296
					<hr/>

The Notified and Unnotified Cases Attending the Rheumatism Supervisory Centre.

The Kensington (Acute Rheumatism) Regulations, 1927, define the notifiable condition as (a) rheumatic pains and arthritis, if accompanied by a rise of temperature; (b) rheumatic chorea; (c) rheumatic carditis, occurring separately or together, in a child under sixteen years. In practice, it is found that a large number of cases requiring supervision are not compulsorily notifiable, e.g., cases recovered from chorea; cases of subacute rheumatism in whom the doctor has not had the opportunity of taking the temperature during an acute stage; and cases of rheumatic heart affection no longer in the stage of carditis, but suffering from valvular disease, adherent pericardium, etc.

Kensington Cases in attendance at the Rheumatism Supervisory Centre 1927-1929.

Notified*	...	...	...	...	96
Unnotified	...	...	...	...	200
					<hr/>
					296
					<hr/>

*It should be explained that cases presenting themselves at the Centre are notified by the Medical Officers if they happen to be notifiable but not previously notified.

These considerations are of importance in showing how it comes about that notification plays such an unexpectedly small part in supplying the rheumatic material of the Centre and they show that the present Regulations concerning rheumatism only apply to approximately one-third of the children suffering therefrom. It would appear to be a justifiable conclusion that if notification is to be of value the restricted definition now in official use must be modified so as to cover all cases which the doctor regards as suffering from any of the various manifestations of juvenile rheumatism.

The Work of the Centre.

At the end of the first year 225 cases were under supervision, by the end of the second this number had grown to 323. From time to time names had been removed from the books because the children were not rheumatic, had died, moved away or passed over the age limit.

The medical officers at the Centre and the Invalid Children's Aid Association so frequently come across rheumatic cases which have not been referred to the Centre and are not under a doctor's supervision that we are convinced that the rheumatic material is not exhausted. In view of the fall in the notification rate we are not surprised that the number of new cases coming to the Centre in the second year is also slightly lower. We are of the opinion that the existence of the Centre is sometimes forgotten by those dealing with rheumatic children and the establishment of other centres would help to make its existence and its functions more widely known.

The work of the Centre in regard to the disposal of severe cases and the arrangements made for operative treatment, convalescence, etc., may be summarised as follows:—

†Tonsillectomy	...	...	...	...	30
Admission to St. Mary Abbots Hospital	...	...	...	...	17
Admission to Princess Louise Hospital	...	...	...	...	5
(Special) P.D. School	...	...	...	...	7
Convalescence (average length of stay 11½ weeks)	...	...	...	...	20

INVESTIGATIONS CONCERNING ENVIRONMENT AND ACUTE RHEUMATISM.

Housing.

Evidence of Dampness.

Information concerning the presence of dampness in the rooms occupied by the rheumatic children notified during the year 1928-1929 shows that the Health Visitors reported dampness to be present in twenty-five instances while in seventy-three instances no dampness was found. In six there was no report and in one instance access to the house was not obtained.

Dampness present	...	...	25	(25.5%)
Dampness absent	...	...	73	(74.5%)
No report	...	...	7	
Total notifications	...	...	105	

The proportion of damp houses in this series is considerably less than the proportion in the 1927-1928 series when dampness was found in 37.7%. In this connection, it should be recalled that a pumping station was installed at the mouth of Counter's Creek Sewer in 1927. The improvement in the flood areas of Kensington resulting from this installation and the fact that a considerable part of the year under consideration was unusually dry, would be sufficient to account for the lowered percentage of damp houses; and it is suggested that a similar diminution in the proportion of damp houses to dry ones would be found in those areas of North Kensington from which the bulk of the rheumatism notifications came. Combining the figures for both years, our series consists of 220 notifications; dampness was present in 71 and absent in 149. This gives a percentage of 32.3 damp houses, a figure within the limits of the findings of the Report of the Medical Research Council* and one giving no substantial support to the view that dampness of housing is an important aetiological factor in the causation of acute rheumatism.

In pursuance of the policy of the previous year, the houses reported by the Health Visitors to be damp were re-inspected by the Sanitary Inspectors:—

Dampness confirmed by Sanitary Inspector	...	...	19
No dampness remediable under the Public Health (London) Act, 1891	...	...	6
			25

†All tonsillectomy cases remain in the Princess Louise Kensington Hospital for Children for two nights.

* Report of the Medical Research Council: "Social Conditions and Acute Rheumatism" 1927.

The nineteen instances of dampness confirmed by the Sanitary Inspectors have been remedied.

Lighting, Ventilation and Cleanliness.

The information yielded by the visits of the Health Visitors in regard to lighting, ventilation and cleanliness of the houses confirmed the findings set forth in the First Annual Report of the Kensington Rheumatism Scheme. Once again the figures for the cleanliness of the rooms show the worst results and it is clear that dirt, untidiness and infestation with vermin are not infrequent in the houses in which the notified children live. We do not suggest that an aetiological connection should be assumed, but further investigations on this point are being proceeded with during the third year of the Scheme.

Distribution of the Notified Cases within the Borough.

The 105 cases notified during 1928-1929 are distributed in a way similar to that of the 1927-1928 notifications and a consideration of a map of the Borough on which has been spotted the houses of the combined notifications for the two years 1927-1929 shows a definite grouping in the "poor" areas of the Golborne, Norland and St. Charles Wards of North Kensington.

In the First Annual Report of the Rheumatism Scheme, we stated that about 90 per cent. of the acute rheumatism notifications came from North Kensington. The same figure was found to apply to the distribution between North and South Kensington of the second year's notifications; and the combined figures show that in a series of 264 notifications, only 9.5 per cent. came from South Kensington.

The distribution of any disease will be related to density of population; the more people available for attack the more cases will occur. It has been shown that as judged by notifications, 90 per cent. of the acute rheumatism in children under sixteen years occurs in North Kensington, the ratio of the population of North Kensington to that of South Kensington being 9:8. Now the incidence of a disease is also related to the number of susceptible persons, and in the case of a malady such as juvenile rheumatism, which has a particular age incidence, the population must be corrected for age; therefore, the ratio of the total number of children under sixteen in North and South Kensington has been calculated. This calculation based on the Census figures for 1921 corrected by the births and child deaths for each year since 1921 is presented below.

Ward.	Total Population (1921 Census).	Estimated child population under 16 years of age in 1929.	Notifications of acute rheumatism under 16 years of age.	
			1927-28.	1928-29.
Norland	22,106	7,701	55	28
Golborne	26,329	9,410	44	39
St. Charles	24,268	7,147	34	22
Pembridge	19,969	4,436	14	6
NORTH KENSINGTON ...	92,675	28,694	147	95
Holland	18,874	2,898	9	3
Queen's Gate	13,777	1,177	1	0
Redcliffe	19,865	2,702	1	6
Earl's Court	17,912	2,423	1	1
Brompton	12,759	1,263	0	0
SOUTH KENSINGTON ...	83,187	10,463	12	10

North Kensington has 73.3 per cent. of the children under sixteen years of age and 91.7 per cent. of the notified cases: South Kensington has 26.7 per cent. of the children under sixteen years of age and 8.3 per cent. of the notified cases; the notifications for 1927-28 and 1928-29 have been combined. Thus, a correction for age of the population of North and South Kensington does not appear to invalidate the view put forward in the First Annual Report of the Rheumatism Scheme that poverty and density of population are factors closely related to the incidence of juvenile rheumatism.

*To be read in conjunction with the First Annual Report of the Rheumatism Scheme of the Royal Borough of Kensington published last year.

Other Notifiable Diseases.—With the exception of tuberculosis, which is dealt with in a separate section, no notifiable infectious diseases, other than those to which reference has been made, were notified during the year.

Non-Notifiable Diseases.

Measles.—Epidemics of measles occur about every two years in London. During inter-epidemic periods the disease is quiescent and any preventive or ameliorative measures which may be required can be carried out through the usual procedure consequent upon voluntary or compulsory notification, as the case may be, without resort to concerted action. In such periods of low prevalence the mortality from measles is low, but when widespread epidemics appear the high death-rate among young children due to the *complications* of measles and the amount of physical disability due to the after-effects of the disease render it imperative that every possible resource of the public health and educational authorities should be utilised in controlling the disease. In 1926, representatives of the Ministry of Health, the London County Council, the Metropolitan Branch of the Society of Medical Officers of Health and the Metropolitan Asylums Board met and as an outcome of their deliberations, the following scheme for the reception of cases of scarlet fever and measles into the Board's hospitals was recommended :—

- (a) That the Board should allocate from time to time a number of beds for measles and a number for scarlet fever, such allocation to be altered by the Board as circumstances demand.
- (b) That cases of scarlet fever and measles be admitted on doctor's certificates as now, without reference to the medical officer of health.
- (c) That when shortage of beds for scarlet fever or measles is imminent the Board should inform the medical officers of health and accept cases only upon their recommendation.
- (d) That during such shortage of beds applications for admission from general practitioners should be referred to the medical officers of health for recommendation.
- (e) That the selection of cases for admission should be based on type of home rather than type of case.
- (f) That cases of measles in tenement houses where there are no facilities for home nursing or in houses connected with shops or where a member of the family is employed in the handling of food, should be given priority over cases of scarlet fever in single family houses where isolation is possible.

The Metropolitan Asylums Board adopted the scheme and in 1927 the approval of the Ministry of Health was obtained.

With the object of reducing the mortality and mitigating the complications associated with measles epidemics by the prompt removal of cases to hospital the London County Council, in conjunction with the several metropolitan borough councils, have drawn up the following scheme to operate during epidemic periods.

Action by the School Medical Service.—The school medical officer will inform the divisional medical officers daily of the schools in which the scheme should be put into operation and the divisional medical officer will instruct the school nurses to visit such schools daily with a view to carrying out the following procedure :—

(1) The school nurse will obtain from the head teachers of infants' departments the names and addresses of all absentees in affected classes and of absentees under 5 years of age, where the cause of absence is due to suspicious illness or to unknown causes, and (a) will enter the particulars on special slips to be provided by the divisional officer (education department). If the divisional office is within reasonable distance the nurse will deliver these slips in person to the divisional officer on the day of her visit, but otherwise she will despatch them at once in an envelope marked "urgent" or (b), in boroughs where special agreement has been reached, involving the appointment of special officers to deal with measles, instead of informing the divisional officer, the school nurse will furnish the names and addresses directly to the health visiting officer of the borough council.

(2) The nurse will make special enquiry as to children up to and including 5 years of age, and as to children in any classes in which cases of measles have occurred, with a view to detecting any children who may have come to school with possible early symptoms of measles.

(3) Children discovered in school to present signs indicating the possible onset of measles, such as coryza or with definite symptoms of measles, must be sent home at once in charge of an elder brother or sister or some other responsible person. The borough medical officer will be informed at once and the head teacher will be asked to send particulars of such cases immediately to the three officers concerned.

In addition to the action taken by the school medical service special instructions have been issued to head teachers and the school attendance staff to report immediately any cases or suspicious cases coming to their knowledge.

For the purpose of obtaining the co-operation of the parents the head teachers of schools in the areas affected will be supplied by the borough medical officers of health with advice leaflets for distribution through the school organisation.

Under the scheme it has also been arranged that borough medical officers of health will report to the head teachers any cases of measles occurring in houses occupied by children attending the County Council's schools, which are discovered by health visitors, etc., or at infant welfare centres, Sunday schools, etc., particulars of which have not been received and the existence of which is, therefore, presumably not known at the schools concerned.

In addition, the school nurses will confer with the health visitors of the borough council who will undertake the visitation of suspicious absentees reported by the school nurses.

At the time of writing this report the scheme is in operation and is working very satisfactorily.

There were two deaths from measles in Kensington during the year as compared with fifty-nine in the preceding year. The women health officers paid 286 visits to measles patients, fifty-one cases were removed to the Metropolitan Asylums Board hospitals.

Whooping Cough.—There were sixty-five deaths from this cause. The deaths in the three preceding years were 8, 20 and 10. The women health officers paid 486 visits to cases of this disease during the year. The number of cases admitted to hospitals of the Metropolitan Asylums Board from Kensington was one hundred and thirty-six.

TUBERCULOSIS.

During the year 188 cases of pulmonary tuberculosis and 53 cases of non-pulmonary tuberculosis were notified.

The following table shows the number of cases of both forms of the disease notified in the Borough and the several Wards therein during each year since 1920.

District.	Years.									
	1920.	1921.	1922.	1923.	1924.	1925.	1926.	1927.	1928.	1929.
The Borough ...	407	374	339	403	314	292	317	252	276	241
North Kensington	294	272	233	267	228	207	227	166	179	156
South Kensington	113	102	106	136	86	85	90	86	97	85
WARDS.										
St. Charles ...	70	66	48	61	45	52	50	39	48	39
Golborne ...	88	89	80	86	65	56	69	53	57	41
Norland ...	93	80	76	85	75	67	59	44	49	43
Pembridge ...	43	37	29	35	43	32	49	30	25	33
Holland ...	36	29	28	26	30	27	20	11	25	20
Earl's Court ...	25	24	24	28	13	18	25	25	20	21
Queen's Gate ...	15	15	20	22	17	13	15	10	11	7
Redcliffe ...	25	19	23	41	15	18	22	25	26	25
Brompton ...	12	15	11	19	11	9	8	15	15	12

The number of cases of tuberculosis notified during 1929 was the smallest since compulsory notification of this disease was introduced in 1912.

Medical practitioners are reporting cases at an earlier stage of the disease than was the case several years ago, but the following figures show that some improvement in this respect is still desirable in order that the Council's machinery for the prevention of the spread of infection may be put into operation at the earliest possible moment :—

(1) No. of deaths in Kensington from all forms of tuberculosis in 1929 ...	137
(2) No. of persons dying unnotified or notified at death ...	44
(3) No. notified within one month before death ...	14
(4) No. notified within three months before death (excluding those under heading 3)	16
(5) No. notified within six months before death (excluding those under headings 3 and 4)	14

The following summary shows the age and sex distribution of the cases notified and the deaths from this disease during the year :—

Age Periods. (Years).	New Cases†				Deaths.			
	Pulmonary.		Non-Pulmonary.		Pulmonary.		Non-Pulmonary.	
	M.	F.	M.	F.	M.	F.	M.	F.
0—1	—	—	2	1	—	—	—	3
1—5	1	1	4	3	—	—	—	2
5—10	—	—	11	2	—	—	—	2
10—15	4	1	2	2	1	1	—	—
15—20	8	12	3	2	1	5	—	—
20—25	14	17	—	8	3	13	—	4
25—35	27	26	1	5	12	15	—	—
35—45	18	18	2	2	22	9	2	—
45—55	20	9	1	1	12	6	1	—
55—65	7	3	—	1	9	6	—	—
65 and upwards	1	1	—	—	2	3	3	—
TOTALS	100	88	26	27	62	58	6	11

† Primary notifications of persons notified during life to be suffering from tuberculosis.

From the above table it will be seen that the disease commonly attacks people at the period of their maximum value to the home, the family and the nation. Apart from causing deaths of persons in the prime of life, it handicaps many by reducing their working capacity for several years before death.

The following table shows the number of notifications of pulmonary and non-pulmonary tuberculosis received since 1920, together with the number of deaths and death-rates in each year.

Year.	Pulmonary Tuberculosis.			Other Forms of Tuberculosis.			Tuberculosis (all forms).	
	No. of Notifications.	No. of Deaths.	Deaths per 100,000 persons living.	No. of Notifications.	No. of Deaths.	Deaths per 100,000 persons living.	No. of Deaths.	Deaths per 100,000 persons living.
1920	293	135	82	114	44	27	179	109
1921	288	153	87	86	32	18	185	105
1922	252	139	78	87	30	17	169	95
1923	280	117	66	123	35	19	152	85
1924	236	120	67	78	29	16	149	83
1925	235	134	75	57	25	14	159	89
1926	248	130	72	69	30	17	160	89
1927	178	114	65	74	26	15	140	80
1928	212	107	60	64	25	14	132	74
1929	188	120	68	53	17	10	137	78

It has already been stated that the number of cases of tuberculosis notified in 1929 is the lowest recorded, but the above table shows a slight increase in the total number of deaths from all forms of this disease. The increase actually occurs in the number of deaths from pulmonary tuberculosis which rises from 107 to 120. The number of deaths from non-pulmonary tuberculosis was 8 less than in the preceding year, and is the smallest on record.

DEATHS FROM TUBERCULOSIS IN 1929 ALLOCATED TO DISTRICT OF USUAL RESIDENCE OF PATIENTS.

	Pulmonary Tuberculosis.	Non-Pulmonary Tuberculosis.
The Borough	120	17
North Kensington	78	11
South Kensington	42	6
WARDS.		
St. Charles	13	2
Golborne	26	4
Norland	28	3
Pembridge	11	2
Holland	8	3
Earl's Court	9	1
Queen's Gate	—	—
Redcliffe	18	2
Brompton	7	—

The places where deaths from tuberculosis occurred are set forth in the following list :—

	Pulmonary Tuberculosis.	Non-Pulmonary Tuberculosis.
Patient's Home	37	4
St. Mary Abbots Hospital	47	4
Princess Louise Kensington Hospital for Children	—	1
Baby Clinic Hospital	1	1
Outlying Hospitals	23	6
Other places outside the Borough	12	1

Public Health (Prevention of Tuberculosis) Regulations, 1925.—These Regulations were introduced with a view to :—

- (1) preventing persons suffering from respiratory tuberculosis entering upon an occupation involving the handling of milk ; and
- (2) enabling local authorities, in proper cases and with suitable safeguards, to require persons engaged in such occupation to discontinue their work when found to be suffering from the disease in an infective stage.

During the year no case occurred which required the attention of the Council under these Regulations.

THE COUNCIL'S SCHEME FOR THE PREVENTION AND TREATMENT OF TUBERCULOSIS.

The Staff Engaged on Tuberculosis Work.

The staff at the Dispensary consists of a Tuberculosis Officer ; two indoor nurses, one of whom also acts as Secretary to the Tuberculosis Care Committee and the other as a Dispenser ; a Clerk and a Caretaker. These officers give whole-time service to tuberculosis work.

In 1920, the Borough was divided into seven areas for the purpose of home visiting in connection with Maternity and Child Welfare work and a Woman Health Officer was allocated to each of these districts. When the Council assumed full control of tuberculosis work in the Borough arrangements were made for the home visiting of tuberculous patients to be undertaken by these Women Health Officers in their respective areas. These officers visit the Tuberculosis Dispensary daily for the purpose of obtaining information as to visits necessary to be paid, and they confer weekly with the Tuberculosis Officer, when they report to him in regard to the home visits paid in the previous week.

Approximately three-sixteenths of the time of these seven Women Health Officers is devoted to tuberculosis work.

Dispensary Diagnosis and Treatment.

The adequacy of the scheme adopted by the Council in 1922 for the prevention and treatment of tuberculosis is evidenced by the fact that after eight years of work no material alterations or additions have been required.

The number of new cases seen at the Dispensary during the year, with the original diagnoses made, is shown in the following table :—

New Cases.

	Adults.		Children under 15 yrs.		Total.
	Males.	Females.	Males.	Females.	
Examined for first time ...	221	319	133	112	785
New cases with Respiratory Tuberculosis	56	49	4	1	110 (14·0 per cent.)
New cases with Non-Respiratory Tuberculosis	4	12	7	7	30 (3·8 „)
New cases regarded as “Suspects”	27	64	8	7	106 (13·5 „)
New cases not suffering from Tuberculosis	134	194	114	97	539 (68·4 „)

This table shows an increase of 12 in the number of adult male respiratory cases over last year. This increase is mainly due to the inclusion under a new regulation of the Ministry of Health of certain special cases undergoing institutional treatment. The number of adult females is the same. The total number of non-respiratory cases is also the same as in 1928.

There were 35 respiratory cases and 53 non-respiratory cases added to the Dispensary Register during the year upon removal into the borough of patients from other districts. This large increase is accounted for by the new regulations of the Ministry of Health dealing with assessment cases which are now required to appear on the Dispensary Register.

The "suspect" cases shown above include all cases not diagnosed in the first instance as either definitely tuberculous or non-tuberculous; to these must be added 26 left on the Dispensary books at the end of 1928, making a total of 132.

The subsequent disposal of these 132 was as follows:—

Diagnosed subsequently as suffering from respiratory tuberculosis	11
Diagnosed subsequently as suffering from non-respiratory tuberculosis	3
Discharged finally as non-tubercular	108
Discharged as having ceased attendance	—
Remaining on books on 31st December, 1929	10

Cases came to the Dispensary of their own accord or were sent up through one of the following agencies: the Public Health Department of the Council, the Ministry of Pensions, Hospitals, School Medical Officers, the Kensington Board of Guardians, the Invalid Children's Aid Association, the Charity Organisation Society, Clergy and private practitioners. Primary consultation cases with the latter numbered 233.

The treatment recommended for the cases diagnosed at the Dispensary as suffering from tuberculosis, which numbered 154 (pulmonary 121 and 33 non-pulmonary), was as follows:—Sanatoria, 92; Domiciliary, 20; Hospitals, 21; Dispensary, 17. No special treatment was required in 4 cases beyond general advice and instructions to report at the Dispensary if necessary.

The total number of attendances by patients at the Dispensary was 2,972, and 1,660 systematic examinations were made.

The number of visits paid by the Tuberculosis Officer was 97, of which 23 were consultations at home with the doctor in charge of the case.

Written reports on cases to Public Authorities numbered 1,457 and to doctors 436.

The total number of sputum examinations was 511 (including 48 specimens sent in by doctors) from 416 individual cases. One hundred and twenty one specimens showed tubercle bacilli to be present and 390 gave negative results.

Records.

Each year several cases of tuberculosis are notified but for special reasons are not kept under subsequent supervision by the Council's staff. Some of these cases are in comfortable circumstances and the private practitioners send requests with the notifications that visits by the Council's staff should not be paid and that they will take steps to prevent the spread of infection. Other notifications are in respect of domestic servants in good class houses who, in a very short time, may leave for their homes in other districts without any notification to this effect being sent to the Public Health Department. Some of these patients die, some are cured, whilst still others are lost sight of, with the result that in the course of several years a number of cases remain on the register, the inclusion of which does not give a fair index of the number actually within the Borough.

With a view to bringing the register up-to-date, the staff at the Tuberculosis Dispensary and the Women Health Officers devoted a considerable amount of time during 1929 investigating the circumstances and residence of all cases notified which have not in the past been kept under regular supervision. This investigation resulted in the removal of a large number of cases from the register and details are given in the following table:—

	Pulmonary.		Non-Pulmonary.	
	Males	Females	Males	Females
No. of cases on the Register of Notifications on 1st January, 1929	1,033	1,127	519	498
No. of cases notified for the first time during the year	100	88	26	27
No. of cases brought to notice otherwise than by notification	23	31	6	8
No. of cases removed from the Register during the year on account of having:—				
(a) been cured	106	135	90	62
(b) removed from district	439	500	222	229
(c) died	190	185	28	21
(d) been inaccurately diagnosed	7	7	2	1
No. of cases remaining on the Register on 31st December, 1929	414	419	209	220

The number of patients on the Dispensary Register on December 31st, 1929, was 814, whilst at the beginning of the year they numbered 801.

A comparison of the dispensary figures with the total number on the Register (1262) shows that the majority of the tuberculosis cases are dealt with through the Council's scheme.

Residential Institutional Treatment, Light Treatment, X-Ray Diagnosis, etc.

The facilities available for residential institutional treatment at sanatoria and St. Mary Abbots Hospital, for medical consultations, X-ray diagnosis and light treatment, will be found on page 82 of the Annual Report for 1928, which also contains reference to the close co-operation of the Council's staff with general medical practitioners and other bodies and institutions.

There were no cases recommended for artificial light treatment during the year.

Home Visiting

The number of home visits paid in 1929 by the Council's Women Health Officers is shown in the following table :—

	WOMEN HEALTH OFFICERS.							TOTAL.
	No. 1	No. 2	No. 3	No. 4	No. 5	No. 6	No. 7	
TUBERCULOSIS.								
<i>Pulmonary.</i>								
First Visits	20	24	26	49	30	10	50	209
Re-Visits	189	184	281	272	260	273	182	1,641
<i>Non-Pulmonary.</i>								
First Visits	7	4	10	6	2	1	15	45
Re-Visits	115	190	191	7	53	192	110	858

Housing conditions form an important element in regard to tuberculosis, and home visits are valuable in this connection. The sleeping arrangements are frequently unsatisfactory and the Women Health Officers always enquire into them. Wherever possible, desirable alterations are pointed out and urged upon the family.

The following table giving the number of rooms occupied by the families of definite cases of tuberculosis diagnosed in 1929 by the Tuberculosis Officer, and the number of occupants, ascertained by the Women Health Officers on their visits to the homes, is inserted to show the difficulties experienced in securing home isolation in many cases :—

	No. of Occupants.										
	1	2	3	4	5	6	7	8	9	10	
Rooms 1	4	7	3	1	—	—	—	—	—	—	=15 cases
„ 2	2	8	10	6	9	5	1	—	2	1	=44 „
„ 3	—	4	7	8	3	5	3	1	1	1	=33 „
„ 4	—	4	6	7	4	6	3	—	—	—	=30 „
„ 5	—	—	2	—	1	—	1	—	—	—	=4 „
„ 6	—	—	—	1	—	1	—	—	—	—	=2 „

128 cases

This total falls 26 short of the total number of cases (including the 30 cases transferred from other districts) owing to patients living in boarding houses, private hotels or large private residences not being included.

It is now five years since this table was first given in the Annual Report, and it is interesting to note that the overcrowding which is so often associated with tuberculosis shows slight improvement as follows :—

1925.	No. of rooms per occupant in all tuberculous families in the tables	·55
1926.	Ditto. ditto.	·58
1927.	Ditto. ditto.	·59
1928.	Ditto. ditto.	·61
1929.	Ditto. ditto.	·67

The Following-up of Patients in Cases of Doubtful Diagnosis.

Patients often do not realise the importance of allowing the Tuberculosis Officer to complete his diagnosis.

When a "suspect" has failed to keep an appointment, he is visited at home by a Woman Health Officer, who gives him a definite appointment with the Tuberculosis Officer at the Dispensary so that he will not be kept waiting. If he fails to keep this appointment, second and third visits are paid for the same purpose, when, if of no avail, the case is dropped for the time being.

During the year there were 132 "suspect" cases. Of these, 11 were finally discovered to be suffering from respiratory and 3 from non-respiratory tuberculosis, and there were 10 still on the books at the end of the year. The remaining 108 were finally discharged as non-tubercular.

Examination and Systematic Supervision of Home Contacts.

There were 638 contacts traced by the Dispensary Service in 1929. Of these, 356 were examined one or more times by the Tuberculosis Officer, 127 were examined by their own doctors or had been recently examined at school, while 155 refused examination or failed to attend after three appointments had been given them.

The endeavour to secure a second examination of the "home contacts" of infectious cases after approximately one year's interval, especially young adult cases whose age renders them more vulnerable, has been continued. These examinations are not included in the above totals.

Dental Treatment of Tuberculous Persons.

Mr. A. Dreaper, L.D.S. (R.C.S.), who was appointed by the Council on the 27th September, 1927, as Dental Officer, continued to act in this capacity during 1929.

The work at the Dispensary during the year is shown in the following table :—

Dentist's attendances at the Dispensary	...	...	...	50
Number of individual patients treated	...	...	...	38
Patients' attendances	...	...	...	75
Number of fillings	...	...	...	3
Number of extractions	...	...	...	69
Number of dentures arranged for	...	...	...	11

Artificial Pneumothorax Treatment.

During the year the Council undertook to pay for artificial pneumothorax treatment in four cases and the payments amounted to £15 3s. 0d.

Home Nursing.

The cases of tuberculosis attended and the visits paid by the Nurses of the Kensington District Nursing Association during the past five years are shown in the following table :—

Year.	Cases.	Visits.
1925	36	614
1926	34	987
1927	22	804
1928	23	901
1929	28	1,327

The Nurses carry out their work splendidly and are very much appreciated by the poor.

Supply of Extra Nourishment to Tuberculous Persons.

The following are particulars of the nourishment granted during 1929 :—

Number of patients assisted	...	...	...	6
Number of pints of milk granted.				Number of eggs granted.
101				101

Estimated cost to the Council of nourishment during the year ... £3 12s. 0d.

Arrangements for "Care" and "After Care."

In July, 1922, the Council approved a proposal for the constitution of a Borough Tuberculosis Care Committee, and this Committee, which commenced its activities in December of that year, undertakes all the "care" and "after-care" work in the Borough.

The constitution and membership of the Committee during the past year were as follow :—

- (1) Borough Council—Councillor Miss E. M. Pennefather and Councillor Miss A. S. Hayne.
- (2) London County Council—Dr. A. W. Sikes, Divisional Medical Officer and Miss G. M. S. Paddon, District Organiser of School Care Committees.
- (3) Kensington School Care Committees—Miss A. Webster.
- (4) Kensington Invalid Children's Aid Association—Miss M. G. Crombie and Miss M. H. Joseph.
- (5) Kensington Charity Organisation Society—Mrs. E. Weber and Miss O. A. Nixon.
- (6) Brompton Hospital—Miss L. C. Marx, Lady Almoner.
- (7) Kensington Board of Guardians—Lady Mellor.
- (8) Kensington District Nursing Association—Miss E. D. Gibbes.
- (9) Kensal House School—Miss E. S. Davidson.
- (10) London Insurance Committee—Dr. W. C. Robinson.
- (11) Panel Committee for the County of London—Dr. A. K. Barrett.
- (12) British Red Cross Society—Mrs. Burne, M.B.E., and Miss H. MacMillan.
- (13) British Red Cross Society (Emergency Help Committee)—Miss C. Keeling, M.B.E., J.P., L.C.C.
- (14) United Services Fund—Miss M. Pickton.
- (15) Ex-officio members—The Medical Officer of Health, Tuberculosis Officer and two Women Health Officers.

The Committee have met fortnightly during the year, and the attendance of members has been well maintained.

Arrangements for Finding Employment.

The difficulties of a Care Committee in securing work for persons whose physical capacity is limited will be readily appreciated, but every effort is made in this matter.

In some instances the intervention of the Tuberculosis Care Committee has resulted in employers holding open the positions of men about to undergo sanatorium treatment.

It is a matter of regret to the Care Committee that they have been forced to abandon the handicraft class as from the end of this year owing to difficulty in maintaining a satisfactory attendance even with the admission to the class of cases from Hammersmith.

Provision of Shelters at the Homes of Patients.

The Council are prepared to loan shelters and they keep several in readiness at their Wood Lane Depot but, at the present time, none is in use.

Provision of Bedding for Home Isolation.

At the present time there are seven patients to whom bedsteads and bedding are being loaned. In two of these the assistance was given for the first time during the past twelve months, the articles issued being as follow :—

Bedsteads	...	2	Mattresses	...	2
Bolsters...	...	2	Pillows	...	2
Pillow-slips	...	4	Sheets	...	8
Blankets	...	5	Quilts	...	2
			Mattress Covers	...	2

The total stock of bedding, etc., on loan on December 31st, 1929, was :—

Bedsteads	...	4	Mattresses	...	4
Bolsters...	...	4	Pillows	...	5
Pillow slips	...	10	Sheets	...	19
Blankets	...	13	Quilts	...	5
Mattress Covers		2			

Disinfection after Death or Removal to Hospital.

In all cases after death from tuberculosis the Council offer disinfection. This offer is also extended when patients enter hospitals or sanatoria and when they change their residence.

Disinfection is also carried out upon request by the Tuberculosis Officer or private practitioners.

The following table shows the number of disinfections carried out during the year :—

Cases where bedding, etc., were disinfected by steam	...	175
Number of rooms disinfected	...	199

Bacteriological Examinations.

Specimens of Sputum submitted by Medical Practitioners for bacteriological examination at the expense of the Council :—

At the Council's Laboratory	...	272
-----------------------------	-----	-----

Specimens examined by the Tuberculosis Officer :—

In respect of Dispensary patients	...	463
Sent up by Medical Practitioners	...	48

Sputum Flasks.

These are supplied to patients who are infectious, and advice is given in regard to the disposal of sputum.

I have the honour to be,

My Lord, Ladies and Gentlemen,

Your obedient Servant,

JAMES FENTON,

Medical Officer of Health.

TABLE II.

Cases of Infectious Disease notified during the Year, 1929.

NOTIFIABLE DISEASE	Number of Cases Notified.								Total Cases Notified in each Ward.									Total Cases Removed to Hospital.
	At all Ages.	At Ages.—Years.							St. Charles.	Golborne.	Norland.	Pembroke.	Holland.	Earl's Court.	Queen's Gate.	Redcliffe.	Brompton.	
		Under 1.	1 to 5.	5 to 15.	15 to 25.	25 to 45.	45 to 65.	65 and upwards.										
Small-pox ...	5	...	...	1	3	...	...	1	...	...	...	...	2	1	...	2	...	5
Cholera ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Dysentery ...	2	...	...	...	...	...	...	2	...	...	...	...	1	1	...	...	...	...
Plague ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diphtheria (including Membranous croup)	326	10	75	145	47	32	12	5	58	76	48	39	19	19	27	32	18	290
Erysipelas...	75	1	3	5	6	21	27	12	11	15	7	8	8	5	8	8	5	89
Scarlet fever ...	526	2	112	286	63	53	10	...	91	166	70	55	35	26	22	50	11	472
Typhus fever ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Enteric fever ...	17	...	1	6	2	5	3	...	...	1	1	...	3	5	1	6	...	11
Continued fever ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Puerperal fever ...	13	...	...	...	7	6	...	...	2	2	4	1*	1	2	...	...	1	11
Puerperal pyrexia ...	41	...	...	...	15	26	...	...	8	8	8	7	...	5	3	2	...	36
Encephalitis Lethargica ...	5	...	...	...	1	4	...	...	...	2	1	...	...	...	...	2	...	5
Cerebro-spinal meningitis ...	2	1	...	1	...	...	...	...	...	1	1	...	...	...	...	...	...	2
Polio-myelitis and Polio-encephalitis	1	...	1	...	...	...	...	...	1	...	...	...	...	...	...	...	...	1
Pulmonary Tuberculosis ...	188	...	2	5	51	89	39	2	30	35	28	25	19	18	6	17	10	181
Other forms of Tuberculosis ...	53	3	7	17	13	10	3	...	9	6	15	8	1	3	1	8	2	27
Ophthalmia Neonatorum ...	22	22	...	...	...	...	...	...	2	5	9	2	...	1	...	2	1	14
Primary Pneumonia ...	114	1	17	23	10	31	27	5	18	38	22	11	9	4	4	7	1	75
Influenzal Pneumonia	146	5	15	9	15	37	34	31	21	51	18	19	11	10	3	6	7	65
Malaria ...	2	...	...	...	...	1	1	...	...	...	...	1	...	...	...	1	...	...
*Enteritis ...	114	76	38	...	...	...	...	...	17	40	42	2	2	1	1	9	...	50
†Acute Rheumatism ...	81	...	...	77	4	...	...	...	24	22	24	4	1	1	...	5	...	50
TOTALS...	1733	121	281	565	239	313	158	56	292	468	293	182	112	102	76	157	51	1364

* Notifiable only in children under the age of 5 years.

† " " " " " 16 years.

Cases of mistaken diagnosis are not excluded from the above table.

TABLE IV.
 INFANT MORTALITY DURING THE YEAR 1929.

Net Deaths from stated Causes, at Various Ages, under One Year of Age.

CAUSE OF DEATH.					Under 1 week.	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total under 4 Weeks.	1-3 Months.	3-6 Months.	6-9 Months.	9-12 Months.	TOTAL DEATHS UNDER ONE YEAR.
All Causes.	{	Certified ...	...	...	45	6	2	6	59	40	51	29	17	196
		Uncertified ...	...	...	9	...	...	...	9	3	2	2	1	17
Measles ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Whooping-cough ...	...	...	...	...	...	...	...	...	...	5	8	4	4	21
Diphtheria ...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
Influenza ...	...	...	...	...	...	...	...	...	...	1	2	1	1	5
Encephalitis Lethargica ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Meningococcal Meningitis ...	...	...	...	...	...	...	...	...	...	...	1	1	...	2
Tuberculosis of respiratory system ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Tuberculous Diseases...	...	...	...	...	...	...	...	...	...	1	...	1	1	3
Bronchitis ...	...	...	...	...	...	1	1	...	2	1	1	2	...	6
Pneumonia ...	...	...	...	...	1	...	...	...	1	7	11	4	5	28
Other respiratory diseases ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diarrhoea, etc. ...	...	...	...	...	...	1	...	...	1	8	16	18	5	48
Congenital debility ...	...	...	...	...	...	...	1	1	2	5	10	1	1	19
Malformation ...	...	...	...	...	6	1	...	2	9	6	3	2	...	20
Premature Birth ...	...	...	...	...	31	8	...	3	37	6	...	...	...	43
Other deaths from violence ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other defined diseases ...	...	...	...	...	16	...	...	...	16	3	...	2	1	32
					54	6	2	6	68	43	53	31	18	218

Net Births in the year of { legitimate, 2,348.
 illegitimate, 216.

Net Deaths in the year of { legitimate infants, 176,
 illegitimate infants, 87.

TABLE VI.

Vaccination Officer's Return respecting the Vaccination of Children whose Births were Registered in 1928.

DATE.	Registration Sub-Districts comprised in Vaccination Officer's District.	Number of Births returned in Birth List Sheets.	Number of these Births duly entered in Columns 1, 2, 4, and 5 of the Vaccination Register (Birth List Sheets), viz.:				Number of these Births which are not entered in the Vaccination Register, on account, (as shown by Report Book) of					Total Number of Certificates of Successful Vaccination received during the Calendar Year, 1929.
			Column I. Success- fully Vaccinated.	Column II.		Column V. Dead, Unvacci- nated.	Postpone- ment by Medical Certificate.	Removed to other Dis- tricts and notified to Vaccination Officers of the Districts.	Removal to places unknown, or which cannot be reached, and cases not having been found.	Not accounted for.		
				Insuscep- tible of Vaccination.	Certificate of Conscien- tious Objection.							
1928	1	2	3	4	6	7	8	9	10			
1st January to 31st Dec.	North	1,304	891	8	234	79	19	35	25	13	1,747	
	South	878	602	3	77	72	18	57	42	7		
	TOTAL	2,182	1,493	11	311	151	37	92	67	20		

TABLE VII.
PARTICULARS OF THE STAFF OF THE PUBLIC HEALTH DEPARTMENT
AT THE END OF 1929.
 (as required by Ministry of Health Circular 359).

	Year of Appointment
<i>Medical Officer of Health and Administrative Tuberculosis Officer.</i>	
James Fenton, M.D., D.P.H.	1920
<i>Assistant Medical Officer of Health and Tuberculosis Officer.</i>	
A. W. K. Picard, M.D.	1922
<i>Consultant Medical Officers (Part time).</i>	
H. Ronald Carter, M.D., (Treatment of Zymotic Enteritis) ...	1924
Remington Hobbs, M.D., (Consultant Gynaecologist) ...	1926
Reginald C. Lightwood, M.D., M.R.C.P., D.P.H., (Rheumatism Super- visory Clinic)	1927
Thomas S. Keith, M.B., B.S. (Lond.), (Bacteriologist) ...	1928
<i>Clerical Staff.</i>	
James H. Wilson (Chief Clerk)	1900
William Gascoyne	1919
John S. Russell	1923
Denis C. Page	1925
† John S. Wheeler	1924
Donald J. Hunt	1924
Arthur L. Vague	1927
Francis T. Pearce	1929
Ronald D. Callis	1929
<i>Sanitary Inspectors.</i>	
* Henry Dawes (Senior Inspector)	1898
* Nelson Males	1897
* Charles G. Sexton	1898
* Thomas Cutting	1900
* Edward J. Bennett	1901
* George W. McQuinn	1901
* Joseph H. Fowles	1902
† John McDermid	1920
¶† Henry W. Walters (Food Inspector)	1925
¶† Cecil R. Webb	1925
¶† Redmond J. McCarthy	1926
<i>Women Health Officers.</i>	
Miss F. C. Hargrave	1910
††* Miss E. Dixon	1917
††* Miss W. H. E. Whitbread	1920
†* Mrs. V. A. Ross	1921
††* Miss E. M. Law	1922
Miss A. E. Haycock	1922
††* Miss K. M. Roe	1926
††* Miss I. Culleton	1929
† Miss E. Mogridge	1929
<i>Health Lecturer.</i>	
Mrs. M. Hayman	1926
<i>Mortuary Keeper.</i>	
William Sutton	1907
<i>Disinfecting Staff.</i>	
Albert Nunn (Chief Disinfecter)	1906
George H. I. Harris	1914
William Taylor	1926
Walter D. Strong	1928
Phillip H. Bowker	1929
<i>Medicinal Baths Staff.</i>	
A. V. Boddington (Superintendent)	1929
Mrs. R. Webber (Matron)	1918
<i>Rat Officer.</i>	
Walter E. Weedon	1926
<i>Drain Testing Assistants.</i>	
William Clancy	1903
Charles H. Coombs	1927
<i>Caretakers, Tuberculosis Dispensary.</i>	
Mr. & Mrs. H. Lake	1921

* Certificate of the Royal Sanitary Institute.

† Certificate of the London Sanitary Inspectors Examination Board.

‡ Certified Midwife.

¶ Certificate for Meat and other Foods.

All the Women Health Officers have undergone 3 years General Hospital Training and have secured the certificate of general nursing proficiency.

Exchequer grants equal to half the salary paid are received by the Council in respect of all the Medical Officers, (with the exception of Dr. Lightwood and Dr. Keith), the Sanitary Inspectors, the Women Health Officers, the Health Lecturer, the Dispensary Caretakers and Mr. Russell.