

[Report of the Medical Officer of Health for Ealing].

Contributors

Ealing (London, England). Council.

Publication/Creation

[1929]

Persistent URL

<https://wellcomecollection.org/works/vvhsqkd3>

License and attribution

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

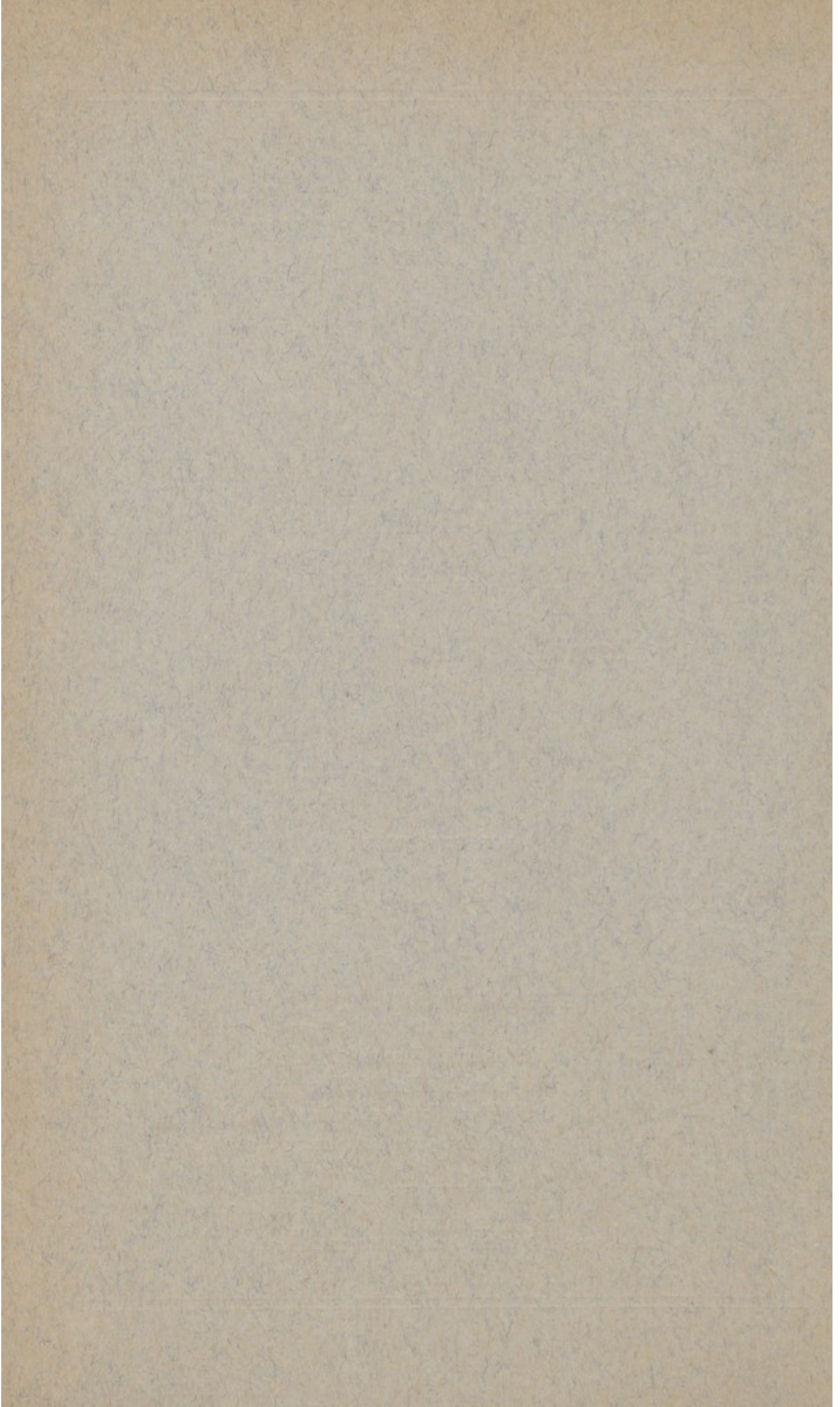
Non-commercial use includes private study, academic research, teaching, and other activities that are not primarily intended for, or directed towards, commercial advantage or private monetary compensation. See the Legal Code for further information.

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

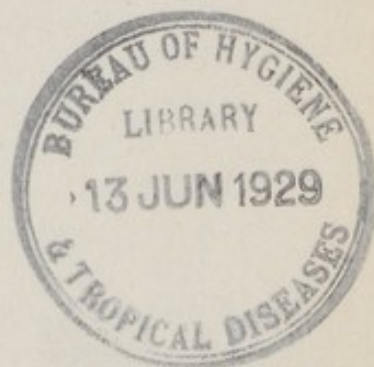


Wellcome Collection
183 Euston Road
London NW1 2BE UK
T +44 (0)20 7611 8722
E library@wellcomecollection.org
<https://wellcomecollection.org>

Unable to display this page



Borough of Ealing.



ANNUAL REPORT

OF THE

Medical Officer of Health

AND

School Medical Officer

FOR THE YEAR

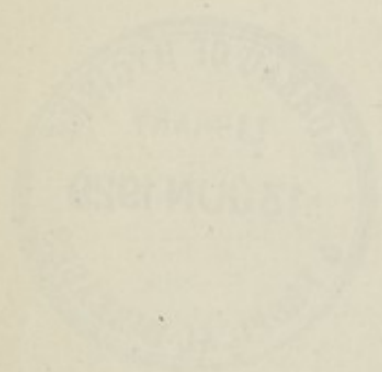
1928.

THOMAS ORR, M.D., D.Sc.,

Of the Middle Temple, Barrister-at-Law.

Medical Officer of Health,
School Medical Officer and
Medical Superintendent of the
Isolation and Maternity Hospitals.

Borough of Belling.



ANNUAL REPORT

Medical Officer of Health

School Medical Officer

FOR THE YEAR

1928.

THOMAS ORR, M.D., D.S.

In the Middle Temple, London, E.C. 4.
Medical Officer of Health,
School Medical Officer, and
Medical Superintendent of the
Isolation and Infectious Hospital.

Printed and Bound by the
Government Printer, Boston, U.S.A.

INDEX

PAGE

19 Act, By-law and Regulations

17 Ambulances

44 Bacteriological Examinations

10 Births

65-77 Blind, Deaf, etc., Children

17 Clinics and Treatment Centers

24-30 Diseases, Communicable and Miscellaneous

18 Day Nursery

14 Deaths

81 Dental Hygiene

34 Diptheria

44 Distribution of W. F. A. and W. F. L. A. Reports

25-27 Factories and Workshops

60-65 Infectious Diseases

7-17 Health Centers

48 Health Visiting

15 Hospitals in the District

29 Housing

12 Infant Deaths

81 Infectious Diseases

17-27 Institutions in the District

48 Medical Treatment of School Children

68-77 Mentally Defective Children

18 Midwives

30 Milk

23 Notifiable Diseases

18 Nursing Supervisors, P. I. and W. F. A.

28 Offensive Trades

9 Population

24 Sanitary Inspection of District

24 Sanitation, Report on Case of

21 School Hygiene

21 Sewage Disposal

24 Slaughtering

28 Statistics, Report on Case of

21 Statistics, Vital and General

2 Tuberculosis

25 Unsanitary

20 Water Supply

40 Welfare Working Party

ANNUAL REPORT

OF THE

Medical Officer of Health

1928.

INDEX.

	PAGE
Acts, Byelaws and Regulations	19
Ambulances	17
Bacteriological Examinations	44
Births	10
Blind, Deaf, etc., Children	69, 77
Clinics and Treatment Centres	17
Dairies, Cowsheds and Milkshops	24, 30
Day Nursery	48
Deaths	14
Dental Defects	59, 63, 81
Diphtheria	34
Disinfection	25, 44
Factories and Workshops	25, 27
Food	30
Health Centres	7
Health Centres, Work of	47
Health Visiting	46
Hospitals in the District	15
Housing	29
Infant Deaths	12
Infectious Diseases	33, 61
Institutions in the District... ..	15
Maternity and Child Welfare	45
Medical Inspection of School Children	53
Medical Treatment of School Children	62
Mentally Defective Children	69, 77
Midwives	18
Milk	30
Notifiable Diseases	33
Nursing Arrangements	18
Offensive Trades	25
Population	8
Sanitary Inspection of District	24
Scarlet Fever	35
School Hygiene	23, 52
Sewage Disposal	21
Slaughterhouses	24
Smallpox, Report on Case of	36
Staff	6, 51
Statistics, Vital and General	8
Tuberculosis	43, 62
Uncleanliness	57
Water Supply	20
Welfare Working Party	46

PUBLIC HEALTH COMMITTEE,

1927-28.

Councillor H. M. SAYERS (*Chairman*).

Councillor A. H. CHILTON, J.P. (*Vice-Chairman*).

Aldermen H. ARMRIDING, Col. R. R. KIMMITT, O.B.E.,

H. W. PEAL, J.P., and A. F. WEBSTER,

Councillors J. C. FULLER, T. HALLIDAY, D. HOWELL-JONES, J.P.

J. J. LYNCH, W. D. POCOCK, J. SMITH, Mrs. E. S. TAYLOR, J.P.,

and G. C. WILCOX.

MATERNITY AND CHILD WELFARE COMMITTEE,

1927-28.

Councillor Mrs. E. S. TAYLOR, J.P. (*Chairman*).

Mrs. E. A. COCKER (*Vice-Chairman*).

Aldermen H. ARMRIDING, Col. R. R. KIMMITT, O.B.E.,

H. W. PEAL, J.P., and A. F. WEBSTER,

Councillors A. H. CHILTON, J.P., J. C. FULLER, T. HALLIDAY,

D. HOWELL-JONES, J.P., J. J. LYNCH, W. D. POCOCK,

H. M. SAYERS, J. SMITH and G. C. WILCOX.

Mesdames GIRDLESTONE, LUDLOW, MORRIS, PARRY and WILCOX.

STAFF.

*Medical Officer of Health and Superintendent of
Isolation and Maternity Hospitals—*

THOMAS ORR, M.D., D.Sc.,
Of the Middle Temple, Barrister-at-Law.

*Assistant Medical Officer of Health and Medical
Attendant of Isolation Hospital—*

JOHN H. D. LAWRIE, M.D., D.P.H.

*Assistant Medical Officer, Maternity and Child
Welfare—*

EDNA I. LANGSTON, M.B., B.S., L.R.C.P., M.R.C.S.

Medical Officer, Maternity and Child Welfare—Part-time—

FRANCIS S. BARRY, M.B., B.S., L.R.C.P., M.R.C.S.

Consultant, Health Centres

(Ante-Natal Consultation)—Part-time—

JOHN W. BELL, L.R.C.P.I. & L.M., L.R.C.S.I. & L.M.

Chief Sanitary Inspector—

THOMAS HILL, Cert. R.S.I., and
Cert. Inspector of Meat and Other Foods.

Sanitary Inspectors—

JAMES STUBBS, Cert. R.S.I., and Cert. Inspector of Meat
and Other Foods.

GEORGE W. STEVENS, Cert. R.S.I., and Cert. Inspector of Meat
and Other Foods.

C. P. H. MEADOWS, Cert. R.S.I., and Cert. Inspector of Meat
and Other Foods.

Health Visitors—

ELEANOR EVANS, Cert. R.S.I., Cert. C.M.B. (Senior).

MARGUERITE FARROW, Cert. R.S.I., and Trained Nurse.

MILDRED ADELINE RICE, Cert. R.S.I., Cert. C.M.B., and
Trained Nurse.

RUBIE G. B. DUGGER, Health Visitors' Cert., Cert. C.M.B.,
and Trained Nurse.

Matron, Day Nursery—

ALICE M. EXON, Trained Nurse.

Chief Clerk and Committee Clerk—

HARRY BIRRELL.

Clerk and Laboratory Assistant—

*ERNEST W. HILL.

(Resigned June 16th, 1928)

Clerks—

*WILLIAM A. J. TURNER. OLIVE LEVASSEUR.

*GEORGE W. STEPHENS. WINIFRED RIVERS.

*HERBERT J. REED. PEGGY GOSTAGE.

*ARTHUR C. MOTTE (Appointed June 25th, 1928)

HEALTH CENTRES.

13, MATTOCK LANE, EALING.

CHERINGTON HOUSE, HANWELL.

ABERDEEN HOUSE, GREENFORD.

MEMORIAL HALL, NORTHOLT.

NOTE.—To the salaries of all the above officials, excepting those marked with an asterisk, contribution is made under the Public Health Acts or by Exchequer Grants.

SUMMARY OF GENERAL STATISTICS, 1928.

Population (Estimated middle of 1928)	...	...	...	98,660
Population (Estimated end of 1928)	...	...	...	100,250
Population (Census, 1921)	...	...	...	89,697
Population (Census, 1911)	...	...	...	81,415
Area of Borough in Acres	...	...	...	9,135
Number of Structurally Separate Dwellings (1921)	...	...	...	18,497
Assessable Value (District Rate), October, 1928	...	...	...	£804,662
Net Produce of a Penny Rate	...	...	...	£3,353

SUMMARY OF VITAL STATISTICS, 1928.

Births :—

Legitimate Males, 693	Females, 711	Total, 1,404	
Illegitimate Males, 43	Females, 25	Total, 68	1,472
Birth-rate	...	...	14.9
Deaths : Males, 463	Females, 571	...	Total 1,034
Death-rate (Crude)	...	...	10.5
Death-rate (Standardised)	...	...	9.6
Deaths of Infants under 1 year :—			
Legitimate : Males, 31	Females, 25	Total, 56	
Illegitimate : Males, 4	Females, 1	Total, 5	61
Infant Death-rate per 1,000 Births :—			
Legitimate, 40	Illegitimate, 74	Total ...	41

	Total Deaths	Death-rate per 1,000 Population
Measles	4	0.04
Whooping Cough	4	0.04
Diphtheria	7	0.07
Scarlet Fever	0	0.00
Influenza	9	0.09
Tuberculosis of Lung	62	0.63
Other Forms of Tuberculosis	14	0.14
All Forms of Tuberculosis	76	0.77

	Total Deaths	Death-rate per 1,000 births
Diarrhoea (under 2 years of age)	4	2.7

Number of Women dying in or in consequence of Childbirth :—

From Sepsis	...	...	...	2	1.4
Other causes	...	...	...	6	4.1

TABLE I.

Comparison of Vital Statistics of Ealing with those
of England and Wales, Etc., 1928.

	England and Wales	107 Great Towns (including London)	London	Ealing
Birth-rate	16.7	16.9	15.9	14.9
Death-rate	11.7	11.6	11.6	9.6
Infant Death-rate	65	70	67	41
Measles Death-rate	0.11	0.15	0.30	0.04
Whooping Cough Death-rate ...	0.07	0.09	0.09	0.04
Diarrhoea (under 2 years per 1,000 Births)	7.0	9.6	10.2	2.7
Diphtheria Death-rate	0.06	0.09	0.09	0.07
Scarlet Fever Death-rate	0.01	0.02	0.02	0.00
Influenza Death-rate	0.19	0.17	0.13	0.09

VITAL STATISTICS.

Population.

The population at the middle of the year is estimated by the Registrar-General as 98,660 ; that at the end of the year, after the inclusion in the Borough of the Parish of Northolt, which took place on the 1st October, as 100,250. The former figure is taken for calculation of the birth and death rates as the births and deaths occurring in Northolt previous to its inclusion are not assigned to the Borough.

During the year the natural increase in the population, or the excess of births over deaths, was 438.

At the Census in 1921 the total population for the area was 89,697.

The Census returns for 1921 indicate that there were 18,497 structurally separate dwellings occupied in the area now included in the Borough, that there were 111,282 rooms occupied and that there were 1.24 rooms per person.

The area of the Borough since the inclusion of Northolt is 9,135 acres and the density of population, or number of persons per acre, is therefore 11.

The *Birth-rate* is low compared with the rates for England and Wales and for London, which are 16.7 and 15.9 respectively. The number of births assigned to the whole of the area was 1,472, which gives a birth-rate of 14.9 per thousand of population. This is a slight increase over the previous year, being 0.8 per thousand of population more and constitutes the highest birth-rate since 1923, when it was 15.6.

The *Death-rate* is lower than in the previous year, 9.6 compared with 10.5. It compares favourably with the death-rate for England and Wales, which is 11.7, and that for London, which is 11.6 per thousand of population.

The *Infant Death-rate* is unusually low and is the lowest yet recorded for Ealing, being 41 per thousand births. This rate compares most favourably with the rates for England and Wales, for the Great Towns and for London, which are, respectively, 65, 70 and 67. In Table II the rate for 1928 is compared with the rates for the previous 17 years. It will be seen the lowest infant death-rate previous to this year was 47, recorded in 1920 and in 1924.

The *Illegitimate Infant Death-rate* is low for the year, being 74 per thousand illegitimate births.

TABLE II.

Showing Birth-rate, Death-rate and Infant Death-rate for
Ealing for the Years 1911-1928.

<i>Year</i>	<i>Birth-rate</i>	<i>Death-rate</i>	<i>Infant Death-rate</i>
1911 ...	20.2	11.5	121
1912 ...	20.6	9.7	67
1913 ...	18.2	8.9	72
1914 ...	17.5	9.4	59
1915 ...	16.6	10.2	63
1916 ...	17.0	11.1	58
1917 ...	14.8	10.5	63
1918 ...	13.0	13.6	76
1919 ...	13.3	10.8	65
1920 ...	17.8	8.8	47
1921 ...	16.9	10.6	63
1922 ...	16.2	11.0	52
1923 ...	15.6	10.6	58
1924 ...	14.3	11.1	47
1925 ...	14.0	9.1	56
1926 ...	14.0	10.1	55
1927 ...	14.1	10.5	56
1928 ...	14.9	9.6	41

The causes of death of infants in 1928 are indicated in Table III, in which the causes of death for the year are compared with those in the preceding eight years.

In Table IIIA the ages at which death occurred in children under twelve months old are indicated. It is noteworthy that 33, or 54 per cent. of the total 61 deaths, occurred under four weeks old. This gives an infant death-rate occurring under four weeks of 22.

The *Baltimore* is low compared with the rates for England and Wales and for London, which are 16.7 and 15.9 respectively. The number of birth registrations which was 1,472, which corresponds to an average of 1.44 to each child a year, which is a considerable increase on the rate of 1.32 in 1920.

TABLE III.

Causes of Infant Deaths, 1920 to 1928.

	1920	1921	1922	1923	1924	1925	1926	1927	1928
Diarrhoeal Diseases	9	9	5	2	4	1	4	3	5
Premature Birth	15	10	5	11	7	9	23	20	14
Congenital Defects	4	4	6	8	4	10	5	9	6
Atrophy, Debility, Marasmus ...	14	12	10	9	6	8	13	11	6
Tuberculous Disease	3	—	2	1	3	—	—	—	2
Syphilis	3	2	—	—	—	1	1	—	—
Rickets	—	—	—	—	—	—	—	—	—
Meningitis (<i>not Tuberculous</i>) ...	—	1	—	1	2	1	1	—	1
Convulsions	2	2	2	2	2	—	1	2	3
Bronchitis	1	6	5	5	1	4	7	5	7
Pneumonia (all forms)	4	9	1	10	3	5	5	7	4
Gastritis	2	1	2	1	—	—	1	—	1
Common Infectious Diseases ...	—	7	4	2	3	3	1	2	—
Other Causes	7	9	15	10	11	12	9	15	12
Totals	64	72	57	62	46	54	71	74	61

The causes of death of infants in 1928 are indicated in Table IV, in which the causes of death for the year are compared with those in the preceding eight years.

In Table III the ages at which death occurred in children under twelve months old are indicated. It is noteworthy that 33 per cent of the total 61 deaths occurred under four weeks of age. This gives an infant death-rate occurring under four weeks of 22

TABLE IIIA.

Infant Mortality during the Year 1928.

Deaths 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	4 weeks and under 3 months	3 months and under 6 months	6 months and under 9 months	9 months and under 12 months	Total deaths under 1 year
All Causes—Certified ...	14	10	8	1	33	12	7	4	5	61
Uncertified ...	—	—	—	—	—	—	—	—	—	—
Small-pox ...	—	—	—	—	—	—	—	—	—	—
Chicken-pox ...	—	—	—	—	—	—	—	—	—	—
Measles ...	—	—	—	—	—	—	—	—	—	—
Scarlet Fever ...	—	—	—	—	—	—	—	—	—	—
Whooping-Cough ...	—	—	—	—	—	—	—	—	—	—
Diphtheria and Croup ...	—	—	—	—	—	—	—	—	—	—
Erysipelas ...	—	—	—	—	—	—	—	—	—	—
Tuberculous Meningitis ...	—	—	—	—	—	—	—	—	2	2
Abdominal Tuberculosis ...	—	—	—	—	—	—	—	—	—	—
Other Tuberculous Diseases ...	—	—	—	—	—	—	—	—	—	—
Meningitis (<i>not Tuberculous</i>) ...	—	—	1	—	1	—	—	—	—	1
Convulsions ...	—	1	1	—	2	1	—	—	—	3
Laryngitis ...	—	—	—	—	—	—	—	—	—	—
Bronchitis ...	—	2	1	—	3	1	1	—	2	7
Pneumonia (all forms) ...	—	—	—	—	—	—	1	2	1	4
Diarrhoea ...	—	—	—	—	—	1	1	—	—	2
Enteritis ...	—	1	—	1	2	—	1	—	—	3
Gastritis ...	—	—	—	—	—	—	1	—	—	1
Syphilis ...	—	—	—	—	—	—	—	—	—	—
Rickets ...	—	—	—	—	—	—	—	—	—	—
Suffocation, Overlying ...	1	—	—	—	1	3	1	1	—	6
Injury at Birth ...	—	—	—	—	—	—	—	—	—	—
Atalectasis ...	—	—	—	—	—	—	—	—	—	—
Congenital Malformations ...	2	2	1	—	5	1	—	—	—	6
Premature Birth ...	9	1	2	—	12	2	—	—	—	14
Atrophy, Debility and Marasmus ...	1	3	1	—	5	1	—	—	—	6
Other Causes ...	1	—	1	—	2	2	1	1	—	6
Totals ...	14	10	8	1	33	12	7	4	5	61

In Table IV are indicated the total deaths from the various diseases. Cancer, it will be seen, was responsible for 147 deaths, giving a cancer death-rate of 1.49 ; heart disease caused 189 deaths, giving a death-rate of 1.92 ; and bronchitis and pneumonia accounted for 107 deaths, or a death-rate of 1.09.

Of the infectious diseases, measles caused four deaths, giving a death-rate of 0.04 per thousand of population ; whooping cough caused four deaths, giving a death-rate of 0.04 per thousand of population ; diphtheria seven deaths, giving a death-rate of 0.07 ; influenza 9 deaths, giving a death-rate of 0.09 and tuberculosis 76 deaths, giving a death-rate of 0.77 per thousand of population. There were no deaths from scarlet fever.

TABLE IV. Causes of Death, 1928.

Cause of Death.	Male	Female	Total
Enteric Fever	3	1	4
Smallpox	—	—	—
Measles	2	2	4
Scarlet Fever	—	—	—
Whooping Cough	2	2	4
Diphtheria	2	5	7
Influenza	5	4	9
Encephalitis Lethargica	1	2	3
Meningococcal Meningitis... ..	—	1	1
Tuberculosis of Respiratory System	37	25	62
Other Tuberculous Diseases	6	8	14
Cancer, Malignant Disease	49	98	147
Rheumatic Fever	1	3	4
Diabetes	3	10	13
Cerebral Haemorrhage, etc.	17	29	46
Heart Disease	78	111	189
Arterio-Sclerosis	32	26	58
Bronchitis	30	30	60
Pneumonia (all forms)	29	18	47
Other Respiratory Diseases	6	6	12
Ulcer of Stomach or Duodenum	7	2	9
Diarrhoea, etc. (Under 2 years)	3	1	4
Appendicitis and Typhlitis	4	3	7
Cirrhosis of Liver	1	3	4
Acute and Chronic Nephritis	14	18	32
Puerperal Sepsis	—	2	2
Other Accidents and Diseases of Pregnancy and Parturition	—	6	6
Congenital Debility and Malformation, Premature Birth	16	17	33
Suicide	9	7	16
Other Deaths from Violence	24	12	36
Other Defined Diseases	81	117	198
Causes ill-defined or unknown	1	2	3
Total	463	571	1034

**GENERAL PROVISION OF HEALTH SERVICES
FOR THE AREA.**

PUBLIC HOSPITALS SITUATED IN OR SERVING THE DISTRICT.

(1) *Isolation Hospital.*—Cases of infectious disease are isolated at the Joint Hospital which is managed by the Chiswick and Ealing Hospitals Committee. At this hospital, which is conveniently situated just within the southern boundary of the Borough, cases from the Urban District of Brentford and Chiswick are also dealt with.

(2) *Smallpox Hospital.*—During the year as a result of negotiations with the Middlesex County Council and following an application to the Ministry of Health, Regulations were issued under Section 61 of the Public Health Act, 1925, authorising the County Council to make arrangements for suitable provision for treatment of cases of smallpox. The Middlesex County Council, consequent on this, made arrangements with the Metropolitan Asylums Board for the reception of cases of smallpox from the County of Middlesex into their Smallpox Hospitals. The use of the Smallpox Hospital maintained by the Borough of Ealing was therefore discontinued and the ground was handed over to the Sports and Recreation Grounds Committee to be let for sports.

(3) *Tuberculosis Hospitals.*—There are no hospitals for tuberculosis within the Borough. The Middlesex County Council make provision for the treatment of cases of tuberculosis at Harefield Sanatorium and at Clare Hall Hospital.

(4) *Maternity Hospital.*—The Chiswick and Ealing Hospitals Committee manage the Maternity Hospital. It serves the needs of the Borough and of the Urban District of Brentford and Chiswick, and consists of 22 beds.

Improvements have just been completed at a cost of over £8,000 by which this Hospital has been provided with a new Labour Ward, with new bathrooms in connection with the main wards, with sufficient accommodation, bedrooms and public rooms, for the staff and with a new hot water and heating apparatus. In these extensions and improvements sufficient provision has been

made to meet future needs should it become necessary to build another ward.

(5) *Hospital Provision for Children.*—At the King Edward Hospital there is a Children's Ward of 12 beds, where children under five years of age can be referred for treatment from the Health Centres. There is also a small Children's Ward of three beds at the Hanwell Cottage Hospital.

(6) *Provision for Orthopaedic Treatment.*—Arrangements have been made with the Royal National Orthopaedic Hospital by which crippled children from birth to school leaving age can receive treatment. After being seen at the Health Centre at Mattock Lane they are, if necessary, admitted to the Orthopaedic Hospital at Stanmore. Massage and manipulative treatment are provided at the Health Centre.

(7) *Other Hospitals.*—To meet the general medical and surgical needs of the Borough there is the King Edward Memorial Hospital, situated at Mattock Lane, which has 94 beds, including eight private wards of one bed each, in addition to the Children's Ward already mentioned, and the Hanwell Cottage Hospital, which consists of 12 beds. The West Middlesex Hospital, situated at Isleworth, is the Poor Law Hospital of the Brentford Board of Guardians, of whose area Ealing forms a part.

In the Annual Report for 1927 remarks were made regarding the need for co-operation between voluntary and Poor Law Hospitals. These remarks still hold good, though they need not be repeated.

The Local Government Act, which has recently been passed and which transfers the management of the Poor Law Hospitals to the County Councils and County Borough Councils, makes provision for certain steps to be taken to secure co-operation between all Hospitals for the treatment of surgical and medical cases. It is hoped that the scheme put forward by the Middlesex County Council will secure such a measure of co-operation between the Voluntary and the Poor Law Hospitals serving this area as will enable them to cope more adequately with the needs of the people.

AMBULANCE FACILITIES.

(1) *For Cases of Infectious Disease.*—The Chiswick and Ealing Hospitals Committee provide a motor ambulance in which cases of infectious disease are removed from the Borough of Ealing and the Urban District of Brentford and Chiswick to the Isolation Hospital.

(2) *Non-Infectious and Accident Cases.*—The Town Council has two ambulances for the conveyance of accident and non-infectious cases of illness to Hospitals or Nursing Homes. Journeys within the Borough are made free of charge, those outside are charged a fee of one guinea. During the year the ambulances were called out on 1,618 occasions, 520 calls being for cases of accidents and 1,098 for cases of illness. The number of journeys made outside the Borough was 253, and the total number of miles travelled was 8,379.

CLINICS AND TREATMENT CENTRES.

<i>Name</i>	<i>Address</i>	<i>Provided by</i>
Health Centre	13, Mattock Lane, Ealing.	Ealing Town Council
Health Centre	Cherington House, Hanwell.	Ealing Town Council
Health Centre (temporary) (School Children)	Betham's School, Greenford.	Ealing Town Council
Health Centre (temporary) (Mothers and Children under school age)	Aberdeen House, Greenford.	Ealing Town Council
Health Centre (temporary) (Mothers and Children under school age)	Memorial Hall, Northolt.	Ealing Town Council
Orthopaedic Clinic	13, Mattock Lane, Ealing.	Ealing Town Council
Day Nursery	Uxbridge Road, Hanwell.	Ealing Town Council
Tuberculosis Dispensary	Green Man Lane, West Ealing.	Middlesex County Council.
Treatment Centres for Venereal Disease	Certain Hospitals in London.	Middlesex County Council.

PROFESSIONAL NURSING IN THE HOME.

(1) *General.*—The Greater Ealing Nursing Association continues to perform most valuable work in meeting the need for sick nursing in the homes of the people. There are now five nurses on the staff, one of whom has to devote her time almost entirely to the Greenford area. During the year the nurses made 15,554 visits. These visits were concerned with 557 patients.

The newly added area of Northolt has not yet come within the scheme. The area is so widely scattered that the nurse serving the Greenford area cannot deal with cases in Northolt. At the present time the population in Northolt is too small to require the services of a whole-time nurse, but it is increasing so rapidly that at no distant date a whole-time district nurse will be required.

It seems desirable that some steps should be taken by the Greater Ealing Nursing Association to include Northolt within their purview and to arrange for a nurse visiting that area as required by the patients. A small local committee might stimulate interest in the Nursing Association and arrange for the collection of contributions from residents. The Provident Scheme which has been so successful in the Greenford and Hanwell areas might very well be established in Northolt.

(2) *Infectious Diseases.*—The Nursing Association receives a grant from the Ealing Town Council for supplying nursing assistance for children under five years of age suffering from ophthalmia neonatorum, measles, whooping cough, poliomyelitis and diarrhoea.

(3) *Midwives.*—In the Borough there are in practice 26 midwives, five of whom are on the staff of the Maternity Hospital.

The Town Council in its scheme of Maternity and Child Welfare does not employ any particular midwife when supplying maternity aid for women in necessitous circumstances. The midwife nearest the patient's residence is engaged and paid by the Council. As the work of all the midwives in the district has been found to be very satisfactory any one of them may be engaged with confidence.

(4) *Maternity and Nursing Homes*.—Under Section 9 (2) of the Nursing Homes Registration Act, application was made to the Middlesex County Council to delegate their powers to the Ealing Town Council under this Act. This application was not acceded to and a representation was made in conjunction with other District Councils within the County to the Minister of Health requesting him to direct the Middlesex County Council to delegate to the Ealing Town Council the powers and duties under the said Act and at the same time requesting him to designate the Ealing Town Council as the Supervising Authority under the Midwives Acts when this has been rendered possible by legislation.

Since the representation was made to the Minister of Health the Local Government Act, 1929, which makes it possible for the Minister of Health to designate the Town Council as the Supervising Authority under the Midwives Act, has been passed. The Minister of Health has not yet replied to this representation.

(5) *Maternal Mortality*.—Increasing public attention has been devoted to the question of maternal mortality, notice being drawn to the fact that the number of maternal deaths arising in the course of, or consequent on, child-birth has not materially decreased during the last 20 years, and to the need for the investigation of all maternal deaths and of puerperal fever.

It has therefore been arranged to co-operate in such an investigation instituted by the Minister of Health which will take place over practically the whole country. For this purpose the Assistant Medical Officer of Health, Dr. Edna Langston, will investigate all such cases as they arise carrying out the suggestions and directions put forward by the Minister of Health.

It is hoped that when a sufficiently large number of cases have been investigated some light will be thrown on the causes and on the means of prevention.

LEGISLATION IN FORCE.

In the following list are noted all the Local Acts, Adoptive Acts, Byelaws and Regulations in force in the Borough:—

The Ealing Corporation Act, 1905, confers additional powers on the Council with respect to certain sanitary matters, the provision of dustbins, the drainage of houses by combined operation, etc.

Adoptive Acts.

Public Health Acts (Amendment) Act, 1890.	20th November, 1890
Infectious Disease (Prevention) Act, 1890.	18th December, 1890
Public Health Acts (Amendment) Act, 1907.	21st December, 1908
Notification of Births Act, 1907.	9th May, 1912
Public Health Acts, 1925. Parts II, III, IV and V.	

Byelaws, with date of making, with respect to :—

(1) Prevention of nuisances arising from sewage, filth, etc., keeping of animals, and (2) Cleansing of earth closets, privies, ashpits and cesspools, October 15th, 1880.

Common Lodging Houses, February 4th, 1881.

Slaughter Houses, March 6th, 1884. (Added: Humane Slaughtering of Animals, 1922).

New Streets and Buildings, 23rd July, 1925.

Byelaws under Section 26 (1) of the Public Health Acts (Amendment) Act, 1890. June 20th, 1907.

Tents, Vans, Sheds, etc., under the Housing of the Working Classes Act, 1885. July 2nd, 1907.

Prevention of keeping Animals on any premises so as to be injurious to Health. July 15th, 1910.

Regulations.

Communications between Drains and Sewers, Section 21, Public Health Act, 1875. October 8th, 1908.

SANITARY CIRCUMSTANCES OF THE AREA.

WATER.—The Greenford and Northolt Wards are supplied with water by the Rickmansworth and Uxbridge Valley Water Company while the rest of the area is supplied by the Metropolitan Water Board.

Several complaints were received during the year regarding the insufficient supply of water to certain groups of houses in Greenford. These complaints were well founded and were due to the rapid growth of the population in the area and the consequent

drawing on the supply to a much greater extent than the mains could cope with. Towards the end of the year, however, the inconvenience was remedied to a large extent through a collateral service from Sudbury being established as a temporary measure until new mains are laid sufficient to supply the whole of the area.

The rapid growth of Northolt is also causing similar conditions of inadequacy of supply to arise at the present time. This inadequacy will have to be remedied by the laying of new mains.

RIVERS AND STREAMS.—There was no occasion during the year to complain of the pollution of any of the streams in the district. The stream running through Greenford which caused so much difficulty and discomfort two years ago is now flowing with a reasonable degree of purity.

DRAINAGE AND SEWERAGE.—Excepting in the Greenford and Northolt Wards and the most northerly part of the Mount Park Ward, all of which areas are still mostly rural in character, the houses in the Borough are supplied with water closets and are drained into the main sewerage system. In the Northolt and Greenford Wards a large amount of work was done during the year in improving the drainage of houses and in connecting them with the main sewerage system. There still remains, however, a large amount of pressing work to be done in connection with the drainage of new houses, the drains of which have been connected up to cesspools as a temporary measure until sewers have been laid in the district. These cesspools are insufficient in size and in character and are a source of serious pollution of ditches and roadways in the neighbourhood of the houses.

SEWAGE DISPOSAL.—There are five separate sewage works in the Borough, situated at North Ealing, South Ealing, Hanwell, Greenford and Northolt. The first two are very efficient works. As regards the Hanwell works steps have been taken to reduce the smell which was complained of and which arose from the sludging methods adopted. A sludge pressing plant is being installed and it is hoped that this may reduce the smell to a minimum.

Since the treatment of the Greenford sewage by the means of chlorine gas was adopted as a routine procedure in the middle of last year complaints have almost ceased from this area. The chlorine treatment has certainly kept in abeyance the production of sulphuretted hydrogen which gave rise to the extremely unpleasant and persistent odour which troubled the inhabitants in the vicinity.

CLOSET ACCOMMODATION.—Excepting in the undeveloped portions of the Borough, namely, the northern portion of the Mount Park Ward and the Greenford and Northolt Wards, the whole of the houses are supplied with water closets, there being as a rule one water closet for each house or part of a house let as a separate tenement.

The following table gives the number of pail-closets, the number of cesspools, and the number of water closets connected therewith, etc., in the areas mentioned :—

Ward	Cesspools	Water-Closets	Pail-Closets	Houses within	
				100 feet of Sewer	No. of Houses
Northolt	173	214	66	68	240
Greenford	35	46	22	10	51
Hanwell North ...	2	2	—	—	2
Mount Park and Drayton	13	17	15	—	32
	223	279	103	78	325

Work is steadily going on in getting the houses, fitted with water closets, within a hundred feet of the sewer in the Northolt and Greenford Wards connected up. With the construction of new sewers in Northolt and Greenford a large number of the cesspools will be abolished and some of the pail-closets will be converted into water-closets. It will be some years, however, before all of the cesspools are abolished and all of the pail-closets are converted because of the slow development of the areas in which the houses are situated and the consequent delay in the construction of sewers to serve them.

SCAVENGING.—In the area of the old Borough of Ealing and in the area of Hanwell scavenging is carried out directly by the Council, the house refuse being transported to two destructors at South Ealing and at Hanwell. The Hanwell destructor during the year was extended and its capacity doubled so that it could deal adequately with the refuse collected.

Scavenging at Greenford and at Northolt has been carried out by private contractors but steps are being taken to arrange for the whole of these two areas coming within the general scheme of scavenging in operation in the rest of the district. The destructor works at South Ealing are now being taxed to their uttermost and extensions are called for. The purchase by the Works Committee of the site of the old Electricity Works will provide sufficient space for this extension to be carried out in the near future.

SMOKE ABATEMENT.—As there are very few factories in the Borough it is seldom that any action is called for in abating nuisance from smoke. During the year complaints were made regarding three small factory chimneys, but representations to the owners brought about immediate improvement which has been maintained.

PREMISES AND OCCUPATIONS WHICH CAN BE CONTROLLED BY BYELAWS AND REGULATIONS.—There are no common lodging-houses in the Borough and there are no Byelaws with respect to houses let-in-lodgings.

There are only two offensive trades carried on in the Borough, that of fish-frying which is conducted in 19 separate premises, and that of tallow melter, which is carried on at a factory in the Greenford Ward. The tallow factory continues to be conducted in such a manner as to reduce offensive odours to a minimum.

SCHOOLS.—The Sanitary Inspectors make a thorough examination each year, during the vacation, of all public elementary and private schools and on their reports steps are taken to remedy any defects found.

In the control of infectious disease the routine weekly reports of the absentees on account of non-notifiable infectious diseases, supplied by the head-teachers to the Medical Officer of Health,

prove invaluable. These reports enable the Health Visitors to visit the homes and to give the mothers advice regarding the prevention of the spread of infection and the prevention of complications, particularly in measles and whooping cough.

SANITARY INSPECTION OF THE AREA.—The following tabular statement shows the extent of the work carried out by the Sanitary Inspectors during the year :—

GENERAL.

Number of Premises inspected on Complaint	...	...	582
Number of Nuisances observed by Inspectors	...	...	234
Number of Premises inspected in connection with Infectious Disease	...	...	563
Number of Premises visited by Periodical Inspection (Cowsheds, Dairies, Slaughterhouses, Workshops, Etc.)	...	...	806
Number of Houses inspected under House-to-House Survey	...	...	607
Food Inspections	...	...	3,239
Total number of Re-inspections	...	...	10,838
Canal Boats inspected	...	...	7
Other Inspections	...	...	1,275
Total number of Inspections and Re-inspections	...	...	18,151
Number of Intimation Notices given	...	...	577
Number of other Letters written	...	...	321
Number of Statutory Notices served	...	...	116
Proceedings before Magistrates	...	...	5

MILK AND DAIRIES ACT, ETC.

Number of Cowsheds on Register	...	...	11
Number of Inspections made of Cowsheds	...	...	10
Contraventions of Act or Orders	...	...	—
Number of Retail Purveyors of Milk on Register	...	...	75
Number of Inspections of Retail Purveyors' Premises	...	...	161
Contraventions of Act or Orders	...	...	20
Proceedings before Magistrates	...	...	3

SLAUGHTERHOUSES.

Number of Registered or Licensed Slaughterhouses	...	...	7
Number of Inspections made	...	...	222
Contraventions of Regulations	...	...	—
Proceedings before Magistrates	...	...	—

FACILITIES AND WORKSHOPS.

Registered Workshops	...	...	...	...	...	135
Factories	...	...	...	...	...	78
Number of Inspections of Factories and Workshops and Workplaces	...	...	...	...	...	318
Number of Defects concerning which Notices were sent	...	...	...	...	...	55
Proceedings before Magistrates	...	...	...	...	...	—

OFFENSIVE TRADES.

Fried Fish Shops	...	...	...	...	...	17
Other Offensive Trades	...	...	...	...	...	1
Number of Inspections	...	...	...	...	...	101
Contraventions	...	...	...	...	...	1

DISINFECTION.

Rooms Disinfected by Spray :—						
(a) Ordinary Infectious Disease	...	...	...	...	...	578
(b) Tuberculosis	...	...	...	...	...	120
Rooms stripped and cleansed	...	...	...	...	...	135
Articles disinfected by steam at Disinfector :—						
(a) Ordinary Infectious Disease	...	...	...	...	...	1,160
(b) Tuberculosis	...	...	...	...	...	255
Articles voluntarily destroyed	...	...	...	...	...	117

PARTICULARS OF THE SANITARY DEFECTS REFERRED
TO IN NOTICES SERVED AND LETTERS WRITTEN.

Water Closets repaired or supplied with water or otherwise improved	...	...	...	...	...	293
Drains cleared and cleansed	...	...	...	...	...	79
Defects in Drains repaired	...	...	...	...	...	134
Drains reconstructed	...	...	...	...	...	49
Dust-bins provided	...	...	...	...	...	140
Overcrowding remedied	...	...	...	...	...	1
Accumulations of refuse removed	...	...	...	...	...	57
Nuisance from fowls and other animals abated	...	...	...	...	...	3
Damp-proof courses inserted in walls	...	...	...	...	...	80
Ventilation under floors provided	...	...	...	...	...	25
Other forms of dampness remedied	...	...	...	...	...	97

Yards paved and repaired	122
Floors repaired	53
Roofs, Gutters and Rain Water Pipes repaired	391
New Soil and Ventilating Pipes provided	128
Sinks and Waste-pipes repaired or renewed	178
Draw Taps fixed to main supply	60
Dirty Walls and Ceilings stripped and cleansed	1,019
Other Defects or Nuisances remedied	364
Cisterns cleansed and covered	7

Legal proceedings were taken in the following cases, with the results as indicated :—

Non-Compliance with Statutory Notices.

Section 49. Public Health Acts (Amendment) Act, 1907.

Provision of sinks.

Factory Cottages and Bridge House, Greenford.

Summons heard at Ealing Police Court on 11th September, 1928. Dismissed on the grounds that Council had not proved their case.

Section 94. Public Health Act, 1875.

5, 6, 7 and 8, St. Helen's Road.

Summons heard on 18th September, 1928, and adjourned to 27th December, 1928.

Summons subsequently withdrawn as work had been carried out by owner.

Milk and Dairies (Amendment) Act, 1922.

Summons against Retail Purveyor of Milk for selling Designated Milk without having obtained a Licence so to do.

Heard on 28th February, 1928, and Defendant fined 20s. and costs 20s.

Milk and Dairies Order, 1926. Article 6, Clause (3).

Summons against a man for carrying on the trade of a Retail Purveyor of Milk without being registered as such.

Heard on 20th August, 1928, and defendant fined 40s.

Milk and Dairies Order, 1926. Article 31, Clause (2).

Summons against the man just mentioned for delivering milk in bottles, which bottles were not filled and closed in registered premises.

Heard on 20th August, 1928, and defendant fined 40s.

*Housing Act, 1925.**Closing and Demolition of Ivy Cottage.*

Ejectment of tenant.

Application for ejectment order against tenant made on 24th April, 1928. Order for possession in not less than 21 or more than 30 days granted.

FACTORIES, WORKSHOPS AND WORKPLACES.**1.—INSPECTION OF FACTORIES, WORKSHOPS AND WORKPLACES.**

Including Inspections made by Sanitary Inspectors or Inspectors of Nuisances.

Premises (1)	Number of		
	Inspections (2)	Written Notices (3)	Prosecutions (4)
Factories (Including Factory Laundries)	120	3	—
Workshops (Including Workshop Laundries)	230	1	—
Workplaces (Other than Outworkers' premises)	20	—	—
Total ...	370	4	—

2.—DEFECTS FOUND IN FACTORIES, WORKSHOPS AND WORKPLACES

Particulars (1)	Number of Defects.			Number of Prosecutions (5)
	Found (2)	Remedied (3)	Referred to H.M. Inspector. (4)	
<i>Nuisances under the Public Health Acts—</i>				
Want of Cleanliness	27	27	—	—
Want of Ventilation	4	4	—	—
Overcrowding	—	—	—	—
Want of drainage of floors	—	—	—	—
Other Nuisances	14	14	—	—
Sanitary accommodation { insufficient	4	4	—	—
{ unsuitable or defective	2	2	—	—
{ not separate for sexes	—	—	—	—
<i>Offences under the Factory and Workshop Acts</i>				
Illegal occupation of underground bake-house (s 101)	—	—	—	—
Other Offences	—	—	—	—
(Excluding offences relating to outwork and offences under the Sections mentioned in the Schedule to the Ministry of Health (Factories and Workshops Transfer of Powers) Order, 1921.)				
Total ...	51	51	—	—

OUTWORK IN UNWHOLESOME PREMISES, SEC. 108.

Nature of Work	Instances	Notices Served	Prosecution
Wearing Apparel Making, Etc.	—	—	—
Others	—	—	—

HOUSING STATISTICS FOR THE YEAR.

NUMBER OF NEW HOUSES ERECTED DURING THE YEAR.

(a) Total	1,027
(b) As part of a Municipal Housing Scheme	128

1.—UNFIT DWELLING HOUSES.

Inspection.

(1) Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts)	1,423
(2) Number of dwelling houses which were inspected and recorded under the Housing (Consolidated) Regulations, 1925	388
(3) Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	2
(4) Number of dwelling houses (exclusive of those referred to under the preceding sub-heading) found not to be in all respects reasonably fit for human habitation	734

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

Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their Officers	822
--	-----

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	None
(2) Number of dwelling houses which were rendered fit :—	
(a) By Owners	None
(b) By Local Authority in default of Owners	None
(3) Number of dwelling houses in respect of which Closing Orders became operative in pursuance of declarations by Owners of intention to close	None

B.—Proceedings under the Public Health Acts :—

(1) Number of dwelling houses in respect of which Notices were served requiring defects to be remedied	66
(2) Number of dwelling houses in which defects were remedied :—	
(a) By Owners or Occupiers	138
(b) By Local Authority in default of Owners	None

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

(1) Number of representations made with a view to the making of Closing Orders	12
(2) Number of dwelling houses in respect of which Closing Orders were made	12
(3) Number of dwelling houses in respect of which Closing Orders were determined, the dwelling houses having been rendered fit	None
(4) Number of dwelling houses in respect of which Demolition Orders were made	16
(5) Number of dwelling houses demolished in pursuance of Demolition Order	7
(6) Number of dwelling houses demolished without Orders being made (Orders for Closure previously made)	2

INSPECTION AND SUPERVISION OF FOOD.

MILK SUPPLY.—In the Borough there are 10 cowkeepers who are on the Register as producers of milk. Five were added to the list when the Parish of Northolt came into the Borough on the 1st October. Of the Cowsheds added on the 1st October, there is one in which Certified Milk is produced, in three others improvements are urgently needed to bring them up to reasonable standard under the Milk and Dairies Order, and one will be abolished shortly as the land has been sold for building purposes. One of the cowsheds in the Greenford Ward was abolished during the year as the land was bought by the Town Council as a public recreation ground.

At the end of the year there were 77 retail purveyors of milk registered in the Borough. Twenty-one of these registrations were in respect of premises owned by one Company and used simply as places for distributing bottled pasteurised milk received from the Central Depot in another district. During the year a purveyor of milk opened new premises for the purpose of selling milk and there were nine new purveyors of milk registered who had purchased premises from others who were on the register. Improvements continue to be effected in such premises as are not simply distributing centres for bottled milk. These improvements are being brought about not only by the demands of the Inspectors but at the instigation of the milk distributors themselves who find that the public are now interested in the hygienic manner in which milk is dealt with and distributed. The public are taking a share in effecting these improvements, for by a visit to dairy premises they can ascertain the nature of the methods employed by those engaged in the trade. Many of the consumers have certainly learned to choose their dairy in this way.

Milk (Special Designations) Order, 1923.—Under this Order 81 licenses were granted during the year, 32 for the sale of Certified Milk, 25 for Grade A (Tuberculin Tested) Milk, 23 for Pasteurised Milk, and one for the sale of Grade A Milk.

Twelve samples of Certified Milk and five of Pasteurised Milk were taken for bacteriological examination. In all of them the results came within the standards laid down by the Order.

Twelve samples of ordinary unclassified milk were examined for general bacterial content. Five of these had over 200,000 bacteria per cubic centimetre, the maximum being 850,000. The attention of the vendors was drawn to the large bacterial content and in one at least a marked improvement was effected as a result.

Twelve samples of the same ordinary milk were examined by the Lister Institute for the presence of tubercle bacilli. In three these were found. On being reported to the Middlesex County Council, in whose area the farms were situated, steps were

taken to have further samples of milk examined and to have the cows inspected. In the first case the offending cow was not discovered, perhaps owing to the animal having been previously sold to the butcher, but in the other two cases the offending animals were found and slaughtered, post-mortem examination confirming the physical diagnosis of tuberculosis in the cow.

MEAT, ETC.—There were no infringements of the Public Health (Meat) Regulations. In the Borough no meat is sold from stalls or vehicles.

Although there are eight private slaughterhouses, except in one of them there is very little slaughtering. In twelve months there were slaughtered 59 cattle, 347 sheep, 518 pigs, 48 calves and one goat. All these animals were stunned by means of the Cash Captive-bolt pistol which is much preferred by the butchers to the old methods. There is no public slaughterhouse in the Borough.

Bakehouses and places where food is cooked or prepared have been regularly visited by the Inspectors during the year.

In connection with the inspection of meat and other foods, the following were found to be diseased or unsound and were voluntarily surrendered for destruction :—

<i>Food.</i>	<i>Quantity.</i>
Beef	1,295 lbs.
Pork	283 „
Fish	308 „
Fruit	480 „
Vegetables (Cauliflowers)	11 heads

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

The numbers of the various infectious diseases notified in the whole of the extended Borough are indicated in Table V and are compared with those of the Borough for the previous ten years:—

TABLE V.

Disease	1918	1919	1920	1921	1922	1923	1924	1925	1926	1927	1928
Smallpox	—	—	—	—	—	—	—	—	—	—	1
Diphtheria	36	46	56	186	282	56	61	40	72	53	68
Scarlet Fever	61	201	171	665	487	142	123	107	156	136	313
Enteric Fever (including Paratyphoid)	6	5	6	8	3	5	9	5	4	14	12
Puerperal Fever	2	3	5	9	3	9	3	6	1	6	2
Puerperal Pyrexia	—	—	—	—	—	—	—	—	3	15	16
Pneumonia : Primary	—	30	38	21	33	32	47	57	47	66	73
Influenzal	—	33	27	17	22	7	27	22	17	38	13
Acute Poliomyelitis	1	—	—	1	—	—	3	—	1	—	—
Cerebro-Spinal Fever	—	3	4	1	—	1	—	—	—	2	—
Malaria	—	40	27	3	4	2	—	2	5	6	4
Dysentery	—	5	2	1	1	—	—	—	—	—	1
Erysipelas	24	22	30	27	22	17	25	17	15	18	28
Encephalitis Lethargica	—	3	1	1	3	1	6	4	2	6	3
Tuberculosis :— (a) Pulmonary	110	83	63	80	69	92	74	90	93	89	99
(b) Non-Pulmonary	22	25	17	23	16	26	31	25	21	16	24
Ophthalmia Neonatorum	3	4	8	13	10	3	3	6	5	4	8
Total ...	265	503	455	1036	955	393	412	381	442	469	665

TABLE VI.

	Scarlet Fever.	Diphtheria.
January	18	2
February	20	10
March	24	8
April	21	5
May	57	3
June	37	4
July	28	3
August	7	4
September	15	10
October	43	3
November	19	8
December	24	8
Total ...	313	68

DIPHTHERIA.—Diphtheria shows an increase of 15 cases over the previous year, but the number, 68, is less than in 1926. The cases occurred during the months of the year as indicated in Table VI. It will be noticed that the two months with the greatest number of cases were February and September, in each of which ten cases occurred. Otherwise the number of cases was fairly well distributed throughout the year and never gave rise at any time to anxiety. When one takes into account the size of the population in the Borough the number of cases can be deemed to be very small.

During the year there were seven deaths from diphtheria, giving a death rate of 0.07 per 1,000 population and a mortality rate of 10.0 per cent. of cases notified. The death-rate is lower than that for England and Wales and that for London. In each this was 0.09 per 1,000 of population.

If parents would only view seriously cases of sore throat and call in a doctor early, so that the specific anti-toxin could be administered at the earliest stage of the disease, the mortality could be

reduced to a very low figure. It is usual to find in fatal cases that the parents have viewed the condition lightly and have not called in the doctor until the child is in an advanced stage of the disease. Delay in the administration of anti-toxin is fraught with so much danger that the doctor, whenever there is suspicion of the cases being of diphtheria, should not wait for bacteriological confirmation of the diagnosis, but should give anti-toxin at once. Some cases are so rapid in progress and so fulminating in type that an hour's delay may make a vast difference in the progress in the disease and in the chances of the patient's recovery.

To assist in the early administration of anti-toxin, a supply can be obtained by doctors at any time of the day or night, either at the Town Hall, Ealing, or at the Health Centre, Cherington House, Hanwell. This anti-toxin is provided free of charge when the parents of the affected child are not able to afford to pay for it. During the year 234,000 units of anti-toxin were supplied to doctors for administration in this way.

SCARLET FEVER.—The number of cases of scarlet fever, 313, is the largest in any year since 1922 when the number of cases was 487. The month of greatest prevalence was May, during which 57 cases occurred. It was then thought that, as the disease had got its hold on a very susceptible young population which had not been attacked by the disease in epidemic form since the years 1921 and 1922, the autumn would show a violent outbreak of the disease. Fortunately the anticipations proved to be wrong, for with the closure of the schools at the end of July there was a marked fall in the number of cases in August and in September there were only 15 cases. In October, however, the number rose to 43, but again fell in November and December to 19 and 24 respectively.

It cannot be said that any Ward suffered particularly, even in May the cases were widely scattered throughout the town with little discernible connection between them.

The disease was very mild in character and no deaths have to be recorded. This is the third year in succession during which there have been no deaths from scarlet fever. It is worth noting for comparison that the death-rates for scarlet fever for England and Wales and for London were respectively 0.01 and 0.02 per 1,000 of population.

ENTERIC OR TYPHOID FEVER.—Under this heading are included all cases belonging to the typhoid or paratyphoid group of fevers. Of the 12 cases notified ten were of paratyphoid B fever and two of typhoid fever. The age and sex distribution of the patients were as follows:—

		0-5	5-10	10-15	15-20	20-35	35-45	45-65
Typhoid Fever	{ Male	—	—	—	—	1	—	—
	{ Female	—	—	—	1	—	—	—
Paratyphoid B Fever	{ Male	—	1	1	—	2	—	1
	{ Female	—	1	—	—	4	—	—

They were distributed throughout the year, one in March, 2 in April, 3 in May, one in July, 2 in August and 3 in September. One of the patients was a nurse who developed the disease as a result of nursing a case at home, two men developed the disease abroad, two were presumably infected from cream which was shown to be the source of infection in other cases occurring in several Metropolitan Boroughs, whereas with regard to the other 7 cases no source of infection of the disease could be discovered.

There were four deaths which give a mortality rate of 0.04 per 1,000 of population.

SMALLPOX.—One case of smallpox was notified during the year. An account of this case is given in the Report which was submitted to the Town Council at the time of its occurrence. Fortunately no further cases arose after the submission of the Report which is as follows:—

REPORT TO THE PUBLIC HEALTH COMMITTEE.

Case of Smallpox.

On the evening of the 12th March, I received a telephone message from the Medical Officer of Health to the Wandsworth Borough Council that a man, W. B., of Broomfield Road, Ealing, had visited his wife at the Springfield Mental Hospital on the previous day, that he had a rash on him then, and that his wife on that day had been removed to Hospital suffering from Smallpox.

Within a few minutes of receiving the message I saw W. B., 71 years of age, at Broomfield Road. I came to the conclusion that he was suffering from Smallpox. I then saw the medical practitioner who had examined this man on the previous Thursday, the 8th March. His description of the rash supported my conclusion. Thereupon I telephoned Dr. Wanklyn of the London County Council, a recognised authority on Smallpox, who very kindly came out to see the case within three-quarters of an hour. He confirmed my diagnosis of Smallpox.

I considered it would be very expensive to open our own Smallpox Hospital to receive a single case, and I telephoned the Medical Superintendent of the Metropolitan Asylums Board's Smallpox Hospital asking if he could take in the case for the Ealing Town Council. He said he could not do so without the authority of the Clerk to his Board, and I had to wait until the following morning before approaching the Clerk's Department. In the meantime instructions were given as to the isolation of the case at home. On the following morning, the 13th March, the Clerk agreed to accept the case and the patient was removed in the course of the morning. The house was then thoroughly disinfected.

This man was apparently infected at the Springfield Mental Hospital where he visited his wife every Sunday since the month of January and where his wife developed what was supposed to be chickenpox on the 10th February. He noticed spots on his face and forearms on Tuesday, the 6th March, but in all probability he developed the disease on the 4th March and he may have been infected two weeks before that, on the 19th February, at Springfield Hospital. The attack was a very mild one, having a rapid course without the usual malaise and backache associated with an attack of Smallpox. This may have been accounted for by his having been vaccinated in infancy and again when 20 years of age.

There were three contacts in the house at Broomfield Road, a man and his wife, and a child about two years old. The man and his wife had been revaccinated four or five years ago, but the child was unvaccinated. All three were vaccinated by me on the 13th March. This man remained away from his work until the 26th March. As W. B. had, since the onset of his illness on the 4th March, been going regularly to his work as a bricklayer at Kensal Rise, there was a large number of fellow workers as contacts. Those living in other districts were immediately notified by telephone to the Medical Officers of Health concerned, and those living in Ealing were visited by the Inspectors and advised to be vaccinated. They have been visited regularly since so as to detect at the earliest possible stage any who might develop the disease.

On the 13th March a report on the case, giving full details and also particulars of contacts, was sent to the Ministry of Health, to the Medical Officer of Health to the County of Middlesex, and to the Medical Officer of Health to the County of London.

On the same day medical practitioners in the town were notified by letter of the occurrence of a case of Smallpox and were informed that the Council would pay 2s. 6d. for each case of Chickenpox notified. The Clerk to the Board of Guardians and the two Vaccination Officers in the Borough were also notified.

In addition to the contacts of W. B., who have had to be kept under observation, there has had to be supervised a large number of contacts residing in Ealing who have been visitors to the Springfield Mental Hospital, where there have been several cases of Smallpox.

Cases of Chickenpox not under a doctor have also been visited.

The Smallpox Hospital is ready to be occupied at any time should any secondary cases of Smallpox occur. This preparation is necessary as the Metropolitan Asylums Board will not accept any further cases from Ealing.

No other cases of Smallpox have occurred. We have been extremely lucky so far, but we cannot say until the 30th March that we are safe.

THOMAS ORR,

Medical Officer of Health.

March 27th, 1928.

CEREBRO-SPINAL FEVER.—No cases of cerebro-spinal fever occurred during the year.

ENCEPHALITIS LETHARGICA.—Three cases of encephalitis lethargica were notified. One was a woman 68 years of age, another a youth of 17 years, and the third a young woman of 19 years. The first two died but the third recovered without any mental or physical impairment.

MALARIA AND DYSENTERY.—Four cases of malaria and one of dysentery were notified. The disease in each case had been contracted abroad.

PNEUMONIA AND INFLUENZAL PNEUMONIA.—During the year 73 cases of primary and 13 cases of influenzal pneumonia were notified. As will be seen in Table V the number of cases of primary pneumonia is in excess of those in previous years but the number of cases of influenzal pneumonia is less than in the preceding four years. The increase in the former may be due to some extent to the better observance by medical practitioners of the regulations requiring the disease to be notified.

PUERPERAL FEVER AND PYREXIA.—Two cases of puerperal fever were notified. One occurred at the Chiswick and Ealing Maternity Hospital from which she was removed for operation to the King Edward Hospital, where she died. The other was under the care of a private medical practitioner; she was removed to the West Middlesex Hospital, from which she was discharged three weeks later.

Twelve cases of puerperal pyrexia were notified. One of the cases was found to be really one of puerperal fever and followed operative measures at the birth of the child. In four others the rise in temperature followed operative measures, but there were no abnormal symptoms beyond the rise in temperature. Of the remaining cases one was due to pneumonia, one to bronchitis, one to an epileptic seizure, one to an abscess of the arm, one to "white leg," and one to a haematoma, while in one no cause could be discovered. Seven of the cases were seen at the request of the medical practitioner by Dr. J. W. Bell, the Council's obstetrical consultant.

WHOOPING COUGH AND MEASLES.—Information regarding the prevalence of these two non-notifiable infectious diseases is obtained from the weekly returns of absentees made by the head-teachers to the Medical Officer of Health. There were 1,025 absences from school owing to measles, indicating that the disease was very prevalent in the district, and 270 owing to whooping cough. Measles and whooping cough accounted for four deaths each during the year, giving for each a death-rate of 0.04 per 1,000 of population.

The death-rates for Ealing are lower than those for England and Wales, the Great Towns and for London, as is indicated below :—

		<i>England and Wales.</i>	<i>Great Towns.</i>	<i>London.</i>	<i>Ealing.</i>
Measles ...	...	0.11	0.15	0.30	0.04
Whooping Cough		0.07	0.09	0.09	0.04

TABLE VII.

Cases of Infectious Disease notified during the year 1928.

Disease	Ages of Cases Notified.													Totals	Total cases removed to Hospital	
	Under One Year	1 to 2	2 to 3	3 to 4	4 to 5	5 to 10	10 to 15	15 to 20	20 to 35	35 to 45	45 to 65	65 and upwards				
Smallpox	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1	1
Diphtheria	—	1	1	2	5	29	15	4	7	2	2	—	—	—	68	64
Scarlet Fever	1	1	8	20	18	150	62	19	25	5	4	—	—	—	313	258
Enteric Fever (including Paratyphoid)	—	—	—	—	—	2	1	1	7	—	1	—	—	—	12	6
Puerperal Fever	—	—	—	—	—	—	—	—	2	—	—	—	—	—	2	2
Puerperal Pyrexia	—	—	—	—	—	—	—	1	14	1	—	—	—	—	16	5
Pneumonia: Primary	—	2	6	3	1	9	3	4	10	8	17	10	—	—	73	6
Influenzal	—	—	—	—	—	—	—	—	4	2	5	2	—	—	13	2
Acute Poliomyelitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Cerebro-Spinal Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Malaria	—	—	—	—	—	—	—	—	3	—	1	—	—	—	4	—
Dysentery	—	—	—	—	—	—	—	—	—	1	—	—	—	—	1	1
Erysipelas	—	—	—	—	—	—	—	—	1	5	7	13	—	—	28	5
Encephalitis Lethargica	—	—	—	—	—	—	—	—	2	—	—	—	—	—	3	—
Tuberculosis:																
(a) Pulmonary																
Male	—	—	—	—	—	—	3	5	17	8	13	1	—	—	47	—
Female	—	—	—	—	—	—	—	3	27	12	8	2	—	—	52	—
(b) Non-Pulmonary																
Male	1	—	1	—	2	1	3	3	2	—	2	—	—	—	15	—
Female	—	—	—	—	—	—	2	1	4	—	2	—	—	—	9	—
Ophthalmia Neonatorum	8	—	—	—	—	—	—	—	—	—	—	—	—	—	8	1
Total	10	4	16	25	26	191	89	44	126	46	69	19	—	665	351	

TABLE VIII.

AGES AT DEATH FROM NOTIFIABLE INFECTIOUS DISEASES.

Disease	Under One Year	1 to 2	2 to 3	3 to 4	4 to 5	5 to 10	10 to 15	15 to 20	20 to 35	35 to 45	45 to 65	65 and up- wards	Totals
Diphtheria	—	—	—	1	2	3	—	—	—	—	1	—	7
Scarlet Fever	—	—	—	—	—	—	—	—	—	—	—	—	—
Enteric Fever (including Paratyphoid)	—	—	—	—	—	—	—	1	2	—	1	—	4
Puerperal Sepsis	—	—	—	—	—	—	—	—	2	—	—	—	2
Pneumonia : Primary	4	3	2	—	—	—	—	—	—	5	15	15	44
Influenzal	—	—	—	—	—	—	—	—	—	—	1	2	3
Acute Poliomyelitis	—	—	—	—	—	—	—	—	—	—	—	—	—
Cerebro-Spinal Fever	—	—	—	—	—	—	—	—	—	—	—	—	—
Malaria	—	—	—	—	—	—	—	—	—	—	—	—	—
Dysentery	—	—	—	—	—	—	—	—	—	—	—	—	—
Erysipelas	—	—	—	—	—	—	—	—	—	—	1	—	1
Encephalitis Lethargica	—	—	—	—	—	—	—	1	—	—	1	1	3
Tuberculosis :													
(a) Pulmonary Male	—	—	—	—	—	—	—	2	8	5	20	2	37
Female	—	—	—	—	—	—	—	1	10	8	4	2	25
(b) Non-Pulmonary Male	1	2	—	—	—	—	—	2	—	1	—	—	6
Female	1	—	1	—	—	2	—	—	3	—	1	—	8
Ophthalmia Neonatorum	1	—	—	—	—	—	—	—	—	—	—	—	1
Totals	7	5	3	1	2	5	1	6	25	19	45	22	141

OPHTHALMIA NEONATORUM.—There were eight cases of ophthalmia neonatorum notified during the year. The following table gives a summary of the cases :—

Number of Cases Notified	No. Treated		Vision un-impaired	Vision im-paired	Total Blind-ness	Deaths
	At Home	In Hospital				
8	7	1	7	—	—	1

TUBERCULOSIS.—In Table IX are indicated the number of new cases of pulmonary and non-pulmonary tuberculosis notified during the year in the whole of the Borough, together with the numbers of deaths in the various age-groups. There were 62 deaths from pulmonary and 14 deaths from non-pulmonary tuberculosis which give death-rates of 0.63 and 0.14 respectively or a total tuberculosis death-rate of 0.77 per 1,000 of population. There were 12 deaths from pulmonary tuberculosis in persons who had not been previously notified ; five were of persons dying outside the district, two of persons dying in the King Edward Hospital and five were of persons attended by local doctors. Eight deaths from non-pulmonary tuberculosis were of persons who were not notified ; six were of persons dying outside the district, one of a person dying in the King Edward Hospital and one of a person attended by a local doctor. The doctors were warned in all cases of failure to notify.

TABLE IX.

TUBERCULOSIS.

Age Periods	New Cases				Deaths			
	Pulmonary		Non-Pulm'y		Pulmonary		Non-Pulm'y	
	Male	F'male	Male	F'male	Male	F'male	Male	F'male
0—1	—	—	1	—	—	—	1	1
1—5	—	—	3	—	—	—	2	1
5—10	—	—	1	—	—	—	—	2
10—15	3	—	3	2	—	1	—	—
15—20	5	3	3	1	2	—	2	—
20—25	7	9	1	4	2	2	—	2
25—35	10	18	1	—	6	8	—	1
35—45	8	12	—	—	5	8	1	—
45—55	8	6	1	1	11	2	—	1
55—65	5	2	1	1	9	2	—	—
65 upwards	1	2	—	—	2	2	—	—
Total ...	47	52	15	9	37	25	6	8

The Tuberculosis Officer has very kindly supplied the following information with respect to cases of tuberculosis from the district which have been under treatment by him :—

Number of persons examined for the first time
by the Tuberculosis Officer :—

- (a) Tuberculosis of Lungs 65
(b) Other forms of Tuberculosis 11

Number of persons transferred from other areas :—

- (a) Tuberculosis of Lungs 5
(b) Other forms of Tuberculosis —

Number of persons kept under treatment at the
County Council Dispensary, Ealing 97

Number sent to Sanatoria 44

Number sent to Hospital 15

No action has been called for, either under the Public Health (Prevention of Tuberculosis) Regulations, 1925, or under Section 62 of the Public Health Act, 1925.

LABORATORY WORK.—At the public health laboratory the following specimens were examined in connection with the diagnosis and control of infectious disease :—

			<i>Positive</i>	<i>Negative</i>	<i>Total</i>
Diphtheria :	From the Borough ...	39	603	642	
	Isolation Hospital ...	99	1,750	1,849	
Tuberculosis :	From the Borough ...	42	205	247	
Miscellaneous :	From the Borough ...	10	13	23	
	Isolation Hospital ...	—	12	12	
Total ...		190	2,583	2,773	

DISINFECTION.—There is a steam disinfecter at the Northern Sewage Works which meets the needs of the whole Borough. A motor van is kept for the purpose of carrying articles for disinfection. At the Isolation Hospital there is another steam disinfecter but this is used chiefly in dealing with articles used in the hospital itself.

The amount of disinfection carried out in connection with infectious disease was as follows :—

Rooms disinfected by formalin spray :—

(a) Tuberculosis ...	120
(b) Other Infectious Disease ...	578

Articles disinfected in Steam Disinfecter :—

(a) Tuberculosis ...	225
(b) Other Infectious Disease ...	1,160

In connection with the disinfection of homes after infectious disease 117 articles of clothing were destroyed.

To render disinfection more thorough, 135 rooms were stripped and cleansed by the owners after notices were served on account of dirty condition.

MATERNITY AND CHILD WELFARE.

The only changes in the Maternity and Child Welfare scheme, which was outlined in previous annual reports, were those associated with the extension of the scheme to include the Parish of Northolt which, as already stated, was added to the Borough in October, 1928.

The changes are indicated in the recommendations contained in the following report which was adopted by the Council:—

REPORT TO THE MATERNITY AND CHILD WELFARE COMMITTEE.

Extension of the Maternity and Child Welfare Scheme to the Northolt Area

When the area of Northolt is included in the Borough on the 1st October it will be necessary to extend all the facilities of the Maternity and Child Welfare Scheme to the mothers and children residing there.

At present the Middlesex County Council conduct a Centre on Thursday afternoons at the Village Hall, which is let for the purpose by the Village Hall Trustees. This place is not by any means ideal, but with some improvements in the sanitary arrangements, furnishing and decorations, it might serve the purpose until another more suitable place is available.

The need for a new and complete Health Centre in Greenford is becoming more pressing every day as the Temporary Centre at Aberdeen House is proving too small to deal with the number of mothers attending. Besides, the need for better and more accessible facilities for the medical treatment of school children is getting more urgent because of the rapid increase in the number of school children. A Health Centre, similar to those at Mattock Lane and Cherington House, catering for school children and for mothers and young children might, if transport facilities become available, also serve, wholly or partly, the needs of Northolt.

I therefore recommend that steps be taken in conjunction with the Education Committee, as has become an established practice, to erect a Health Centre at Greenford. A site on Coston's Farm which has recently been acquired by the Council, would be suitable for the purpose.

It will be necessary to engage the part-time services of a medical officer to attend the Northolt Centre on one session a week, and I recommend that Dr. Frances Barry, who at present attends the Aberdeen House Centre, be asked to take over this work on the usual terms of £1 11s. 6d. per session, or £81 18s. 0d. per annum.

The Health Visitors during the past two years have been working at high pressure to overtake all the work in the Borough and it is now absolutely essential to appoint another Health Visitor to cope with the work. Miss Duggar would continue to take charge of the Aberdeen House Centre and would take over the Northolt Temporary Centre and the new Health Visitor would be attached to the Mattock Lane Centre but would give assistance at any Centre requiring her services. The appointment of an additional Health Visitor will mean an annual expenditure of £200 a year as salary.

The cost of equipment for the Temporary Centre will be about £50.

Recommendations.

1. That steps be taken to establish a new Health Centre at Greenford on a site on Coston's Farm which has recently been acquired by the Town Council.
2. That arrangements be made with the Village Hall Trustees for the hall to be continued as a Temporary Centre until another more suitable place is available, and that equipment be purchased at a sum not exceeding £50.
3. That Dr. Barry be appointed to attend the Northolt Centre on one afternoon each week at a fee of £1 11s. 6d. for each session, or £81 18s. 0d. a year.
4. That a new Health Visitor be appointed at a salary of £200 a year.

THOMAS ORR,
Medical Officer.

25th September, 1928.

All the recommendations have been acted upon and plans are being prepared for a new Health Centre in Greenford as suggested.

Acknowledgment must be made of the valuable assistance in the work of the Health Centres rendered by the Welfare Working Party which, under the leadership of Mrs. Kimmitt, continues to make for babies and young children suitable approved garments which are either sold to mothers at cost price or are distributed to those in necessitous circumstances free of charge and of the untiring help given by Mrs. Cocker, Mrs. Ludlow, Miss Atkinson, and Mrs. Bodsworth in giving instructions to the mothers attending the Centres on the cutting out and making up of suitable garments for infants and young children. At the Health Centres the District Nurses have also rendered valuable aid for which thanks should be expressed.

**The following is a Summary of the Work of the Health Visitors
during the year :—**

	<i>Total</i>
Visits to children under 12 months :—	
First visits 	1,339
Return visits 	2,354
Visits to children 1 to 5 years of age 	4,042
Visits to children or mothers attending the Welfare Centres	2,743
Visits to expectant mothers 	335

Visits to investigate infant deaths and still-births...	...	...	...	...	...	87
Special visits or investigations	...	...	...	...	...	212
Visits to cases of Ophthalmia Neonatorum	...	...	...	...	...	17
Visits to cases of Puerperal Fever and Pyrexia	...	...	...	...	...	17
Visits to cases of Measles and Whooping Cough	...	...	...	...	...	222
Visits to cases of Scarlet Fever on discharge from the Isolation Hospital	...	...	...	...	...	241
Other Visits	...	...	...	...	...	3
					Total Visits	11,612
Interviews, etc.	...	...	...	...	...	3,574

The following is a Summary of the Work of the Health Centres
during the year :—

	<i>Mattock Lane.</i>	<i>Cherington House.</i>	<i>Aberdeen House.</i>	<i>Memorial Hall, Northolt.</i>	
Number of children on register at the end of year	1,582	743	231	51	
Mothers visiting Centre for the first time	760	349	149	65	
Children visiting Centre for the first time	829	420	177	50	
Total attendance made by mothers	7,683	4,306	1,557	134	
Total attendances made by children	8,882	5,063	1,973	152	
Average attendance of children each afternoon	57	49	24	12	
Number of Consultations by Medical Officer	3,055	1,963	751	105	
Average number of children seen by Medical Officer on each session	20	19	18	8	
					<i>Total</i>
Children referred to School Clinic for treatment :—					
Nose and Throat	...	...	...	...	20
Eyes	...	...	...	...	12
Teeth	...	...	...	...	118
Orthopaedic	...	...	...	...	68

Children undergoing Ultra Violet Ray treatment at King Edward Hospital	27
Mothers receiving dental treatment	66
Mothers supplied with artificial dentures	4
Children referred to King Edward Hospital for minor operations	32
Children admitted to King Edward Hospital as indoor patients	6
Children referred to other Hospitals	31
Mothers attending Ante-Natal Clinic :—	
First visits	445
Re-visits	1,227
Number of Consultations by Consultant at Centre	23
Mothers referred to Hospital	10
Aid provided for mothers at confinement :—	
Consultant aid—cases	8
Medical aid—cases	10
Midwives—cases	47
Home Helps—cases... ..	33
Dried Milk supplied at cost price Value	£334 13s. 10d.
Virol supplied at cost price Value	£88 3s. 3d.
Cod Liver Oil supplied at cost price Value	£131 6s. 8d.
Number of cases admitted to the Chiswick and Ealing Maternity Hospital	304
Amount received for treatment at Maternity Hospital	£1,047 19s. 3d.
Expectant or Nursing Mothers receiving a supply of milk free of charge for one month	590
Children under 5 years of age receiving a supply of milk free of charge for one month	677

DAY NURSERY.

Whole day attendances	3,328
Half day attendances	86
Amounts received from Parents	£128 9s. 1d.

THOMAS ORR,

Medical Officer of Health.

TOWN HALL,

EALING, W.5.

May 28th, 1929,

Borough of Ealing.



EDUCATION COMMITTEE.

REPORT

OF THE

School Medical Officer

FOR THE

Year ended 31st December, 1928.

EDUCATION GENERAL PURPOSES SUB-COMMITTEE, 1927-28.

(Which deals with the School Medical Service).

Chairman—

Mr. L. MARSH, M.A.

Vice-Chairman—

Councillor H. M. SAYERS.

Councillor G. R. WEEKS (*Ex-officio*,
Chairman of the Education Committee).

The Rev. C. J. SHARP, M.A. (*Ex-officio*,
Vice-Chairman of the Education Committee).

Alderman H. J. BAKER.

Councillor E. H. ATKINSON.

Councillor W. J. S. COX.

Councillor J. C. FULLER.

Councillor the Rev. T. B. SCRUTTON, M.A.

Councillor Mrs. E. S. TAYLOR, J.P.

Councillor W. T. WHITE, J.P.

Miss F. M. COOMBE.

Miss C. G. WILSON, L.L.A.

The Rev. W. M. FARQUHAR, M.A.

Mr. E. HEATON.

STAFF.*School Medical Officer—*

THOMAS ORR, M.D., D.Sc.,

Of the Middle Temple, Barrister-at-Law.

Assistant School Medical Officers—

JOHN H. D. LAWRIE, M.D., D.P.H.

EDNA I. LANGSTON, M.B., B.S., L.R.C.P., M.R.C.S.

School Nurses—

*†‡HILDA BAILEY (Senior).

*†‡ANNIE JOHNSON.

*MARY MCGANN.

*†MAY P. DORKINS.

Clerks—

†MERCIE RICHARDSON.

WINIFRED RIVERS.

GRACE SUCH.

PEGGY GOSTAGE.

Surgeon (part-time)—

CECIL I. GRAHAM, M.R.C.S., L.R.C.P., F.R.C.S. (Eng.).

Anaesthetist (part-time)—

S. M. BANHAM, M.B., M.R.C.S., L.R.C.P.

Dentist—

C. E. MAINWARING, L.D.S. (Birm.).

HEALTH CENTRES—

13, MATTOCK LANE, EALING, W.5.

CHERINGTON HOUSE, HANWELL, W.7.

BETHAM'S SCHOOL, GREENFORD (temporary).

NORTHOLT SCHOOL, (temporary).

*Certificate as Trained Nurse.

†Certificate of Royal Sanitary Institute, School Nurse and Health Visitor

‡Certificate of Central Midwives Board.

CO-ORDINATION.

The co-ordination of maternity and child welfare and of school medical inspection and treatment which has been noted in the Annual Report for the year 1927 has become even more complete. The co-ordination, as has been previously stated, is greatly facilitated by the arrangement by which both these forms of public health activity are conducted together in Health Centres. There are two main Health Centres situated at 13, Mattock Lane, and at Cherington House, and two temporary Centres at Greenford and at Northolt. The Centre at Greenford has become quite inadequate to meet the needs of that area and plans are being submitted for a new Centre to be erected on ground at Coston's Farm which was recently acquired by the Council as a public recreation ground.

THE SCHOOL MEDICAL SERVICE IN RELATION TO PUBLIC HEALTH.

School Hygiene.

Under the control of the Education Authority at the end of the year there were 18 public elementary schools embracing 33 departments. Towards the end of the year the new Coston's School to serve the demands of Greenford was nearing completion. As it was recognised that Coston's School alone would not be sufficient to meet the needs of this rapidly increasing area a further new school was decided upon. This latest school, Stanhope, is to be of the Derbyshire type—a true open-air school—in which the classrooms can be kept open in winter and summer yet sheltered from the wind and adequately warmed. The Derbyshire type of school has proved a success not only in the county of its origin but in other places.

The general adoption of open-air principles as exemplified by this type of school construction should tend to prevent the cases of anaemia and malnutrition found amongst school children and overcome the necessity of providing a special open-air school for such cases.

It is to be hoped that the policy of the Education Committee will be to continue to erect open-air schools of the Derbyshire type in the rapidly developing areas of Greenford and Northolt.

Medical Inspection.

The inspections carried out at the schools in the Borough included the following groups :—

1.—Routine inspections as required by the Board of Education as follows :—

- (a) Entrants—All children admitted to school for the first time during the year.
- (b) Intermediates—All children eight years of age or reaching that age before the end of the year.
- (c) Leavers—Children who are twelve or who will be twelve before the end of the year, together with those over that age not previously examined.

2.—Non-routine inspections as follows :—

- (a) Children, not in the aforementioned routine groups, who are presented by the head-teachers for examination for some defect or suspected defect.
- (b) Children requiring supervision on account of some defect found at a previous routine or non-routine examination.

3.—Annual Inspections at the schools or at the Health Centres of :—

- (a) Physically defective or crippled children.
- (b) Mentally defective children.

The following tables indicate the total number of children medically inspected in a routine manner. The children included 1,001 entrants, 1,557 intermediates, and 1,437 leavers, making the total children inspected in a routine manner 3,995, or 40.9 per cent. of the children on the school registers.

NUMBER OF CHILDREN INSPECTED.

School	Entrants		Total
	Boys	Girls	
<i>Provided.</i>			
Drayton	25	26	51
Grange	72	50	122
Greenford Avenue	—	—	—
Lammas	37	33	70
Little Ealing	81	57	138
North Ealing	22	28	50
Northfields	41	33	74
Northolt*	—	—	—
Oaklands Road	40	42	82
St. Ann's	24	27	51
St. Mark's	20	19	39
<i>Non-Provided.</i>			
Betham's	61	47	108
St. John's	35	38	73
St. Joseph's	9	14	23
St. Mary's	11	17	28
St. Saviour's	47	45	92
Total	525	476	1,001

*The Northolt School came under the control of the Ealing Education Committee on the 1st October, 1928, when the Parish of Northolt was added to the Borough of Ealing.

NUMBER OF CHILDREN INSPECTED.

School	Intermediates.			Leavers.		
	Boys	Girls	Total	Boys	Girls	Total
<i>Provided.</i>						
Ealing Central ...	—	—	—	140	100	240
Drayton ...	67	78	145	45	37	82
Grange ...	73	87	160	76	86	162
Greenford Avenue ...	—	—	—	—	—	—
Lammas ...	50	52	102	—	—	—
Little Ealing ...	109	93	202	107	100	207
North Ealing ...	44	41	85	22	31	53
Northfields ...	89	53	142	96	72	168
Northolt ...	—	—	—	—	—	—
Oaklands Road ...	74	88	162	52	73	125
St. Ann's ...	34	35	69	96	97	193
St. Mark's ...	28	43	71	8	4	12
<i>Non-Provided.</i>						
Betham's ...	58	62	120	23	22	45
Christ Church ...	35	31	66	20	42	62
St. John's ...	37	36	73	16	19	35
St. Joseph's ...	16	22	38	13	11	24
St. Mary's ...	23	26	49	19	10	29
St. Saviour's ...	37	36	73	—	—	—
Total ...	774	783	1557	733	704	1437

At the Health Centres there were specially inspected 1,938 children who had been submitted by the head-teachers, school enquiry officers and school nurses. Of this number 1,022 attended for re-inspection. Consequent on routine inspection 401 children were re-examined on account of some defect previously found. Ten other children, apart from the usual routine group, were submitted by the head-teachers for examination at school on account of some definite or suspected defect.

The total number of children attending public elementary schools who were examined once at least during the year was 5,943. The average number of children on the school register was 9,744. This means that 61 per cent. of the children on the registers were medically examined during the year. The average attendance at the schools was 87.1 per cent.

Findings of School Medical Inspection.

In Table II are indicated the defects noted on inspection at the schools during medical inspection and at the special inspections. Among the 3,995 routine children examined there were 1,414 defects requiring treatment and 868 requiring to be kept under observation without treatment ; and among 1,948 children specially examined there were found 1,668 defects requiring treatment and 152 requiring to be kept under observation. Out of a total of 5,493 children there were altogether 3,082 defects requiring treatment, and 1,020 requiring to be kept under observation. Of the 3,995 children examined at the routine inspections, 647, or 16.2 per cent. were found to require treatment for defective conditions other than uncleanliness and dental disease.

(a) UNCLEANLINESS.—The heads of all the girls attending public elementary schools were inspected three times in the year after the usual school holidays. Of 17,391 children examined, 389, or 2.2 per cent. were excluded on account of verminous condition. There were 47 other children with heads in a verminous condition found at the routine medical inspection in the schools, and 39 found at special inspections after being referred by the head-teachers for examination at the Health Centres. In addition four children were excluded for verminous condition of the body.

No summonses were issued under the School Attendance Byelaws for non-attendance owing to exclusion for verminous condition.

UNCLEANLINESS, 1923—1928.

year	Number of Children Examined for Verminous Condition	Number of Children Excluded	Percentage	Summonses Issued
1923	8,247	418	5.0	33
1924	9,591	329	3.4	2
1925	9,387	245	2.6	1
1926	9,826	209	2.1	7
1927	16,326	410	2.5	2
1928	17,391	389	2.2	—

(b) MINOR AILMENTS.—The minor ailments found at routine and non-routine inspections were as follows:—

Ringworm of Head	...	...	...	13
Ringworm of Body	...	...	...	15
Scabies	...	...	...	14
Impetigo	...	...	...	350
Other Skin Diseases	...	...	...	85
Minor Injuries	...	...	...	100
Ear Diseases (including Otorrhoea)	...	...	...	128
Eye Diseases (including Blepharitis and Conjunctivitis)	...	...	...	128
Miscellaneous (Sores, Chilblains, etc.)	...	...	...	175
				—
			Total	... 1,008
				—

(c) ENLARGED TONSILS AND ADENOIDS.—At the routine inspection 111 children were found with enlarged tonsils, 16 with adenoids, 75 with enlarged tonsils and adenoids and 11 with other conditions of the nose and throat requiring treatment. Children with these conditions who required to be kept under observation

numbered 361. In addition, 56 cases of enlarged tonsils, 5 of adenoids, 29 of enlarged tonsils and adenoids and 5 of other conditions requiring treatment, and 30 cases of similar diseases of the nose and throat requiring to be kept under observation, were found as a result of special inspection.

(d) TUBERCULOSIS.—Three suspected cases of pulmonary tuberculosis needing to be kept under observation were found at routine medical inspection. In addition, eight others, to be kept under observation, were discovered on special examination. Two cases of suspected glandular tuberculosis were also found.

(e) DISEASES OF THE SKIN.—At the routine inspection there were found ten cases of impetigo, one of scabies and seven of other conditions of the skin. The cases met with at non-routine examinations, for which they had been specially referred, were as follows:—

Ringworm of Head	...	...	...	13
Ringworm of Body	...	...	...	15
Scabies	...	...	...	13
Impetigo	...	...	...	340
Other Skin Conditions	...	...	...	78
				459
				459

(f) EXTERNAL EYE DISEASE.—Twenty cases of blepharitis, four of conjunctivitis, 23 of squint and two of other conditions of the eyes were observed at routine medical inspection; and 31 cases of blepharitis, 30 of conjunctivitis, 14 of squint and 41 of other conditions were found in children referred for special examinations. Of these cases 151 were advised treatment and 14 were recommended to be kept under observation.

(g) DEFECTIVE VISION.—During routine inspection 273 children were found with defective vision and referred for examination by an Oculist. As a result of special inspection 85 were also referred to an Oculist.

(h) EAR DISEASE AND DEFECTIVE HEARING.—One case of defective hearing, eleven of otitis media and 10 of other conditions of the ear requiring treatment; and 14 cases of defective hearing, 7 of otitis media, and 6 of other conditions requiring to be kept under observation were found at routine medical inspection. Special inspections revealed 8 cases of defective hearing, 48 of otitis media and 23 cases of other conditions of the ear, all requiring treatment.

(i) DENTAL DEFECTS.—The first table which follows classifies the dental defects found at routine medical inspection. In this table it will be seen that of the entrants 35.5 per cent. had sound teeth, of the intermediate group 44.0 per cent., and of the leavers 64.5 per cent. had sound teeth.

DENTAL INSPECTION, 1928.

	Entrants	Inter- mediates	Leavers	Total
<i>All teeth sound—</i>				
No. of Children ...	356	686	928	1,970
Percentage ...	35.5	44.0	64.5	49.3
<i>Less than 4 teeth decayed—</i>				
No. of Children ...	334	559	435	1,328
Percentage ...	33.3	35.9	30.2	33.2
<i>Four and more than 4 teeth decayed—</i>				
No. of Children ...	311	312	74	697
Percentage ...	31.1	20.0	5.2	17.4

In the next table will be found the percentages of sound teeth in the various groups since 1915.

DENTAL INSPECTION, 1915 TO 1928.

Year	Entrants	Inter- mediates	Leavers	Total
	Percentage with sound Teeth	Percentage with sound Teeth	Percentage with sound Teeth	Percentage with sound Teeth
1915	23.0	26.2	35.7	27.0
1916	15.6	30.2	37.2	25.3
1917	21.7	25.9	41.1	28.8
1918	28.8	25.8	44.1	32.8
1919	36.9	32.2	60.6	42.7
1920	48.6	46.4	64.2	53.1
1921	58.4	64.0	76.5	66.6
1922	45.7	50.2	72.8	56.3
1923	55.2	52.5	80.5	63.9
1924	55.0	58.5	78.0	65.0
1925	47.8	44.3	74.0	53.4
1926	35.5	39.0	64.2	43.8
1927	41.6	46.5	70.8	53.3
1928	35.5	44.0	64.5	49.3

(j) CRIPPLING DEFECTS.—At the end of the year there were 49 children classified as suffering from some form of crippling. Five of these children were so defective that they had to be maintained at Special Residential Schools, and 44 were able to attend public elementary schools. There were no crippled children who were not attending any school.

The list of crippled children represents practically all with whom we have to deal in connection with our public elementary schools. Crippled children are discovered through the head-teachers, school enquiry officers, school nurses and particularly through the Health Centres which the children attend before they reach school age. The Orthopaedic Scheme which applies to children under 5 years of age as well as school children has proved a valuable means of obtaining information regarding crippled children newly admitted to school.

As a routine practice all crippled children are medically examined at least once a year to determine their physical condition and progress. Those requiring treatment are referred to the Surgeon under the Orthopaedic Scheme.

INFECTIOUS DISEASE.

By means of the returns of non-notifiable infectious disease, supplied at the end of each week by the head-teachers, it was ascertained that during the year the numbers of children absent from school on account of these diseases were as follows :—

Measles	...	...	...	...	1,025
Whooping Cough	...	...	...	...	270
Chicken Pox	...	...	...	...	419
Mumps	...	...	...	...	202

On no occasion was it found necessary to give a certificate under Schedule IV, Rule 23, of the Code.

Children to the number of 419 were excluded during the year under Article 53 of the Education Code for the following conditions :—

Conjunctivitis	...	...	...	...	3
Impetigo	...	...	...	...	350
Ringworm of Head	...	...	...	...	13
Ringworm of Body	...	...	...	...	8
Scabies	...	...	...	...	14
Other Skin Diseases	...	...	...	...	31
Total	...	...	...	...	419

FOLLOWING-UP.

After medical inspection two copies of a list of all defective children are supplied to the head-teacher of each school. One copy is retained at the school for reference, the other is returned to the Health Centre at the end of six weeks after the head-teacher has entered opposite each child if treatment has been received in the meantime as a result of the notice sent to the parents.

The enquiries by the head-teachers often stimulate the parents to secure treatment for certain defects at an earlier stage than is possible by the visits of the School Nurse, who cannot always follow up all the cases within that time. Again, the information received from the head-teachers often prompts an earlier visit by the School Nurse to urge suitable treatment.

In connection with the following-up of defective children the School Nurses made 1,529 visits to the schools and to the homes of the children.

MEDICAL TREATMENT.

(a) MINOR AILMENTS.—In Table IV are tabulated the number and the nature of the minor ailments which received treatment during the year. It will be noted that 690 of the 951 children suffering from minor ailments, or 72.5 per cent., were treated at the Health Centres and 261, or 27.4 per cent., were treated by private practitioners or at hospitals. The total attendances at the Health Centres for the daily treatment of minor ailments were as follows:—

Ear Cases	...	...	...	...	1,303
Eye Cases	...	...	...	...	1,353
Ringworm	...	...	...	...	183
Impetigo	...	...	...	...	5,004
Scabies	...	...	...	...	46
Eczema	...	...	...	...	184
Minor Injuries	...	...	...	...	403
Others	...	...	...	...	2,465
					—
Total	...	...	...	...	10,941
					—

(b) TONSILS AND ADENOIDS.—It is indicated in Table IV, Group III, that 97 cases of enlarged tonsils or adenoids were submitted for operation at the Mattock Lane Health Centre, and that 34 cases were dealt with at hospitals or by private practitioners.

(c) TUBERCULOSIS.—Eleven children were referred to the Tuberculosis Officer for supervision, nine being suspected of tuberculosis of the lungs and two of the cervical glands.

(d) SKIN DISEASES.—The cases of diseases of the skin which were treated are included in Table IV, Group I. There were 471 referred for treatment, 380 of whom were treated at the Health Centres and 91 otherwise.

Under this heading are included cases of such conditions as minor injuries, sores, chilblains, etc. Of these, 188 were treated at the Health Centre and 87 otherwise.

During the year 11 cases of ringworm of the head were treated by means of X-Rays by Dr. Arthur, the results being satisfactory in all cases.

Of the 350 cases of impetigo, 298 were treated at the Health Centres. During the year 14 cases of scabies were found and eleven of these were treated at the Mattock Lane Centre.

(e) EXTERNAL EYE DISEASE.—The children referred for treatment of external eye disease numbered 113, of whom 63 were treated at the Health Centres.

(f) DEFECTIVE VISION.—During the year as a result of medical inspection, 358 children were referred for the testing of refraction. The School Oculist examined 333 children and 40 were examined by private practitioners or at hospitals. Glasses were prescribed for 274 cases at the Health Centres and supplied for 266 cases.

(g) EAR DISEASE AND HEARING.—Of 92 children with ear defects who received treatment, 59 were treated at the Health Centres.

(h) DENTAL DEFECTS.—The following is the report of the School Dentist :—

During the year 1928 all the elementary school children in the original Borough of Ealing had their teeth inspected. In the recently added areas of Hanwell and Greenford the children in all the entrant, intermediate and leaving groups were seen, together with those who were in the entrant and intermediate groups during the previous year. In the year 1929 it is proposed that all children attending elementary schools in the enlarged Borough of Ealing shall have their teeth examined.

Altogether, as seen in Table IV, Group IV, 7,634 children or 78 per cent. on the school register were inspected, of whom 4,546 required treatment, a percentage of 59.5.

There were actually treated 2,643 ; 1,307 of whom received further treatment during the year.

The extractions numbered 1,633 permanent and 7,694 temporary teeth. Both nitrous oxide and local anaesthetics were employed, the former being administered on 1,021 occasions.

Fillings were applied to 2,207 permanent and 65 temporary teeth.

The increase in the figures for treatment will indicate sufficiently the progress that is being made.

The increase in the number of fillings, that is, in conservative work is a source of satisfaction. It is regrettable, however, that so many extractions have still to be made, but a clean mouth is of primary importance. During the year a determined attempt has been made to clear up many septic mouths, and one may confidently look forward to a gradual decrease in the number of necessary extractions in the future, with a corresponding increase in the number of fillings.

With regard to the extraction of permanent teeth, a great many of these were removed for regulation purposes. Crowding of the teeth is the commonest form of irregularity in the dentition, and in the majority of cases this is remedied by judicious extraction. An examination of children so treated during the year 1927 proved how satisfactory this orthodontic procedure has been in nearly every case. Children whose irregularities cannot be remedied by extraction are advised to seek independent treatment at one of the Dental Hospitals.

Instruction in oral hygiene is given to children and parents on the occasion of dental inspections or during visits to the Health Centres. In addition, eleven lectures on the subject of dental hygiene were given in the schools. It seems now that the greatest bar to the progress of dentistry is the increasing consumption of sweets. The highly coloured tongues and particles of sticky sweets clinging to the teeth that are seen in more than half of the children's mouths prove how many more of these cheap confections are being consumed. The constant reiteration of the dangers of eating too many sweets is not simply a stunt of public health officers; one is forced more and yet more strongly to the conclusion that sweets play a very large part in producing such deterioration of the teeth as is found among the children—especially the town-dwelling children of to-day.

A big increase in dental work in connection with Maternity and Child Welfare is to be recorded for the year, when 42 sessions were devoted to this work.

Children of pre-school age to the number of 121 were referred for treatment and advice, of whom 100 were actually inspected; 184 attendances were made for the extraction of 167 teeth and the application of 15 fillings.

Seventy nursing and expectant mothers were referred for examination. Altogether 73 mothers attended on 247 occasions; 199 teeth were extracted and fillings were applied to 126 teeth; 18 mothers had their teeth scaled, and 31 were fitted with artificial dentures.

(Signed) C. E. MAINWARING, L.D.S.

(i) ORTHOPAEDIC TREATMENT.—During the year the Orthopaedic Surgeon saw, on the occasion of his monthly visits, 93 school children for the first time. There were 146 re-inspections of these or other children already undergoing treatment. Four children were advised operative treatment and 72 were advised massage and special exercises. The attendances for massage numbered 812. Seven children were supplied with surgical appliances.

In addition to the school children, 59 children under five years of age were submitted for a first examination by the Surgeon, 128 re-inspections being necessary. The attendance of those requiring massage numbered 718. Four operations were advised for children under school age.

(j) HEART DISEASE.—During the year there were found in the course of routine and special inspections 27 children suffering from organic, and 87 from functional disease of the heart.

A record is kept of all children suffering from functional and organic heart conditions and periodical examinations are made to ascertain their condition and to give advice as to treatment. Instructions are given to the parents regarding the care of the children at home and to the teachers as to their supervision at school, particularly in reference to the physical exercises and games which may be indulged in.

(k) PAYMENTS FOR TREATMENT.—The following amounts were received during the year for the treatment of children at the Health Centres :—

	£	s.	d.
Dental Treatment	103	19	0
Artificial Dentures for Children	1	9	6
Throat Operations	26	19	6
Spectacles	68	12	4
X-Ray Treatment for Ringworm of Head ...	3	18	6
Treatment at National Orthopaedic Hospital	7	13	6
Surgical Appliances	3	11	0
Massage Treatment	19	10	6
Other Payments, from Maternity and Child Welfare Committee, etc., for treatment given to children under school age	139	4	10
	<hr/>		
	£374	18	8
	<hr/>		

OPEN-AIR EDUCATION.

Every encouragement is given for the development of playground classes and there appears to be a due appreciation by the teachers of the value of these open-air classes, not only as a means of promoting the health of the children, but in inculcating in their minds the value of fresh air and healthful conditions in the prevention of disease.

The Grange School and the more recently completed Coston School which have been built on open-air lines, offer special facilities for education in the open air. The projected new school at Greenford, of which the plans have just been approved, shows a further development in the open-air school. This school is of the Derbyshire type, designed by Mr. Widdows, and offers better facilities for opening up the classrooms in all kinds of weather without discomfort to the children or the teachers. With schools developed along these lines there should be no necessity in the future for special open-air schools for anaemic or badly nourished children.

PHYSICAL TRAINING.

The value of physical training by means of organised games cannot be over-estimated. Every facility is therefore being offered by the Education Committee for their development by the purchase of playing fields and by the allotting in the public parks of playing pitches for school children. Here during school hours the children indulge in such games as cricket, football, netball, etc.

Swimming is one of the most valuable physical exercises for children and facilities are offered by which every boy or girl can become a proficient swimmer before leaving school. The teachers of swimming are capable and enthusiastic and the results of their efforts, as evidenced by the number of certificates of proficiency gained each year by the children, indicate the keenness and interest of the children.

PROVISION OF MEALS.

Meals are not provided for school children under Sections 82 and 85 of the Education Act. When, on rare occasions, the teachers discover that children are insufficiently fed, they provide out of voluntary funds supplementary food in the form of milk or cocoa

and milk and biscuits, but the numbers of such children are so small that organised methods of providing meals in schools are not called for.

CO-OPERATION OF OTHERS IN THE SCHOOL MEDICAL SERVICE.

The parents show an ever increasing interest in the medical inspection of their children and in the treatment of the defects discovered. Rarely is objection made to medical inspection. On the contrary very often the parents solicit special inspection for and seek advice regarding some suspected defect or apparent lack of health in the children. The high percentage of parents attending medical inspection, 75 per cent. of the children examined, gives evidence of their interest.

The help which the teachers give in the general scheme of medical inspection and treatment is very great, but still greater help will be given by them when they recognise to the greatest extent how much education in hygiene and the cultivation of healthy habits form part of the essential education of the child and when the suggestions contained in the Handbook on Health Education issued by the Board of Education have been fully accepted and acted upon.

This Handbook has been issued to all the schools and teachers have been advised to adopt the suggestions contained therein. It has been further advised that the extent of the teaching of hygiene in the schools should be as follows :—

Infants' Schools.

- (a) Incidental and habit teaching each day when occasion offers.
- (b) In the upper classes, short informal talks of five minutes each day.

Junior Schools.

- (a) Incidental teaching each day as occasion offers.
- (b) Formal talks of five minutes each day.
- (c) Formal lesson of thirty minutes each week.

Senior Schools.

(a), (b) and (c) as for Junior Schools.

Central School.

(a) Incidental teaching as occasion offers.

(b) At least two formal lessons of thirty minutes each week.

Acknowledgment must be made as in previous years of the valuable assistance given by the School Enquiry Officers who heartily co-operate with the School Medical Staff in ascertaining mentally and physically defective children, in reporting on the absence of children from school owing to defective conditions and in stimulating neglectful parents to secure treatment for their children.

Valuable help has been obtained in various ways from the Central Aid Society, who assist in obtaining Special Hospital and Convalescent Home treatment for anaemic or badly nourished children, from the National Society for the Prevention of Cruelty to Children in bringing pressure to bear on parents who are neglecting their children, from the School Attendance Aid Committee in supplying boots for necessitous children and from the Middlesex King Edward Memorial Committee in giving holidays at their Holiday Home at Herne Bay to anaemic and weakly children.

NURSERY SCHOOLS.

The Local Education Authority have not established any Nursery Schools, but children between four and five years of age are admitted to the Infants' Departments if accommodation is available whenever the School Attendance Sub-Committee are satisfied that it will be of advantage to the child to be so dealt with, because of particular circumstances such as the employment of the mother or the overcrowded or unsuitable conditions of the home. Each case is considered on its merits by the Committee on an application being made by the parents. Very few married women engage in regular employment in the Borough so that there is no insistent demand for Nursery Schools.

SECONDARY SCHOOLS.

By an arrangement with the Middlesex Education Committee, the Ealing School Medical Staff carries out medical inspection at the Secondary Schools for boys and girls. This arrangement is very suitable as most of the boys and girls attending these schools come from Public Elementary Schools where they have already been under medical supervision.

BLIND, DEAF, DEFECTIVE AND EPILEPTIC CHILDREN.

Specially defective children are ascertained through the School Enquiry Officers, who report all such cases not attending school, through the head-teachers who are expected to notify all defective children immediately on admission to school, through the School Nurses as a result of visiting homes and through the Health Visitors who discover the defective children before they are of school age on being brought to the Health Centres by their mothers. In those ways a fairly complete list of all specially defective children can be kept.

Blind and deaf children of school age whenever they are discovered are sent to Special Residential Schools. Three blind girls and five blind boys were being maintained at Certified Schools for the Blind at the end of the year. Five girls and five boys, suffering from myopia to such an extent as to be considered partially blind, attended public elementary schools under special supervision. The partially blind children undergo regular medical examination at intervals of three months or oftener depending on their actual condition as determined by the Medical Officer. The teachers and parents receive specific instructions regarding the care and supervision of those children, particularly as to the avoidance of excessive exercise or severe physical exertion which might adversely affect the condition of the eyes and as to the kind of visual work which the eyes may be called upon to perform either in the school or in the home.

Ten deaf-mutes, three boys and seven girls, were maintained at Special Residential Schools.

One boy suffering from very severe epilepsy was kept at home. The case is really one for hospital treatment, but the parents insist on his being treated at home. Eight children, four boys and

four girls, suffering from epilepsy of a mild character, the attacks never occurring at school or during the day, were attending public elementary schools. One girl, suffering from mild epilepsy, was kept at home for observation and treatment by her own medical attendant.

Nine feeble-minded children, five girls and four boys, were maintained at Special Residential Schools. There were 19 feeble-minded children in attendance at the public elementary schools, and one, who was awaiting a vacancy at a Special Residential School, was kept at home.

The education of mentally defective children constitutes one of the most difficult problems with which the Education Committee has to deal. It will be remembered that the question was discussed on several occasions in recent years. In February, 1927, a report was submitted on the desirability of establishing "Craft" classes at certain of the elementary schools which backward and feeble-minded children might attend. On the ultimate failure of this proposal, after a temporary acceptance, another proposal was submitted which suggested the establishment of a school for mentally defective children by certain Local Education Authorities in Middlesex. This proposal was favourably considered by a Conference representing the Authorities concerned, but the consideration had to be adjourned pending the issue of the Report of the Departmental Committee on Mental Deficiency.

The policy adopted with regard to mentally defective children has been to examine all children three or more classes behind those of a similar age to determine their mental condition. First of all imbeciles are diagnosed and notified to the Local Control Authority, then the feeble-minded are classified into those requiring care in a Residential Special School, generally speaking, those who are troublesome at home or at school or whose home circumstances are such as to necessitate their being placed under better care, and into those high-grade mental defectives, who with special care can make some progress in the ordinary school without unnecessarily disturbing the education of others. The number in this last group, indicated in Table III, is small owing chiefly to the fact that there is no necessity for strictly defining those on the borderline as mentally defective as their education or supervision in school would not be materially altered by the classification.

The Report of the Departmental Committee has recently been issued and should form a valuable guide in determining the most practicable method of dealing with the general question of the education of the feeble-minded and backward children attending our elementary schools.

EMPLOYMENT OF CHILDREN AND YOUNG PERSONS.

The number of boys and girls employed out of school hours in accordance with the Byelaws with respect to the Employment of Children is given in the following list, together with the nature of the employment :—

BOYS.			GIRLS.		
Errands	...	182	Errands	...	1
Milk Round	...	45	Cashier	...	1
Newspaper Round	...	51	House Work	...	1
House Work	...	3	Newspaper Round	...	2
Delivering Washing	...	2			
Baker's Round	...	65	Total	...	5
Order Boy	...	34			
Bottle Washer	...	1			
Delivering Coal	...	2			
Delivering Circulars	...	30			
Delivering Parcels	...	6			
Helping in Shop	...	4			
		<hr/>			
Total	...	425			
		<hr/>			

All these children were medically inspected during the year and 41 were found to be in such a condition of health that their employment was discontinued.

Twenty-five children on routine medical inspection were found to be employed without being registered under the Byelaws and two were found to be under age.

MISCELLANEOUS.

Under this heading are noted all inspections carried out at the Health Centres, including children referred by the Education Committee, Head-teachers, School Enquiry Officers, and School Nurses.

Children are submitted for inspection at the Centres on each school day at 9.30 a.m. Those usually submitted are children suspected of having verminous heads or bodies, or having ringworm, scabies or impetigo, or those whose examination is desirable on account of some defect, such as defective eyesight, disease of the eye, ear, nose and throat, which may require treatment. In fact, any defective child not under medical care may be submitted by the head-teachers for examination.

The examinations carried out during the year may be summarised as follows :—

Verminous Children	...	...	...	932
Impetigo	...	...	...	907
Scabies	...	...	...	48
Ringworm...	...	...	...	99
Eczema	...	...	...	22
Minor Injuries	...	...	...	115
Teachers on Appointment	...	...	...	29
King Edward Memorial Scheme	...	...	...	9
Miscellaneous	...	...	...	2,172
				—
Total	...	...	...	4,333
				—

SPECIAL REPORT.

On the inclusion of the Parish of Northolt within the boundaries of the Borough on the 1st October, 1928, a Special Report on the extension of the School Medical Service to the newly added area was submitted to and approved by the Education Committee. The Report is as follows :—

REPORT TO THE EDUCATION GENERAL PURPOSES SUB-COMMITTEE.

Extension of School Medical Services to the Northolt Area.

I have to report that I have considered the steps which are necessary to extend the School Medical Services to the area of Northolt which will be included in the Borough on the 1st October.

It is anticipated that the present staff will be able to carry out such medical and dental inspections as are required by the present school population, but any marked increase in the number of school children will call for the part-time services of a medical or dental officer, in the same way as they are at present called for in connection with Maternity and Child Welfare Work in the same area.

You are aware that the present staff of School Nurses has only with the greatest difficulty been able to cope with the work in the Borough, so that the appointment of an additional nurse, the consideration of which has been postponed pending the inclusion of Northolt, will be necessary. This appointment, which would carry a commencing salary of £200 per annum, should be made at the earliest possible date. It is proposed to station the new nurse at the Mattock Lane Centre, to transfer Miss Johnson from the Mattock Lane Centre to the Cherington Road Centre, and to place Miss McGann in charge of the schools in Greenford, with which district she is already familiar, and the school in Northolt.

The time has now come for the Committee to consider the establishing of a new Health Centre where children attending the Greenford and Northolt Schools can be treated, and I suggest that application be made to the Ministry of Health for sanction to appropriate for the purpose a piece of the land which has recently been acquired by the Council at Coston's Farm. A Centre at this point would serve the needs, at least for some years, of both Greenford and Northolt. I am assuming, of course, that the Committee in establishing such a Centre would, in accordance with established practice, act in conjunction with the Maternity and Child Welfare Committee, to whom I am reporting on the need for further provision of accommodation for Maternity and Child Welfare work.

Until the new Centre is available the School Nurse will attend the school at Northolt on two mornings each week, as is done at Greenford, for the treatment of minor ailments, and children suffering from other defects such as enlarged tonsils and adenoids, defective vision, crippling, etc., will attend the Mattock Lane or Cherington House Centres as may be suitably arranged. The journey to Cherington House or Mattock Lane is a long one from either Greenford or Northolt, and makes the opening of a new Health Centre all the more necessary.

I propose arranging for dental treatment to be carried out at Northolt School, where, as a temporary measure, the cookery-room can be utilised as a dental room on two occasions, of a week each, in the year. The apparatus required at the present time is not large in amount and consists of a small aseptic table costing £3 18s. 0d. and a dental engine costing £8 8s. 0d. A suitable light portable dental chair and a dental cabinet can be hired for the two weeks in the year for a very small amount. It is not advisable to buy a portable dental chair and a cabinet at present, for these would not be suitable for a permanent dental room which would be fitted at the new Health Centre.

The only other piece of apparatus required is a weighing machine which can be purchased at a cost of £12 10s. 0d.

Recommendations.

1. That a whole-time School Nurse be appointed at a salary of £200 per annum.
2. That steps be taken in conjunction with the Maternity and Child Welfare Committee to establish a new Health Centre to meet the needs of Greenford and Northolt.
3. That an aseptic table, a dental engine, and a weighing machine be purchased at an estimated cost of £24 16s. 0d.

THOMAS ORR,

School Medical Officer.

20th September, 1928.

STATISTICAL TABLES.

The Statistical Tables required by the Board of Education are as follows:—

TABLE I.

A.—Routine Medical Inspections.

Number of Code Group Inspections:—

Entrants ... ..	...	...	...	...	...	...	1,001
Intermediates ... ..	...	...	...	...	...	...	1,557
Leavers ... ..	...	...	...	...	...	...	1,437
Total							3,995
Number of other Routine Inspections							—

B.—Other Inspections.

Number of Special Inspections ... ..	...	...	...	...	...	1,948
Number of Re-Inspections ... ..	...	...	...	...	...	1,423
Total							3,371

TABLE II.

A. — RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION
IN THE YEAR ENDED 31st DECEMBER, 1928.

DISEASE OR DEFECT. (1)	Routine Inspection		Special Inspections		
	No. of Defects.		No. of Defects.		
	Number referred for Treatment. (2)	Number required to be kept under observation but not referred for Treatment. (3)	Number referred for Treatment. (4)	Number required to be kept under observation, but not referred for Treatment (5)	
Malnutrition	3	22	1	—	
Uncleanliness	47	—	43	—	
Skin {	Ringworm, Head	—	13	—	
	" Body	—	15	—	
	Scabies	1	13	—	
	Impetigo	10	340	—	
	Other Diseases (Non-Tubercular)	2	5	77	1
Eye {	Blepharitis	11	9	31	—
	Conjunctivitis	4	—	30	—
	Keratitis	—	—	3	—
	Corneal Opacities	—	—	1	—
	Defective Vision	273	—	85	—
	Squint	20	3	14	—
	Other Conditions	—	2	37	—
Ear {	Defective Hearing	1	14	8	—
	Otitis Media	11	7	48	—
	Other Ear Diseases	10	6	23	—
Nose and Throat {	Enlarged Tonsils	111	239	56	5
	Adenoids	16	—	5	—
{	Enlarged Tonsils and Adenoids	75	3	29	—
	Other Conditions	11	119	5	25
Enlarged Cervical Glands (Non-Tuberculous)	1	121	—	25	
Defective Speech	—	8	—	2	
Teeth—Dental Diseases	697	—	249	—	
Heart and Circulation {	Heart Disease :—				
	Organic	4	14	3	6
	Functional	—	72	4	11
	Anaemia	20	19	15	2
Lungs {	Bronchitis	8	26	8	3
	Other Non-Tubercular Diseases	1	14	—	11
	Pulmonary :—				
	Definite	—	—	—	—
	Suspected	—	3	—	8
Tuberculosis {	Non-Pulmonary :—				
	Glands	—	—	—	2
	Spine	—	—	—	—
	Hip	—	—	—	—
	Other Bones and Joints	—	—	—	—
Nervous System {	Other Forms	—	—	—	—
	Epilepsy	—	—	5	—
	Chorea	—	1	6	—
Defor- mities {	Other Conditions	—	6	—	12
	Rickets	—	3	—	—
{	Spinal Curvature	15	12	1	—
	Other Forms	50	123	11	6
Other Diseases and Defects	12	17	489	33	
TOTAL	1414	868	1668	152	

TABLE II
 A.—RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION
 IN THE YEAR ENDED 31ST DECEMBER, 1928.

CLASSIFICATION OF DEFECTS	General Inspection		Special Inspections	
	No. of Defects	% of Defects	No. of Defects	% of Defects
Defects requiring treatment	42	1.1	13	0.3
Defects requiring attention	45	1.2	27	0.7
Defects requiring observation	15	0.4	11	0.3
Defects requiring no attention	113	3.0	77	2.0
Total	115	3.1	112	3.0

B.—Number of Individual Children found at Routine Medical Inspection to require Treatment

(excluding Uncleanliness and Dental Diseases).

GROUP (1)	NUMBER OF CHILDREN		Percentage of Children found to require Treatment (4)
	Inspected (2)	Found to require Treatment (3)	
Code Groups :—			
Entrants	1,001	146	14.5
Intermediates	1,557	255	16.3
Leavers	1,437	246	17.1
Total (Code Groups)	3,995	647	16.2
Other Routine Inspections	—	—	—

TABLE III.

RETURN OF ALL EXCEPTIONAL CHILDREN IN THE AREA.

			Boys	Girls	Total
BLIND (including partially blind)	(i) Suitable for training in a School or Class for the totally blind.	Attending Certified Schools or Classes for the Blind ...	5	3	8
		Attending Public Elementary Schools ...	—	—	—
		At other Institutions ...	—	—	—
		At no School or Institution ...	—	—	—
(ii) Suitable for training in a School or Class for the partially blind.	Attending Certified Schools or Classes for the Blind ...	—	—	—	
	Attending Public Elementary Schools ...	5	5	10	
	At other Institutions ...	—	—	—	
	At no School or Institution ...	—	—	—	
DEAF (including deaf and dumb and partially deaf)	(i) Suitable for training in a School or Class for the totally deaf or deaf and dumb.	Attending Certified Schools or Classes for the Deaf ...	3	7	10
		Attending Public Elementary Schools ...	—	—	—
		At other Institutions ...	—	—	—
		At no School or Institution ...	—	—	—
(ii) Suitable for training in a School or Class for the partially deaf.	Attending Certified Schools or Classes for the Deaf ...	—	—	—	
	Attending Public Elementary Schools ...	1	1	2	
	At other Institutions ...	—	—	—	
	At no School or Institution ...	—	—	—	
MENTALLY DEFECTIVE	Feeble-minded (cases not notifiable to the Local Control Authority).	Attending Certified Schools for Mentally Defective Children ...	4	5	9
		Attending Public Elementary Schools ...	8	11	19
		At other Institutions ...	—	—	—
		At no School or Institution ...	1	—	1
Notified to the Local Control Authority	Feeble-minded ...	—	1	1	
	Imbeciles ...	4	2	6	
	Idiots ...	—	—	—	
EPILEPTICS	Suffering from severe epilepsy.	Attending Certified Special Schools for Epileptics ...	—	—	—
		In Institutions other than Certified Special Schools ...	—	—	—
		Attending Public Elementary Schools ...	—	—	—
		At no School or Institution ...	1	—	1
Suffering from epilepsy which is not severe.	Attending Public Elementary Schools ...	4	4	8	
	At no School or Institution ...	—	1	1	

		Boys	Girls	Total	
PHYSICALLY DEFECTIVE	Infectious pulmonary and glandular tuberculosis.	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board	2	—	2
		At other Institutions ...	—	—	—
		At no School or Institution ...	—	1	1
	Non-infectious but active pulmonary and glandular tuberculosis.	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board	—	—	—
		At Certified Residential Open-Air Schools	—	—	—
		At Certified Day Open-Air Schools	—	—	—
		At Public Elementary Schools	3	10	13
		At other Institutions ...	—	—	—
		At no School or Institution ...	—	—	—
	Delicate children (<i>e.g.</i> , pre- or latent tuberculosis, malnutrition, debility, anaemia, etc.)	At Certified Residential Open-Air Schools	—	—	—
		At Certified Day Open-Air Schools	—	—	—
		At Public Elementary Schools	124	127	251
		At other Institutions	—	—	—
		At no School or Institution ...	—	—	—
	Active non-pulmonary tuberculosis.	At Sanatoria or Hospital Schools approved by the Ministry of Health or the Board	—	—	—
		At Public Elementary Schools	—	—	—
		At other Institutions ...	—	—	—
		At no School or Institution ...	—	—	—
	Crippled Children (other than those with active tuberculous disease <i>e.g.</i> , children suffering from paralysis, etc., and including those with severe heart disease).	At Certified Hospital Schools	—	—	—
At Certified Residential Cripple Schools		4	1	5	
At Certified Day Cripple Schools		—	—	—	
At Public Elementary Schools		22	22	44	
At other Institutions ...		—	—	—	
At no School or Institution ...	—	—	—		

TABLE IV.

RETURN OF DEFECTS TREATED DURING THE YEAR
ENDED 31st DECEMBER, 1928.

TREATMENT TABLE.

Group 1.—Minor Ailments (excluding Uncleanliness, for which
see Group V.)

DISEASE OR DEFECT (1)	Number of Defects treated, or under treatment during the year.		
	Under the Authority's Scheme (2)	Otherwise (3)	Total (4)
SKIN :—			
Ringworm—Scalp	11	2	13
Ringworm—Body	15	—	15
Scabies	11	3	14
Impetigo	298	52	350
Other Skin Diseases	45	34	79
MINOR EYE DEFECTS (external and other, but excluding cases falling in Group II)	63	50	113
MINOR EAR DEFECTS	59	33	92
MISCELLANEOUS (<i>e.g.</i> , minor injuries, bruises, sores, chil- blains, etc.)	188	87	275
TOTAL	690	261	951

Group II.—Defective Vision and Squint (excluding Minor Eye Defects treated as Minor Ailments—Group I.)

DEFECT OR DISEASE (1)	No. of Defects dealt with.			
	Under the Authority's Scheme (2)	Submitted to refraction by private practitioner or at hospital, apart from the Authority's Scheme (3)	Other-wise (4)	Total (5)
Errors of Refraction (including Squint) (Operations for squint should be recorded separately in the body of the Report)	333	40	—	373
Other Defect or Disease of the Eyes (excluding those recorded in Group I) ...	—	—	—	—
TOTAL	333	40	—	373

Total number of children for whom Spectacles were prescribed :—

(a) Under the Authority's Scheme	274
(b) Otherwise	40

Total number of children who obtained or received Spectacles :—

(a) Under the Authority's Scheme	266
(b) Otherwise	40

Group III.—Treatment of Defects of Nose and Throat.

NUMBER OF DEFECTS.

Received Operative Treatment			Received other forms of Treatment (4)	Total number treated (5)
Under the Authority's Scheme, in Clinic or Hospital (1)	By Private Practitioner or Hospital, apart from the Authority's Scheme (2)	Total (3)		
97	34	131	—	97

Group IV.—Dental Defects.

(1) Number of Children who were :—

(a) Inspected by the Dentist :

		Aged			
Routine Age Groups		4	...	4	} Total 7,385
		5	...	478	
		6	...	794	
		7	...	801	
		8	...	1,187	
		9	...	839	
		10	...	572	
		11	...	522	
		12	...	827	
		13	...	726	
		14	...	543	
		15	...	79	
		16	...	13	
Specials	249
Grand Total					7,634

(b) Found to require treatment	...	...	...	...	4,546
(c) Actually treated	...	...	...	...	2,643
(d) Re-treated during the year as the result of periodical examination	...	...	...	...	1,307

(2) Half-days devoted to :—

Inspection	...	...	...	...	49
Treatment	...	...	...	...	365
					Total 414

(3) Attendances made by Children for Treatment ... 3,950

(4) Fillings :—

Permanent Teeth	...	...	...	...	2,207
Temporary Teeth	...	...	...	...	65
					Total 2,272

(5) Extractions :—

Permanent Teeth	...	...	...	...	1,633
Temporary Teeth	...	...	...	...	7,694
					Total 9,327

(6) Administrations of General Anaesthetics for Extractions ... 1,021

(7) Other Operations :—

Permanent Teeth	...	...	...	...	—
Temporary Teeth	...	...	...	...	—
					Total —

Group V.—Uncleanliness and Verminous Conditions.

(1) Average number of Visits per School made during the year by the School Nurses	...	...	...	...	3
(2) Total number of Examinations of Children in the Schools by School Nurses	...	...	...	...	17,391
(3) Number of individual children found Unclean	...	...	...	...	389
(4) Number of Children cleansed under arrangements made by the Local Education Authority	...	...	...	...	—
(5) Number of cases in which legal proceedings were taken :—					
(a) Under the Education Act, 1921	...	...	...	...	—
(b) Under School Attendance Bye-Laws	...	...	...	...	—

(1) Number of Children who were inspected by the Dentist

Age	Number of Children
4	478
5	601
6	1,197
7	839
8	372
9	323
10	327
11	328
12	328
13	328
14	328
15	328
16	328
17	328
18	328
Total	7,984

(2) Hours to require treatment

(3) Actually treated

(4) Not-treated during the year as the result of periodical examination

(5) Half-days devoted to inspection

(6) Attendance made by Children for Treatment

(7) Fillings:—

(8) Extractions:—

(9) Administration of General Anesthetics for Extractions

(10) Other Operations

Group V - Unhealthy and Verminous Conditions

(1) Average number of visits per school child during the year

(2) Total number of examinations of children in the district

(3) Number of individual children found to be

(4) Number of children cleaned under arrangements made by the local health authority

(5) Number of cases in which local proceedings were taken

(a) Under the Education Act, 1901

(b) Under School Attendance By-Laws