

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

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Ealing (London, England). Council.

Publication/Creation

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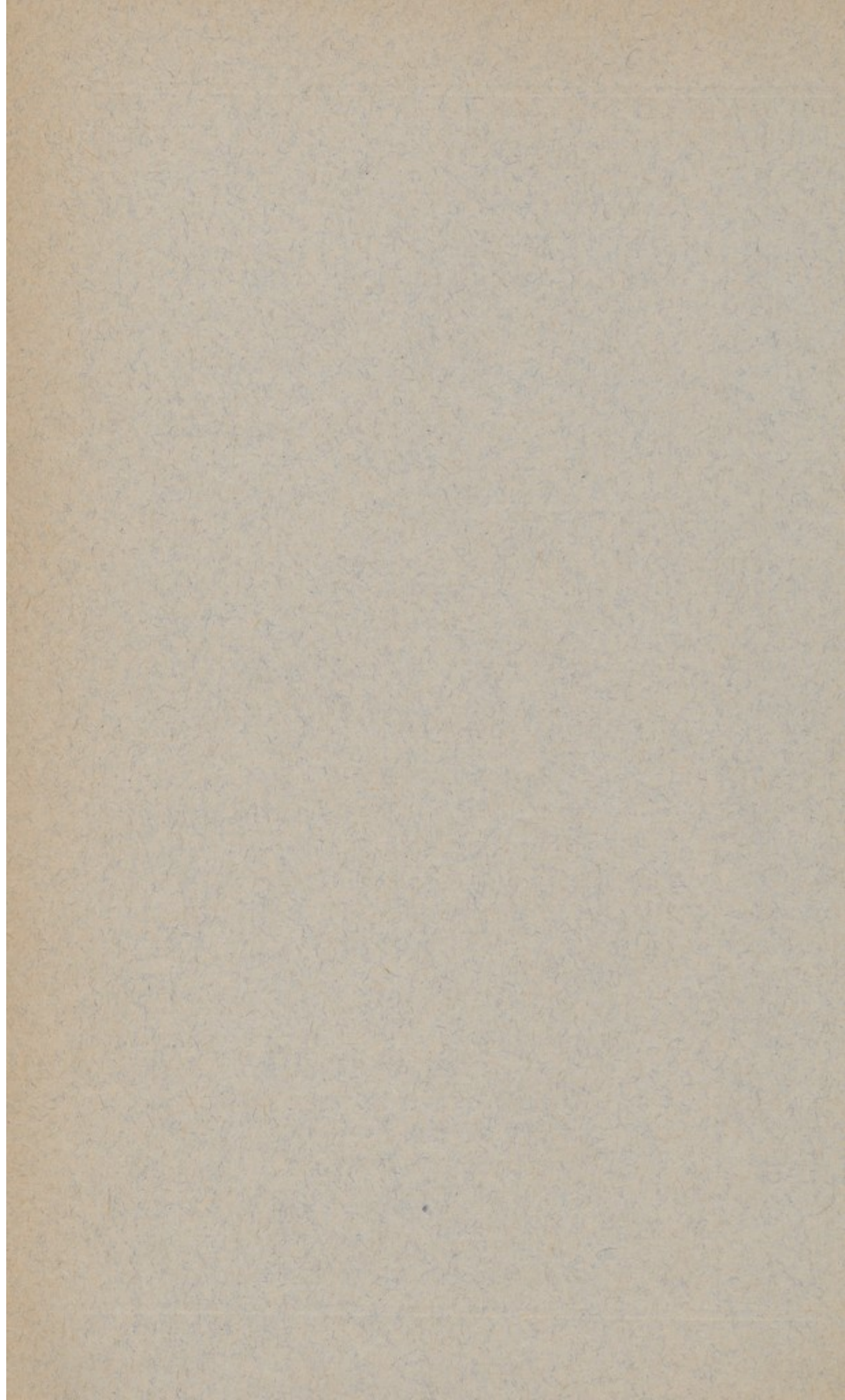
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Borough of Ealing.



ANNUAL REPORT OF THE Medical Officer of Health AND School Medical Officer FOR THE YEAR **1929.**

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

EALING :
FRANCIS A. PERRY, LTD., 4, KIRCHEN ROAD.

Annual Report

of the

Medical Officer of Health 1929.

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PUBLIC HEALTH COMMITTEE,

1928-29.

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

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

Aldermen H. ARMRIDING, Col. R. R. KIMMITT, O.B.E.,
and H. W. PEAL, J.P.

Councillors Mrs. F. M. BAKER, J.P., WILLOUGHBY GARNER,
T. HALLIDAY, D. HOWELL-JONES, J.P., W. D. POCOCK, J. SMITH,
Mrs. E. S. TAYLOR, J.P., W. T. WHITE, J.P., and G. C. WILCOX.

MATERNITY AND CHILD WELFARE COMMITTEE,

1928-29.

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Mrs. PARRY (*Vice-Chairman*).

Aldermen H. ARMRIDING, Col. R. R. KIMMITT, O.B.E.,
and H. W. PEAL, J.P.,

Councillors Mrs. F. M. BAKER, J.P., A. H. CHILTON, J.P.,
WILLOUGHBY GARNER, T. HALLIDAY, D. HOWELL-JONES, J.P.,
W. D. POCOCK, H. M. SAYERS, J. SMITH, W. T. WHITE, J.P.,
and G. C. WILCOX.

Mesdames COCKER, GIRDLESTONE, LUDLOW, MORRIS 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. (Resigned July, 1929).
GEORGE W. STEVENS, Cert. R.S.I., and Cert. Inspector of Meat and
Other Foods. (Appointed July, 1929).

Sanitary Inspectors—

JAMES STUBBS, 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.

G. T. H. BLACKIE, Cert. R.S.I., and Cert. Inspector of Meat and
Other Foods. (Appointed 22nd July, 1929).

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.

FREDA DE LA HOYDE, Health Visitors' Cert., Cert. C.M.B.,
and Trained Nurse. (Appointed Jan. 1st, 1929).

Matron, Day Nursery—

ALICE M. EXON, Trained Nurse.

Chief Clerk and Committee Clerk—

HARRY BIRRELL.

Clerks—

*WILLIAM A. J. TURNER.

*ARTHUR C. MOTTE.

*GEORGE W. STEPHENS.

OLIVE LEVASSEUR.

*HERBERT J. REED.

PEGGY GOSTAGE.

HEALTH CENTRES.

13, MATTOCK LANE, EALING.

CHERINGTON HOUSE, HANWELL.

ABERDEEN HOUSE, GREENFORD.

ISLIPS MANOR, 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, 1929.

Population (Estimated 1929)	...	...	...	...	104,000
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, 1929	...	...	...	...	£1,055,513
Net Produce of a Penny Rate	...	...	...	...	£4,259

SUMMARY OF VITAL STATISTICS, 1929.

Births :—

Legitimate Males, 749	Females, 706	Total, 1,455	} 1,529
Illegitimate Males, 32	Females, 42	Total, 74	
Birth-rate	...	...	14.7
Deaths : Males, 613	Females, 683	...	1,296
Death-rate (Crude)	...	...	12.4
Death-rate (Standardised)	...	...	11.3

Deaths of Infants under 1 year :—

Legitimate : Males, 40	Females, 28	Total, 68	} 73
Illegitimate : Males, 4	Females, 1	Total, 5	

Infant Death-rate per 1,000 Births :—

Legitimate, 47	Illegitimate, 67	Total	...	48
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	Total Deaths	Death-rate per 1,000 Population
Measles	0	0.00
Whooping Cough	17	0.16
Diphtheria	8	0.08
Scarlet Fever	3	0.03
Influenza	92	0.88
Tuberculosis of Lung	87	0.83
Other Forms of Tuberculosis	13	0.12
All Forms of Tuberculosis	100	0.96

	Death-rate per 1,000 Births
Diarrhoea (under 2 years of age)	3.9

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

From Sepsis	...	...	...	—	—
Other Causes	...	...	...	3	1.96

TABLE I.

**Comparison of Vital Statistics of Ealing with those
of England and Wales, Etc., 1929.**

				England and Wales	107 Great Towns (including London)	London	Ealing
Birth-rate	...	...	...	16.3	16.6	15.7	14.7
Death-rate	...	...	...	13.4	13.7	13.8	11.3
Infant Death-rate	...	...	...	74	79	70	48
Measles Death-rate	...	...	...	0.08	0.12	0.04	0.00
Whooping Cough Death-rate...				0.15	0.19	0.26	0.16
Diarrhoea (under 2 years per 1,000 Births)	...	...	...	8.1	10.9	10.7	3.9
Diphtheria Death-rate	...			0.08	0.09	0.08	0.08
Scarlet Fever Death-rate	...			0.02	0.02	0.02	0.03
Influenza Death-rate	...	...	...	0.74	0.76	0.69	0.88

VITAL STATISTICS.

Population.

The Registrar-General has estimated the population at the middle of the year as 104,000. This number however is likely to be an under-estimate, as owing to the building of a large number of houses, particularly in Greenford, there has been an influx of new inhabitants into the Borough in excess of the normal.

During the year the natural increase in the population or the excess of births over deaths was 233.

At the Census in 1921 the total population for the area was 89,697. The Census Returns for 1921 showed that there were 18,497 structurally separate dwellings in the area now within the Borough, that there were 111,282 rooms occupied and that there were 1.24 rooms per member of the population.

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

In Ealing the *Birth-rate* of 14.7 is low compared with that for England and Wales of 16.3 and that for London of 15.7 per 1,000 of population. The rate is slightly less than that for the previous year which was 14.9, although it is higher than the rates for the years 1924 to 1927.

The *Death-rate*, 11.3, is higher than in the previous year, mainly accounted for by the increased number of deaths from influenza. The rate however is less than that for England and Wales, which is 13.8 per 1,000 of population.

The *Infant Death-rate* of 48 per 1,000 births is very low compared with that for England and Wales, with that for the Great Towns, and with that for London which are respectively 74, 79 and 70. The rate is higher than in the previous year, which was the lowest ever recorded in the Borough, but it compares favourably, as is seen in Table II with those for the years previous to 1928. Whooping cough and premature birth accounted for the increase of deaths over the previous year. In 1929 there were six deaths from common infectious diseases (whooping cough) compared with none in 1928 and 25 deaths from premature birth compared with 14 in the previous year. (Table III).

The *Neo-Natal Death-rate* (deaths occurring under one month old) is 22. (Table IIIA).

The *Illegitimate Infant Death-rate* is low, being 67 per 1,000 illegitimate births.

Stillbirths.—The number of stillbirths registered in the year were as follows :—

		Male	Female
Legitimate ...	...	24	16
Illegitimate ...	...	1	—
Total		25	16

TABLE II.

Showing Birth-rate, Death-rate and Infant Death-rate for
Ealing for the Years 1911-1929.

<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
1929	...	14.7	11.3	48

The causes of deaths of infants in 1929 are shown in Table III in which the causes of death for the year are compared with those in the preceding years.

In Table IIIA the ages at which death occurred in children under twelve months old are indicated. It is to be noted that 34 of the total 73 deaths occurred in children under four weeks old. This gives a neo-natal death-rate of 22 per 1,000 births.

TABLE III.

Causes of Infant Deaths, 1921 to 1929.

	1921	1922	1923	1924	1925	1926	1927	1928	1929
Diarrhoeal Diseases ...	9	5	2	4	1	4	3	5	4
Premature Birth ...	10	5	11	7	9	23	20	14	25
Congenital Defects ...	4	6	8	4	10	5	9	6	4
Atrophy, Debility, Marasmus ...	12	10	9	6	8	13	11	6	10
Tuberculous Disease ...	—	2	1	3	—	—	—	2	1
Syphilis ...	2	—	—	—	1	1	—	—	—
Rickets ...	—	—	—	—	—	—	—	—	—
Meningitis (<i>not Tuberculous</i>) ...	1	—	1	2	1	1	—	1	3
Convulsions ...	2	2	2	2	—	1	2	3	3
Bronchitis ...	6	5	5	1	4	7	5	7	2
Pneumonia (all forms) ...	9	1	10	3	5	5	7	4	8
Gastritis ...	1	2	1	—	—	1	—	1	1
Common Infectious Diseases ...	7	4	2	3	3	1	2	—	6
Other Causes ...	9	15	10	11	12	9	15	12	6
Totals ...	72	57	62	46	54	71	74	61	73

TABLE IIIA.

Infant Mortality during the Year 1929.

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 ...	27	3	2	2	34	12	8	10	9	73
Uncertified ...	—	—	—	—	—	—	—	—	—	—
Small-pox ...	—	—	—	—	—	—	—	—	—	—
Chicken-pox ...	—	—	—	—	—	—	—	—	—	—
Measles ...	—	—	—	—	—	—	—	—	—	—
Scarlet Fever ...	—	—	—	—	—	—	—	—	—	—
Whooping-Cough ...	—	—	—	—	—	1	—	1	4	6
Diphtheria and Croup ...	—	—	—	—	—	—	—	—	—	—
Erysipelas ...	—	—	—	—	—	—	—	—	—	—
Tuberculous Meningitis ...	—	—	—	—	—	—	—	1	—	1
Abdominal Tuberculosis ...	—	—	—	—	—	—	—	—	—	—
Other Tuberculous Diseases	—	—	—	—	—	—	—	—	—	—
Meningitis (<i>not Tuberculous</i>)	—	—	—	—	—	—	—	2	1	3
Convulsions ...	—	—	—	1	1	1	1	—	—	3
Laryngitis ...	—	—	—	—	—	—	—	—	—	—
Bronchitis ...	—	—	—	—	—	2	—	—	—	2
Pneumonia (all forms) ...	—	—	—	—	—	—	1	4	3	8
Diarrhoea ...	—	—	—	—	—	—	1	—	—	1
Enteritis ...	—	—	—	—	—	1	1	1	—	3
Gastritis ...	—	—	—	—	—	—	—	—	1	1
Syphilis ...	—	—	—	—	—	—	—	—	—	—
Rickets ...	—	—	—	—	—	—	—	—	—	—
Suffocation, Overlying ...	—	1	—	—	1	—	—	—	—	1
Injury at Birth ...	2	—	—	—	2	—	—	—	—	2
Atelectasis ...	—	—	—	—	—	—	—	—	—	—
Congenital Malformations	2	—	—	—	2	2	—	—	—	4
Premature Birth ...	19	1	2	1	23	2	—	—	—	25
Atrophy, Debility and Marasmus	2	1	—	—	3	3	3	1	—	10
Other Causes ...	2	—	—	—	2	—	1	—	—	3
Totals ...	27	3	2	2	34	12	8	10	9	73

In Table IV are indicated the total deaths from the various diseases. Cancer, it will be seen, was responsible for 150 deaths, giving a cancer death-rate of 1.44; heart disease caused 242 deaths, giving a death-rate of 2.32; and bronchitis and pneumonia accounted for 179 deaths, or a death-rate of 1.72.

Of the infectious diseases, scarlet fever caused 3 deaths, giving a death-rate of 0.03 per thousand of population; whooping cough caused 17 deaths, giving a death-rate of 0.16 per thousand of population; diphtheria 8 deaths, giving a death-rate of 0.08; influenza 92 deaths, giving a death-rate of 0.88, and tuberculosis 100 deaths, giving a death-rate of 0.96 per thousand of population.

TABLE IV. Causes of Death, 1929.

Cause of Death.	Male	Female	Total
Enteric Fever	—	—	—
Smallpox	—	—	—
Measles	—	—	—
Scarlet Fever	2	1	3
Whooping Cough	7	10	17
Diphtheria	5	3	8
Influenza	34	58	92
Encephalitis Lethargica	—	2	2
Meningococcal Meningitis... ..	1	1	2
Tuberculosis of Respiratory System	46	41	87
Other Tuberculous Diseases	7	6	13
Cancer, Malignant Disease	63	87	150
Rheumatic Fever	5	—	5
Diabetes	4	9	13
Cerebral Haemorrhage, etc.	21	31	52
Heart Disease	108	134	242
Arterio-Sclerosis	28	16	44
Bronchitis	40	53	93
Pneumonia (all forms)	41	45	86
Other Respiratory Diseases	10	12	22
Ulcer of Stomach or Duodenum	10	6	16
Diarrhoea, etc. (Under 2 years)	4	2	6
Appendicitis and Typhlitis	2	4	6
Cirrhosis of Liver	1	2	3
Acute and Chronic Nephritis	17	14	31
Puerperal Sepsis	—	—	—
Other Accidents and Diseases of Pregnancy and Parturition	—	3	3
Congenital Debility and Malformation, Premature Birth	26	11	37
Suicide	12	10	22
Other Deaths from Violence	26	13	39
Other Defined Diseases	93	109	202
Causes ill-defined or unknown	—	—	—
Total	613	683	1296

GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA.

PUBLIC HOSPITALS SITUATED IN OR SERVING THE DISTRICT.

(1) *Isolation Hospital*.—Cases of infectious disease arising in the district are treated at the Joint Hospital in South Ealing, which is under the control of the Chiswick and Ealing Hospitals Committee. At this Hospital, which is conveniently situated just within the Southern boundary, cases from the Urban District of Brentford and Chiswick are also treated.

The Hospitals Committee are now considering the extension of the Hospital to provide for the rapidly growing population in the districts served.

(2) *Smallpox Hospital*.—In accordance with the arrangements made by the Middlesex County Council, the London County Council receive into their Smallpox Hospitals cases of smallpox occurring in Ealing.

(3) *Tuberculosis Hospitals*.—There are no hospitals for tuberculosis in 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 maintain a Maternity Hospital of 22 beds, which serves both the needs of the Borough of Ealing and of the Urban District of Brentford and Chiswick. So great has been the demand for beds in this hospital that the Hospitals Committee are at the present time considering the provision of additional beds.

(5) *Hospital Provision for Children*.—At the King Edward Memorial 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.*—A scheme is in operation by which, in conjunction with the Royal National Orthopaedic Hospital, children from birth to school-leaving age can receive proper treatment. At the Mattock Lane Health Centre the children are seen by the Surgeon, who gives advice as to the treatment which is required, whether operative or massage treatment. If operative treatment is called for the child is admitted to the National Orthopaedic Hospital at Stanmore, and if massage and manipulative treatment, or special physical exercises, are required they are given at Mattock Lane Health Centre.

So great has been the demand for this form of treatment, not because of the large number of crippled children in the district but because the parents are taking full advantage of the scheme, that steps have had to be taken to erect a special building to accommodate this work at the Mattock Lane Health Centre. This extension will, of course, serve for other purposes, but its erection was called for primarily owing to the need for further accommodation for orthopaedic treatment.

(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. There is also the Hanwell Cottage Hospital, which has twelve beds.

The West Middlesex Hospital, situated at Isleworth, is the Poor Law Hospital for the area of which Ealing forms a part. The control of this hospital was transferred on the 1st April, 1930, under the Local Government Act, 1929, from the Brentford Board of Guardians to the Middlesex County Council.

AMBULANCE FACILITIES.

(1) *For Cases of Infectious Disease.*—The Chiswick and Ealing Hospitals Committee maintain a motor ambulance for the purpose of removing cases of infectious disease to the Hospital from their homes in the Borough of Ealing and in the Urban District of Brentford and Chiswick.

(2) *For Non-Infectious and Accident Cases.*—The Town Council possesses two motor ambulances for the conveyance of accident and non-infectious cases of illness to hospitals and nursing homes. Journeys in the Borough are made free of charge, while those outside are charged a fee of 7s. 6d. to £1 1s. 0d., depending on the distance the Hospital is from Ealing.

During the year the ambulances were called out on 1,600 occasions, 530 calls being for cases resulting from accidents and 1,070 for cases of illness. The number of journeys made outside the Borough was 215 and the total number of miles travelled was 7,988 miles. The service is available at all times of the day and night.

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 ...	Islips Manor, Northolt.	Ealing Town Council
Orthopaedic Clinic ...	13, Mattock Lane, Ealing.	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

To meet the growing needs of Northolt a new Health Centre has been established at Islips Manor, where by the conversion of the house, which was purchased with twelve acres of land for recreational purposes, an admirable Centre for Maternity and Child Welfare and School Medical purposes has been arranged. A new Centre, to be called the Ravenor Park Health Centre, is being erected at Greenford just adjoining the present temporary Centre at Aberdeen House. It is hoped that this Centre, which will serve the Greenford area, will be opened in September.

PROFESSIONAL NURSING IN THE HOME.

(1) *General*.—As noted in previous reports the Greater Ealing Nursing Association maintains five nurses to supply the needs of sick nursing in the homes of the people. Northolt, with which communication with the rest of the district is difficult owing to lack of sufficient roadways, has a Nursing Association of its own. When, however, inter-communication is made practicable it is hoped that the Northolt Association will join up with the Greater Ealing Nursing Association so as to form one body serving the needs of the whole Borough. It will then be possible to secure co-operation between the nurses and greater efficiency of service.

The Nursing Association obtains its funds mainly through voluntary subscriptions, though every effort is being made to run it on Provident lines as a result of which the people, by making monthly or annual contributions, will be able to call for the services of the nurses when needed.

(2) *Infectious Diseases*.—The Ealing Town Council makes a contribution of £150 towards the Greater Ealing Nursing Association and one of £25 towards the Northolt Nursing Association, in return for which nursing assistance is given to children under five years of age suffering from ophthalmia neonatorum, measles, whooping cough, poliomyelitis and diarrhoea. The nurses are also supposed to render a certain amount of assistance at the Health Centres in the weighing of children attending there. By their attendance at the Centres a certain measure of co-operation is obtained between the Nurses and the Health Visitors, which is so essential for the work of both branches of nursing work.

(3) *Midwives*.—In the Borough there are in practice 32 midwives, of whom seven are engaged at the Maternity Hospital. The Town Council in its scheme of maternity welfare does not employ any particular midwife when supplying maternity aid for expectant mothers in necessitous circumstances. A midwife living near to the patient's residence is engaged and paid by the Town 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 some degree of confidence.

(4) *Maternity and Nursing Homes.*—As recorded in last year's annual report the Ealing Town Council, under Section 9 (2) of the Nursing Homes Registration Act, made application to the Middlesex County Council to delegate their powers to the Ealing Town Council under this Act. As this application was not acceded to, a Representation was made in conjunction with other district councils in the County to the Minister of Health to direct the Middlesex County Council to delegate to the Ealing Town Council the powers and duties under the Act and at the same time requesting him to designate the Ealing Town Council as the Supervising Authority under the Midwives Act, as provided for in the Local Government Act, 1929.

As a result of this Representation the Minister of Health has recently informed the Town Council that he is proceeding to make the necessary Order under Section 62 of the Local Government Act 1929, directing that the Ealing Town Council shall become the Local Supervising Authority under the Midwives Act, 1902 and 1926, for the Borough in place of the County Council and that he has given a direction to the County Council to delegate to the Town Council from the 1st October, 1930, their powers under the Nursing Homes Registration Act, 1927. Through the powers contained in this Act the Town Council will be able to secure complete co-ordination of all work of maternity and child welfare in the district and to have a certain amount of supervisory control over nursing homes, where a large number of births take place.

(5) *Maternal Mortality.*—As stated in the previous report, all maternal deaths are investigated by the Assistant Medical Officer for maternity and child welfare purposes. The Town Council are rendering whatever assistance they can in the efforts to reduce maternal mortality. They have established ante-natal clinics and they have supported the establishment of the Maternity Hospital, both of which have as their aim the reduction of maternal and infant deaths; and their application to be made the Supervising Authority under the Midwives Acts and to have the supervision of Nursing Homes under their control has been made with the same object in view.

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 : —

New Streets and Buildings, 23rd July, 1925.

In January, 1929, Byelaws were made by the Town Council with the approval of the Minister of Health, making certain amendments in the Byelaws with respect to nuisances, in the Byelaws with regard to tents, vans and sheds, repealing certain Byelaws and extending the Byelaws mentioned below to the whole of the extended Borough :—

(1) Prevention of nuisance 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).

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.

The provision of means of escape in case of fire in certain factories and workshops, 22nd March, 1922.

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.

On several occasions complaints have been received from Greenford and Northolt regarding the condition of the water, but these appeared to have been due to the laying of new mains and to the making of new connections. The bad condition of the water was in each instance of a temporary matter.

RIVERS AND STREAMS.—There has been no occasion during the year to complain of the pollution of any of the streams in the district.

DRAINAGE AND SEWERAGE.—As was remarked in the Annual Report for 1928 the houses in the Borough, excepting some in the most northerly part of the Mount Park Ward and in the Greenford and Northolt Wards are supplied with water-closets and are drained into the main sewerage system. During the year a large amount of work was carried out in improving the drainage of houses in the Northolt and Greenford Wards and in connecting the drains with the main sewerage system. Very few houses in the Greenford Ward now remain to be connected up with the Council's sewers. In the Northolt Ward, when sufficient sewers have been constructed, further improvements will be effected.

SEWAGE DISPOSAL.—There are five separate sewage works in the Borough, situated at North Ealing, South Ealing, Hanwell, Greenford and Northolt. It was remarked in the previous Annual Report that complaints had been received regarding the smell arising from the Hanwell Sewage Works, but since the Sludge Pressing Plant was installed there during the early part of the year there have been no further complaints.

Complaints have continued to be received regarding the smell from the Greenford Works, although they have not been so numerous or so insistent as in previous years. The treatment by means of chlorine has kept the production of sulphuretted hydrogen down to a minimum and certainly has improved matters, although the continued overloading will prevent these works, until they are extended, from being conducted in a way which will reduce smell to a minimum. The proposed extension should go a considerable way in effecting improved conditions there.

CLOSET ACCOMMODATION.—Excepting in the undeveloped portions of the Borough, namely, in the northern portion of the Mount Park Ward and in 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, at the end of 1929. Alongside the totals are indicated the numbers at the end of the previous year. The reduction in the numbers show the large amount of good sanitary work carried out at Greenford and especially at Northolt during the year under review :—

Ward		Cesspools	Water Closets	Houses within 100 feet of		No. of Houses
				Pail Closets	Sewer	
Northolt	...	85	114	54	11	135
Greenford	...	27	34	21	12	42
Hanwell North	...	2	2	—	—	2
Mount Park and Drayton		14	17	16	—	33
Total at end of 1929		128	167	91	23	212
Total at end of 1928		223	279	103	78	325

SCAVENGING.—The whole of the Borough is now scavenged directly by the Council, the house refuse being transported to the two destructors, at South Ealing and at Hanwell. The Hanwell destructor, since its extension, has been able to deal adequately with the whole of the work which it is called upon to do. The

South Ealing Works have been taxed to their uttermost in recent years and additions are at present being carried out by which the works will be extended by six new cells.

SMOKE ABATEMENT.—There are few factories in the Borough and therefore it is seldom that action is called for in abating nuisance from smoke.

During the year representations were made regarding two factories, one for emitting smoke and the other smoke and dust. In the former case improvements in stoking were effected and in the latter the factory was removed to another district.

The Town Council are at present, with the approval of the Minister of Health, making a Byelaw under Section 2 of the Public Health (Smoke Abatement) Act, 1926, by which the emission of black smoke for a period of two minutes in the aggregate within any continuous period of thirty minutes from any one chimney in a building other than a private dwelling house shall be presumed to be a nuisance. From the operation of this Byelaw it is proposed to exclude glass works, which, on account of the gas-producer plants used in connexion with the smelting process, are unable to comply with such a Byelaw at all times.

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 is only one class of offensive trade carried on in the Borough, namely, fish-frying, which is conducted in 16 separate premises. The trade of tallow melting was carried on in premises in the Greenford Ward, but this trade has been discontinued.

SCHOOLS.—At least once a year the Sanitary Inspectors make a routine visit to all public elementary and private schools and inspect the sanitary conveniences and drainage and on their reports steps are taken to have remedied any defects which have been found.

In the control of non-notifiable infectious diseases the routine weekly reports of the absentees furnished by the head-teachers at the end of each week prove invaluable to the public health department. They not only enable the Health Visitors to visit the homes affected, but they give a general idea of the prevalence of these diseases at any particular time.

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	...	...	888
Number of Nuisances observed by Inspectors	...	..	194
Number of Premises inspected in connection with Infectious Disease	...	...	494
Number of Premises visited by Periodical Inspection (Cowsheds, Dairies, Slaughterhouses, Workshops, Etc.)	...		1,085
Number of Houses inspected under House-to-House Survey			893
Food Inspections	...	...	2,218
Total number of Re-inspections	...	...	9,408
Canal Boats inspected	...	...	2
Other Inspections	...	...	1,143
Total number of Inspections and Re-inspections	...	...	16,325
Number of Intimation Notices given	...	...	633
Number of other Letters written	...	...	340
Number of Statutory Notices served	...	...	126
Proceedings before Magistrates	...	...	1

MILK AND DAIRIES ACT, ETC.

Number of Cowsheds on Register	...	...	10
Number of Inspections made of Cowsheds	...	...	10
Contraventions of Act or Orders	...	...	1
Number of Retail Purveyors of Milk on Register	...		82
Number of Inspections of Retail Purveyors' Premises	...		125
Contraventions of Act or Orders	...	...	5
Proceedings before Magistrates	...	...	—

SLAUGHTERHOUSES.

Number of Registered or Licensed Slaughterhouses	...		4
Number of Inspections made	...	...	484
Contraventions of Regulations	...	...	2
Proceedings before Magistrates	...	...	—

FACORIES AND WORKSHOPS.

Registered Workshops	...	...	164
Factories	...	...	59

Number of Inspections of Factories and Workshops and Workplaces	215
Number of Defects concerning which Notices were sent ...	28
Proceedings before Magistrates	—

OFFENSIVE TRADES.

Fried Fish Shops	16
Other Offensive Trades	—
Number of Inspections	68
Contraventions	—

DISINFECTION.

Rooms Disinfected by Spray :—	
(a) Ordinary Infectious Disease	466
(b) Tuberculosis	92
Rooms stripped and cleansed	11
Articles disinfected by steam at Disinfector :—	
(a) Ordinary Infectious Disease	852
(b) Tuberculosis	332
Articles voluntarily destroyed	147

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

Water Closets repaired or supplied with water or otherwise improved	300
Drains cleared and cleansed	187
Defects in Drains repaired	86
Drains reconstructed	114
Dust-bins provided	208
Overcrowding remedied	1
Accumulations of refuse removed	55
Nuisance from fowls and other animals abated	7
Damp-proof courses inserted in walls	41
Ventilation under floors provided	14
Other forms of dampness remedied	73
Yards paved and repaired	63
Floors repaired	44
Roofs, Gutters and Rain Water Pipes repaired	275
New Soil and Ventilating Pipes provided	79
Sinks and Waste-pipes repaired or renewed	119

Draw Taps fixed to main supply	...	...	...	...	23
Dirty Walls and Ceilings stripped and cleansed	...	...	...	...	759
Other Defects or Nuisances remedied	...	...	...	...	420
Cisterns cleansed and covered	...	...	...	...	7
Houses connected to Sewer	...	...	...	...	110
Water Supply re-instated	...	...	...	...	53

Legal proceedings were taken in the following case, with the result as indicated :—

Non-Compliance with Statutory Notice.

Section 94, Public Health Act, 1875.

Premises in such a state as to be a nuisance or injurious to health.

The Summons was heard at the Ealing Police Court on the 23rd July, 1929, when the case was adjourned for seven days to give the owner a further opportunity to carry out the work required. At the adjourned hearing on the 31st July, 1930, the case was dismissed on payment of 20s. costs as the notice had in the meantime been complied with.

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)	32	7	—
Workshops ... (Including Workshop Laundries)	164	14	—
Workplaces ... (Other than Outworkers' premises)	19	—	—
Total ...	215	21	—

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	8	8	—	—
Want of Ventilation	—	—	—	—
Overcrowding	—	—	—	—
Want of drainage of floors	—	—	—	—
Other Nuisances	7	7	—	—
Sanitary { insufficient	—	—	—	—
accommo- { unsuitable or defective	7	7	—	—
dation { not separate for sexes	—	—	—	—
<i>Offences under the Factory and Workshop Acts</i>				
Illegal occupation of underground bake- house (s 101)	—	—	—	—
Other Offences	6	6	—	—
(Excluding offences relating to outwork and offences under the Sections men- tioned in the Schedule to the Ministry of Health (Factories and Workshops Transfer of Powers) Order, 1921.)				
Total ...	28	28	—	—

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	1,345
(b) As part of a Municipal Housing Scheme	204

1.—UNFIT DWELLING HOUSES.

Inspection.

(1) Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts)	1,826
(2) Number of dwelling houses which were inspected and recorded under the Housing (Consolidated) Regulations, 1925	893
(3) Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	10
(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	1,090

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	1,028
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3.—ACTION UNDER STATUTORY POWERS.

A.—Proceedings under Section 3 of the Housing Act, 1925 :—

(1) Number of dwelling houses in respect of which notices were served requiring repairs	4
(2) Number of dwelling houses which were rendered fit :—	
(a) By Owners... ..	—
(b) By Local Authority in default of Owners	—
(3) Number of dwelling houses in respect of which Closing Orders became operative in pursuance of declarations by Owners of intention to close	4

B.—Proceedings under the Public Health Acts :—

(1) Number of dwelling houses in respect of which Notices were served requiring defects to be remedied	87
(2) Number of dwelling houses in which defects were remedied :—	
(a) By Owners or Occupiers	86
(b) By Local Authority in default of Owners	—

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

(1) Number of representations made with a view to the making of Closing Orders	6
(2) Number of dwelling houses in respect of which Closing Orders were made	6
(3) Number of dwelling houses in respect of which Closing Orders were determined, the dwelling houses having been rendered fit	—
(4) Number of dwelling houses in respect of which Demolition Orders were made	9
(5) Number of dwelling houses demolished in pursuance of Demolition Order	8
(6) Number of dwelling houses demolished without Orders being made (Orders for Closure previously made)	1

An appeal was made to the Minister of Health against the Demolition Order made by the Town Council with respect to a house previously closed by an Order under Section 11 of the Housing Act, 1925. The owner stated that he desired to use the premises as a store for agricultural produce. The Council opposed the appeal and a public enquiry was held on June 18th, 1929, by an Inspector of the Ministry of Health.

The Minister of Health as a result of this enquiry deferred giving his decision for three months in order to allow the owner to carry out the repairs necessary to make the house fit for use as a store. As the owner did not carry out these repairs within the three months the Minister of Health by an Order of the 16th December, 1929, dismissed the appeal of the owner and confirmed the Demolition Order made by the Council and ordered the owner to pay the costs of the enquiry into the appeal.

The house was demolished by the owner.

After the appeal was heard and before the Minister announced his decision proceedings had to be taken against the owner under Sections 91—94 of the Public Health Act for allowing the premises to get into an insanitary condition through their improper use by others. The magistrates ordered the owner to carry out certain works to prevent the premises from being improperly used and so becoming a nuisance or injurious to health. The works were carried out within the time indicated, the owner having to pay the costs of the summons.

INSPECTION AND SUPERVISION OF FOOD.

MILK SUPPLY.—There are 10 cowkeepers on the Register as producers of milk. As one would naturally expect in a district where building operations are proceeding rapidly, the number of dairy farms is gradually decreasing. Two farms have been sold for development as building estates and two others have been offered for sale, so that in a few years one may expect the complete disappearance of cowsheds from the Borough.

At the end of the year there were 82 retail purveyors of milk registered. Nineteen 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 two purveyors of milk opened new premises for the purpose of selling milk, there were eight new purveyors of milk registered who had purchased premises from others who were on the register and two with premises in another district were registered to retail milk within the Borough. Four purveyors of milk gave up business during the year and were removed from the register.

Improvements continue to be made in the methods of distributing milk in retailer's premises. No milk is permitted to be sold from general stores unless the milk is sold in sealed bottles and kept in a cool place. Dairy premises have been greatly improved and now all except two premises have a steam boiler so that steam is available for sterilising milk cans and other receptacles. If bottling is carried out proper means of sterilising these bottles has been insisted upon, chiefly in the way of providing a steam sterilising chest. All dairy premises except six have up to the present been supplied with a steam chest.

Milk (Special Designations) Order, 1923.—Under this Order 80 licences were granted during the year, 29 for the sale of Certified Milk, 27 for Grade A (Tuberculin Tested) Milk, and 24 for Pasteurised Milk.

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

Eight samples of ordinary unclassified milk were examined for general bacterial content. Four of these were found to have over 500,000 bacteria per cubic centimetre, the maximum being 2,240,000 per cubic centimetre. The attention of the vendors was drawn to the condition of the milk with the result that on the next examination a considerable improvement was effected.

Eight samples of ordinary milk were examined by biological test at the Lister Institute for the presence of tubercle bacilli, but in no case were these bacilli found.

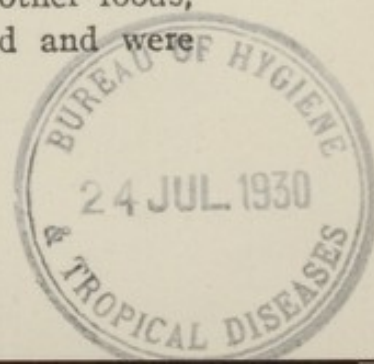
MEAT, ETC.—In the Borough no meat is sold from stalls or vehicles. There was one infringement of the Public Health (Meat) Regulations, a butcher failing to give notice of the slaughter of an animal. This was reported to the Council with the result that a letter was sent to the offender warning him that proceedings would be taken if the offence was repeated.

There are four private slaughterhouses, but in two of them there is very little slaughtering. In twelve months there were slaughtered in these private slaughterhouses 244 cattle, 571 sheep, 813 pigs and 108 calves. All these animals were stunned by means of a humane implement.

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	...	...	...	...	2,246 lbs.
Pork	...	...	...	...	276 lbs.
Veal	...	...	...	...	48 lbs.
Fish	...	...	...	...	230 lbs.
Walnuts	...	...	...	...	42 lbs.
Groceries (Assorted)	...	...	...	...	440 lbs.
Sponge Mixture	...	...	...	...	72 pkts.
Blanc Mange Powders	...	...	...	...	108 pkts.
Sauce	...	...	...	...	66 bottles

During the inspection of a provision dealer's premises a quantity of bacon (71 lbs.) was found, which on examination proved to be unsound and unfit for human food. The bacon was seized and taken before a Justice who condemned it and ordered it to be destroyed. The seizure was reported to the Council with the result that a letter was sent to the person responsible pointing out the seriousness of the offence and warning him that a repetition of the offence would result in a prosecution. In this case the Council were convinced that the unsound bacon was retained on the premises by carelessness and not with the intention of its being sold.

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS DISEASES.

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

TABLE V.

Disease	1919	1920	1921	1922	1923	1924	1925	1926	1927	1928	1929
Smallpox ...	—	—	—	—	—	—	—	—	—	1	1
Diphtheria ...	46	56	186	282	56	61	40	72	53	68	90
Scarlet Fever ...	201	171	665	487	142	123	107	156	136	313	231
Enteric Fever (including Paratyphoid)	5	6	8	3	5	9	5	4	14	12	1
Puerperal Fever ...	3	5	9	3	9	3	6	1	6	2	2
Puerperal Pyrexia ...	—	—	—	—	—	—	—	3	15	16	13
Pneumonia :											
Primary ...	30	38	21	33	32	47	57	47	66	73	100
Influenzal ...	33	27	17	22	7	27	22	17	38	13	59
Acute Poliomyelitis ...	—	—	1	—	—	3	—	1	—	—	1
Cerebro-Spinal Fever ...	3	4	1	—	1	—	—	—	2	—	1
Malaria ...	40	27	3	4	2	—	2	5	6	4	4
Dysentery ...	5	2	1	1	—	—	—	—	—	1	—
Erysipelas ...	22	30	27	22	17	25	17	15	18	28	24
Encephalitis Lethargica ...	3	1	1	3	1	6	4	2	6	3	3
Tuberculosis :—											
(a) Pulmonary ...	83	63	80	69	92	74	90	93	89	99	109
(b) Non-Pulmonary ...	25	17	23	16	26	31	25	21	16	24	27
Ophthalmia Neonatorum	4	8	13	10	3	3	6	5	4	8	9
Total ...	503	455	1036	955	393	412	381	442	469	665	675

TABLE VI.

				Diphtheria.	Scarlet Fever.
January	...	...	...	6	31
February	...	...	...	7	9
March	...	...	...	9	38
April	...	...	...	8	25
May	...	...	...	6	12
June	...	...	...	6	9
July	...	...	...	4	9
August	...	...	...	1	8
September	...	...	...	15	16
October	...	...	...	7	27
November	...	...	...	7	22
December	...	...	...	14	25
Total				90	231

DIPHTHERIA.—Diphtheria showed an increase of 22 cases over the previous year, and the number, 90, was the highest since 1922. 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 September and December. Apart from these two months the number of cases was fairly well distributed throughout the year. For a town of the population of Ealing the number of cases of diphtheria is small.

During the year there were eight deaths from diphtheria, giving a death-rate of 0.08 per 1,000 population and a mortality rate of 8.8 per cent. of cases notified. The death-rate is the same as that for England and Wales and that for London. It is a little less than that for the Great Towns which is 0.09.

The importance of the early administration of anti-toxin has been discussed in successive Annual Reports. To facilitate the early use of anti-toxin, a supply is available for use by doctors at any time of the day or night at the Town Hall, Ealing, or any time

during the day at Cherington House, Hanwell. This anti-toxin is provided free of charge when the parents or relatives of the patient are not able to afford to pay for it. During the year 388,000 units of anti-toxin were supplied for administration in this way.

SCARLET FEVER.—The number of cases of scarlet fever was less than in the previous year, although it was more than in the years 1923 to 1927. The months in which the prevalence was greatest were January and March, when 31 and 38 cases respectively, were notified. It will be seen from Table VI that the lowest number of cases occurred during February, June, July and August. No Ward of the Borough suffered particularly during the year, the cases being more or less evenly distributed throughout the Borough. The disease on the whole was mild in character, but three deaths occurred. In the three previous years there were no deaths recorded. The death-rate from scarlet fever for Ealing during the year was 0.03 per 1,000 of population. This rate is a little more than that for England and Wales and for London, the rates for each of which was 0.02 per 1,000 of population.

ENTERIC OR TYPHOID FEVER.—There was only one case notified under this group of diseases, namely, a case of typhoid fever, compared with twelve cases in the previous year. The case was that of a man 40 years of age who developed the disease on his return from holiday. He recovered from his attack so that no death had to be recorded.

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 Council at the time of its occurrence. There were fortunately no secondary cases. The Report submitted to the Council was as follows :—

REPORT TO THE PUBLIC HEALTH COMMITTEE.

Case of Smallpox.

I have to report that a case of smallpox has occurred in the Borough since the last meeting of the Public Health Committee.

This was a young man, W.R.S., 21 years of age, whose home is at Drayton Green, West Ealing, but who ordinarily "lives in" at his place of employment in the City of London where he is a warehouseman.

He developed at his place of employment what was supposed to be a "chill" on Tuesday, the 30th April. He had a rise in temperature, headache and backache and was kept in bed and attended there by a doctor. His condition had so much improved, although he still suffered

from marked weakness of his legs, that he was allowed to travel to his home at Drayton Green, Ealing, on the 4th May. On the same evening spots began to appear and there was puffiness under the eyes. The next day, Sunday, the 5th May, spots appeared on various parts of the body. He remained at home until Sunday, the 12th May, when he visited some friends in Woodfield Avenue, and on the following day Monday the 13th May, he returned to his work in the City. He was at work all day and at 6.30 in the evening he saw Dr. Adams, the partner of the doctor who saw him previously. The patient came to his home in Ealing on that evening and next morning the doctor telephoned informing me of the case and the nature of the rash. I immediately visited the patient and formed the opinion that he was suffering from smallpox.

I had him removed to the M.A.B. Hospital at Dartford and gave particulars of the case by telephone to Dr. Willoughby, the Medical Officer of Health to the City of London, so that he could deal with the contacts there.

All the contacts in Ealing were ascertained.

On the same day full particulars of the case and information regarding the contacts were sent to the Minister of Health, the Medical Officer to the City of London, the Medical Officer to the County of Middlesex and other Medical Officers of Health in whose districts contacts resided and who had already been informed by telephone.

The Clerk to the Board of Guardians and the Public Vaccinators in Ealing were also informed of the occurrence of a case of smallpox in Ealing so that steps could be taken to meet requests for vaccination.

All the contacts in Ealing have been kept under supervision since the date of the notification of the case but no case of the disease and no suspicious illness has been met with. It may therefore be assumed that the danger is over and that no further case will occur as a result of infection from this case.

THOMAS ORR,
Medical Officer of Health.

28th May, 1929.

CEREBRO-SPINAL FEVER.—One case of cerebro-spinal fever was notified during the year. This was a child, five years of age, who ultimately recovered. Two deaths, however, occurred from cerebro-spinal fever in children who were not notified in the district, but whose deaths were assigned to the district. One was a boy, seven months old, who died in the King Edward Memorial Hospital, and the other was a girl, 17 months old, who died in the West Middlesex Hospital.

ENCEPHALITIS LETHARGICA.—There were three cases of encephalitis lethargica notified. Two were women, 54 and 60 years of age respectively, and the third was a boy of 17 years. There were two deaths from the disease.

MALARIA AND DYSENTERY.—There were four cases of malaria notified, all of whom developed the disease abroad. There were no cases of dysentery.

PRIMARY AND INFLUENZAL PNEUMONIA.—During the year there were notified 100 cases of primary pneumonia and 59 cases of influenzal pneumonia. The number was greater than in any of the previous ten years during which these diseases have been notifiable and was accounted for by an epidemic of influenza, particularly in February and March, 45 cases of primary pneumonia and 44 cases of influenzal pneumonia being notified in these two months of the year.

PUERPERAL FEVER AND PYREXIA.—There were 13 cases of puerperal pyrexia and two cases of puerperal fever notified during the year. There were no deaths from these conditions. One of the latter cases occurred in a large London Hospital and the other in the Chiswick and Ealing Maternity Hospital. Both of the cases were abnormal on admission to hospital and a septic condition after confinement was not unexpected.

WHOOPIING COUGH AND MEASLES.—Information regarding the prevalence of these two non-notifiable infectious diseases, it has already been mentioned, is obtained from the weekly return of absentees made by the head-teachers to the Medical Officer of Health. There were 383 absentees from school owing to measles and 365 owing to whooping cough during the year. There were no deaths from measles, but there were 17 deaths from whooping cough. The death-rate from the latter disease for the year was 0.16 per 1,000 of population. This rate was slightly higher than that for England and Wales, which was 0.15 per 1,000 of population, but lower than that for London, which was 0.26 per 1,000 of population. The death-rate from measles, which was nil in Ealing, was 0.08 for England and Wales and 0.04 for London.

TABLE VII.

Cases of Infectious Disease notified during the year 1929.

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	4	3	6	45	13	4	8	4	1	—	90	86	
Scarlet Fever	—	3	7	13	16	110	29	27	20	3	3	—	231	198	
Enteric Fever (including Paratyphoid)	—	—	—	—	—	—	—	—	—	1	—	—	1	1	
Puerperal Fever	—	—	—	—	—	—	—	—	2	—	—	—	2	2	
Puerperal Pyrexia	—	—	—	—	—	—	—	1	10	1	1	—	13	9	
Pneumonia: Primary	4	3	3	4	3	8	2	6	20	18	15	14	100	23	
Influenzal	—	—	—	1	—	2	4	2	5	7	19	19	59	9	
Acute Poliomyelitis	—	—	—	—	1	—	—	—	—	—	—	—	1	—	
Cerebro-Spinal Fever	—	—	—	—	—	1	—	—	—	—	—	—	1	1	
Malaria	—	—	—	—	—	—	—	—	1	3	—	—	4	—	
Dysentery	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Erysipelas	—	—	—	—	—	—	—	—	5	3	13	3	24	3	
Encephalitis Lethargica	—	—	—	—	—	—	—	1	—	—	2	—	3	1	
Tuberculosis:															
(a) Pulmonary Male	—	—	—	—	1	1	1	7	26	10	15	—	61	—	
Female	—	—	—	—	—	—	1	6	24	9	7	1	48	—	
(b) Non-Pulmonary Male	—	—	1	—	2	4	3	3	2	—	—	—	15	—	
Female	—	—	—	—	1	1	—	3	7	—	—	—	12	—	
Ophthalmia Neonatorum	9	—	—	—	—	—	—	—	—	—	—	—	9	—	
Total	14	7	15	21	30	172	53	60	131	59	76	37	675	334	

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	1	—	—	5	1	—	—	—	—	—	8
Scarlet Fever	—	—	—	—	—	1	1	—	—	1	—	—	3
Enteric Fever (including Paratyphoid)	—	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal Sepsis	—	—	—	—	—	—	—	—	—	—	—	—	—
Pneumonia : Primary	4	7	—	—	2	2	—	—	4	5	13	14	51
Influenzal	—	1	—	—	—	1	—	—	2	3	9	19	35
Acute Poliomyelitis	—	—	—	—	—	—	—	—	—	—	—	—	—
Cerebro-Spinal Fever	2	—	—	—	—	—	—	—	—	—	—	—	2
Malaria	—	—	—	—	—	—	—	—	—	—	—	—	—
Dysentery	—	—	—	—	—	—	—	—	—	—	—	—	—
Erysipelas	—	—	—	—	—	—	—	—	—	—	—	1	1
Encephalitis Lethargica	—	—	—	—	—	—	—	—	1	1	—	—	2
Tuberculosis :													
(a) Pulmonary Male	—	—	—	—	1	—	—	—	15	13	15	2	46
Female	—	—	—	—	—	—	1	3	21	8	7	1	41
(b) Non-Pulmonary Male	1	—	—	1	—	—	—	—	1	2	1	1	7
Female	—	1	—	—	—	—	2	1	2	—	—	—	6
Ophthalmia Neonatorum	—	—	—	—	—	—	—	—	—	—	—	—	—
TOTALS	7	10	1	1	3	9	5	4	46	33	45	38	202

OPHTHALMIA NEONATORUM.—There were nine cases of ophthalmia neonatorum notified during the year. The following Table gives a summary of the cases and the results of treatment :—

Number of Cases Notified	No. Treated		Vision un-impaired	Vision im-paired	Total Blind-ness	Deaths
	At Home	In Hospital				
9	8	1	9	—	—	—

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 87 deaths from pulmonary and 13 deaths from non-pulmonary tuberculosis, which give death-rates of 0.88 and 0.12 respectively or a total tuberculosis death-rate of 0.96 per 1,000 of population. There were 11 deaths from pulmonary tuberculosis in persons who had not been previously notified : 7 were of persons dying outside the district and four were of persons attended by local doctors. Seven deaths from non-pulmonary tuberculosis were of persons who were not notified : three were of persons dying outside the district and four of persons attended by local doctors. The doctors were communicated with in all cases of failure to notify.

TABLE IX.
TUBERCULOSIS.

Age Periods	New Cases				Deaths			
	Pulmonary		NonPulm'y		Pulmonary		Non-Pulm'y	
	Male	F'male	Male	F'male	Male	F'male	Male	F'male
0—1	—	—	—	—	—	—	1	—
1—5	1	—	3	1	1	—	1	1
5—10	1	—	4	1	—	—	—	—
10—15	1	1	3	—	—	1	—	2
15—20	7	6	3	3	—	3	—	1
20—25	9	15	1	2	4	8	1	1
25—35	17	9	1	5	11	13	—	1
35—45	10	9	—	—	13	8	2	—
45—55	10	5	—	—	7	5	1	—
55—65	5	2	—	—	8	2	—	—
65 upwards	—	1	—	—	2	1	1	—
Total ...	61	48	15	12	46	41	7	6

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	...	...	...	81
(b) Other forms of Tuberculosis	...	...	...	15

Number of persons in Institutions :—

(a) Tuberculosis of Lungs	...	...	...	36
(b) Other forms of Tuberculosis	...	...	...	10

Number of persons kept under treatment at the
County Council Dispensary, Ealing 106

Number sent to Sanatoria 26

Number sent to Hospital 3

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	...	41	650	691
	Isolation Hospital	...	70	1,595	1,665
Tuberculosis :	From the Borough	...	37	279	316
Miscellaneous :	From the Borough	...	18	26	44
	Isolation Hospital	...	2	3	5
Total			...	168	2,553
			...		2,721

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 ...	92
(b) Other Infectious Disease ...	466

Articles disinfected in Steam Disinfecter :—

(a) Tuberculosis ...	332
(b) Other Infectious Disease ...	852

In connection with the disinfection of homes after infectious disease 147 articles of clothing were destroyed.

To render disinfection more thorough, 11 rooms were stripped and cleansed by the owners after notices were served on account of dirty condition.

MATERNITY AND CHILD WELFARE.

There were no changes in the general scheme of Maternity and Child Welfare during the year. Steps were taken to convert Islips Manor into a Health Centre to serve the needs of the Northolt Ward and this Centre was recently opened. It is equipped in every way similar to the other Health Centres to deal with all cases

coming within the Maternity and Child Welfare and School Medical schemes. The new Health Centre, which is to serve the needs of the Greenford Ward, is in course of construction and should be available during the current year.

DAY NURSERY.—In view of the small numbers of children seeking admission to the Day Nursery and the high relative cost of each child per day, the Maternity and Child Welfare Committee called for a report on the subject. The report submitted was as follows :—

REPORT TO THE MATERNITY AND CHILD WELFARE COMMITTEE.

Day Nursery.

I beg to submit, as requested, a report on the attendances at, and the cost of, the Day Nursery.

The Day Nursery was opened by the Hanwell Urban District Council during the period of the Great War and was taken over by the Ealing Town Council when the Hanwell District was included within the Borough on the 1st October, 1926.

Since the war, as one would expect, the use made of the Day Nursery has declined and during the last six months, March to September, the number of children in attendance has averaged twelve a day, whereas the accommodation is from 20 to 24 children.

The costs of the Day Nursery for the last five years and for the first half of the current year are as follows :—

Period	Gross Cost	Income	Net Cost	Total Attendances	Average Cost for each Attendance	
					Gross	Net
	£	£	£		s. d.	s. d.
1923-24	743	225	518	4,262	3 6	2 5
1924-25	658	163	495	*2,450	5 5	4 1
1925-26	725	248	477	3,836	3 10	2 6
1926-27	796	222	574	3,877	4 1	3 0
1927-28	732	137	595	3,628	4 1	3 4
1928-29	691	129	562	3,487	4 0	3 3
1929 (six months, March to September)	338	46	292	1,234	5 6	4 9

*Closed for six weeks on account of staff difficulties.

It will be seen from the table that the gross cost per attendance has varied from 3s. 6d. in the year 1923-24 to 5s. 6d. in the first six months of the current year, and the net cost from 2s. 5d. in the year 1923-24 to 4s. 9d. in the first six months of this year. The average gross cost for other Day Nurseries throughout the country, I understand, is 2s. 10d. with a net cost of about 2s. 1d.

In fairness to the Ealing Day Nursery, however, it must be pointed out that no more inconvenient house could have been used for the purpose. The building consists of four floors, the two main rooms, in which the children are kept, being small, one on the ground floor and the other on the first floor. The kitchen and the bathing-room are in the basement, and the older children have to go down a narrow staircase to get out to the garden. All these features add to the difficulties and therefore to the cost of management. In fact, these difficulties make the retention of a good staff impossible. It is difficult to keep servants in a dwelling house with a basement but it is still more difficult to keep them in a Day Nursery with a basement.

After the Day Nursery came under the control of the Ealing Town Council a resolution was passed on the 26th October, 1926, which limited the children admitted. The resolution is as follows :—

Resolved : That the children eligible for admission to the Day Nursery be those whose mothers have to go out to work on account of being widowed or unmarried or having a sick or unemployed husband.

As can be seen from the number of attendances this resolution had little, if any, effect in reducing the attendances for the attendances had in fact been on the decline before this. The attendances in the year 1926-27 were higher than in the previous year but in 1927-28 there was a decline of 259 compared with the previous year, and in 1928-29 there was a further decline of 141 compared with the year 1927-28. The greatest decline, however, has been in the first six months of the current year during which there were 1,234 attendances compared with 1,679 in the corresponding six months of the previous year.

It is difficult to explain this reduction. The resolution of the Council has not been strictly enforced and in several instances where the fathers have been in employment, but at a low wage, the children have been admitted to the Day Nursery.

The reduction in the numbers may be due to the fact that the mothers are going out less to work and therefore do not require to send their children to the Day Nursery. Here it may be stated that of the fourteen mothers sending their children to the Centre at the end of October, four had to work because their husbands were earning low wages, one because her husband had deserted her, one because her husband was ill with tuberculosis, two because their husbands were unemployed, one because she was a widow and five because they were unmarried.

We have now reached an extraordinary state of affairs. We are maintaining children at the Day Nursery at a cost of 5s. 6d. per day in order to enable the mothers to go out and earn 4s. to 4s. 6d. a day, of which they pay 9d. a day towards the maintenance of their children while they are at work.

There can be no doubt that as a rule the best nurse is the mother and the best place to rear the child is in the mother's home. A grant to the mother to enable her to look after her child at home would be a better arrangement but at present there is no legal power by which this grant can be made. The problem is a very difficult one and I expect the difficulty accounts for the fact that of the 98 Day Nurseries recognised by the Ministry of Health only 19 are maintained by Local Authorities.

What is to be done ?

The first suggestion which someone may put forward is to close the Day Nursery and to leave the mothers to find other mothers to look after their children and so enable them to go out to work. Suitable women to look after children are difficult to obtain and, if obtainable, would not be prepared to care for the children at less than 2s. per day which the mothers cannot afford to pay. It may be suggested that the Council might make a grant towards the payment but the consent of the Ministry to such a proposal, I fear, would not be forthcoming.

The second suggestion which might be put forward is that a voluntary society might take over the responsibility for caring for these children. Any such suggestion I am sure would not meet with success. In Ealing some years ago we had experience of a Day Nursery managed by a voluntary society who found its maintenance so difficult that the Town Council were asked to take it over, which they did. It was ultimately closed.

The third suggestion is that which was put forward at the last meeting of the Committee and that is to open the doors wider and to admit children up to the number of 20 to 24 at my discretion, when these children are in poor circumstances though their fathers are employed. This would still further increase the total cost but the cost per attendance would be less. If 20 children were regularly admitted, the average cost per child per day would probably be about 3s. 3d.

The value of Day Nurseries from a Public Health point of view is so doubtful that I am not myself prepared to make any recommendation. I shall simply quote what the Chief Medical Officer of the Ministry of Health has to say about Day Nurseries in his Annual Report for 1928, and leave you to decide what should be done :—

" There has been a good deal of discussion of late in regard to an extended use of Day Nurseries and Nursery Schools as a means of safeguarding health among young children, and it is generally agreed that the Day Nursery as at present organised fulfils a limited and not wholly satisfactory function, while the Nursery School has also its disadvantages and is not being employed or developed as its protagonists would wish. I have dealt with the question of a re-organised " Health Nursery " in previous reports and this matter is receiving attention from the Ministry and from the Board of Education. The Ministry have agreed somewhat to extend the scope of the Day Nursery by the admission of children on account of harmful environment or social circumstances, even though their mothers may not be obliged actually to go out to work. Such a concession will certainly enhance the value of Day Nurseries to many busy mothers living in their neighbourhood."

THOMAS ORR,

26th November, 1929.

Medical Officer.

On the consideration of this report it was decided that the Day Nursery should be continued for a further period of three months after which the question of its continuance should be reconsidered and that in the meantime some relaxation of the rules with regard to the class of case to be admitted should be allowed.

At the end of the three months the question was again considered, when, on account of the small number of children admitted, it was decided to close the Day Nursery. The Day Nursery was therefore closed on the 30th April, 1930.

Thanks must again, as in former years, be tendered to the Welfare Working Party which, under the chairmanship of Mrs. Kimmitt, makes for babies and young children attending the Centres suitable approved garments which are either sold to the mothers at cost price or are given free of charge to those who are in needy circumstances. Thanks are likewise due to Mrs. Adams, Miss Atkinson, Mrs. Bodsworth, Mrs. Girdlestone, Mrs. Horsburgh, Mrs. Ludlow and Mrs. Parry, who have given great help in various ways at the Centres, particularly in giving instruction to the mothers in the cutting out and making up of suitable garments for the children. The District Nurses have also rendered very great service at the Health Centres, where they have co-operated in every way with the Health Visitors.

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	1,458
Return visits	3,784
Visits to children 1 to 5 years of age	5,854
Visits to children or mothers attending the Health Centres	4,602
Visits to expectant mothers	433
Visits to investigate infant deaths and still-births ...	87
Special visits or investigations	297
Visits to cases of Ophthalmia Neonatorum	30
Visits to cases of Puerperal Fever and Pyrexia	8
Visits to cases of Measles and Whooping Cough ...	131
Visits to cases of Scarlet Fever on discharge from the Isolation Hospital	240
Other Visits	14
Total Visits	16,938
Interviews, etc.	3,869

The following is a Summary of the Work of the Health

Centres during the year :—

	Mattock Lane.	Cherington House.	Aberdeen House.	Memorial Hall Northolt.
Number of children on register at the end of year	1,567	1,006	266	106
Mothers visiting Centre for the first time	571	548	230	76
Children visiting Centre for the first time	714	635	269	99
Total attendances made by mothers	6,849	5,700	2,579	859
Total attendances made by children	8,310	6,517	2,949	1,093
Average attendance of children each afternoon	58	59	30	22
Number of Consultations by Medical Officer	2,904	2,092	1,124	655
Average number of children seen by Medical Officer on each session	19	19	21	13
Children referred to School Clinic for treatment :—				
For Nose and Throat ... ..	...	...	...	20
For Eyes ... ..	...	...	...	18
For Teeth ... ..	...	...	...	159
Orthopaedic Treatment ... ..	...	...	...	84
Children undergoing Ultra Violet Ray treatment at King Edward Hospital				
Mothers receiving dental treatment ... ..	...	...	...	87
Mothers supplied with artificial dentures ... ..	...	...	...	26
Mothers receiving treatment for eyes ... ..	...	...	...	3
Children referred to King Edward Hospital for minor operations				
Children admitted to King Edward Hospital as indoor patients ... ..	...	...	...	2
Children referred to other Hospitals ... ..	...	...	...	40
Mothers attending Ante-Natal Clinic :—				
First visits ... ..	...	...	...	485
Re-visits ... ..	...	...	...	1,258

Number of Consultations by Consultant at Centre	...	...	...	...	22
Mothers referred to Hospitals	...	...	...	...	13
Aid provided for mothers at confinement :—					
Consultant aid—cases	...	...	...	...	8
Medical aid—cases	...	...	...	...	6
Midwives—cases	...	...	...	...	49
Home Helps—cases	...	...	...	...	19
Dried Milk supplied at cost price	...	...	Value	£504 10s. 11d.	
Virol supplied at cost price	...	...	Value	£93 14s. 6d.	
Cod Liver Oil supplied at cost price	...	...	Value	£194 10s. 8d.	
Number of Cases admitted to the Chiswick and Ealing					
Maternity Hospital	...	...	...	...	383
Amount received for treatment at Maternity Hospital £1,680 10s. 0d.					
Expectant or Nursing Mothers receiving a supply of milk					
free of charge for one month	...	...	...	...	449
Children under 5 years of age receiving a supply of milk					
free of charge for one month	...	...	...	...	412

DAY NURSERY.

Whole day attendances	...	...	...	...	2,815
Half day attendances	...	...	...	...	96
Amounts received from Parents	...	...	...	£105 17s. 0d	

THOMAS ORR,

Medical Officer of Health.

TOWN HALL,

EALING, W.5.

July 8th, 1930.

Borough of Ealing.



EDUCATION COMMITTEE.

REPORT

OF THE

School Medical Officer

FOR THE

Year ended 31st December, 1929.

EDUCATION GENERAL PURPOSES SUB-COMMITTEE, 1928-29.

(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 A. H. CHILTON, J.P.

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.
*†‡VERA C. LAWES.

Clerks—

†MERCIE RICHARDSON.	GRACE SUCH.
WINIFRED RIVERS.	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.) (resigned Feb., 1929).
C. COLENZO, L.D.S. (Liver.) (appointed Feb., 1929).

HEALTH CENTRES—

13, MATTOCK LANE, EALING, W.5.
CHERINGTON HOUSE, HANWELL, W.7.
BETHAM'S SCHOOL, GREENFORD (temporary).
ISLIPS MANOR, NORTHOLT.

*Certificate as Trained Nurse.

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

‡Certificate of Central Midwives Board.

CO-ORDINATION.

Every effort has been made to secure complete co-operation between the Maternity and Child Welfare and the School Medical Services. Both these services have for their object the proper nurture of the children and the preservation of their health. In a well organised scheme of public health administration there should be no line of division between them.

Although the one service is under the control of the Maternity and Child Welfare Committee and the other under the Education Committee, in Ealing the policy of these two Committees is the same and the staff carrying out the executive duties are under the same administration. In fact, if both these services were placed under the control of only one Committee it would make little if any difference. Whatever facilities for supervision and treatment are offered to children attending school the same are offered to children under school age.

Co-ordination is also rendered easy by these two services being carried on together at the Health Centres. There are four Health Centres in the Borough for Maternity and Child Welfare and School Medical purposes, one at Mattock Lane, one at Cherington House, Hanwell, a temporary Centre at Greenford, to be replaced by a new Centre (Ravenor Park) in course of erection and Islips Manor Health Centre which has just been opened. The last named Centre, which is to serve the Northolt area, has been formed by the adaptation of the house, Islips Manor, which stands within the twelve acres of land purchased by the Town Council as a public recreation ground. The house has lent itself admirably to adaptation as a Health Centre and should prove not inferior but in many ways superior in arrangement to the other Health Centres of the Borough.

THE SCHOOL MEDICAL SERVICE IN RELATION TO PUBLIC HEALTH.

School Hygiene.

At the end of the year there were 18 public elementary schools, embracing 33 departments, under the control of the Ealing Education Authority. Coston's School, the new school intended to meet the rapidly growing needs of Greenford, was opened in the beginning of the year but it was almost immediately filled to the maximum of its capacity. Stanhope School, which is now quickly nearing completion, is urgently required. Stanhope School, as stated in the Annual Report for 1928, is of the Derbyshire type and marks a new departure in the architecture of schools in the Borough.

When the Grange School was constructed some years ago it was felt that great progress was being made and that we should have an open-air school which would be utilized as such to the betterment of the health of the children. So many defects were found in the arrangement of this school, both as regards comfort and from the teaching aspect, that when a new school was constructed at Greenford, Coston's School, it was not made to comply with the requirements of an open-air school. Fortunately, the Committee, when another new school was called for at Greenford, again considered the open-air type and after reviewing the matter very carefully decided to adopt the Derbyshire type, which is a true open-air school and which has proved an unqualified success in Derbyshire and in other parts of the country. Another school of the same type is being erected to serve the northern part of Greenford and proposals are being put forward for the erection of a new school of the same type at Northolt and a department of similar construction at the Grange School.

The Committee are certainly to be congratulated on the decision to erect all these schools of the open-air type and in doing so have initiated a policy which will have a far reaching effect on the health of the children. In providing for the children in the recently added and rapidly growing areas, the Education Committee, by adopting, so to speak, the policy of "open-air schools for all" has shown that it can take a very broad and very progressive view of its duties.

In the Annual Report for 1930 it will be possible to give a full description of the schools which are at present in course of construction.

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 undergoing routine medical inspection. The children included 1,172 entrants, 1,568 intermediates, and 849 leavers, making 3,589 as the total children inspected in a routine manner.

NUMBER OF CHILDREN INSPECTED.

School					Entrants		Total
					Boys	Girls	
<i>Provided.</i>							
Drayton	...	...	...	...	77	54	131
Grange	...	...	...	...	50	35	85
Hobbayne	...	...	...	...	67	56	123
Lammas	...	...	...	...	50	28	78
Little Ealing	...	...	...	...	57	49	106
North Ealing		...	...	...	44	39	83
Northfields	...	...	...	...	29	32	61
Oaklands	...	...	...	...	45	48	93
St. Ann's	...	...	...	...	24	24	48
St. Mark's	...	...	...	...	28	28	56
Northolt	...	...	...	...	11	12	23
<i>Non-Provided.</i>							
Betham's	...	...	...	...	50	48	98
St. John's	...	...	...	...	16	12	28
St. Joseph's	...	...	...	...	29	14	43
St. Mary's	...	...	...	...	23	28	51
St. Saviour's	...	...	...	...	41	24	65
Total					641	531	1,172

NUMBER OF CHILDREN INSPECTED.

School	Intermediates.			Leavers.		
	Boys	Girls	Total	Boys	Girls	Total
<i>Provided.</i>						
Coston	59	49	108	28	25	53
Ealing Central ...	—	—	—	46	42	88
Drayton	59	37	96	23	24	47
Grange	63	58	121	35	24	59
Hobbayne	92	76	168	3	1	4
Lammas	44	51	95	—	—	—
Little Ealing ...	81	75	156	51	43	94
North Ealing ...	41	47	88	16	14	30
Northfields ...	57	48	105	48	34	82
Oaklands	74	80	154	37	41	78
St. Ann's	49	24	73	62	70	132
St. Mark's	30	30	60	5	8	13
Northolt	27	40	67	25	24	49
<i>Non-Provided.</i>						
Betham's	21	16	37	—	—	—
Christ Church ...	13	17	30	26	43	69
St. John's	29	30	59	13	15	28
St. Joseph's ...	17	16	33	10	7	17
St. Mary's	28	36	64	4	2	6
St. Saviour's ...	22	32	54	—	—	—
Total	806	762	1568	432	417	849

At the Health Centres there were specially inspected 2,140 children who had been submitted by the head-teachers, school enquiry officers or school nurses and of whom 1,014 attended for re-inspection. Consequent on routine inspection 477 children were re-examined on account of some defect previously found. There were thus 3,631 special inspections or re-inspections of children.

The total number of children attending public elementary schools who were examined once at least during the year was 5,729. The average number of children on the school register was 10,442.

This means that 54.8 per cent. of the children on the registers were medically examined during the year. The average attendance at the schools was 84.7 per cent.

Findings of School Medical Inspection.

Table II gives the number of defects noted on medical inspection at the schools and at the special inspections or re-inspections. Among the 3,589 routine children examined there were 1,277 defects requiring treatment and 1,022 requiring to be kept under observation without treatment; and among 2,140 children specially examined there were found 1,593 defects requiring treatment and 148 requiring to be kept under observation. Of the 3,589 children examined at the routine inspections, 514, or 14.3 per cent., were found to require treatment for defective conditions other than uncleanness 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 the 19,276 children examined, 342, or 1.7 per cent. were excluded on account of verminous condition. There were 43 other children with verminous heads found at the routine medical inspection in the schools, and 22 found at special inspections after being referred for examination by the head-teachers. In addition 16 children were found to have verminous condition of the body.

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

The percentage of verminous children is very low and is due to the energetic steps taken to impress upon the parents the necessity of care in keeping the heads of the children in a cleanly condition. It has never been the policy of the Education Committee to cleanse the heads of the children. The Committee have insisted upon the parents performing their duty and have very properly issued summonses under the School Attendance Byelaws against those who, after a warning, have failed to do their duty and have sent their children to school in a condition necessitating exclusion. In the table which follows the improvement of the children since 1923 is evident. The slight rise in 1927 was occasioned by the

taking over of the Hanwell Schools in which there was found to be a higher percentage of dirty children. The value of the measures adopted is indicated by the fall of the percentage of verminous children in 1929 to so low a figure as 1.7 per cent. of the children examined.

UNCLEANLINESS, 1923—1929.

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	—
1929	19,276	342	1.7	—

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

Ringworm of Head	...	...	...	50
Ringworm of Body	...	...	...	19
Scabies	...	...	...	16
Impetigo	...	...	...	227
Other Skin Diseases	...	...	...	109
Minor Injuries	...	...	...	95
Ear Diseases (including Otorrhoea)	...	...	...	129
Eye Diseases (including Blepharitis and Conjunctivitis, but excluding defective vision)	...	...	...	155
Miscellaneous (Sores, Chilblains, etc.)	...	...	...	306
				<hr/> 1,106

(c) ENLARGED TONSILS AND ADENOIDS.—At the routine inspection 161 children were found with enlarged tonsils, 14 with adenoids, 52 with enlarged tonsils and adenoids, and 2 with other conditions of the nose and throat requiring treatment. Children with these conditions that had to be kept under observation numbered 422. In addition, 47 cases of enlarged tonsils, 5 of adenoids, 22 of enlarged tonsils and adenoids, and 4 of other conditions requiring treatment, and 44 cases of similar diseases of the nose and throat requiring to be kept under observation were found on special inspection.

(d) TUBERCULOSIS.—Three suspected cases of pulmonary tuberculosis, two requiring treatment and one requiring to be kept under observation were found at routine medical inspection. In addition, six others, who needed to be kept under observation, were discovered on special examination. One case of glandular tuberculosis and one case of spinal tuberculosis requiring treatment were also found on special examination.

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

Ringworm of Head ...	...	...	...	50
Ringworm of Body ...	...	...	...	18
Scabies ...	...	...	...	16
Impetigo ...	...	...	...	224
Other Skin Conditions ...	...	...	...	100
				<hr/>
				408
				<hr/>

The number of cases of ringworm of the head was unusually high and was accounted for by the fact that the whole of the 35 boys in a Home for Children were found to be suffering from the disease. The discovery of two boys at school suffering from ringworm of the head led to the examination of all the children in the Home with the result that all of them, ranging from 3 to 13 years of age, were found to be affected with the disease. It appears that the Matron of the institution treated the two children

who were badly affected yet failed to recognise the condition from which they were suffering and also failed to see that all the others were affected, though in a lesser degree.

Twenty-two of the boys attended Christ Church School, eight attended St. Saviour's and five had not yet been admitted to school, being under 5 years of age. In taking steps to rid the Home of the infection the children under school age had to be dealt with at the same time as if they were school children. Treatment of the condition by means of X-rays, segregation of the children and disinfection of infected articles soon enabled most of the children to attend school.

(f) EXTERNAL EYE DISEASE.—Sixteen cases of blepharitis, eight of conjunctivitis, 17 of squint, and one with another condition of the eyes were observed at routine medical inspection ; and 31 cases of blepharitis, 56 of conjunctivitis, 9 of squint and 43 of other conditions were found in children referred for special examination. Of these cases, 164 were advised treatment and 17 were recommended to be kept under observation.

(g) DEFECTIVE VISION.—During routine inspection 167 children were found with defective vision and referred for examination by an Oculist. As a result of special inspection 80 were also referred to an Oculist.

(h) EAR DISEASE AND DEFECTIVE HEARING.—Thirteen cases of otitis media and 7 of other conditions of the ear requiring treatment ; and 12 cases of defective hearing, two of otitis media, and five of other conditions requiring to be kept under observation were found at routine medical inspection. Special inspections discovered 9 cases of defective hearing, 56 of otitis media, and 20 of other conditions of the ear requiring treatment ; and 4 of defective hearing and one case of another condition of the ear to be kept under observation.

(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 41.0 per cent. had sound teeth, of the intermediate group 49.8 per cent., and of the leavers 68.7 per cent. had sound teeth.

DENTAL INSPECTION, 1929.

			Entrants	Inter- mediates	Leavers	Total
<i>All sound teeth—</i>						
No. of Children	...		480	781	583	1,844
Percentage	...	...	41.0	49.8	68.7	51.4
<i>Less than 4 teeth decayed—</i>						
No. of Children	...	...	337	502	232	1,071
Percentage	...	...	28.7	32.0	27.3	29.8
<i>Four and more than 4 teeth decayed—</i>						
No. of Children	...	...	355	285	34	674
Percentage	...	...	30.3	18.2	4.0	18.8

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

DENTAL INSPECTION, 1915 TO 1929.

Year	Entrants		Inter-mediates	Leavers
	Percentage with sound Teeth		Percentage with sound Teeth	Percentage with sound Teeth
1915	23.0		26.2	35.7
1916	15.6		30.2	37.2
1917	21.7		25.9	41.1
1918	28.8		25.8	44.1
1919	36.9		32.2	60.6
1920	48.6		46.4	64.2
1921	58.4		64.0	76.5
1922	45.7		50.2	72.8
1923	55.2		52.5	80.5
1924	55.0		58.5	78.0
1925	47.8		44.3	74.0
1926	35.5		39.0	64.2
1927	41.6		46.5	70.8
1928	35.5		44.0	64.5
1929	41.0		49.8	68.7

(j) CRIPPLING DEFECTS.—The crippled children under supervision at the end of the year numbered 47. Of these, two were so severely affected that they were unable to attend an ordinary school and were being maintained at a Special School. There were no crippled children who were not attending any school.

The list of crippled children of school age is practically a complete one and is compiled from information received from the health visitors, who transfer particulars of defective children on reaching five years of age, from the teachers, the school nurses, and the school enquiry officers, all of whom give immediate information regarding crippled children coming to their knowledge.

Each crippled child newly admitted to school is examined on the earliest possible occasion and all crippled children are examined at least once a year to determine their exact condition or to estimate their progress and put them forward for any treatment required under the Committee's 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 number of children absent from school on account of these diseases were as follows :—

Measles	...	...	...	...	...	383
Whooping Cough	...	...	...	...	...	365
Chicken Pox	...	...	...	...	...	361
Mumps	...	...	...	...	...	152

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

Children to the number of 324 were excluded during the year under Article 53 of the Education Code for the following conditions :

Conjunctivitis	...	...	...	...	...	3
Impetigo	...	...	...	...	...	227
Ringworm of Head	...	...	...	...	...	45
Ringworm of Body	...	...	...	...	...	5
Scabies	...	...	...	...	...	16
Other Skin Diseases	...	...	...	...	...	27
Total						323

FOLLOWING UP.

No scheme of medical inspection and treatment can be complete without a well organised system of following-up. It is only by following-up that the full results of medical inspection can be obtained. However appreciative the parents may be of school medical inspection and however much many of them may welcome the treatment required, unless they are visited by specially trained School Nurses who can encourage them to seek the treatment advised and to give at home the care and treatment recommended, medical inspection loses much of its value. Parents are apt to put off and put off seeking treatment or acting on advice and it requires the services of the School Nurse to assist them to make up their minds or to take the necessary steps at once. With some parents it is simply a matter of giving assistance in making up their minds, with others it is a question of convincing them of the need for

treatment and the value of it, while with a few something more is required, it may be in the way of pointing out their duty to their children and even by threatening action under the Children Act for failing in their duty.

Following-up or supervision after inspection can be assisted by the teachers, who can inform the School Medical Officer when treatment has been obtained or when the advice given is not carried out. After medical inspection the head-teachers receive two copies of a form which contains a list of all the children found defective on School Medical Inspection. One of the forms is retained by the head-teacher, who is able to keep, with respect to all abnormal children, a complete record, which may be of assistance to him in estimating their educational progress and in keeping them under special supervision. The other copy is sent to the Health Centre at the end of six weeks after medical inspection and on it the head-teacher enters a note as to whether the treatment has been obtained as a result of the notice sent to the parents by the School Medical Officer. In this way the teacher comes into touch with the parents in regard to the care and treatment of the children and at the same time is able to give valuable assistance in following-up many cases which cannot be visited at their home as early as may be desired by the school nurse.

The school nurse in due course visits the homes of the defective children and is able as already indicated to see that the advice of the medical officer is carried out and to encourage the securing of the treatment required.

In connection with the following-up of defective children the school nurses made 2,810 visits to the homes and to the schools.

MEDICAL TREATMENT.

(a) MINOR AILMENTS.—In Table IV are indicated the number and the nature of the minor ailments which received treatment during the year. It will be noted that 833 of the 1,046 children suffering from minor ailments, or 79.6 per cent., were treated at the Health Centres, and 213, or 20.4 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:—

Impetigo	...	...	...	...	2,408
Ear Cases	...	...	...	...	1,127
Eye Cases	...	...	...	...	1,406
Ringworm	...	...	...	...	166
Scabies	...	...	...	...	54
Eczema	...	...	...	...	178
Minor Injuries	...	...	...	...	140
Others	...	...	...	...	2,470
Total					7,949

(b) TONSILS AND ADENOIDS.—It is indicated in Table IV, Group III, that 103 cases of enlarged tonsils or adenoids were submitted for operation at the Mattock Lane Health Centre, and that 56 cases were dealt with at hospitals or by private practitioners.

(c) TUBERCULOSIS.—Nine children were referred to the Tuberculosis Officer for supervision, seven being suspected of having 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 407 referred for treatment, 376 of whom were treated at the Health Centres and 31 otherwise.

In this table are included under the term "miscellaneous," 401 cases of such conditions as minor injuries, sores, chilblains, etc., and of these 280 were treated at the Health Centres and 121 otherwise.

During the year 47 cases of ringworm of the head were treated by means of X-rays by Dr. Arthur.

Of the 227 cases of impetigo, 226 were treated at the Health Centres. During the year 16 cases of scabies were found and nine of these were treated at the Mattock Lane Centre.

(e) EXTERNAL EYE DISEASE.—The children referred for treatment of external eye disease numbered 142, of whom 97 were treated at the Health Centres.

(f) DEFECTIVE VISION.—The School Oculist examined 342 children and 32 were examined by private practitioners or at hospitals. Glasses were prescribed for 313 cases at the Health Centres and supplied in all cases.

(g) EAR DISEASE AND HEARING.—Of 96 children with ear defects who received treatment, 80 were treated at the Health Centres.

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

REPORT OF THE SCHOOL DENTIST.

The year 1929 has seen a marked advance in the dental treatment of school children, expectant and nursing mothers, and children of pre-school age. This advance has been primarily due to the fact that the value of dentistry is becoming more widely appreciated as a result of the instruction given to both mothers and children. Leaflets and booklets are distributed to the mothers and lectures are given to children and parents on the care of the mouth in relation to the general health. The school nurses by their visit to the homes have been able to persuade many wavering parents to submit their children for treatment.

There were many more children admitted into the schools in the Greenford and Northolt areas during the year as a result of the rapid erection of houses in those areas. Therefore more children were inspected and consequently a greater amount of treatment was required. The parents in these areas are seeking treatment in such large numbers that it is advisable to have a second dentist to cope with the work.

The number of school children inspected during the year was 8,134, exactly 500 more than in the previous year. This meant therefore that a greater amount of treatment was required. The number of children found to require treatment was 6,377, an increase over last year of 1,831. There were actually treated 2,874 children and during the year 688 of these received further treatment; an increase of 231 over the previous year.

Fillings were inserted in 3,294 permanent teeth and in 180 temporary teeth, a total of 3,474.

Extractions performed by local or general anaesthesia included 1,290 permanent and 7,944 temporary teeth, a total of 9,234. It is to be noted, and with satisfaction, that there was a decrease in the number of permanent teeth extracted as compared with last year. On the other hand there was a slight increase in the number of temporary teeth extracted, this being due to an increase in the number of newly admitted children requiring attention.

The treatment given to expectant and nursing mothers and to children of pre-school age continues to increase. It is to be hoped that with this early treatment of young children and with the instruction of the parents and children in the care of the teeth, dental caries in the young will be greatly lessened. Attendances made by mothers, and children under 5 years, from the Maternity and Child Welfare Department, amount to 459. The number of mothers and children treated was 87 and 159 respectively. As regards these patients a total of 246 fillings were applied to 118 permanent teeth and 176 temporary teeth, this being a marked increase over last year. Extractions numbered 204 permanent and 123 temporary teeth, or a total of 327.

Dentures were supplied to 26 expectant or nursing mothers.

(Signed) C. COLENZO, L.D.S.

January, 1930.

Since this Report was submitted the Committee have appointed a second whole-time dentist who will not only be able to cope with arrears of treatment arising in 1929 but also meet the increasing demand of the children of the rapidly growing areas of Greenford and Northolt.

(i) ORTHOPAEDIC TREATMENT.—During the year the Orthopaedic Surgeon saw for the first time, on the occasion of his monthly visits, 73 school children suffering from crippled conditions, lateral curvature and round shoulders. There were 138 re-inspections of these or other children already undergoing treatment. Some of the cases of lateral curvature and round shoulders were only mildly affected and were completely cured after treatment lasting but a few months. Four children were advised and received operative treatment at the National Orthopaedic Hospital and 67 were advised massage and special exercises. The attendances for massage numbered 888. Four children were supplied with surgical appliances which were ordered by the Surgeon.

In addition to the school children, 87 children under five years of age were submitted for a first examination by the Surgeon, 145 re-inspections being necessary. The attendances of those requiring massage numbered 582. Three operations were advised for, and performed at the Hospital on children under school age.

The large number of children under school age dealt with under the scheme is indicative of its success. It may be said that practically all the crippled children attending the public elementary schools are receiving treatment under the scheme, and the time is fast approaching when it can be said that all the children under five years of age, who will later attend public elementary schools, are similarly receiving treatment. The earlier the children receive treatment, the better will be the results and the less the treatment will be called for in later life; so that as time goes on and the scheme develops fewer children of school age will require to be dealt with.

So much has the work of the Orthopaedic Clinic extended that the accommodation at the Mattock Lane Health Centre has proved insufficient and an addition to this Centre is being constructed primarily to facilitate this branch of treatment.

With the new addition it will be possible to deal with a larger number of children at a time and to give a wider range of special exercises to those who require them without disturbing the other activities of the Centre.

(j) HEART DISEASE.—During the year there were found in the course of routine and special inspections 17 children suffering from organic, and 67 from functional murmurs of the heart. The children suffering from organic disease of the heart were kept under particular supervision, special hospital treatment being recommended where necessary, and instructions being given to the parents and teachers regarding their care at home and the exercises suitable for them at school. One child was sent to a Special Residential School for a period of residence in order that he might receive the special care and treatment required.

(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	140	9	6
Throat Operations	28	18	6
Spectacles	62	11	4
Treatment at National Orthopaedic Hospital	3	2	6
X-Ray Treatment for Ringworm of Head ...	1	15	0
Surgical Appliances	5	5	6
Massage Treatment	19	12	10
Other Payments from Maternity and Child Welfare Committee, etc.	145	6	2
	<hr/>	<hr/>	<hr/>
	£407	1	4

OPEN AIR EDUCATION.

The teachers take every opportunity of holding classes in the playground whenever the weather permits. The teachers in general appreciate the value of open air classes not only as a means of promoting the health of the children but of affording the children a practical lesson on the value of fresh air and sunshine in building up a healthy body and in fostering resistance to disease.

In the new Stanhope School and in the others about to be constructed the teachers will be given the opportunity of teaching the children under open air conditions in all states of the weather. These schools will prove valuable object lessons not only to the children but to the people generally.

PHYSICAL TRAINING.

The Education Committee, recognising the great value of organised games not only as a means of preserving health, but of building up character and encouraging good conduct and bearing, have given every encouragement for their development. I am indebted to Mr. A. L. Binns, the Director of Education, for the following summary of the provision for organised games for school children.

“ The following schools have playing fields of their own :—

Central Schools	5 acres
North Ealing Girls'	1 acre
Hobbayne Junior Mixed	1½ acres
Northolt Mixed	1 acre
Stanhope Senior Mixed	2½ acres
Wood End Senior Mixed	4 acres
Horsenden Senior Mixed	4½ acres

“ In addition, the following pitches are used in Parks :—

<i>Cricket and Football Pitches.</i>	<i>No. of Pitches</i>	<i>No. of Schools</i>
Walpole Park	3	5*
Drayton Green	1	2†
Pitshanger Park	1	1
Churchfields	1	2
Elthorne Park	1	1
Ravenor Park	1	1

Netball Pitches.

Walpole Park	1	2
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Hockey Pitches

Lammas Park	1	1
Pitshanger Park	1	1

*One pitch for cricket only

†Pitch for football only

" Every Girls' School has a netball pitch marked out in its playground, and there are tennis courts in the playgrounds at North Ealing, Grange and Central.

" The Education Committee supplies all equipment such as balls, bats, rackets, sticks, pads and wickets, and also goal posts and nets, but the children themselves, or the school funds, are required to provide the special sports clothing required.

" As regards the amount of time devoted to organised games, the detailed arrangements depend largely on the weather and the state of the grounds, but generally speaking each class has four or five 20-minute periods allotted for physical training each week, and when circumstances permit two of these 20-minute periods are grouped together and used for organised games.

" There is a School League for Football and also one for Netball. The Annual School Sports are held in Walpole Park in May, and training under the supervision of the teachers takes place from Easter onwards. Last year there were 39 events in the programme and 5,029 entries in all for these events.

" The school swimming bath has proved insufficient to accommodate all the children in the enlarged Borough, and the 2nd Class Bath was engaged in addition for two half-day sessions weekly last year. As a result of the examination held at the end of the session 85 Honours Certificates, 139 First Class Certificates, and 210 Elementary Certificates were issued to boys and 113 Honours Certificates, 184 First Class Certificates, and 267 Elementary Certificates to girls. It might be explained that the Elementary and First Class Certificates cover different degrees of proficiency in swimming and the Honours Certificate includes also an elementary knowledge of life-saving."

PROVISION OF MEALS.

With the encouragement of the Committee most of the head-teachers during the year put into operation the scheme of the National Milk Publicity Council which consists in supplying milk in bottles to the amount of one-third of a pint to school children each day at a cost to the parents of one penny. In the scheme the clerical work imposed on the head-teacher is reduced to a minimum.

Forms are supplied on which the parents indicate their willingness to pay one penny a day for the supply of milk to each child. The milk is delivered by the dairyman in capped bottles containing one-third of a pint in the required number and a supply of straws is provided. At the mid-morning interval the bottles are passed to the children who perforate the cap on the bottle, insert the straw and drink the milk. The empty bottles are collected by the dairyman. There is very little labour entailed in distributing the milk and in collecting the pennies and there are no receptacles to wash.

So well was the scheme accepted by the teachers that at the end of the year there were 3,046 children receiving milk in this way in school.

In previous years, when considering the school children who appeared to be improperly or insufficiently fed, the difficulty in supplying meals to them was felt to be so great, on account of smallness of the numbers in different schools, that nothing was done to meet their needs. The scheme of the National Milk Publicity Council, however, offered a means of supplying those necessitous children with a meal of milk. On a survey being made of the children in needy circumstances who would be likely to benefit from a supplementary addition to their diet it was found that roughly 300 children came within that category. The Committee, therefore, with the approval of the Board of Education, decided to supply those children, free of charge to the parents, with a daily milk meal similar to that received by the other children whose parents can afford to pay for it. No distinction is made in the distribution and those receiving milk free obtain it in the same way as those paying.

Carefully controlled experiments, carried out both in England and Scotland, in which a supplementary ration of milk has been given to school children have shown a marked improvement in height and weight and even in brightness in those receiving it. There can be no doubt that milk given in this way will in many cases supply constituents of food not supplied in the home in sufficient quantity and will make an otherwise deficient diet into a satisfactory one. For these reasons the supply of milk to children in school each day as a routine practice deserves every encouragement.

CO-OPERATION OF OTHERS IN THE SCHOOL

MEDICAL SERVICE.

As has already been commented on in previous reports, the parents show an ever increasing interest in the welfare of their children and welcome medical inspection as a valuable means of obtaining advice and possibly treatment for defects discovered. The interest of the parents is exemplified by the fact that over 75 per cent. are present during the medical examination at the schools.

The teachers, as has been remarked upon on previous occasions, give every possible assistance in medical inspection and show a sustained interest in the medical aspects of school life. Without their continued help medical inspection and treatment would not prove so great a success. They recognise that medical inspection and treatment must go hand in hand with the education of the child and are most ready to seek advice regarding particular defective children coming to their knowledge. Every assistance is rendered by them in the ascertainment of mentally and physically defective children and in the special supervision of such children during the period which they spend in school.

The school enquiry officers so thoroughly co-operate with the school medical staff, that at times one feels that they form part of it. This intimate co-operation leads to the early discovery of defective children and to their efficient supervision and at the same time indirectly leads to better attendance.

In the early days of school medical inspection there was a feeling that the day might come when school nurses would almost entirely replace school enquiry or attendance officers, but the school attendance officers occupy a distinctive position. Their duties cannot be taken over by the school nurses, although to a very large extent their duties have been reduced and the work of school attendance can be carried out by a smaller staff than formerly. In the course of their work the school attendance officers frequently come across children concerning whose condition the school nurse is better able to make enquiries and through their intimate association with the school medical staff they are able to get this information without much trouble. Again, much good can result from the school attendance officers reporting to the school medical staff on any

child who they think is not receiving medical attention, or whose continued absence necessitates some medical supervision. The school nurse in these cases, on receiving information, is able to devote attention to securing the medical treatment or supervision that is required. Further, cases of long absence from school are often brought to the notice of the school medical officer for his advice as to attendance at school. In this way the school medical staff renders great assistance to the school attendance staff and vice versa.

Acknowledgment must be made as in previous years for the valuable assistance 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.

There is little demand for the establishment of Nursery Schools in the Borough. Very few married women engaged in regular employment and the housing difficulties are not so insistent as they are in crowded industrial areas. The Education Committee have therefore not established any Nursery Schools or Classes but children between four and five years of age are admitted to the Infants' Departments whenever accommodation is available and whenever the Attendance Sub-Committee are satisfied that it will be of advantage to the children to be admitted. Each case is considered on its merits on the application of the parents to the Sub-Committee.

SECONDARY SCHOOLS.

On behalf of the Middlesex County Council the Ealing School Medical Staff carries out medical inspection at the Secondary Schools for Boys and Girls. As the great majority of children attending those schools have already been in attendance at public

elementary schools in Ealing and have been under medical supervision there, it is very appropriate that their medical supervision should be continued under the same staff.

BLIND, DEAF, DEFECTIVE AND EPILEPTIC CHILDREN.

Specially defective children are often first discovered by the health visitors at the Health Centres to which their parents bring them in the early years of their life. They may be discovered by the school enquiry officers owing to their failure to attend school on reaching school age or they may be discovered by the teachers on their admission to school or by the school nurses or medical officers in the course of medical inspection. Through these means a fairly complete list of all specially defective children is kept.

Blind and deaf children of school age are sent to Special Residential Schools. Four blind girls and three blind boys were being maintained at Certified Schools for the Blind at the end of the year. Seven girls and five boys suffering from myopia to such an extent as to be considered partially blind were in attendance at public elementary schools where they were kept under special supervision.

The partially blind children are medically examined every three months, or oftener, if necessary, to ascertain their progress. 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 given either in the school or at home.

Seven deaf mutes, four girls and three boys were maintained at Special Residential Schools.

Two boys suffering from severe epilepsy were kept at home where they were undergoing treatment by their regular medical attendant.

Six girls and five boys who were suffering from mild attacks of epilepsy at night, and never 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.

Two crippled boys who were unable to attend the ordinary school were maintained at Special Residential Schools. All the other children suffering from crippling conditions were able to attend the public elementary schools like normal children—a very satisfactory state of things which has been mainly due to the marked improvement in their condition resulting from orthopaedic treatment.

Five feeble-minded children, three girls and two boys, were maintained at Special Residential Schools. There were 37 feeble-minded children, 20 girls and 17 boys, in attendance at public elementary schools.

In the Report for 1928 it was stated that a Conference, representing the local education authorities of Middlesex, Brentford and Chiswick, Heston and Isleworth, and Ealing, were considering the establishing of a Special Day School for Mentally Defective Children. This Conference met in October, 1929, and in view of the Report of the Mental Deficiency Committee again considered the question of providing a Special Day School. Differences of opinion were expressed as to the kind of children who should be provided for, whether low grade or high grade feeble-minded. The Conference therefore adjourned until each authority should make a survey of all the mentally defective children in its area and, having at its disposal definite numbers, come to some decision as to the class of children for whom, in the first place, provision should be made in a Special Day School.

On the decision of the Conference being reported to the Education Committee the following resolutions were passed :—

- “ (i) That the necessary steps be taken as soon as possible to accommodate low-grade mentally defective children in Occupation Centres or Residential Special Schools according to the nature of the defect.
- “ (ii) That retarded children be dealt with in each school as a part of the Hadow Re-organisation Scheme, on the understanding that it may be necessary to transfer such children from small and badly graded schools,

- " (iii) That the School Medical Officer proceed as quickly as possible with the ascertainment of children with a view to further steps being taken towards the establishment of a Joint Day School for high-grade mentally defective children."

These resolutions are self-explanatory. A thorough survey is being made of all the backward and mentally defective children and when this survey is complete the matter can be again considered by the Committee and by the Conference.

HEALTH EDUCATION.

When the " Handbook of Suggestions on Health Education " was issued by the Board of Education it was so much appreciated by the Education Committee that copies were sent to all the teachers, with the advice that the suggestions contained therein should be adopted. At the same time it was 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,

An enquiry was recently made regarding the extent of the teaching of health in the schools and this showed that the advice tendered by the Committee had been generally accepted by the teachers in a remarkably keen and appreciative manner. Many of the teachers were found to have gone further and whilst adopting the handbook as a basis to have instilled some individuality into the method of approaching the children and of presenting the subject so as to be of particular interest at the moment.

In giving instructions on health to the children the teachers have derived assistance from the Syllabus of the Board of Education on "The Hygiene of Food and Drink," from the booklet, "Hygiene of the Mouth and Teeth" issued by the Dental Board, from the monthly periodical "Better Health," issued by the Public Health Department and from various posters and publications of the Health and Cleanliness Council.

At the Domestic Subjects Centres the teachers have devoted particular attention to the teaching of Infant Care and Management to the older girls attending them. The teachers keep in touch with the Health Centres and endeavour to follow the nature of the teaching there. Model garments for infants and young children, corresponding to those recommended at the Health Centres, have been supplied to all the schools, where the girls are taught to make them.

One of the most striking lessons on health received by the girls attending the Domestic Subjects Centres is given in the course of a visit to one of the Health Centres. They attend 10 or 12 at a time and are shown how all the work of the Centre is carried out, how the health of the mothers and the children is recorded, how the baby is weighed by the health visitors, and examined by the doctor, how records are kept regarding the medical inspection and treatment of school children, how treatment is carried out, and so on. This visit has proved a most interesting lesson to the girls who have shown great enthusiasm about what they have seen and heard. The interest is not simply momentary for by the intelligent questions which are commonly asked one is bound to conclude that the visit makes a permanent impression.

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 ...	...	101	Shop Cleaning ...	...	3
Milk Round ...	...	31	House Work ...	...	1
Newspaper Round		33			—
House Work ...	...	4	Total ...	...	4
Baker's Round ...	...	25			—
Light Delivery ...	...	2			
Delivering Parcels		13			
Delivering Goods ...	...	24			
Delivering (Butcher)		2			
Helping in Shop ...	...	6			
		—			
Total ...	...	241			
		—			

All these children were medically inspected during the year and 33 were found to be in such a condition of health that their employment was discontinued.

Twenty children were found in the course of routine medical inspection to be employed without being registered under the Byelaws and two were found to be under age.

MISCELLANEOUS.

Under this heading are noted all examinations 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 certain days of the week at 9.30 a.m. Those actually submitted are children suspected of having verminous heads or bodies, or of 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	...	...	...	827
Impetigo	...	...	...	469
Scabies	...	...	...	46
Ringworm	...	...	...	103
Eczema	...	...	...	20
Minor Injuries	...	...	...	136
Teachers on Appointment	38
King Edward Memorial Scheme	11
Miscellaneous	2,516
Total				4,166

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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	...	...	...	...	...	...	1,172
Intermediates	...	...	...	...	...	...	1,568
Leavers	...	...	...	...	...	...	849
Total							3,589

Number of other Routine Inspections —

B.—Other Inspections.

Number of Special Inspections	...	...	...	...	2,140
Number of Re-Inspections...	...	...	...	...	1,491
Total					3,631

TABLE II.

**A. — RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION
IN THE YEAR ENDED 31st DECEMBER, 1929.**

DISEASE OR DEFECT.					Routine Inspection		Special Inspections	
					No. of Defects.		No. of Defects.	
					Number referred for Treatment.	Number required to be kept under observation but not referred for Treatment.	Number referred for Treatment.	Number required to be kept under observation, but not referred for Treatment.
(1)	(2)	(3)	(4)	(5)				
Malnutrition	2	35	—	—				
Uncleanliness	59	—	22	—				
Skin {	Ringworm, Head	—	50	—				
	" Body	1	18	—				
	Scabies	—	16	—				
	Impetigo	3	224	—				
	Other Diseases (Non-Tubercular)	2	93	7				
Eye {	Blepharitis	12	4	31				
	Conjunctivitis	6	2	56				
	Keratitis	—	—	—				
	Corneal Opacities	—	—	1				
	Defective Vision	167	1	80				
Ear {	Squint	14	3	7				
	Other Conditions	—	1	37				
	Defective Hearing	—	12	9				
	Otitis Media	13	2	56				
	Other Ear Diseases	7	5	20				
Nose and Throat {	Enlarged Tonsils	161	321	47				
	Adenoids	14	—	5				
	Enlarged Tonsils and Adenoids	52	2	22				
Other Conditions	2	99	4	31				
Enlarged Cervical Glands (Non-Tuberculous)	2	168	1	20				
Defective Speech	—	11	—	7				
Teeth—Dental Diseases	674	—	142	—				
Heart and Circulation {	Heart Disease :—	—	—	—				
	Organic	—	15	—				
	Functional	1	58	—				
Lungs {	Anaemia	12	8	8				
	Bronchitis	4	23	6				
	Other Non-Tubercular Diseases	—	4	—				
Tuberculosis {	Pulmonary :—	—	—	—				
	Definite	—	—	—				
	Suspected	2	1	—				
	Non-Pulmonary :—	—	—	6				
	Glands	—	—	1				
	Spine	—	—	1				
	Hip	—	—	—				
Nervous System {	Other Bones and Joints	—	—	—				
	Other Forms	—	—	—				
	Epilepsy	—	—	3				
Deformities {	Chorea	3	—	2				
	Other Conditions	—	—	—				
	Rickets	—	3	—				
Other Diseases and Defects	Spinal Curvature	20	6	—				
	Other Forms	37	219	14				
					7	12	617	32

TABLE II.
A.—RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION
IN THE YEAR ENDED 31st DECEMBER, 1932.

DEFECTS FOUND	NUMBER OF CHILDREN		PERCENTAGE OF CHILDREN FOUND TO REQUIRE TREATMENT
	INSPECTED	FOUND TO REQUIRE TREATMENT	
ENTRANTS	1,172	146	12.4
INTERMEDIATES	1,568	248	15.8
LEAVERS	849	120	14.1
TOTAL (CODE GROUPS)	3,589	514	14.3
OTHER ROUTINE INSPECTIONS	—	—	—

**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	1,172	146	12.4
Intermediates	1,568	248	15.8
Leavers	849	120	14.1
Total (Code Groups)	3,589	514	14.3
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 ...	3	4	7
		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	7	12
		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	4	7
		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 ...	2	3	5
		Attending Public Elementary Schools ...	17	20	37
		At other Institutions ...	—	—	—
		At no School or Institution ...	—	—	—
	Notified to the Local Control Authority	Feeble-minded ...	1	1	2
		Imbeciles ...	3	6	9
		Idiots ...	2	—	2
	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 ...			2	—	2
Suffering from epilepsy which is not severe.		Attending Public Elementary Schools ...	5	6	11
		At no School or Institution ...	—	1	1

PHYSICALLY DEFECTIVE			Boys	Girls	Total
	Infectious pulmonary and glandular tuberculosis.	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board	3	—	3
		At other Institutions ...	—	—	—
		At no School or Institution ...	—	—	—
	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	4	6	10
		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	123	131	254
		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	1	—	1
		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	2	—	2
		At Certified Day Cripple Schools	—	—	—
		At Public Elementary Schools	22	23	45
		At other Institutions ...	—	—	—
		At no School or Institution ...	—	—	—

TABLE IV.

RETURN OF DEFECTS TREATED DURING THE YEAR
ENDED 31st DECEMBER, 1929.

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	47	3	50
Ringworm—Body	19	—	19
Scabies	9	7	16
Impetigo	226	1	227
Other Skin Diseases	75	20	95
MINOR EYE DEFECTS (external and other, but excluding cases falling in Group II)	97	45	142
MINOR EAR DEFECTS	80	16	96
MISCELLANEOUS (<i>e.g.</i> , minor injuries, bruises, sores, chil- blains, etc.)	280	121	401
TOTAL	833	213	1046

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

DEFECT OR DISEASE	No. of Defects dealt with.			
	Under the Authority's Scheme	Submitted to refraction by private practitioner or at hospital, apart from the Authority's Scheme	Other-wise	Total
(1)	(2)	(3)	(4)	(5)
Errors of Refraction (including Squint) (Operations for squint should be recorded separately in the body of the Report)	342	32	—	374
Other Defect or Disease of the Eyes (excluding those recorded in Group I) ...	—	—	—	—
TOTAL	342	32	—	374

Total number of children for whom Spectacles were prescribed :—

(a) Under the Authority's Scheme	313
(b) Otherwise	32

Total number of children who obtained or received Spectacles :—

(a) Under the Authority's Scheme	313
(b) Otherwise	32

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

NUMBER OF DEFECTS				
Received Operative Treatment			Received other forms of Treatment	Total number treated
Under the Authority's Scheme, in Clinic or Hospital	By Private Practitioner or Hospital, apart from the Authority's Scheme	Total		
(1)	(2)	(3)	(4)	(5)
103	56	159	—	159

Group IV.—Dental Defects.

(1) Number of Children who were :—

(a) Inspected by the Dentist :

Inspected by the Dentist:								
		Aged						
Routine Age Groups		{	5	...	455	}	Total	7,992
			6	...	886			
			7	...	990			
			8	...	1,145			
			9	...	1,161			
			10	...	874			
			11	...	581			
			12	...	640			
			13	...	717			
			14	...	420			
			15	...	—			
16	...	—						
Specials	142	
<hr/>								
Grand Total							...	8,134

(b) Found to require treatment ... 6,377

(c) Actually treated ... 2,874

(d) Re-treated during the year as the result of periodical examination ... 688

(2) Half-days devoted to :—

Inspection ... 50
Treatment ... 433 Total 483

(3) Attendances made by Children for Treatment ... 3,562

(4) Fillings :—

Permanent Teeth ... 3,294
Temporary Teeth ... 180 Total 3,474

(5) Extractions :—

Permanent Teeth ... 1,290
Temporary Teeth ... 7,944 Total 9,234

(6) Administrations of General Anaesthetics for Extractions ... 846

(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 ... 19,276

(3) Number of individual Children found Unclean ... 342

(4) Number of Children cleansed under arrangements made by the Local Education Authority ... None

(5) Number of cases in which legal proceedings were taken :—

(a) Under the Education Act, 1921 ... None

(b) Under School Attendance Bye-Laws ... None

