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

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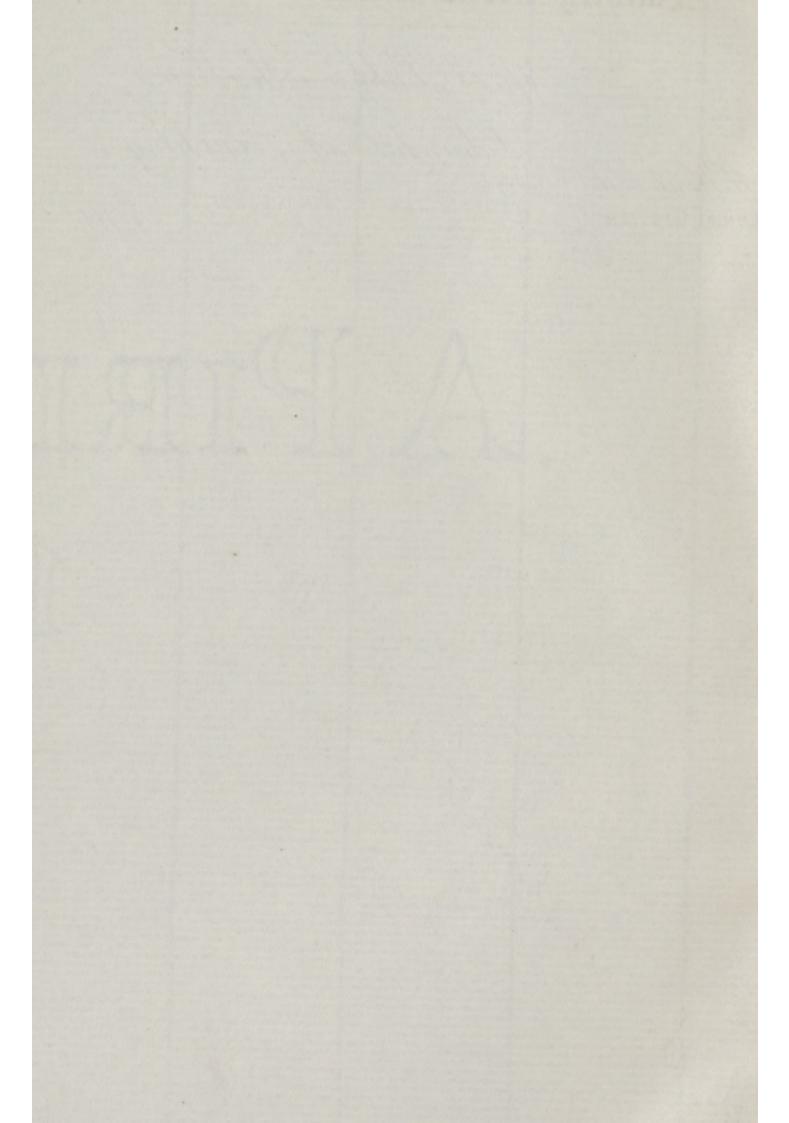
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The Urban Sanitary District

OF

FINCHLEY.

REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR 1903.

BY

HENRY KENWOOD,

M.B., L.R.C.P., D.P.H., F.C.S.,

Professor of Public Health at University College, London; Fellow and Member of Council of the Sanitary Institute; and Medical Officer of Health and Public Analyst for the Borough of Stoke Newington, N.;

MEDICAL OFFICER OF HEALTH.

TOGETHER WITH

THE REPORT

OF THE

SANITARY INSPECTOR.





"Preventable disease does not kill only; too often it maims or enfeebles, so that in a substantial, perhaps in a very large, proportion of cases, it subtracts the patients whom it may ultimately spare from the sum of the vigorous, and adds them to the sum of the relatively inefficient. If in any large number our weakly members are left as such by the passing shadow of disease, how can we despise the labours of the sanitary reformer?"

PROFESSOR T. CLIFFORD ALLBUTT.

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TO THE CHAIRMAN AND MEMBERS OF THE FINCHLEY DISTRICT COUNCIL.

GENTLEMEN,

The general Death-rate for the Finchley District during the year 1903 was only 9.7 per 1000, as against 15.2 for London generally. This rate is the same as that for the year 1901, and the rates for these two years are the lowest that I have recorded in the ten years during which I have acted as your Medical Officer of Health. The absence of excessive cold and of excessive heat and drought throughout the year are circumstances largely responsible for the low death-rate.

The deaths from Consumption during the year were remarkably few. It is to be hoped that the voluntary system of notification of this disease recently inaugurated by the Council will soon be followed by the measure of compulsory notification. The advantages accruing from such a step will doubtless lead to a reduction in the preventable mortality from this disease.

Altogether there were fewer cases of Scarlet Fever and Typhoid Fever notified than for several years past—and it is a happy circumstance, and one which was much appreciated by parishioners, that owing to the arrangements made with the Hornsey District Council, we were enabled to isolate some 50 per cent. of the cases of infectious illness notified. On the other hand there was during 1903 an exceptional prevalence of Diphtheria in the District; the disease was, generally speaking, of a mild type, and the outbreak gave rise to an unprecedentedly low case-mortality, there being only 3 fatal cases among 72 sufferers.

The Rate of Infantile Mortality and the Zymotic Death-rate (i.e., the Death-rate from the 7 principal Communicable Diseases) are both accepted as excellent tokens of the general healthiness of the District, and each of these rates was below that of the preceding year, and far below the corresponding rates for England and Wales as a whole.

The Report of the Sanitary Inspector is appended to this Report. It constitutes, in my opinion, a most satisfactory record of work for the past year, and I cannot speak too highly of the manner in which Mr. Franklin and Mr. Topping have discharged their duties.

I am, Gentlemen,

Your obedient Servant,

HENRY KENWOOD.

March, 1904,

Population of the District of Finchley.

According to the Census returns of 1901, the population of the District amounted to 22,126. The Census returns, however, give the figures of the population at the end of the first quarter of the year, whereas for purposes of calculating the vital statistics, the population in the middle of the year must be taken. Now if the rate of increase in the population which took place between the last two Census returns is assumed to have been maintained up to the middle of last year, one arrives, by a logarithmetical calculation, at an estimated population of 23,662 for the middle of last year. I am confident, however, that this figure is an underestimate of the population, which has shown an increase during the past two or three years very largely in excess of that which occurred in the first eight years which elapsed between the two last Census enumerations. By a consideration of the number of occupied houses in the District in the middle of last year, and by allotting to these the average number of persons found to be occupying each house at the last Census, I estimate the population to be about 24,125, and it is on this figure that the rates in this Report are based.

THE APPROXIMATE POPULATION FOR EACH OF THE SUB-DISTRICTS IS AS FOLLOWS:—

EAST FINCHLEY	 	 9,105
NORTH FINCHLEY	 	 5,450
WEST FINCHLEY	 	 6,650
WHETSTONE	 	 2,920

24,125

The Natural Increase of the Population by excess of births over deaths during the year was 646-234=412, as against 319 in the preceding year.

Number of People to the Acre.—The area of the District amounts to 3,384 acres, and this, divided among the residents, represents only a fraction over 7 people to the acre.

In East Finchley (1,219 acres) it is estimated that there are 7.4 people to the acre.

In North Finchley (788 acres) there are 6.9 people to the acre.

In West Finchley (1,002 acres) there are 6.6 people to the acre.

In Whetstone (373 acres) there are 7.8 people to the acre.

BIRTHS .- BIRTH-RATE.

During the year 1903 there were 646 births registered in the District, i.e., 318 males and 328 females. The birth-rate per 1,000 per annum was therefore 26.8, as against 24.7 for the preceding year.

The rate for England and Wales was 28.4, that for London 28.5, and that for the 76 great towns 29.7.

The Finchley Birth-rate for the year will be seen from Table A6 to be the highest since 1894; but it is still a low rate, a fact which favours the low Death-rate. Allowance is made for this circumstance, however, in estimating the corrected Death-rate.

In England and Wales the Birth-rate was one of the lowest recorded. The persistency with which the proportion of Births continues to decrease year by year is a feature of great national importance.

Mortality.

GENERAL MORTALITY.—There were 234 Deaths registered of parishioners. Of these Deaths, 116 were of Females, and 118 were of Males.

The Recorded General Death-rate is therefore only 9.7 per 1,000 per annum, as against 11.0 in the preceding year, 9.7 in 1900, 11.0 in 1899, 10.3 in 1898, 10.2 in 1897, 10.7 in 1896, and 11.4 in 1895. This ordinary Death-rate, however, can only be taken as a true index of the relative healthiness of the District, as compared with other districts, after some allowance has been made for the proportion of persons of different ages and sexes in the districts compared. The so-called "factor for correction" for the Finchley District is about 1.05, and the Death-rate Corrected for Age and Sex-Distribution would be 9.7 × 1.05 = 10.2, as against 11.5 in the preceding year, 10.2 in 1900, 11.5 in 1899, and 10.8 in 1898.

The recorded Death-rate of Finchley = 9.7 per 1000 per annum.

The recorded Death-rate of London generally = 15.2 per 1,000 per annum.

The recorded Death-rate of the 76 Great Towns = 16.3 per 1,000 per annum.

The recorded Death-rate of England and Wales = 15.4 per 1,000 per annum.

The recorded Death-rate of Croydon = 11.8 per 1000 per annum.

The recorded Death-rate of Brighton = 14.3 per 1000 per annum.

The Recorded and Corrected Death-rates of the Finchley District for 1903 are among the lowest on record, and they are considerably below the corresponding rates for the whole of the Outer Zone of London. This fact, taken in conjunction with the low rate of Infantile Mortality which has prevailed for several years, is incontrovertible evidence of the healthiness of the District. The reduced Death-rate for the year is largely due to favourable climatic conditions.

The rainfall of England and Wales during 1903 was sufficiently unusual to justify an inquiry as to how far and in what direction it may have influenced the mortality statistics, for the rainfall of the past year exceeded the average of the previous 15 years by at least 35 per cent.. The consequences, physical and otherwise, of rainfall, are manifold. It tends to keep the atmosphere clean; it keeps collections of dust and refuse moist, and therefore prevents particles from being detached by the wind, thus reducing the chances of infection of food, etc., by organisms; the flushing effect of the rainfall upon the sewers and the cleansing effects upon gullies, yards and pavements must also be thought of. On the other hand the rising of the level of the subsoil water and the general increase of surface moisture are responsible for conditions of dampness which may give rise to several forms of disease.

If we take a general view of the figures for 1903 for the country as a whole the interesting fact stands out that the General Death-rate was the lowest on record, namely, 15.4 per 1,000; and compared with the average rate in the 10 years, 1893—1902, it shows a decrease of 2.2 per 1,000. The rate of Infantile Mortality was 132, and in London it was 130—a very low figure indeed. The Death-rate from Enteric Fever and Summer Diarrhoea was well below the average, as was also the Death-rate from Diphtheria. The statistics for 1903 also afford evidence of the continuation of general tendencies shown during the last eight or nine years, namely, a declining Birth-rate, a declining Death-rate, and a relatively slight decline in the Infantile Mortality.

The deaths from Scarlet Fever and Enteric Fever were the fewest on record; those from Diphtheria are the lowest totalled since 1881.

MORTALITY ALLOTTED TO EACH OF THE SUB-DISTRICTS:-

Among the residents in East Finchley the Deaths numbered 97, and furnished a rate of 10.6 per 1,000 per annum.

IN NORTH FINCHLEY the Deaths numbered 67, and furnished a rate of 12.3

In West Finchley 56, and a rate of 8.4.

In WHETSTONE 14, and a rate of 4.8.

INFANTILE MORTALITY.—There were 59 deaths registered of infants under 1 year of age, as against 646 births. The proportion which the deaths under 1 year of age bear to 1,000 births is therefore only 91.3 as against 93.4 in the preceding

year, 98.1 in 1900, 110.4 in 1899, 136.5 in 1898, 101.7 in 1897, and 92.7 in 1896. The corresponding rate for England and Wales was 132; that for London generally, 130; and that for the 76 great towns, 144.

The deaths under 1 year of age form 25.2 PER CENT. of the total deaths at all ages, whereas in 1902 they formed 20.9 per cent., in 1900 24.2 per cent., in 1899 22.5 per cent., in 1898 31.7 per cent., in 1897 24.8 per cent., and in 1896 23.0 per cent.

Table A. Causes of and Ages at Death during the Year 1903.

DEATHS IN WHOLE DISTRICT AT SUBJOINED AGES. DEATHS IN LOCAL- STEP STREET AT DEATHS IN LOCAL- STREET AT SUBJOINED AGES.												
Causes of Death.	All ages.	Under 1.	l and under 5	5 and under 15.	15 and under 25.	25 and under 65.	65 and Upwards.	North Finchiey.	East Finchley.	West Finchley.	Whet- stone.	DEATHS IN PUBLINSTITUTIONS.
*	T								1	-		-
Small-pox												
Measles	1	1						***	1	***		
Scarlet Fever												
Whooping Cough	-	2	3					3			2	
Diphtheria and Mem-												
branous Croup	. 2	2							1	1		
Croup	1		1					1				
(Typhus												
Fever Enteric						***	***					
Other continued				***	***		***	***	**		***	
Epidemic Influenza	1			***		2	2	3		1		2
Cholera	***					***			***	***	10.0	
Plague							***				***	***
Diarrhœa	. 4	4			***			1	1	2	***	***
Enteritis	. 4	1	1				2		4		***	
Puerperal Fever			***				:		***	***	- 13	
Erysipelas			***		***						***	***
Other Septic Diseases		2	***	1	3	4		2	5	3	***	2
Phthisis	. 13	***		1	***	12	***	6	4	3	***	2
Other Tubercular	1								-			3
Diseases	. 4	1	1	***	2	***	***	***	4	***	***	0
Cancer, Malignant	1					70	10	0	7		1	
Disease			***		***	12	10	6	7 6	5 2	4	1
Bronchitis		8	3			1	4	7 6	7	2	1	2
Pneumonia		5	5	***		4	1				1	10000
Pleurisy	. 1			***	***		1			***	1	
Other Diseases of Res-						-						
piratory ()rgans	. 1			***	***	1		***				
Alcoholism ?	6	***		**	***	6		1	2	2	1	
Cirrnosis of Liver)	0						1000					
Venereal Diseases	2.0	10	***	***		***	***	3	7	3		
Premature Birth	13	13					***	0		0	***	
Diseases and Accidents					1					1		
of Parturition	0.3			1	1	7	12	5	4	9	3	2
Heart Diseases	10		ï		2	5		1	9	2		
Accidents		4				2			1	1	***	
Suicides		***	***			1	11	2	7	3		***
Senile Decay	12	16	2	2	2	21	21	19	27	16	2	4
All other causes	64	10	2	2	-	-1		1	1		[]	
All causes	234	59	17	5	11	78	64	67	97	56	14	16*

* 1 Resident of District. 15 non-resident.

Table AI.

SHOWING THE CAUSES OF DEATH AMONGST PARISHIONERS IN THE DISTRICT OF FINCHLEY DURING EACH OF THE FOUR QUARTERS OF THE YEAR 1903.

Causes of Death.		1st Quarter.	2nd Quarter.	3rd Quarter.	4th Quarter.	Totals.	1902.
Small-pox							1
Measles			1			1	2
Scarlet Fever							1
Whooping Cough		5				5	9
Diphtheria & Membranous Cre	oup	1			1	2	3
Croup		1				1	1
(Typhus							*:
Fevers { Enteric							1
Other continued			.:				
Epidemic Influenza		1	1		2	4	7
Cholera							
Plague		.:	**				
Diarrhœa		1	1	2 2		4	7 2
Enteritis		2		Z		4	1
Puerperal Fever					2.5		1
Erysipelas		.;			2	10	4
Other Septic Diseases		4	2 3	2	4	13	26
Phthisis			9	2	1	4	17
Other Tubercular Diseases		2 5	7	5	5	22	15
Cancer, Malignant Disease		3	4	1	8	16	27
Bronchitis		6	4	1	5	15	21
Pneumonia	* *	0	*		1	1	
Pleurisy				* *	1		
Other Diseases of Respirat	ory				1	1	
Organs	* *	3	1	2		6	6
Alcoholism, Cirrhosis of Liver			*				2
Venereal Diseases Premature Birth		3	2	2	6	13	2 6
Diseases & Accidents of Paturit						1	1
Heart Diseases		1 7	6	5	3	21	24
Accidents		3		4	3	12	9
Suicides		1	2 1			2	2
Senile Decay		4	3	1	4	12	12
All Other Causes		14	13	12	25	64	51
Totals		71	51	41	71	234	259

Table A2—Showing the District Mortality for each Quarter of 1903.

			Nоктн.				East.				West.				WHETSTONE.						
			Qua	rters.		al.		Quar	ters.		al.	Quarters.			al.		Quarters.		1-		
		1	2	3	4	Total.	1	2	3	4	Total.	1	2	3	4	Total.	1	2	3	4	Total.
Small pox						***					***										-
Measles						***		1	***		1						***		***		
Scarlet Fever									***												
Whooping Cough						3			***				***			***	2				1 5
Diphtheria and Membra	anous Crou	p								1	1	1			***	1					
Croup		1				1					***										**
Enteric																					
Epidemic Influenza		. 1	1		1	3									1	1	1	***			-
Diarrhœa		. 1				1			1		1		1	1		2				***	
Enteritis							9		9		4		1								**
Puerperal Fever		1										***	***			***		**	***	***	
Erysipelas					***					***	***		***	**		***	***	***		***	
Other Septic Diseases	***	1			1	2	2	1	2	***	5	***	1	***	1	3		***	***	***	**
Phthisis		. 2		***	0	6	l ĩ		1	2	4	1	1	"1	1	3	***	***		***	
Other Tubercular Disea	000		-	***	-		2		1	1	4	1	1		**	0	***	***	***		
Cancer		2	3	1	***	6	1	3	1	2	_		***		3		1 "			***	
D List		0	0	1			1		1	3	1	***	1	2	0	5	2	1	1		
Daniel Control	***		1	***	4	7		2	1	3	6		1	***	1	-	1			***	
111		. 0	2		1	6	2	1	**	4	1	1	1			2	***		***	***	
			***		***		111		+++	**	***	***		***		***	1	***		1	
Other Respiratory Dise Alcholism and Cirrhosis	ases .	7	***		1	1		***	***	***		***	***	112	***		***	***	***		
47			1	400	***	1	1	***	1		2	1		1		2	1			***	1 3
Venereal			***	***	***		1		***		***			***							
Premature Birth		. 1	1	***	1	3	1	***	2	4	7	1	1		1	3					
Diseases & Accidents o	t Paturitio	n		***		***		***	***		***	1			***	1		***	***		1
Heart Diseases	-	. 1	3	1	***	ō	1		1	2	4	4	3	2		9	1		1	1	
Accidents			1	***		1	3		3	3	9		1	1	***	2		***	***		
Suicides				***		***	1		***		1		1	F 10.00		1		***		***	
Old Age		. 1		***	1	2	3	2		2	7		1	1	1	8					1 2
All Other Causes		. 5	2	3	9	19	7	7	5	8	27	2	4	2	8	16			2		1 5
Totals		. 24	17	5	21	67	27	27	21	32	97	13	16	11	16	56	7	1	4	2	14

Senile Mortality.—Of the 234 deaths registered, 52 were of persons over 70 years of age. The proportion of deaths occurring among those of over 70 years of age to the total deaths is therefore 22.2 per cent. There were 18 deaths of persons of over 80 years of age. These figures represent a high proportion of senile mortality, a fact which also speaks well for the healthiness of the district.

SENILE MORTALITY.

		65 and under 70.	70 and under 80.	80 and under 90.	90 and upwards.	Totals.
First Quarter		5	7	3		15
Second Quarter		2	9	7	1	19
Third Quarter		3	6	3		12
Fourth Quarter		2	12	4		18
		12	34	17	1	64
	One	parishion	er died at	99).		

THE CAUSES OF DEATH.—These are fully set forth in Table A. in which it will be noted that the deaths are also apportioned to different age periods. Table Al shows the deaths during each of the four quarters of the year.

It will be noted (Table A) that there is no marked incidence of any particular form of disease upon any one district, when regard is had to the different populations, with the exception that Whooping Cough was especially prevalent at North Finchley and Whetstone. Whetstone furnishes fewer deaths in proportion to its population than either of the other three sub-districts, and West Finchley stands next in this respect.

In comparing Table Al with the corresponding table for last year the most noticeable points are: A decrease in the deaths from Whooping Cough, Influenza, Diarrhœa,

Phthisis and other Tubercular Diseases, and Diseases of the Respiratory Organs; and an increase in the deaths from Cancer, Premature Births, Senile Decay and Accidents. The increase in the mortality from Whooping Cough is due to a severe and general outbreak of the disease over the Districts of North Finchley and Whetstone.

THE PUBLIC INSTITUTIONS WITHIN THE DISTRICT furnished 16 deaths, as follows:—

DEATHS IN PUBLIC INSTITUTIONS WITHIN THE DISTRICT.

	rst Quarter.	2nd Quarter.	3rd Quarter,	4rh Quarter.	Totals.
Convent of the Good Shepherd	4	1			5
Woodside Home	1		2	3	6
Home for Homeless Babies			1	2	3
Convalescent Home, East Finchley	1	**		1	2
	-	_	-	-	
	6	1	3 .	6	16

Fifteen of these deaths were of persons who came to Finchley from other districts, and who were non-parishioners; they have not, therefore, been reckoned with in estimating the Finchley Death-rate.

The Causes of Infantile Mortality are set forth in Table A3. Most of these causes are greatly affected by wholesome surroundings and a proper observance of the laws of health—as they apply to infants. The lack of intelligent parental control, which is responsible for so much infantile mortality, is seen to be mainly reflected in the number of deaths from Diseases of the Respiratory Organs,

England excels all other countries in Europe in the proportion of deaths of infants under one year of age which result from suffocation in bed with their parents. During the recent 10 years the number of such deaths have exceeded 15,000. It is impossible to believe that a large number of these deaths are not due to criminal neglect on the part of parents. Although most cases of overlying are of an accidental nature, yet there are many cases in which the death occurred under such conditions of carelessness or reckless indifference to the infants' welfare or of culpable neglect of precautions during intoxication, that, in the opinion of a high authority, the parents should be committed for trial for manslaughter. This is done in a few cases in England, but it is difficult to prove gross and culpable neglect, and convictions have seldom followed.

The Clergy and Ministers of all denominations might do much in the way of warning poor and ignorant parents against the risk of taking their infants into bed with them, and the question arises as to whether it should not be declared to be an obligation on every parent to provide a cradle or cot for the infant's use.

Table A3.

THE CAUSES OF INFANTILE MORTALITY, 1903.

			1st Quar.	2nd Quar.	3rd Quar.	4th Quar.	Totals.
		-					
Wasting, Developmen	ntal Disease	es,					
and Debility Premature Birth and			1		2	2	5
Premature Birth and	Insufficie	nt					
Vitality			4	2	2	7	15
AD Attachment			1	1 -	2		4
Diseases of Lungs .			3	1	1	8	13
Whooping Cough			2			*:	3 1
Convulsions			2			1	3
Gastric Catarrh and	Enteritis			14	1		1
Measles				1			2
TO I DITTION AND			1			1	2
Tuberculosis (other	than (P	ul-				1	1
222022017			1:			1	1
Acute Eczema			1				1
2311111		1 1	1	1			1
			1				1
Acute Rickets		*.*	1	**		**	1
Septic Meningitis			1				1
Accidental Suffocation	on with be	ed-				1	0
- DECESSOR			1	11		1	2 5
Other Causes				2	3		9
Totals			20	7	11	21	59

ZYMOTIC MORTALITY.—Included in the Zymotic Mortality are the deaths from the 7 principal Zymotic Diseases, viz.: Small-pox, Measles, Scarlet Fever, Diphtheria, Whooping Cough, "Fever" (including Typhoid Fever, Typhus Fever, and Simple Continued Fever), and Diarrhoea. The rate affords a good criterion to the healthiness of the District and of the efficiency of its sanitary administration.

Table A4.

DHATHS FROM ZYMOTIC DISEASES (INCLUDING INFLUENZA) IN THE YEAR 1903.

	Scarlet Fever.	Diptheria.	Membranous Croup.	Typhoid Fever.	Puerperal Fever.	Measles.	Whooping Cough.	Diarrhoea and Dysentery.	Influenza.	Erysipelas.	Total.	Rate to every 1,000 Persons.
First Quarter		1	1				5	1	1		9	
Second ,,						1		1	1		3	
Third ,,					***			2			2	
Fourth ,,		1							2		3	
		2	1			1	5	4	4		17	0.7
1902	1	3	1	1	1	2	9	7	7	1	33	1.4

The Zymotic Death-rate for 1903 was 0.54, as against 1.03 in the preceding year. In Table A4 the Zymotic rate of last year can be compared with that of previous years, and in Table A5 the rates for each of the Diseases comprised within the term 'Zymotic' are given, along with the corresponding rates for England and Wales, the 76 Great Towns, and London generally.

It will be noted that the comparison is in every instance favourable to Finchley.

The Public Mortuary.

Twenty-six bodies were deposited during the year at the Public Mortuary, as against 22 in the preceding year; 19 of these had been parishioners of Finchley, and 7 of Friern Barnet.

INQUESTS, 1903.

		1st narter.	2nd Quarter.	3rd Quarter.	4th Quarter.	Total:
Accidental Burns		1				1
Whooping Cough		1				1
Perforation by Gastric Ulcer		1				1
Hanging, Executed by Order	of					
the Law		1				1
Overlying		1				1
Suicide, Cut Throat		1				1
Heart Disease		1	1	1	1	4
Uræmia, Chronic Alcoholism			1			1
Suicide, Bullet Wound			1			1
Exhaustion following Fractu	re					
of Thigh			1			1
Asphyxia by Vomited Milk			1			1
Accidental Asphyxia by Be	d-					
clothes during Epileptic F	it			1		1
Septicæmia following Fractu	re					
of Leg				1		1
Rupture of Intestine, Bicyc	le					
Accident				- 1		1
Fractured Skull, Accident				1		1
Hæmorrhage into Ventricle	of					
Brain, Accident					1	1
Fractured Spine, Accident						
Suicide, by Hanging (Home as	d-					
dress, Stepney, Net includ	ed					
amongst deaths)					1	1
Accidental Suffocation by Bee	d-					
clothes, Infant	*			14.	1	1
		-	-	-	-	-
		7	5	5	5	22

Table A5.

A Comparison of the Rates of the Finchley District with those of England and Wales, the 76 Great Towns, and London generally, for the Year 1903.

			General Death- Rate,		ate of antile rtality.	Birth-Rat	te. Z	ymotic Death- Rate.
England and Wales		15.4			132	28 4		1.46
The 76 Great Towns		16.8			144	29.7		1.89
London generally		15.2		1	130	28.5		1.76
The Finchley District		9.7		91:3		26.8		0.54
	Small- pox.	Measles.		arlet	Whooping Cough.	Typh'd Fever.	Diph- theria.	Diarrh- and Dysen- tery.
England and Wales	0.020	0 27	0	12	0.27	0.10	0.18	0 50
London generally	0 003	0.44	0	08	0.35	0.08	0.16	0.63
The 76 Great Towns	0.030	0.36	0.	14	0.33	0.12	0.20	0 71
The Finchley [District	0.000	0.04	0	00	0 20	0.00	0 08	0.16

Table A6.

VITAL STATISTICS OF WHOLE DISTRICT DURING 1903 AND PREVIOUS YEARS.

	estimated dle of ear.	Вп	стиѕ.	4 5 6 29.5 42 86.8 28.0 43 90.1 27.7 52 107.0 28.6 57 110.7 25.0 46 98.7 25.8 46 92.7 101.8 22 23.8 68 136.5 23.2 56 110.4 2.5 56 110.4	DEAT TO	DEATHS AT ALL AGES, TOTAL.		on- stered t,	idents	DEAT ALL . NE	HS AT AGES, TT.	
YEAR.	Population estima to Middle of each Year.	Number.	Rate. *	Number.	Rate per 1,000 Births registered.	Number.	Rate, *	Deaths in Public Institutions.	Deaths of Non- residents registered in District.	Deaths of Residents registered beyond District.	Number.	Rate.*
1	2	3	4	5	6	7	8	9	10	11	12	13
1891 1892 1893 1894 1895 1896 1897 1898 1899 1900	16,419 17,002 17,500 18,015 18,598 19,218 20,064 20,907 21,800 22,750	477 486 515 466 496 501 498 507	29.5 28.0 27.7 28.6 25.0 25.8 24.4 23.8 23.2 23.9	43 52 57 46 46 51 68 56	90·1 107·0 110·7 98·7 92·7 101·8 136·5 110·4	224 220 197 204 216 246 244	12·4 11·8 10·2 10·1 10·4 11·3 10·7		 17 21 9 11 10 19 17	 14 11 12 12 12 12 22 17	182 207 231 221 210 200 205 218 249 244	11·1 12·2 13·2 12·2 11·3 10·4 10·2 10·4 11·4 10·7
Averages for years 1892-1901	19,227	495	26.0	51.9	104.6	222	10.7		14.5	13:5	216.7	11.3
1901 1902 1903	22,500 23,400 24,125	578	24·0 24·7 26·8	53 54 59	98·1 93·4 91·3	211 269 247	9 4 11 5 10 2		12 27 16	20 17 29	219 259 234	9·7 11·0 9·7

Note.—The deaths included in Column 7 of this table are the whole of those registered during the year as having actually occurred within the district or division. The deaths included in Column 12 are the number in Column 7, corrected by the subtraction of the number in Column 10 and the addition of the number in Column 11.

By the term "non-residents" is meant persons brought into the district on account of illness, and dying there; and by the term "residents" is meant persons who have been taken out of the district on account of illness, and have died elsewhere

The "Public Institutions" taken into account for the purposes of these Tables are those into which persons are habitually received on account of sickness or infirmity, such as hospitals, workhouses, and lunatic asylums. A list of the Institutions in respect of the deaths in which crorections have been made is appended.

^{*} Rates calculated per 1,000 of estimated population.

Table A6-Continued.

	Total population at all ages	22,126) 3	10
	Number of inhabited houses	3,949	100 101.
sive of area >3,384 covered by water).	Average number of persons per house	5.6	16

Institutions within the District receiving sick and infirm persons from outside the District. Institutions outside the District receiving sick and infirm persons from the District.

Convent of the Good Shepherd.
Woodside Home.
Convalescent Home, East
Finchley.
Small-pox Isolation Hospital.
Home for Homeless Babies,
Fallow Corner, North
Finchley.

Royal Free Hospital.
St. Bartholomew's Hospital.
Hospital for Women, Soho.
Islington Infirmary.
Middlesex Hospital
Children's Hospital, Great
Ormond Street.
Salvation Army Maternity Home
Great Northern Hospital.
Royal Chest Hospital.
London Temperance Hospital.
Northumberland House Asylum,
Stoke Newington.
Hackney Infirmary.
University College Hospital.

Infectious Diseases and the Measures taken to Prevent their Spread.

It will be seen from Table B that 159 notification certificates of infectious illness were received from medical practitioners in the District, as against 189 in the preceding year, and 151 in 1901.

The 159 cases represent infection in 126 different houses, each of which was subsequently disinfected by the Sanitary Authority. At least one visit was paid to every house infected, and it was ascertained that in 29 of the 126 infected houses there were grave sanitary defects; in 35 the sanitary defects were slight, and in 62 there were no sanitary defects. In forming these

whether any sanitary defect found was of a nature which is generally held by health officers to predispose to or directly bring about the particular disease in question.

Thus, apart from the measures that have been taken to prevent the spread of infectious illness, the notification of such illness was the means, during the year, of bringing about a sanitary inspection of 126 premises, and the abatement of insanitary conditions in 64.

Of the 159 cases of Infectious Diseases notified, 80 were removed to hospital, or 50 per cent.

The Agreement with the Hornsey Borough Council with reference to the conjoint use of their Isolation Hospital for Hornsey and Finchley patients came into operation on April 1st, 1903. By this arrangement 25 beds will be reserved for the use of Finchley residents, and cases of three different infectious diseases will be isolated. This marks a great advance in the sanitary administration of the District, and a very much needed improvement of the previous state of things whereby only one disease (Scarlet Fever) could be isolated in a small building, which had ceased to be suitable for the reception of patients at all.

THE INFECTIOUS SICKNESS RATE OF THE DISTRICT was 6.6 to each 1,000 of the population, as against 8.0 in 1902. The rate in London generally was 6.0.

It will be seen from Table B1 that the number of cases of Diphtheria notified were far above the mean of the past 10 years, and they represent a marked increase on the number notified during the preceding year. On the other hand the number of cases of Scarlet Fever and Typhoid Fever were far below the mean.

Table B.—Cases of Infectious Disease Notified During the Year 1903.

	CASES	Nor	IFIED	IN V	VHOL	E DIS	STRICT.			LOCALIT	No. of Cases Removed to Hospital from Each Locality.				
NOTIFIABLE DISEASE.	Ages.		A	Age	es – Y	ears		ey.	h ey.	one.	t ley.	ley.	h ley.	0000	
	At all A	Under 1	I to 5	5 to 15	15 to 25	25 to 65	65 and upwards	East Finchley	West Finchley	3 North Finchley	Whetstone.	East Finchley.	West Finchley	North Finchley	Whatstone
Small-pox															
Cholera															
Diphtheria	72	3	29	32	3	ō		46	15	6	5	18	9	6	1
Membranous Croup		***													
Erysipelas	15	1			2	11	1	8	5	2					
Scarlet Fever	67		14	39	13	1		30	10	24	3	20	3	19	5
Interic Fever	4			2	1	1		1	2	1			1	1	
Typhus Fever															
Relapsing Fever															
Continued Fever	***														+ 1
Puerperal Fever	1				1			1					0.00		* 1
Plague					.,										
Totals	159	4	43	73	20	18	1	86	32	33	8	38	13	26	:

Table B1.

Showing the Number of Cases and Deaths from the Principal.
Infectious Diseases Notified from among Parishioners
During the Years 1890-1903 (inclusive).

	Small	l-pox.	Scarlet	Fever.		phtheria and Croup.		
	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.		
1890 1891 1892 1893 1894 1895 1896 1897 1898 1898 1899 1900 1901 1902 1903	9 8 1 7 15	1 2 1 1	53 80 125 189 57 27 33 54 91 58 94 98 115 67	1 2 3 2	31 32 37 30 66 22 25 20 12 32 12 21 31 72	4 3 6 9 4 2 5 1 6 1 2 3 3		
1000	Erysi Cases.	pelas.		al Fever.		l Fever.		
1890 1891 1892 1893 1894 1895 1896 1897 1898 1899 1900 1901 1902 1903	16 14 17 38 22 15 14 15 6 14 16 10 13 15		 1 2 1 4 1 2 2 1 1	 4 1 2 1	7 3 3 14 12 12 12 13 9 12 7 15 13 4	1 1 1 1 1 3 2 2 2 3 3 1		

Table B2.

Cases of Infectious Disease Notified during each Month of the Year 1903.

		Diphtheria.	Erysipelas.	Scarlet Fever.	Enteric Fever.	Puerperal Fever.	Totals.
January	 	20		10			30
February	 	11	1	10 3 7 4 6 2 6 5 8 10 5 1	1	1	17 12 7 12 6 15
March	 	4	1	7			12
April May	 	3 6 2 5 2 2 2 3 3		4			7
May		6		6			12
June		2	3	2			6
July	 	5	3	6	1		15
August .	 	2		õ	1		8
September October	 	2	2 2 3	8			12
October	 	3	2	10	1		16 11
November			3	5			11
December	 	11	1	1			13
Totals	 	72	15	67	4	1	159

Scarlet Fever.

The 67 cases of Scarlet Fever notified were for the most part of a very mild nature. They represent infection in 57 houses. This is the lowest figure of notification of Scarlet Fever since 1899.

Diptheria.

The 72 cases of this disease notified during the year gave rise to only 3 deaths and represented infection in 53 different households. The disease, therefore, though unusually prevalent, was of a very mild type

Typhoid or Enteric Fever.

The 4 cases which were notified during the year represented infection in 4 different dwellings. It is ten years since such a low figure of notification was recorded.

Of the 4 cases of Enteric Fever, none proved fatal. The disease appears to frequently spread from obscure cases in whom the nature of the disease was not recognised; and the risk of the retention of cases of Enteric Fever in the houses of poor persons, where the conditions of life are such as to give opportunity for the extension of the disease, is borne out in many recorded instances.

Measles and Whooping Cough.

Whooping Cough was very prevalent in North Finchley and Whetstone during the earlier months of the year, and several schools had to be closed in consequence of the danger of bringing the children together.

Bacteriological Diagnosis.

During the year 1903, 25 Bacteriological Examinations were made in order to determine the existence of Diphtheria, Phthisis and Enteric Fever in doubtful cases. In 18 cases the suspected disease was Diphtheria, and in 8 instances the bacteriological diagnosis pronounced against the disease. In 6 instances the suspected disease was Enteric Fever, and in 1 instance the bacteriological diagnosis supported the existence of the disease. In one instance the suspected disease was Consumption, and this proved to be the case on examination. During the preceding year 10 such examinations were made.

Cancer.

In Cancer we have a terrible disease, furnishing a progressive increase in mortality-more especially among males. No one can reasonably doubt the real nature of much of this increase. It can be demonstrated as not due to any altered age and sex distribution of the population of this country, and the statistics of other countries (Germany, America, France, Sweden, Holland, Switzerland, Russia, and several of our Colonies) furnish records of an increase very similar to our own. Local irritation or injury is a strong predisposing, if not exciting, factor, especially among those with congenital vulnerability to the disease; and when we add that in certain districts Cancer is more rife than in others, we have almost exhausted the stock of our present knowledge. This varying prevalence over different areas is found in Germany to be largely accounted for by variations in the average duration of life in the different districts; but in England and Wales, Dr. Tatham has shown in Supplement to 55th Annual Report that if the Cancer rates are corrected for differences in age and sex distribution, even then the variations in the rates from 1881-1890 were as great as from 2,250 per million for London to 1,574 for Monmouthshire. The incidence of Cancer upon the Finchley District is happily below the average figure for England and Wales.

Consumption (Phthisis).

During the year the Council has taken a very important step with the object of adopting measures to reduce the sickness and death resulting from Tuberculosis, by making that disease voluntarily notifiable in the District. Pulmonary Tuberculosis (Consumption) causes one-ninth of all the deaths in Great Britain and one-sixteenth of the total deaths in Finchley. If there had been no Consumption the average length of life for each individual born would have been lengthened by 21 years and the working period of life would be lengthened on the average by very nearly 2 years. During the past two or three years several London Boroughs have taken a similar action to Finchley, but Finchley must take the credit of being one of the first of the London suburbs to adopt this valuable measure. It is surprising that it has been left so late in the day for Local Authorities to make some organised attack upon this largely preventable disease. As one writer has put it. "Try to fancy that some 150,000 of our people are kept in some dreadful bondage, and that every year some 60,000 of them have to submit to the pain of death at the hand of some unrelenting foe. Would it not be thought worth a little trouble to adopt some direct plan of campaign against this enemy, and would it be considered possible that any Government would refuse to sanction the expenditure of money necessary to assist in an attempt promising a fair amount of success?"

Shortly after the Council had agreed to adopt the voluntary notification of the disease, the following letter was addressed to the medical practitioners of Finchley:—

Dear Sir,

The Council at their recent Meeting unanimously resolved to inaugurate a Voluntary System of Notification of cases of Phthisis within the District.

I now beg to invite your co-operation in this effort to diminish the spread of Phthisis by dust infection. As you are aware, even though every care is taken as to the disposal of sputum in a given case attended by you, it is very desirable that the room occupied by the patient should be purified before any other person sleeps in it. This work of disinfection will be carried out by the Public Health Department free of all charge.

I enclose herewith a copy of the precautionary handbills which it is proposed to leave at the house where a case of Phthisis is notified, and sincerely trust that you will be able to assist me in the efforts which I propose to make to bring about the removal of conditions which are likely to favour the spread of the disease.

The usual fees for notification will be paid for information of the existence of any case of Consumption which has not been previously notified from the same premises. As cases will only be notified with the consent of the patient, there will, it is thought, be no difficulty in obtaining information as to whether the case has been previously notified or not.

Arrangements have been made for examining, without fee, specimens of sputum from patients the nature of whose illness is dubious, and I feel sure you will agree that this provision should be utilised in all such cases.

I am, dear Sir,

Yours faithfully,

HENRY KENWOOD,

Medical Officer of Health.

ACTION WHICH IT IS PROPOSED TO TAKE UNDER THE VOLUNTARY NOTIFICATION OF CONSUMPTION.

- (A.) Forms will be issued to Medical Practitioners on which they are invited to notify (with the consent of the patient or those in charge of patient) any case of Consumption which may come under their notice and with respect to which the Council would be of assistance in promoting preventive measures.
- (B.) The preventive measures which the Council will undertake are as follows:—
 - 1. A visit by the Medical Officer of Health with the view of inspecting the surroundings of the patient, the conditions of work, etc., and the detection and removal of conditions likely to promote the disease.
 - 2. Verbal advice will be given and a printed handbill of instructions left at the house.
 - 3. An offer will be made to perform, free of all charge, any necessary disinfection of rooms, bedding, etc.
 - 4. The house will be visited from time to time in order to see if the necessary precautions have been observed to prevent the spread of the disease.
 - 5. Arrangements will be made for examining, without fee, specimens of sputum from persons the nature of whose illness is dubious, in order to bring about a prompt diagnosis of the disease.

6. Medical Practitioners will be informed that the usual fees for notification will be paid for information of the existence of any case of Consumption which has not been previously notified from the same premises.

The voluntary notification of this disease enables the Local Sanitary Authority to assist in preventing its spread, and the measure is undoubtedly valuable, but it is not before the disease is compulsory notifiable that the maximum amount of good will be obtained. Of course, it is almost entirely amongst the poor that the Sanitary Authority requires the information of the existence of cases and powers to limit the spread of infection, because the danger of the spread of the disease amongst this class of the community, owing to the conditions under which they are housed, is very great indeed. Happily the disease is declining in this and many other countries, in consequence apparently of general hygienic measures and the improved social conditions of the people; and having regard to the fact that the communicability of the disease is but slight, a little more knowledge and care on the part of the general public would have the effect of reducing the number of cases infected from pre-existing cases almost to vanishing point.

With reference to the compulsory notification of this disease, Sheffield has, under a local Act, succeeded in obtaining such powers from Parliament. It is necessary, however, to point out that under the Sheffield Act the disease is not added to those comprised in the Notification Act, and that the subjects of Pulmonary Tuberculosis are expressly exempted from the disabilities of those suffering from the acute fevers.

During the year the London County Council has issued a Bye-law directed against the dangerous and disgusting habit of spitting. The Bye-law is undoubtedly doing good, although I have not yet heard of an instance in which a breach of the Bye-law has been followed by the conviction and fine of the offender; but to what an extent this promiscuous spitting is a habit, and nothing else, is sufficiently evidenced by one who, at the present time rides in our 'busses, tramcars and railway carriages, and compares the state of the floors with that which obtained only a few months back.

London and its suburbs is at the present time the worst provided with Sanitoria of all large towns in the kingdom, whereas at the same time the demands for treatment of Consumption in these Institutions are overwhelming. The treatment of early cases and the isolation of dangerous cases necessarily implies the provision of some accommodation for these patients. The existing Consumption Hospitals and the Poor Law Infirmaries do not provide nearly enough of such accommodation, even if they limited admission to patients from London and the suburbs. It is at present by no means an unusual thing for cases of Consumption in Finchley which urgently require isolation and sanitorium treatment, to have to wait many months before they are able to obtain admission into one of these Institutions. Sanitoria for the poorer class of the community within easy reach of London hardly exist, and more accommodation is urgently needed, both for the treatment of early cases and for the isolation of advanced cases. During the year a scheme was launched having for its object the provision of a Sanatorium for the County of Middlesex. The scheme has been well thought out, and it should appeal successfully for

support to every Sanitary Authority in the County. The value of sanatoria, however, must not be exaggerated; doubtless they are an essential part of any scheme directed against the scourge of Tuberculosis, but it is true of this disease, as with others, that prevention is better than cure, and it is by improving the conditions of life and the dwellings of the poorer section of the community that we shall achieve most in our crusade against the disease.

THE SANITARY AUTHORITY AS THE EDUCATION AUTHORITY.

During the year the District Council became the Education Authority, and responsible for the conditions under which many hundreds of children spend a not inconsiderable portion of their time. An opportunity has, therefore, been afforded to the Sanitary Authority, not only of ensuring that the sanitary surroundings of the scholars are as good as they can be made, but that the whole of school life should be passed under the most hygienic surroundings. It is, therefore, to be hoped that the Schools themselves, and the manner in which they are conducted, will be made to serve as object-lessons, which will be used to supplement and illustrate the teaching of the elements of Hygiene—which is, in my opinion, an essential part of education.

In many districts the Medical Officer of Health will. doubtless, be the Medical Adviser of the Education Committee. He will, therefore, be able to exercise a detailed supervision—which will imply frequent visits—and he will have the opportunity of bringing many hygienic requirements directly before the knowledge and consideration of the Education Authority. There is scope for improvement in the

direction of reducing, so far as possible, the dangers attending the packing together of large numbers of school children in one class-room, and the arrangements for sufficiently ventilating the class-rooms are such as at present admit of improvement. The school furniture should be far more generally adapted to the children of various sizes, and not the children to the furniture. The evil effects of bad posture upon scholars is universally recognized; it is responsible for permanent body deformities, defective physical development, and a large amount of visual defect. The children should be taught some of the elementary laws of health, and the female children should all be taught the more essential facts with reference to domestic economy and infant rearing. Everyone admits the advisability of giving this information to school children, and yet year after year it has been excluded from the curriculum. How to live healthy lives (and therefore happy and useful lives) is one of the greatest matters which education has to teach, and a system of education falls far short of the ideal if these subjects are excluded from the curriculum. If these subjects are to be taught, the Teachers must be taught how to teach them, and there is certainly a want in this country for the suitable preparation of Teachers for this important work. A teacher well-informed upon the principles of hygiene would be enabled to keep a watchful eye upon the health of the children entrusted to his or her care, and would at the same time help to obtain the most healthy environment and the best hygienic conditions for the scholars. Every scholar represents a certain social value, capable of being increased by attention to his physical, intellectual and moral culture; the value is diminished or lost if from neglect of early treatment of disease or of hygienic precautions the scholar fails in health. Hence, periodical medical inspection of scholars, as well as of schools, is imperatively demanded in the interests of the community. It is this personal aspect of school hygiene which, excepting in a comparatively small number of instances, has been neglected in this country. Special and frequent examination of school children should be made for mild and unrecognized cases of infectious disease, defective sight, deafness, and other physical defects.

The School Attendance Officers require to be brought (and doubtless will be brought, under the new order of things) in closer touch with the Medical Officer of Health. More prompt information as to absentees is desirable, and his cooperation in helping to check unhealthy and vicious conditions of life in the homes which he is constantly visiting could not fail to be of great advantage to the Sanitary Authority. Many of the above matters can easily be provided for; but some I fully recognize, present difficulties of an administrative or economic character; but all can and will be overcome in the immediate future, and the gain to the next generation will fully compensate for some extra trouble and expense in initiating these very desirable reforms.

It must be constantly borne in mind by those who take upon themselves the important function of controlling or directing education, that the end of all education is to produce capable citizens, and that the scholar who is compelled to attend school should be protected in every possible way against any risks to health. The most brilliant scholastic achievements are dearly purchased at the expense of permanent impairment of health.

A well-organised system of physical drill, carried out, not in crowded schoolrooms, but either outside or in special buildings, will promote physical fitness, which counts for so much in the future well-being and success of the scholars. These drills should be directed by some person who is well-acquainted with the object of each particular exercise. Many of the drills which I have witnessed in Board Schools are a hollow farce, and the manner in which the scholars are allowed to go through them is ludicrous. It is difficult to see how any good can result from them.

Meteorology in and around London during the Year 1903.

January.—The weather of January was singularly eventful. The opening week was extremely mild and unsettled, with frequent rain, and with thunderstorms on the 3rd in many parts of England. On the 8th or 9th the weather became colder and drier, and for nearly a week a frost of considerable severity prevailed over the whole kingdom. About the middle of the month this broke up, and for the remainder of the time mild, changeable conditions again prevailed. Pressure was below the average; temperature was above the normal. Rainfall exceeded the average. Winds were chiefly from points between south and west.

February.—The weather, until the closing week, was mostly fair and dry. A violent south-westerly to westerly gale occurred on the night of the 26th or on the 27th over nearly the whole of the kingdom. Temperature was considerably above the normal; the winds were chiefly from the south-westward or westward; bright sunshine was less than normal. Rainfall was below the average.

MARCH.—The spell of mild south-westerly breezes noticed in February continued throughout the greater part of March, the only interruption occurring quite early in the month, when the wind was more variable and the weather cold, with snow showers in the western and northern districts. Temperature was above the normal; the winds were chiefly from between south and west. Rainfall was considerably in excess of the average; bright sunshine was fairly normal.

APRIL.—The mild south-westerly type of weather which had been the feature of the winter months came to an end early in April. Snow showers and night frosts were of frequent occurrence, and the weather generally was of an unseasonable character. During the last week the conditions were of a cyclonic type, the centres of the disturbances keeping to the southward, and so bringing the wind into the eastward. Rainfall was irregularly distributed; bright sunshine was above the normal generally over the northern and inland parts of England.

MAY.—The weather during the month was of a very variable character, there being one well-defined anti-cyclone. Thunderstorms were fairly numerous in several localities on as many as five days in London, where those of the 30th and 31st were exceptionally severe and prolonged; bright sunshine was generally well under the average.

able character, presenting extremes of rain and drought, of cold and warmth. Within the basin of the Thames the rain was the largest June fall on record. There was a great predominance of winds from the noth-east quarter; gales were rarely felt; temperature varied greatly, from very cold to very warm; rainfall was most irregularly distributed; bright sunshine was rather deficient.

July.—The weather during July was scarcely less remarkable than that of the preceding month. Thunderstorms were not particularly frequent, but almost every part of the kingdom was thus visited at least once. South-westerly to north-westerly winds were most general. Temperature and bright sunshine were both below the normal.

August.—The month as a whole was characterised by a very unsettled type of atmospheric conditions, numerous Atlantic disturbances bringing frequent and often heavy rain; thunderstorms were experienced on several days, yet there were many brilliantly fine intervals. The winds were mainly from points in the west, gales being rather numerous for the time of year; temperature was everywhere below the average; and there was a deficiency in the amount of bright sunshine.

September.—The early part of the month was extremely changeable, with heavy rain, the unsettled weather culminating on the 10th in a westerly gale of unusual severity, which occasioned much damage. A short spell of cold northerly and north-westerly winds set in, with frosts in many parts. Later on the weather improved very materially. Temperature varied greatly. Rainfall was in excess.

October.—Throughout the month the weather remained in an exceptionally unsettled state. As a result, the period was extremely wet in all districts,, the rainfall being both abnormally frequent—from 28 to 31 rainy days being experienced—and heavy. On the last day of the month there was a magnetic storm of exceptional intensity. Pressure was everywhere considerably below the mean;

the winds were mostly from southerly or westerly direction. Temperature kept rather high for the season. There was a deficiency of bright sunshine practically everywhere.

November.—The weather experienced during the month of November was generally of a more settled and drier character than that of any preceding month of the year. The change was associated with the presence, during the greater part of the time, of systems of high barometric pressure, either immediately over our islands, or with their centres to the south-west or south. There was a good deal of fair to fine dry weather, and fogs were not so frequent as is usual at this season. Pressure was above the average. The winds were mainly from points between south-west and north-west of England, and bright sunshine was in excess. Rainfall was below the average.

DECEMBER.—The weather during the closing month of the year was characterised by a great prevalence of dull, overcast skies, and at times there was a good deal of mist and fog; the fog of the 5th covered the greater part of England. Cyclonic depressions were fairly numerous in our neighbourhood, and several were deep, with strong winds and gales accompanying them; but as a rule the rainfall was slight throughout the country. Cold prevailed in all districts in the opening and closing days, with very sharp frosts at night. The middle period was rather mild and open. Pressure was below the average; the winds were very variable; temperature was nearly everywhere below the normal; rainfall was in deficiency; and so also was the duration of bright sunshine.

METEOROLOGICAL OBSERVATIONS TAKEN DURING THE YEAR 1903, AT THE BARNET GAS WORKS, BY T. H. MARTIN, Esq., C.E.

The Observations have been reduced to mean values by Glaisher's Barometrical and Diurnal Range Tables, and the Hygrometrical results from the sixth edition of his Hygrometrical Tables.

	Temperature of Air.				Rain.		(00)	
Month.	Highest.	Lowest.	of all Highest,	of all Lowest.	Mean Temperature of Air.	No. of Days it fell.	Amount Collected.	Relative Humidity (Saturation
January February March April June July August September October November December		Deg 18·5 16·0 21·0 21·5 26·5 31·8 36·9 37·8 32·8 31·0 24·2 20·0	Deg. 44·8 51·7 54·2 53·3 64·7 66·4 72·1 67·6 59·1 50·8 42·3	Deg. 32 8 36 4 35 2 33 7 41 6 44 1 49 7 48 4 44 6 44 2 37 3 32 3	Deutees. 39 3 44 0 45 6 45 7 55 7 58 7 63 6 61 6 58 6 53 3 44 7 38 2	17 12 20 12 12 12 9 11 18 13 27 14	Ins. 2·26 0·93 3 05 1 76 2·38 6·18 4·08 4 43 3 23 6 77 1·72 1·76	89 84 80 75 75 73 74 76 84 85 86 89

Notes Upon Sanitary Work Performed During the Year.

During the year 1903, 1,646 premises were inspected for conditions injurious or dangerous to health, and insanitary conditions varying in their nature from comparatively trivial to grave were discovered in 384 instances.

Of the number, only 134 inspections were the result of personal complaints, a circumstance showing the necessity of some house to house inspection from time to time.

A statement of the work done under the Nuisances Sections of the Public Health Act will be seen in the appended Report of the Sanitary Inspector. It will be noted that during the year 23 different houses were found to be overcrowded; and 4 houses were closed as unfit for human habitation.

Analyses performed during the year include:-

A large number of effluents from the Sewage Farm were chemically examined, and the results were satisfactory in each case.

Forty samples of mortar were analysed, and over one-third of these were condemned as not complying with the bye-law.

By direction of the Council (in November, 1897), I have taken samples of the public water supply monthly, and submitted them to a careful analysis. Each sample has been taken from a different stand-pipe, and the results of the analyses have, without exception, been very satisfactory. Five private supplies were examined, and two condemned.

All the Dairies, Cowsheds, and Slaughterhouses of the District have been periodically inspected by myself, and, in my opinion, they are generally kept in a satisfactory condition. A full list of these premises (together with the Bakehouses) is appended.

Factories and Workshops.

All the Workshops and Work-places in the District have been inspected during the year. The majority of these I have myself visited.

At the beginning of the year 1903 there were on the Register 73 Workshops and Work-places.

During the year 15 premises were added to the Register. At the end of the year 1903, 88 places were on the Register.

As a rule proper attention is given to ensure a satisfactory provision as regards sanitary conveniences. In respect of warming and ventilation, the Workrooms will doubtless compare favourably with those of most other districts, but am unable to say that in the majority of cases the warming and ventilation can be regarded as wholly satisfactory. There is a great prejudice among the workers against obtaining fresh air by open windows, and even if extra provision for ventilation is made, the workers almost invariably close such ventilators during the working hours. I am of opinion that this circumstance is largely due to the fact that in many cases the Workrooms are not efficiently warmed, and the workers therefore find it necessary to keep the temperature up by their own body heat, and this can only be done when the fresh cold air from outside is excluded from the room. It is a pity that the Act does not define what a "reasonable temperature" is; it would be of great value to those of us who have to administer the Act if a low limit and a high limit of temperature were defined by the Home Secretary.

During the year there were no cases of notifiable infectious disease occurring on premises in which there were Workshops, but on several occasions outworkers in connection with several Workshops had to be stopped from carrying on their work at home. A list of all outworkers has been kept in the office; these lists have generally been obtained on calling at the workshops, for employers generally fail to realise their duty to send in their list of outworkers twice a year, viz., in February and August, as the Act directs,

The Revenue Act of 1903.

In 1890 the Customs and Inland Revenue Act granted exemption from Inhabited House Duty to all houses used solely for providing separate dwellings at rents not exceeding 7s. 6d. per week for each dwelling, if the Medical Officer of Health certified that the premises afforded suitable accommodation for each of the persons inhabiting them, and that due provision was made for their sanitary requirements. This exemption was in order to encourage the erection of Artisans' Dwellings on good lines, and it has proved a useful piece of legislation.

The Revenue Act of 1903 extends the provisions of the former Act, and now where a dwelling-house is used for the sole purpose of providing separate dwellings: (a) Any dwelling which is of an annual value of below £20 shall be exempt from Inhabited House Duty; (b) The rate of Inhabited House Duty in dwellings of an annual value of £20, but not exceeding £40, is reduced to 3d.; and (c) The rate in respect of dwellings beyond an annual value of £40, and not exceeding £60, is reduced to 6d.

Bakehouses.

During the year the whole of the Bakehouses of the District were inspected on two occasions. There are at present in the District 3 Underground Bakehouses, and as these had to be certified by the Sanitary Authority as suitable in regard to construction, light, ventilation, and all other respects, at the commencement of this year, they received special attention.

The minimum requirements for the Council's Certificate included provisions against the entry of ground air and moisture, and provision for ventilation, light and cleanliness

of the premises. In my opinion the requirements were perfectly fair and reasonable, and they represented the absolute minimum requirements in order to insure fairly healthy surroundings and cleanliness. Each of the 3 Underground Bakehouses were duly certified, after certain structural alterations were made.

Cremation.

The difficulties of disposing of the dead must of necessity increase with the rapid growth of our large towns, and there can be no doubt that the time is not far distant when it will be found difficult and costly to continue the method of earth burial. The recent Cremation Act (of 1902), which legalises the burning of human remains and enables Local Sanitary Authorities to provide Crematoriums, is therefore a statute of public health importance. By this Act, on April 1st, 1903, the several Crematoriums in the country came under the control of the Home Office and the Local Government Board, and a Departmental Committee has recently drawn up Regulations provided for by the Act, for the management and conduct of these establishments.

The Midwives' Act of 1902.

This Act came into force on April 1st of the year under review. This is a very necessary measure, requiring suitable qualifications of Midwives for their work, and their registration. There is a practically unanimous agreement amongst County Councils not to delegate their powers under the Act, as the supervising authority, to the Local District Councils, and doubtless in cases where a County Medical Officer of Health has been appointed, Administration by a Committee of the County Council would appear to offer the best chances of

success. If the necessary duties of inspection are discharged by the County Council, the inspection of all the Midwives in the county could be undertaken by a comparatively small staff employed for the purpose, and this would involve very little increase of expenditure. The areas within which such Midwives practice are generally extensive, and even where the area is small it would probably be within two or more Districts, so that, if the powers be delegated, a Midwife would be under the necessity of giving notice to all the local supervising authorities in whose area she practised, or intended to practice. Differences in administration would produce confusion as to the character of the regulations, and as to the degree of strictness that the authority might be expected to exercise; and the differences in administration would necessarily so harass the midwife as to discourage effort to comply with the regulations of the various authorities.

The following Adoptive Acts are in force in the District :--

The Infectious Diseases (Notification) Act, 1889.

,, ,, (Prevention) ,, 1890.

The Public Health Amendment ,, 1890.

The following Bye-laws are in force:-

The cleansing of footways and pavements; the removal of house refuse; and the cleansing of earth closets, privies, ash pits, and cesspools.

The prevention of nuisances arising from snow, filth, dust, ashes, and rubbish, and the keeping of animals on any premises as to be injurious to health.

Common lodging houses.

New streets and buildings.

Slaughterhouses.

Houses let in lodgings.

Offensive trades.

List of Bakehouses.

East Finchley.

Burgess, High Road, East Finchley.

Price, Market Place, East Finchley.

Janes, Market Place, East Finchley.

Hine, I, Park Hall Place, East Finchley.

Ramsey, 5, Victoria Parade, East Finchley.

Buss and Son, 24, Market Parade, East Finchley.

Church End.

Battson Brothers, Albert Terrace.
Abery, Queen's Terrace.

North Finchley.

Purvis, The Parade, High Road.

Jones, 20, High Street.

Cooper, 5, Faversham Terrace, High Street.

Whetstone.

Harper, High Road.

Cook, High Road.

Herridge, 1, Whetstone Parade.

List of Slaughterhouses.

East Finchley.

Mudd, Market Place. Wilson, Market Place. Pulham, High Road.

Church End.

Galpin, 7, Albert Terrace. Randall, The Broadway.

North Finchley and Whetstone.

Lane, 3, Fortnum Terrace, High Street.

Watson, 25, High Street.

Ware, Torrington Place.

*Tansley, 2, High Street.

Friday, High Road, Whetstone.

List of Dairies, Cowsheds, and Milkshops.

East Finchley.

Adams, 11, Cavendish Terrace.

Manor Farm Dairy Company, 9, Park Hall Place.

Friern Manor Dairy Company, 1, Victoria Parade.

Arnold, Cable and Co., The Creamery, Market Parade.

Viners, Lodge Farm, Bishops Avenue.

Morden, 1, Oak Lodge Estate, Long Lane.

Coppen, Market Place, East Finchley.

Pidgeon, Long Lane, East Finchley.

Clark, Vale Farm Dairy, High Road.

Church End.

Adams, Courthouse Farm Dairy, Ballard's Lane. Harriman, 21, The Broadway.

Manor Farm Dairy Company, The Broadway. Collins, 11, Queen's Terrace.

Friern Manor Dairy Company, 9, Station Road.

Express Dairy Company, College Farm, Regents Park Road.

Chaney, Glebe Farm, Dollis Park.

Manor Farm Dairy Company, 5, King's Parade.

North Finchley and Whetstone.

Collins, 3, Faversham Terrace.

Manor Farm Dairy Company, High Street.

Floyd, Friern Lane, Whetstone.

Herring, Courthouse Farm, Nether Street.

De Rway and Tucker, A1 Dairy Farm, Whetstone. Holloway, The Alderney Dairy, High Street. Brinkler, 42, High Street.

REPORT

OF THE

SANITARY INSPECTOR

For the Year 1903.

To the Chairman and Members of the Finchley Urban District Council.

GENTLEMEN,-

I beg to submit my Annual Report of the work carried out during the year 1903.

It will be seen by reference to the appended summary that the amount of work accomplished during the past year is considerably in excess of that done during any previous year. This is largely due to the Council adopting the Medical Officer's recommendation to appoint an Assistant Inspector.

The Officer appointed has fully justified the selection made, and has proved to be keen and energetic in his duties.

The total number of inspections made was 5,918. 2,149 nuisances were dealt with, in connection with 859 houses and premises, and to secure the abatement of these nuisances, 608 notices were served on the persons in default, each notice containing a detailed specification of the work required to be executed to remedy the defects.

It will be noted that the number of nuisances is considerably in excess of the notices served, but this is explained by the fact that several nuisances were often included on one notice. Moreover, a large number of sanitary defects were remedied after the owners had been notified of their existence by letters.

In four instances it was necessary to institute summary proceedings against the persons in default to enforce the compliance of notices served. In a very large percentage of cases, however, property owners and others have carried out the Council's requirements in a prompt and ready manner, and, at the year's end, practically all the nuisances on the register had been abated, or arrangements were being made to commence the necessary works.

During the year, 134 complaints were received. Each complaint was promptly and carefully investigated, and duly recorded in a Register kept for the purpose, together with full particulars of the action taken in each case.

Summary of Work Done.

Total	Number	of	Inspections	and Re-	inspections	 5918
			Houses and			1646
Ordin	ary Inspe	ecti	ons			 1017

House to House Inspections				382
Re-inspections				2543
Visits to Works in Progress				1427
Visits to Workshops and Bak	cehouses			156
Visits to Slaughter Houses				54
Visits to Cowsheds, Dairies an	d Milksho	ps		32
Visits re Infectious Diseases				307
Complaints received				134
Number of Notices Served-				
Notices of Entry, Sect	ion 41, 1	Public		
Health Act, 1875			106	
Preliminary			384	
Statutory			224	
				714
Letters written	in			698
Letters received and dealt wi	th, excludi	ing Comp	laints	
and Departmental Letter	rs			534
Details of Conitour Impuno	romonto	nonwied	out di	mind
Details of Sanitary Impro		carried	out at	iring
the	year.			
DRA	NAGE.			
Number of Drains Examined,	Tested, E	xposed, e	tc	186
Defective Drains Repaired				32
Drains Unstopped and Cleans	ed			46
Number of Houses and Prem	ises Re-dr	ained		154
Length in Yards of Stonewar	e Pipe Dra	ins laid		3173
Length in Yards of Heavy Ca	st Iron Pi	pe Drain	laid	71

Manholes provided		75
Intercepting Traps fixed		46
Stoneware Gully Traps fixed		310
Dip and Bell Traps removed		8
Cesspools abolished		4
Water Tests applied		382
Smoke Tests applied		189
Number of Plans of Drainage Drawn	n	54
WATER CLOSETS AND SANITAL	RY CONVENIE	NCES.
New W.C. Pans of the "Washdown"	type fixed	200
W.C.'s Cleansed or Repaired		15
New Soil Pipes and Ventilating Shafts	fixed	124
Soil Pipes and Ventilating Shafts Rep	paired	29
New Flushing Boxes fixed to W.C.'s.		171
Existing Flushing Boxes to W.C.'s Re	epaired	121
New W.C. Apartments erected agains		3
Public House Urinals Re-constructed		
DAMPNESS.		
Roofs Repaired		121
Eaves Guttering Renewed		84
Rainwater Pipes Renewed and made t	o Discharge clear	
of House Walls on proper Gul	lies	42
Damp Walls Remedied		7
Yards Re-paved		75
Paving of Yards and Floors Repaired		87
Stagnant Water in Cellars Removed		
made for Sub-soil Drainage		12

MISCELLANEOUS.

Rooms Repaired, Cleansed and	Lime-was	hed		463
Workrooms Cleansed and Lime	-washed			24
Bakehouses Cleansed and Lime	-washed	every	Six M	Ionths.
Structural Alterations to Bakeh	ouses			4
Slaughterhouses Re-constructed				1
New Lairage Accommodation pro	ovided			1
Slaughterhouses Cleansed and Months.	Lime-wa	ashed	every	Three
Slaughterhouse Floors Repaired				2
New Impervious Sinks provided				9
New Waste Pipes fixed				26
Waste Pipes provided with prope	er Traps			6
Waste Pipes Repaired				18
Cisterns Repaired, Cleansed and	Covered			69
New Cisterns provided				14
Movable Sanitary Dustbins provide	ded			102
Nuisances from Overcrowding aba	ated—			
Houses				23
Workrooms				7
Nuisances from Animals abated				26
Accumulations of Refuse removed	1			9
New Manure Pits provided				5
Accumulations of Manure remove	ed			13
Dirty Houses Cleansed				3
Dirty Yards Cleansed				3

Smoke Nuisances abated				2
Nuisances from Fish Frying	g abated			1
Stables Re-paved				3
Pigstyes Re-constructed				2
Nuisances from Temporary	Privies abated			2
HOUSES UNFIT FO	R HUMAN	HAB	ITATIO	٧.
Number of Houses Closed				4
INFECTIOUS DISEA	SE AND D	ISINF	ECTION	
Cases of Infectious Disease	notified			159
Number of Rooms Fumigat	ed			169
Number of Rooms Stripped	and Cleansed			28
Articles Disinfected—Num	ber of Ovens			189
LEGAL	PROCEEDING	SS.		
Summonses Served				4
Convictions Obtained				2
Dismissed				1
No Decision given				1

UNSOUND FOOD DESTROYED.

46 lbs. Butcher's Meat.

20 lbs. Apples.

HOUSE TO HOUSE INSPECTIONS.

The total number of house to house inspections made was 382. This number is scarcely as high as might be desired, but owing to constant pressure in other directions, it was not possible to devote more time to this work. Of the 382 houses visited, only 51 were found to be free from nuisances, a fact which proves that it is essential that these systematic house to house inspections should be regularly carried out if the District is to be kept in a thoroughly sanitary condition.

After one inspection has been made, however, it does not necessarily follow that other defects will not occur, since the lapse of time must needs bring about a recurrence of those dilapidations which cause discomfort and ultimate danger to health.

The nuisances discovered were of a miscellaneous character, and although many premises were found to be in a most insanitary and dangerous condition, in the majority of cases the defects were of a somewhat trivial nature.

It is difficult to imagine why some property owners allow their premises to get into such a dilapidated condition as that frequently found by the Inspectors. It would prove much more economical to have the defects remedied as they arise, than to allow them to exist until the Sanitary Authority intervenes, as the delay often renders the necessary repairs a much more expensive matter than it would otherwise have been.

HOUSE DRAINAGE.

During the year the drains of 186 houses were tested or examined under Section 41 of the Public Health Act, 1875, and in every case were found to be more or less defective.

It was necessary to call upon the owners to construct entirely new systems of drainage in connection with 154 of these houses, and in the remaining 32 cases the existing drains were properly repaired.

The chief defects discovered were leaky joints, fractured pipes, unglazed pipes without collars, and absence of or insufficient fall. In many cases the percolation of liquid sewage from the drains had resulted in dangerous soil pullution. In one instance it was found that the drain had been made with chimney pots, and, in addition, was connected with two large cesspools before it ultimately discharged into the public sewer.

The supervision of new drainage work has, as hitherto, taken up a great deal of the Inspector's time. Frequent visits were made while the work was in progress in order to ensure that the requirements of the Council were carried out in a satisfactory manner. All new drains are laid with a minimum fall of 1 in 40, on a solid bed of good cement concrete at least six inches deep. The material used is salt glazed stoneware pipes with cement joints, or, heavy cast iron pipes coated with Dr. Angus Smith's solution, the joints being run with lead and caulked. Proper provision is made for efficient trapping and ventilation, and in most cases manholes are built on the line of drain for cleansing, testing, and inspecting purposes. The drains are subjected to the water test before and after the trenches are filled in. A disc, the full size of the pipes, is also passed through the drain, where practicable, to remove any superflous and projecting cement which the workman may have neglected to remove when making the joints.

Upon the completion of the work a survey of the premises is made by the Inspector, who subsequently draws a block plan indicating the position of the drains. This plan, together with the details of the work executed, forms a record which will doubtless prove of value for future reference.

The Inspectors have, during the year, supervised the laying of 3,173 yards of stoneware, and 71 yards of heavy iron pipe drains; 310 stoneware gully traps and 46 intercepting traps have been fixed, and 75 manholes built. 382 water tests and 189 smoke tests were applied. 54 plans were drawn showing the position of the drains of 154 houses and premises.

In consequence of the owners of 10 houses not having complied with the notices served, the Council executed the work at their cost.

INSPECTION OF WORKSHOPS.

The number of Workshops at present on the Register is 88, as against 73 at the end of the previous year.

These have been periodically inspected in order to ascertain that the requirements of the Factory and Workshops Act, 1901, were properly carried out with regard to ventilation, air space, lighting, cleansing, drainage of floors, and the provision of suitable sanitary conveniences.

In all cases where necessary the workrooms were measured up, and the occupiers supplied with cards on which were specified the cubical contents of the rooms, and the number of persons who might be employed in them during ordinary time and overtime.

During the year the following list of nuisances were discovered in connection with the workshops visited, viz:

Defective	drains			5
,,	water-closets			6
,,	sink waste-pipes			1
,,	flushing boxes to	w.c.'s		6
,,	floors			5
Insufficier	nt means of venti	lation provide	ed	1
Overcrowd	ding in workroom	ıs		7
Dirty wor	rkrooms			24

Representations were made to the persons responsible, and in each instance the work necessary for remedying the nuisances was promptly carried out.

PUBLIC HOUSE CONVENIENCES.

A considerable amount of attention has been paid to the sanitary condition of the whole of the Public House Conveniences in the district. Twenty-five of the twenty-six licensed houses were found to be provided with urinal accommodation, but in no less than twelve instances it was found necessary to order the reconstruction of the urinals on more sanitary principles Although in some cases this could not be effected without considerable outlay, the work was executed, with two exceptions, with comparatively little trouble to the department.

Regarding the two above-mentioned exceptions, the Clerk to the Council was directed to lay the matter before the Justices at the Licensing Sessions, and they refused to renew the licenses until the work was completed; this resulted in the necessary alterations being quickly carried out. Provision was also made for the lighting and flushing of the urinals.

The efforts made to secure the provision of adequate flushing of the urinals were checked to a considerable degree by the Regulations of the Barnet Water Company, which prohibits the use of a flushing apparatus of more than one gallon capacity. It is obvious that an apparatus of this size is insufficient to properly flush a urinal with a surface liable to fouling of from 40 to 50 square feet, and in practice this has to be supplemented to a great extent by hand flushing. With reference to the premises without a sanitary convenience, such provision has not yet been made. The owners, however, have now arranged to erect a temporary urinal, and, I understand, that it is their intention to present to the Justices at the next Licensing Sessions, plans of proposed structural alterations, including the provision of modern sanitary conveniences.

OVERCROWDING.

Overcrowding of dwelling houses was dealt with in 25 instances as a nuisance calculated to be injurious to the health of the inmates. In about two-thirds of these cases the overcrowding was not very serious, and the occupiers were able to abate the nuisance by re-arrangement of the sleeping accommodation. At the end of the year two cases were still being dealt with.

PAVING OF YARDS.

During the year the yards of 75 houses were properly paved with some suitable hard and impervious material, and the existing paving of a large number of other yards was properly repaired.

The Council's new Bye-laws with regard to the paving of yards and open spaces in connection with dwelling-houses were approved by the Local Government Board in August last, and the additional powers conferred by them have proved a material aid in securing the execution of this class of work.

The Requirements of the section which relates to old houses are as follows:—

Section 3.—The owner of every dwelling-house in connection with which there is any yard or open space, shall, where it is necessary for the prevention or remedy of insanitary conditions, that all or part of such yard or open space shall be paved, forthwith cause the same to be properly paved with a hard, durable and impervious pavement of flagging or paving bricks, evenly and closely laid upon a bed of good Portland cement mortar or cement concrete, at least three inches thick, and properly jointed with Portland cement and sand, mixed in equal proportions, or with good Portland cement, or with good asphalte, on a proper foundation of at least five inches thick. and so sloped to a properly constructed channel as effectually to carry off all rain or waste water therefrom.

SLAUGHTER HOUSES.

There are ten licensed slaughterhouses in the District, and these have been regularly visited during the year.

It was occasionally necessary to call the occupiers' attention to the provisions of the bye-laws relating to lime-washing, and the removal of refuse, and in two instances the occupiers were requested to properly repair the defective floors.

The lairs and immediate surroundings of one slaughter-house at East Finchley were found to be in an insanitary condition. The occupier was requested to entirely re-construct the lairs, and to properly pave the yard surface adjoining the slaughterhouse. This work was executed in due course, and in addition, considerable structural alterations were carried out in connection with the slaughterhouse.

DAIRIES, COWSHEDS AND MILKSHOPS.

All the Dairies, Cowsheds and Milkshops were inspected periodically during the year, and were, generally speaking, kept in accordance with the requirements of the Regulations controlling these premises.

The drains of two dairies were found to be in a defective condition, and entirely new systems of drainage were laid. In one instance a new cowshed was erected and the old one disused. Another cowshed was re-constructed and efficient means of drainage provided, and the yard surface near one dairy was properly paved.

There were five applications for Registration as Dairymen, Cowkeepers or Purveyors of Milk. The premises were inspected and found satisfactory, and the applications granted.

There are at present 21 Dairies and Milkshops, and 7 Cowsheds in the District.

HOUSES CLOSED AS UNFIT FOR HUMAN HABITATION.

Four houses have been reported as being quite unfit for human habitation owing to general dilapidations, excessive dampness, defective drainage, etc. Two of these were closed voluntarily by the owners, and still remain empty. Application was made to the Magistrates for Closing Orders with regard to the other two houses, and these were granted in each instance. The work necessary to put the premises into a proper habitable condition was subsequently carried out, and on representation of this being made to the Justices, the Closing Orders were cancelled and Orders made declaring the houses fit for habitation.

LEGAL PROCEEDINGS.

Legal proceedings were taken to enforce compliance with the Council's requirements in four instances, viz.:—

- (1) Nuisance arising from defective drains.—In this case an Order was made by the Justices to execute the works specified in the Council's notice, and, owing to the serious nature of the defects, for the premises to be closed until the drains were re-laid.
- (2) House unfit for human habitation—Proceedings for Closing Order.—This house was ordered to be closed until the work necessary to put the premises into a proper habitable condition had been carried out.
- (3) Overerowding in Dwelling Houses.—
 - A. The Magistrates decided in this case to dismiss the summons.

Evidence was given as to the cubic capacity of the rooms and the number of Inmates. The Bench held that evidence on these points alone was insufficient, and required proof that the family family actually occupied the room on the date of the summons, and that a wash-house had not been used as a sleeping room, despite the statements of the witnesses that it was quite devoid of furniture. To obtain the information required by the Court, it would be necessary to visit the premises while the inmates are in bed, and this procedure is impracticable, as the officers of the Council can only exercise their powers of entry between the hours of 9 a.m. and 6 p.m.

B. In this case the Bench were unable to agree—two being in favour of making an Order and two against.

No decision was therefore given.

I am, Gentlemen,

Your obedient Servant,

E. J. FRANKLIN.

Chief Sanitary Inspector.