

**[Report of the Medical Officer of Health for Willesden].**

**Contributors**

Willessden (London, England). Municipal Borough.

**Publication/Creation**

[1939]

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Borough of Willesden.



1938.

THE  
63rd ANNUAL HEALTH REPORT.

GEORGE F. BUCHAN, M.D., F.R.C.P., D.P.H.,  
Medical Officer of Health.

London:

JAS. TRUSCOTT & SON, LTD.,  
SUFFOLK LANE, CANNON STREET, LONDON, E.C.4.

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# CORPORATION OF WILLESDEN, 1938-39.

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† Member of Health Committee.

‡ Member of Housing Act (1936) Committee.

§ Member of Hospital Visiting Sub-Committee.

TOWN HALL,

DYNE ROAD, KILBURN, LONDON, N.W. 6.

1st May, 1939.

To the Willesden Borough Council—

The Local Sanitary Authority,  
and the Local Education Authority.

I beg to submit herewith the Annual Health Report for Willesden for the year 1938. This Report includes :—

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(i.) The Health and Sanitary Condition of the District—63rd Annual Report ...	16
(ii.) Health of Children attending the Public Elementary Schools—31st Annual Report	30
(iii.) School and Maternity and Child Welfare Work—Certain Statistical Data... ..	35
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It also includes reports for the year 1938 by the specialists in charge of the following departments :—

- (a) The Dermatological and Actinotherapeutic Department—Appendix C.
- (b) The Eye Department—Appendix D.
- (c) The Orthopædic Department—Appendix E.
- (d) The Ear, Nose and Throat Department—Appendix F.

It also includes various special reports made during the year—Appendices G to U.

The Report is written in accordance with the requirements of the Ministry of Health and Board of Education.

#### VITAL STATISTICS.

The estimated population of Willesden at Midsummer, 1938, was 203,734.

2,968 live births were registered during 1938, giving a birth rate of 14.57 per 1,000 of the population, as against 15.04 in 1937. 101 still births were registered, giving a still birth rate of 32.91 per 1,000 total live and still births.

1,841 deaths were registered in 1938, giving a death rate of 9.04 per 1,000 of the population. These figures compare with a total number of deaths of 1,979 and a death-rate of 9.73 in 1937.

The infantile mortality rate for the year 1938 was 53.91 per 1,000 births. 160 children under one year of age died in 1938.



The following table shows the principal causes of deaths of children under one year of age and the infantile mortality year by year up to and including 1938 :—

TABLE No. 1.

	1925	1926	1927	1928	1929	1930	1931	1932	1933	1934	1935	1936	1937	1938
Congenital Malformations ...	11	6	13	12	17	11	9	10	10	16	11	25	16	22
Premature Birth ...	43	42	43	35	61	57	51	40	35	29	53	44	50	40
Atrophy, Debility and Marasmus ...	13	10	13	13	7	15	9	12	11	7	7	7	7	3
Atelectasis ...	8	4	4	5	9	5	9	4	11	9	8	5	12	3
Diarrhoea and Enteritis ...	13	10	9	9	11	24	16	31	27	20	57	24	57	31
Measles ...	3	3	0	4	0	4	0	4	0	1	0	2	0	2
Whooping Cough ...	13	4	8	5	7	2	6	1	5	1	2	7	2	2
Bronchitis ...	6	6	6	7	7	2	3	3	2	1	5	9	3	2
Pneumonia ...	30	31	21	30	22	27	30	26	10	15	16	22	22	21
Total Infantile Mortality Rate (rate per 1,000 live births) ...	62	53	59	57	61	61	60	61	46	43	66	60	64	54

Actually few children under the age of one should lose their lives. I say this because of the fact that the infantile mortality rate amongst clinic attendants was only 21 per 1,000 births, whereas amongst non-clinic attendants it was 115 per 1,000 births. These figures are arrived at by knowing that out of the 2,968 Willesden children born alive in 1938, 1,927 attended the Health Centres, of whom 40 died, giving an infantile mortality rate amongst clinic attendants of 21 per 1,000 births. 1,041 children born in Willesden in 1938 did not attend the clinics and of this number 120 died before reaching the age of one, thus giving an infantile mortality rate amongst non-clinic attendants of 115 per 1,000 births.

It should be noted that the infantile mortality rate of 21 amongst clinic attendants compares with a rate of 25 in 1937, 24 in 1936 and 30 in 1935, and the infantile mortality rate of 115 amongst non-clinic attendants compares with a rate of 145 in 1937, 120 in 1936 and 121 in 1935.

### CANCER.

In Willesden in 1938 there were 332 deaths from cancer as compared with 281, 302, 266, 281, 260, 250, 250, 214 and 239 in each of the preceding nine years.

Two Cancer clinics are held: one at Health Centre (1), on the first and third Thursdays of the month from 7 to 8 p.m., and the other at Health Centre (2), on the second and fourth Thursdays at the same hour. No treatment is given, the object being to get early contact, to secure diagnosis and treatment if necessary, or to give reassurance. Treatment or diagnosis is obtained at certain of the larger London hospitals with which the Council has made satisfactory arrangements.

If a patient is under a private doctor who can be located the latter is communicated with, and the result of any consultation is made known to him as soon as possible.

Propaganda in the form of posters, leaflets, advertisements in the press and talks has been continued.

During 1938, 47 patients attended the clinics, of whom 30 were new cases (8 men and 22 women), and 17 had attended in 1937 or in previous years. The total attendances made during the year were 65.

Of the 30 new cases:

2 were found to reside without the district, and after being examined and suitably directed as to the means of getting investigation or treatment, were dismissed.

11 were referred to a hospital for further investigation.

1 was referred to the Council's Skin Clinic, and was later reassured and discharged.

7 were referred back to their own doctors at home or at hospital.

8 were kept under observation and asked to attend again. By the end of the year 3 of these were able to be discharged.

1 was reassured and discharged.



Of the 11 who were referred to hospital :

- 1 required operation and is awaiting it.
- 4 received special treatment, 2 for cancer of the breast and 2 for chronic mastitis.
- 5 required further investigation, after which 4 were able to be reassured and dismissed and 1 is still under observation.
- 1 was reassured and discharged.

The pathological conditions from which the 30 new patients suffered were as follows :

- 3 had cancer of the breast.
- 4 had chronic mastitis.
- 3 had non-malignant growths of the body wall.
- 6 had affections of the generative organs often found to be pre-cancerous.
- 6 had disorders of the digestive tract which occasionally lead to cancer.
- 4 had affections of the mouth and throat which sometimes become cancerous.
- 4 had conditions unconnected with cancer but which were causing anxiety in the patient's mind.

During the year the nurses attached to the clinics paid 31 visits to the patients' homes in connection with their attendances at the clinics, or after deaths from cancer in the hope of getting information that might shed light on the cause or progress of the disease, and if possible to ascertain how long had elapsed between the onset of symptoms and the obtaining of medical advice. Having regard to the fact that in many instances these enquiries were made after the death of the patient and that a very considerable time had elapsed since the commencement of symptoms in these cases it is impossible to record any accurate information regarding this matter.

#### INFECTIOUS DISEASES.

During the year 1938, 1,867 cases of Infectious Disease were notified as compared with 2,429 in the previous year.

The following table gives the number of notifications of certain diseases included in the above total of 1,867, together with the corresponding figures for 1937 :—

TABLE NO. 2.

	Number of Cases notified.	
	1937	1938
Diphtheria ... ..	400	415
Scarlet Fever ... ..	477	371
Pneumonia ... ..	409	284
Whooping Cough ... ..	626	277
Erysipelas ... ..	68	72

RETURN CASES OF SCARLET FEVER.—The following statement gives the return cases that have occurred during 1938 :—

#### I. HOME CASES.—44.

(a) No. of infecting cases giving rise to return cases not longer than 28 days after release from isolation ... ..	0
„ return cases they gave rise to ... ..	0
„ infecting cases per cent. of total home cases ... ..	0
„ return cases per cent. of total home cases ... ..	0
(b) No. of infecting cases giving rise to return cases more than 28 days after release from isolation ... ..	0
„ return cases they gave rise to ... ..	0
„ infecting cases per cent. of total home cases ... ..	0
„ return cases per cent. of total home cases ... ..	0

## II. HOSPITAL CASES.—327.

(a) No. of infecting cases giving rise to return cases not longer than 28 days after discharge ... ..	6
„ return cases they gave rise to ... ..	6
„ infecting cases per cent. of total hospital cases ... ..	1.8
„ return cases per cent. of total hospital cases ... ..	1.8
(b) No. of infecting cases giving rise to return cases more than 28 days after discharge ... ..	1
„ return cases they gave rise to ... ..	1
„ of infecting cases per cent. of total hospital cases ... ..	0.3
„ return cases per cent. of total hospital cases ... ..	0.3

SMALL POX.—No cases of Small Pox were notified during 1938.

No vaccinations were performed by the Medical Officer of Health under the Public Health (Small Pox Prevention) Regulations, 1917.

ENTERIC FEVER.—Eleven cases were notified as Typhoid or Para-typhoid Fever during 1938 as against 10 in 1937, 10 in 1936, 10 in 1935, 7 in 1934 and 13 in 1933.

Nine cases were removed to hospital—8 to the Willesden Municipal Hospital and 1 to St. Andrew's Hospital. Two cases were nursed at home. Of the 8 cases removed to the Willesden Municipal Hospital 1 was diagnosed as Typhoid Fever and 2 as Para-typhoid Fever. The case of Typhoid Fever was ill on her arrival in England from Spain. All 3 recovered. Of the other 5 removed to the Municipal Hospital 1 was a negative case, 1 was diagnosed as Influenza, 1 as Enteritis, 1 as Polio-encephalitis and 1 as Psittacosis. The two last proved fatal. The case of Psittacosis was supposed to have been connected with an outbreak of this disease in the London Zoological Gardens. The case removed to St. Andrew's Hospital was believed to have contracted Typhoid Fever while nursing a patient suffering from Typhoid Fever in London. She recovered. The two cases nursed at home recovered.

MALARIA.—No cases of Malaria were notified during 1938.

INFECTIOUS DISEASES OF THE NERVOUS SYSTEM—CEREBRO-SPINAL MENINGITIS, POLIOMYELITIS, ENCEPHALITIS LETHARGICA AND ACUTE POLIO-ENCEPHALITIS.—24 cases of these diseases were notified in 1938. Six of these notified cases proved fatal giving a fatality rate of 25 per cent. of notified cases. Five of the deaths were certified as due to Cerebro-Spinal Fever. One of these 5 occurred in 1937, the case not being notified till 1938 after death. One was certified as due to Encephalitis Lethargica. In addition there were 3 further deaths from these diseases in Willesden residents and 1 further death in a non-Willesden resident in an Institution in Willesden.

Since the Autumn of 1931, in accordance with the request of the Ministry of Health, reports have been sent to the Ministry in cases of Cerebro-Spinal Fever, giving information desired by the Ministry as to the use and results of anti-meningococcus serum treatment.

DYSENTERY.—37 cases were notified during 1938. 11 in January, 7 in February, 10 in March, 1 in April, 1 in May, 2 in October, 1 in November, and 4 in December. 10 patients were admitted to the Municipal Hospital, 13 to other hospitals, and 14 were nursed at home. One man aged 21 years died in Hospital, the death being certified as due to Ulcerative colitis.

WHOPING COUGH is a notifiable disease in Willesden. 277 cases were notified during the year but a total of 506 cases coming to their knowledge were visited by the Health Visitors. There were 3 deaths from Whooping Cough, all in children under 5 years of age. All 3 deaths occurred in hospitals.

NON-NOTIFIABLE ACUTE INFECTIOUS DISEASES are reported from the Public Elementary Schools and are found by the Health Visitors during the course of home visitation.

During 1938, 2,907 cases of measles which is not notifiable in Willesden were visited by the Health Visitors. There were 6 deaths from Measles in Willesden residents, 2 in children under 1 year of age, 3 in children between 1 and 5 years of age, and 1 in a man aged 35 years. Four of these deaths occurred in hospitals. In addition there were 2 deaths from Measles of non-Willesden residents between 1 and 5 years of age in Institutions in Willesden.

## MOTHERS AND CHILDREN UNDER FIVE YEARS.

MUNICIPAL CENTRES.—At the Municipal Centres, expectant mothers attended the medical consultations and treatment Clinics on 15,464 occasions; nursing mothers 34,023, and children under 5, 64,830, making a total of 114,317 attendances or 6,384 more than last year.

Out of the total number of 2,968 children registered as born alive during the year, 1,927 or 65 per cent. subsequently attended the Municipal Welfare Centres. Altogether, however, 2,158 children under 1 year of age attended the Municipal Centres for the first time during the year, excluding transfers from other districts. This represents 73 per cent. of the 2,968 registered live births belonging to Willesden. 430 children between the ages of 1 and 5 years attended the Municipal Centres for the first time during the year, excluding transfers from other districts.



The number of live births occurring amongst expectant mothers who attended the Ante-Natal Clinics was 1,710; 76 per cent. of these mothers with their babies subsequently attended the Welfare Centres.

MATERNITY HOSPITAL—

BOOKINGS.—The following table shows the bookings year by year for hospital confinement under the Council's schemes since hospital provision was first made by the Council for such cases:—

TABLE NO. 3.

Year.	No. of Confinement Cases Booked.	
1918 (part-year) ...	99	Maternity Pavilion at Municipal Hospital opened.
1919 ... ..	267	
1920 ... ..	444	Restrictions began to be placed on bookings.
1921 ... ..	335	
1922 ... ..	266	
1923 ... ..	140	Municipal Hospital Pavilion closed, 30th April, 1923. Cases sent to Park Royal Hospital which later became the Central Middlesex County Hospital.
1924 ... ..	99	
1925 ... ..	146	
1926 ... ..	220	
1927 ... ..	221	
1928 ... ..	272	
1929 ... ..	334	
1930 ... ..	402	
1931 ... ..	535	Willesden Maternity Hospital opened, 14th February, 1931. Cases no longer sent to Central Middlesex County Hospital.
1932 ... ..	544	Bookings limited to relieve pressure on Hospital accommodation.
1933 ... ..	550	
1934 ... ..	666	Willesden Maternity Hospital extended, 29th December, 1934.
1935 ... ..	942	
1936 ... ..	979	
1937 ... ..	1,069	
1938 ... ..	1,038	

During 1938, 440 applicants for confinement in the Willesden Maternity Hospital were unable to be booked for the reasons set out below:—

TABLE NO. 4.—APPLICATIONS FOR BOOKING REFUSED.

No beds available ... ..	395
Not resident in Willesden ... ..	43
Will not have had 3 months' residence in Willesden prior to expected date of confinement ... ..	2
Unable to pay fee ... ..	0
	440

The following Table shows the fees at which the 1,038 cases were booked:—

TABLE NO. 5.

Fee.	No. of Cases.	Fee.	No. of Cases.
£ s. d.		£ s. d.	
12 10 0 ... ..	1	5 0 0 ... ..	23
12 0 0 ... ..	2	4 10 0 ... ..	30
9 10 0 ... ..	1	4 0 0 ... ..	30
9 0 0 ... ..	1	3 10 0 ... ..	47
8 10 0 ... ..	5	3 0 0 ... ..	79
8 0 0 ... ..	6	2 10 0 ... ..	92
7 10 0 ... ..	8	2 0 0 ... ..	106
7 0 0 ... ..	4	1 10 0 ... ..	109
6 10 0 ... ..	4	1 0 0 ... ..	108
6 0 0 ... ..	13	Free ... ..	349
5 10 0 ... ..	20		

The average fee per case is approximately £1 17s. 2½d.



**HOSPITAL CONFINEMENTS.**—During 1938, 1,045 women were confined in the Willesden Maternity Hospital. In addition to these a number of Willesden mothers were confined in Institutions outside Willesden, 519 births of Willesden residents being notified from such outside Institutions—123 from Queen Charlotte's Hospital, 69 from St. Mary's Hospital, 42 from Middlesex Hospital, 34 from Queen Mary's Maternity Home, Hampstead, 22 from University College Hospital, 16 from Royal Free Hospital and smaller numbers from other Hospitals; 70 from a Nursing Home and smaller numbers from other Nursing Homes. These together with some 448 in the Central Middlesex County Hospital are approximately 66 per cent. of the births belonging to Willesden and show the desire of the present-day mother for institutional confinement.

The following table shows the increasing demand for institutional confinement :—

TABLE NO. 6.

Years.	Domiciliary Births attended by Midwives.	Domiciliary Births attended by Doctors.	Births in hospitals and nursing homes.	Total Births notified. (Note—Notified not registered.)
1931	515	1,174	1,110	2,799
1932	457	997	1,220	2,674
1933	532	776	1,357	2,665
1934	610	680	1,436	2,726
1935	589	568	1,706	2,863
1936	646	516	1,745	2,907
1937	760	465	1,906	3,131
1938	710	394	1,974	3,078

A report on the Willesden Maternity Hospital by Mr. Arnold Walker, F.R.C.S., the Council's Consultant Obstetrician, appears later in this report.

**ANTE-NATAL WORK FOR INSTITUTIONS NOT UNDER THE COUNCIL.**—Requests are received from the Middlesex County Council and from various London Hospitals for home visits to expectant mothers, and for special reports by the Council's Health Visitors in connection with women who are to be confined in these Hospitals.

127 such reports were supplied to London Hospitals and 331 to the Middlesex County Council during the year.

298 Expectant Mothers booked for confinement in the Central Middlesex County Hospital were referred to the Willesden Health Centres for Ante-natal care.

**PUERPERAL PYREXIA.**—47 cases were notified during the year. All recovered.

**MATERNAL MORTALITY.**—During 1938 there were 5 deaths classed to pregnancy and child-bearing—3 to Puerperal Sepsis, and 2 to other puerperal causes.

The puerperal mortality rate from Sepsis was, therefore, 1.01 per 1,000 registered live births and 0.98 per 1,000 registered total births. The corresponding figures for 1937 were 0.98 per 1,000 registered live births and 0.95 per 1,000 registered total births.

The total puerperal mortality rate was 1.68 per 1,000 registered live births and 1.63 per 1,000 registered total births. The corresponding figures for 1937 were 3.27 per 1,000 registered live births and 3.17 per 1,000 registered total births.

During 1938 there were, in addition, 2 maternal deaths from non-puerperal causes and 2 maternal deaths from criminal abortion.

The total maternal mortality from all causes excluding criminal abortion, was thus 2.36 per 1,000 registered live births and 2.28 per 1,000 registered total births as against 3.92 and 3.80 in 1937.

The total maternal mortality from all causes including criminal abortion was 3.03 per 1,000 registered live births and 2.93 per 1,000 registered total births as against 4.58 and 4.43 in 1937.

**Sterilised Accouchment Sets.**—These sets are supplied in accordance with the arrangements stated in my Annual Report for 1930, p. 10.

During 1938, 558 were supplied free, 6 at full cost and 103 at part cost.

**Specialist Help.**—The Council accept responsibility for the payment of the fee of one of their specialists called in by a medical practitioner to assist him in connection with a difficult case of labour occurring in a Willesden resident. 3 such consultations were paid for in 1938.

The services of the Council's Consultant Obstetrician are also available in cases of Puerperal Fever and Puerperal Pyrexia when desired by the practitioner in attendance.

**Provision of Anæsthetist.**—The Council further accept responsibility for the payment of a fee to an anæsthetist called in by a medical practitioner in connection with confinement cases. No such fee was paid in 1938.

**Home Helps.**—The Council provided the services of home helps in connection with 321 confinement cases.

**MATERNAL MORTALITY INVESTIGATIONS.**—The Council has continued to take part in the investigation of deaths of mothers in childbirth for the Maternal Mortality Committee of the Ministry of Health. The investigations are carried out by the Council's Consultant Obstetrician. 8 cases were inquired into during 1938.

**HOSPITAL TREATMENT OF CHILDREN UNDER 5 YEARS OF AGE** (See page 39).



## HEALTH VISITING AND MEDICAL INSPECTION OF CHILDREN BETWEEN THE AGES OF 1 AND 5 YEARS.

The practice described under this heading on page 9 of the Annual Report for 1931 was continued during the current year. The aims and methods adopted were outlined on pages 9 and 10 of the Annual Report for 1932.

FINDINGS OF MEDICAL INSPECTIONS.—The following table shows the numbers and percentages of individual defects found in 609 children examined during the year.

TABLE NO. 7.

Age Period.	18 months.	2 years.	3 years.	4 years.	Total years.	Percentage.
Number of children inspected ... ..	237	182	125	65	609	
Malnutrition (including slight degrees) ...	11	6	6	5	28	4.6
Skin conditions ... ..	11	9	8	5	33	5.4
Eyes—Blepharitis and Conjunctivitis ...	1	3	1	—	5	2.6
Squint ... ..	1	1	4	1	7	
Other conditions ... ..	1	2	—	1	4	0.7
Ears, Otitis Media ... ..	—	1	2	1	4	
Nose and Throat—Enlarged Tonsils or Adenoids or both ... ..	19	21	29	20	89	14.6
Enlarged cervical Glands ... ..	2	3	11	10	26	4.3
Teeth—Dental Diseases ... ..	1	5	15	19	40	6.6
Heart and Circulation (including Anæmia)	5	5	2	2	14	2.3
Lung Disease (non-tubercular) ... ..	9	3	3	1	16	2.6
Nervous System (including functional conditions) ... ..	4	4	1	2	11	1.8
Deformities—Rickets ... ..	9	2	3	—	14	2.3
Others ... ..	40	25	27	9	101	16.6
Other defects ... ..	8	14	9	1	32	5.3

The number of children under 5 years who were able to be given a full routine medical inspection during the year was about 100 more than during 1937, but this still represents only a small percentage of the 10,000 or so children who should be so dealt with, were the staff and accommodation available. The Ministry of Health Circular issued in 1936 exhorted the Council to provide for this work, and in their reply to the Minister the Council promised to do so when Health Centre (2) was rebuilt. The completed plans for this Centre are now before the Ministry of Health and Board of Education.

OPHTHALMIA NEONATORUM.—The number of cases of this disease notified during the year was 26, as against 28 last year. This gives a case rate of 8.8 per 1,000 registered live births. A district midwife attended at the confinement in 10 cases, and 16 cases were born in hospital. Treatment was obtained at a hospital in 19 cases, at the Municipal Centres in 4 cases, and by a private doctor at home in 3 cases. Complete recovery with unimpaired vision occurred in 23 cases, 2 cases left the district and 1 case died, the death being certified as due to broncho-pneumonia.

Cases of inflammation of or discharge from the eyes of infants or of cases of ophthalmia neonatorum entering Willesden after notification elsewhere are also visited by the Health Nurses.

## TEACHING OF MOTHERCRAFT AT THE CENTRES.

An important part of the work of each Health Centre is its Mothercraft Section.

This is in special charge of one Health Visitor at each Centre, and holds its sessions in the afternoons.

The work has proceeded on the same lines as outlined on page 10 of the 1931 Annual Report.

During 1938, 501 Mothercraft sessions were held, with 4,877 attendances of mothers, and 4,387 attendances at the nurseries. This gives an average of 9.7 attendances of Mothers per session. 337 individual mothers attended.

## THE SCHOOL MEDICAL SERVICE.

SCHOOLS—There are 35 public elementary schools in the district. Of this number 23 are Council and 12 church or non-provided schools.

Included in the number of the Council schools are 2 special schools, 1 for mentally defective and 1 for physically defective children.

The hygienic condition of the schools in Willesden is very variable. The more modern schools are quite satisfactory as regards ventilation, lighting, warming, equipment and sanitation, but some of the other schools fall short of the standard desirable.

Water to the schools is supplied in all instances direct from the mains of the Metropolitan Water Board.

Adequate facilities are provided for the supply of drinking water for the scholars.



**MEDICAL INSPECTION.**—During the year ending 31st March, 1938, the average number of scholars on the Public Elementary School Rolls, including the Special Schools, in Willesden was 18,995. The following groups of children were examined during the year :—

- (1) All children admitted to school for the first time ;
- (2) All children between 8 and 9 years of age ; and
- (3) All children between 12 and 13 years of age, together with children over 13 years of age who had not been examined on reaching the age of 12.

The total number of children medically inspected at routine and special inspections during 1938 was 13,465.

**FINDINGS OF MEDICAL INSPECTIONS.**—(a) *Uncleanliness.*—Cleanliness inspections were carried out in the schools on 572 occasions during the year 1938, the average number of visits paid to each school by the Health Visitor being 17. The total number of examinations and re-examinations made during the year was 52,857.

This is highly important work. In 1914, when it was first begun, the percentage of nitty or verminous children in the schools was as high as 20. In those days a child was not called nitty or verminous except there were many nits on the hair. In 1931, when a child with only a few nits was placed in this category, the percentage of nitty or verminous children in the schools had dropped to 3·6. It will therefore be noted that enormous improvement had been effected, far greater actually than the figures show. In 1938, the percentage was 3·8.

The first reverse in the steady decline which had been maintained since 1920 was in 1933, when the percentage rose to 4·1.

*Percentage of Nitty and Verminous individual children recorded upon routine cleanliness inspection at the Schools from year to year since 1914 :—*

1914	...	...	20%
1915	...	...	23%
1916-19	...	...	Results not recorded owing to war.
1920	...	...	11·9%
1921-25	...	...	7·9%
1926-30	...	...	4·6%
1931-35	...	...	3·8%
1936	...	...	4·0%
1937	...	...	4·2%
1938	...	...	3·8%

(b) *Tonsils and Adenoids.*—During 1938 at routine and special medical inspections, 1,168 cases of enlarged tonsils and adenoids were discovered, as compared with 1,161 found in 1937, 1,165 in 1936, 1,114 in 1935, 1,150 in 1934, 1,361 in 1933, 1,394 in 1932, 1,668 in 1931, 2,021 in 1930.

(c) *Skin Disease.*—During 1938, at routine and special medical inspections, 1,281 cases of skin disease were detected as compared with 1,545 in 1937, 1,507 in 1936, 1,580 in 1935, 1,503 in 1934, 1,727 in 1933, 1,607 in 1932, 1,807 in 1931, 1,888 in 1930.

(d) *Enlarged Cervical Glands (non-tuberculous).*—During 1938, at routine and special medical inspections, 159 cases of this defect were noted, as compared with 144 in 1937, 145 in 1936, 107 in 1935, 150 in 1934, 275 in 1933, 285 in 1932, 302 in 1931, 505 in 1930.

**INFECTIOUS DISEASES.**—The action taken to detect and prevent the spread of infectious diseases was as set forth in my Annual Report for 1925. Appendix N.

**FOLLOWING UP.**—All defects found requiring treatment at medical and dental inspections are notified to the parents, and it is the duty of the Health Nurses to follow up these cases in their homes as may be necessary, in order to ascertain if the treatment has been obtained. If nothing has been done the Health Nurse again explains the necessity for treatment to the parent, and advises as to the best method of obtaining such treatment.

**MEDICAL TREATMENT.**—During the year 1938, school children were followed up by the Health Department on account of 16,887 medical defects and 7,045 dental defects. Of those defects found to require treatment, medical or dental treatment was obtained for 15,826 and domestic treatment was obtained for 2,982. 89 per cent. of the medical defects were treated, 71 per cent. receiving medical treatment and 18 per cent. domestic treatment, 64 per cent. of the dental defects followed up were treated. No record is available of defects requiring treatment which were not followed up. 95 per cent. of the total medical defects treated and 98 per cent. of the total dental defects treated were dealt with by the Education Committee. The remainder, or 5 per cent. of the medical defects and 2 per cent. of the dental defects treated, were dealt with by private practitioners, voluntary hospitals or other charitable institutions, or Public Assistance. In connection with defects treated, the children concerned made 92,634 attendances at the Health Centres in 1938.



CRIPPLING DEFECTS AND ORTHOPÆDICS.—An Orthopædic Clinic staffed by an Orthopædic Surgeon and a specially qualified nurse is held at the Stonebridge Health Centre. The report of the Orthopædic Surgeon appears as Appendix E.

The Fifth Annual Report on the work in connection with Abnormal Children appears later in this report.

VOCATIONAL GUIDANCE.—In the year ended July, 1938, medical reports were made on 1,553 children who were shortly to leave school, indicating any type of occupation for which they were physically unsuited. The relevant information is collected when the child is examined at the age of 12 years, and shortly before school-leaving age this is reviewed, any additional information from the clinic record cards being added to the vocational guidance cards.

554 children were advised to avoid the type of occupation contra-indicated by their condition.

#### SECONDARY AND JUNIOR TECHNICAL, ETC., SCHOOLS.

The arrangement by which the Medical Staff of the Willesden Council carry out the inspection of pupils attending the Secondary and Technical Schools in Willesden, on behalf of the Middlesex County Council has been continued. The total number of pupils on the rolls of the Secondary and Technical Schools in Willesden now included in this arrangement is 2,855.

1,561 medical examinations and 595 re-examinations of Secondary and Technical School pupils have been carried out during the year 1938.

333 medical defects were found amongst the scholars examined. Parents and Head Teachers are notified of defects and are advised as to the action to be taken.

The Middlesex County Council's scheme of treatment of scholars suffering from defective vision at the Willesden Council's Health Centres, and also that of dental inspection and treatment by the Council's dental staff, has been continued. 2,503 pupils were dentally inspected during the year, 1,835 were found to require treatment and 615 were treated at the Willesden Council's Dental Clinics. 2,710 attendances were made at the Clinics during the year for Medical and Dental Treatment.

#### PARENTS' PAYMENTS.

##### (a) *Public Elementary Schools.*

The recovery of the cost of certain forms of treatment from parents of children attending Public Elementary Schools is undertaken according to the Council's Economic Circumstances Scale, which is based on the net income per head per week of the family.

For cases of enlarged tonsils, adenoids, and deflected septum, the payment for operation and the first three days in hospital is either the full cost of 24s. or part cost, or nil. The charge per day after the first three days is 4s. 6d. full cost, or part cost.

Spectacles are provided either at the full cost of 4s., at half-price, or free if below the Economic Scale.

Certain nutrient drugs prescribed by the Health Centre Medical Officers are supplied free, if the economic circumstances of the family are below the Council's Scale, otherwise cost price is charged.

Vouchers issued by certain Hospital Associations and Sickness Funds are accepted in lieu of payment for the provision of spectacles and for operation in cases of enlarged tonsils, adenoids and deflected septum.

The arrangements for recovering the cost of treatment for dental work are dealt with in the Reports of the Dental Surgeon, Annual Report, 1934, page 55, and Annual Report, 1935, page 57.

##### (b) *Secondary and Technical Schools.*

Pupils attending these schools who are suffering from defective vision, may, by an arrangement of the Middlesex County Council, be examined and treated by the Willesden Council's Ophthalmic Surgeon at one of the Health Centres. No charge is made to the parent for inspection or refraction by the Ophthalmic Surgeon, but if spectacles are ordered a fee of 5s. is payable by the parent to the Head Teacher of the School.

The arrangements for recovering the cost of treatment for dental work are dealt with in the Report of the Dental Surgeon for 1935, page 57.

#### HEALTH EDUCATION.

The work has proceeded on the same lines as outlined on page 12 of the Annual Report for 1934.

## PROVISION OF MEALS.

320,148 meals were supplied in 1938 as compared with 283,367 in 1937, 260,822 in 1936, 249,509 in 1935, 241,905 in 1934, 197,338 in 1933, 197,821 in 1932 and 138,361 in 1931.

The recipients of these meals are mainly children of the unemployed, widows and deserted wives.

## HOME NURSING SERVICE.

The Home Nurse employed by the Council nursed 448 cases during the year, and in connection with such cases paid 4,177 visits. 1,783 of these visits were paid in the Carlton Ward, 846 in the Kilburn Ward, 451 in the Mapesbury Ward, 216 in the Roundwood Ward, 203 in the Willesden Green Ward, and smaller numbers in the other wards of Willesden.

Of the 448 cases nursed during the year, 433 were new cases. 373 of these 433 new cases were referred by the Health Department for nursing, 25 by private doctors and 35 by Hospitals, Associations and private persons.

Ophthalmia neonatorum received 133 visits and other ophthalmia cases 494 visits.

## SANITARY WORK.

The approximate number of houses in Willesden at the end of 1938 was 34,322, smaller flats contained under one roof being counted as one house, larger flats in blocks being counted separately.

During the year the total number of inspections and re-inspections made by the Sanitary Staff was 35,575 as compared with 26,176 in 1937.

The houses inspected under the Housing Acts numbered 1,514 as compared with 1,265 in 1937.

The number of complaints received were 3,140 as compared with 2,695 in 1937.

The total number of Notices issued and nuisances abated were 6,558 and 35,786, respectively.

Work done under the Housing Acts is shown in the tabular statement in the body of the Report.

HOUSING.—The Health Department ever since the passing of the Public Health Act, 1875, has been concerned with the housing conditions of the people. The work of the Department has from time to time been extended by the various Housing Acts which have been passed, beginning with the Housing of the Working Classes Act, 1885, and ending at present with the Housing Act of 1936.

Many complaints reach the Department as to nuisances in connection with dwelling houses and these complaints generally are dealt with under the nuisance sections of the Public Health Act, 1936. The work is carried out in the vast majority of cases by an intimation notice served by the sanitary inspector and recourse to legal proceedings is only required in relatively few instances.

The main work, however, of the Department relative to housing, comes under the Housing Acts. Under the Housing Consolidated Regulations, 1925 and 1932, the Department is enjoined to make regular routine inspections of the houses in the Borough. This has been carried on now for a number of years and the average number of houses which have been inspected per annum during the past ten years is approximately 1,200. As a result of these inspections the necessary work to make the houses fit for human habitation is carried out by notice served by the Department. Again the great majority of such notices are complied with, legal proceedings as a rule being unnecessary.

CLEARANCE.—The re-housing of the families displaced by the various Clearance and Compulsory Purchase Orders has proceeded as the new flats and houses became ready for occupation, and practically all the houses in the areas concerned have been vacated. For various reasons many of the families have not accepted the accommodation offered and the surplus houses built in connection with the slum clearance scheme are being allotted to families outside clearance areas who are overcrowded. It is the adopted practice of the Council to disinfect the furniture and bedding of all families leaving privately-owned dwellings for Council houses. The furniture is treated with hydro-cyanide and the bedding steam disinfected.



**OVERCROWDING.**—The Minister of Health fixed 1st July, 1937, as the appointed day after which newly-created overcrowding became an offence, and the same day was fixed as the terminal date by which a statement showing the permitted number of persons applicable to each house was to be inserted by the landlord in the rent books.

The information obtained by the housing survey forms a valuable record of the amount of housing accommodation existing in the Borough. Owing to the frequent changes in the manner in which many working-class houses are let out to families, the permitted number in relation to these dwelling-houses needs to be revised from time to time and constant inspection is required to enforce the overcrowding standard.

By 31st December, 1938, 292 overcrowded families were rehoused by the Council.

**SOCIAL CONDITIONS.**—The District is largely of a residential character, and the population, in addition to persons daily engaged elsewhere in the Metropolis, is composed of persons locally engaged in industry and trade. Apart from the numerous and important shopping centres in the District, there are several local industrial undertakings such as railways, and large electrical, motor engineering, and coachbuilding works, biscuit manufacturers, bedstead and mattress manufacturers, printing, etc.

I am indebted to the Manager of the Willesden Employment Exchange for the following information regarding unemployment.

**UNEMPLOYED.—**

	Men.	Women.	Total.
January 1938, ... ..	4,875	963	5,838
January, 1939 ... ..	5,148	1,111	6,259

**PUBLIC MORTUARY.**

123 bodies were deposited at the Mortuary during the year ending 31st December, 1938, as follows:—2 Accommodations, 72 Post-Mortems, 8 Post-Mortems and Inquests, and 41 Inquests only.

**AMBULANCE SERVICE.**

The demands on the Ambulance Service increase year by year.

During the year 9,569 calls were made for the Council's ambulances as compared with 8,535 in 1937, 7,685 in 1936, 6,856 in 1935, 5,617 in 1934, 5,633 in 1933, 5,497 in 1932 and 5,171 in 1931.

Altogether, 177,338 miles were run in 1938 as compared with 164,761 in 1937, 153,459 in 1936, 143,557 in 1935, 132,548 in 1934, 132,168 in 1933, 132,208 in 1932, and 131,564 in 1931.

Approximately 250 defective children are on the lists for daily conveyance by the Council's school ambulances to and from the special schools.

The detailed report of the 24th year of working of the Ambulance Service appears on page 80.

**MUNICIPAL HOSPITAL.**

The 47th Annual Report on the Municipal Hospital, written by Dr. Troup, appears later in this Report.

Your obedient Servant,

**GEORGE F. BUCHAN,**

*Medical Officer of Health.*



# THE SIXTY-THIRD ANNUAL REPORT

FOR THE

Year ending 31st December, 1938,

ON THE

## HEALTH AND SANITARY CONDITION OF THE BOROUGH OF WILLESDEN.

### GENERAL STATISTICS.

Area (acres) ... ..	4632.5
Population (estimated Midsummer, 1938) ... ..	203,734*
Population Census (1931) (not including areas taken over on 1st April, 1934) ... ..	185,300
Number of inhabited houses (end of 1938) according to Rate books ... ..	42,418
(Flats separately assessed counted as one house.)	
Rateable value at 31st March, 1938 ... ..	£1,610,684
Sum represented by a penny rate ... ..	£6,474

\* Registrar General's estimate Midsummer, 1938 ... .. 187,600

### EXTRACTS FROM VITAL STATISTICS OF THE YEAR.

Live Births—	Total.	M.	F.	Total.			
Legitimate ...	2,849	1,466	1,378	2,844	} Birth Rate per 1,000 of the estimated resident population ...	14.57	16.14
Illegitimate ...	119	94	89	183			
Stillbirths ...	101	57	44	101	Rate per 1,000 total (live and still) births ... ..	32.91	32.29
Deaths ... ..	1,841		1,851		Death Rate per 1,000 of the estimated resident population ...	9.04	9.87

Deaths from puerperal causes (Headings 29 and 30 of the Registrar-General's Short List) :—

	Deaths.	Rates per 1,000 total (Live and Still) Births.
No. 29—Puerperal sepsis ... ..	3	0.98
No. 30—Other puerperal causes ... ..	2	0.65
Total ... ..	5	1.63

Death Rate of Infants under one year of age :—

All infants per 1,000 live births ... ..	53.91	53.85
Legitimate infants per 1,000 legitimate live births ... ..	48.79	49.58
Illegitimate infants per 1,000 illegitimate live births ... ..	176.47	120.22

Deaths from Cancer (all ages) ... ..	332	330
„ „ Measles (all ages) ... ..	6	6
„ „ Whooping Cough (all ages) ... ..	3	3
„ „ Diarrhoea (under 2 years of age) ... ..	34	30

Figures in italics (other than rates) supplied by Registrar-General.

TABLE NO. 8.  
NOTIFIABLE DISEASES DURING THE YEAR.

DISEASE.	Total Cases Notified.	Cases admitted to		Total Deaths.
		Willesden Municipal Hospital.	Other Hospitals.	
	(1)	(2)	(3)	(4)
Diphtheria ... ..	415	397	15	8
Scarlet Fever ... ..	371	322	5	—
Enteric Fever (including Paratyphoid) ...	11	8	1	—
Puerperal Pyrexia ... ..	47	6	36	1
Pneumonia ... ..	284	7	—*	146
Small Pox ... ..	—	—	—	—
Cholera ... ..	—	—	—	—
Plague ... ..	—	—	—	—
Erysipelas ... ..	72	30	21	2
Typhus Fever ... ..	—	—	—	—
Relapsing Fever ... ..	—	—	—	—
Continued Fever ... ..	—	—	—	—
Cerebro-spinal Meningitis ... ..	19	14	5	4
Poliomyelitis ... ..	4	—	3	1
Ophthalmia Neonatorum ... ..	26	11	8	—
Malaria ... ..	—	—	—	—
Dysentery ... ..	37	10	13	—
Encephalitis Lethargica ... ..	1	—	—	3
Acute Polio-Encephalitis ... ..	—	—	—	—
Anthrax ... ..	—	—	—	—
Tuberculosis :—				
(a) Pulmonary ... ..	241	—	—*	101
(b) Non-Pulmonary ... ..	62	—	—*	16
Whooping Cough ... ..	277	19	—*	3

For analysis of the age groups see Appendix "A" Table IV.

\* No complete record.

TABLE NO. 9.  
TUBERCULOSIS.

NEW CASES AND MORTALITY DURING 1938.

This table includes primary notifications received from Medical Practitioners, cases not notified but included in the death returns and cases transferred from other areas.

AGE-PERIODS.	New Cases.				Deaths.			
	Respiratory.		Non-Respiratory.		Respiratory.		Non-Respiratory.	
	M.	F.	M.	F.	M.	F.	M.	F.
0 ... ..	0	0	0	0	0	0	0	0
1 ... ..	5	0	4	3	1	0	2	2
5 ... ..	5	5	3	2	0	1	0	1
10 ... ..	3	5	3	2	0	0	0	1
15 ... ..	6	18	3	7	1	4	0	0
20 ... ..	14	28	6	2	8	14	0	2
25 ... ..	33	29	6	8	11	15	2	0
35 ... ..	23	11	1	4	8	5	1	1
45 ... ..	17	8	3	2	11	4	0	0
55 ... ..	15	6	0	1	7	4	1	0
65 and upwards ...	9	1	1	1	5	2	1	2
TOTALS ... ..	130	111	30	32	52	49	7	9

The ratio of non-notified tuberculosis deaths to total tuberculosis deaths was 1 : 30.



When a death from tuberculosis is registered and no record of notification is found, a letter is sent to the medical practitioner certifying the death, asking for his reasons, and the answers have in all cases proved satisfactory—the medical practitioner having believed that the case had previously been notified.

The Public Health (Tuberculosis) Regulations, 1930, came into operation on 1st January, 1931. They place clearly upon the District Medical Officer of Health the duty to take such steps as are necessary or desirable for investigating the source of infection, for preventing the spread of infection and for removing conditions favourable to infection.

Since the beginning of 1931 the Council's Health Visitors have visited cases of Tuberculosis. They investigate the source of infection and give advice for preventing the spread of infection. They arrange for the provision of paper handkerchiefs and sputum bottles with disinfectant. They are also able to arrange for the loan of bed and bedding to enable the patient to sleep in a separate bed, but in most cases the patients cannot avail themselves of the offer because there is no space in the home in which to fit in an extra bed. Ring pillows have been provided in emaciated cases with a view to the prevention of bed sores. Contacts are advised to attend at the Tuberculosis Dispensary of the Middlesex County Council for examination.

The housing conditions of the majority of tuberculosis families are unsuitable, and make measures for the care of the patient and the prevention of spread of the disease difficult, if not indeed, impossible.

#### PUBLIC HEALTH (PREVENTION OF TUBERCULOSIS) REGULATIONS, 1925.

No case was dealt with under the above regulations during 1938.

#### PUBLIC HEALTH ACT, 1936. SECTION 172.

Removal to hospital of infectious persons suffering from pulmonary tuberculosis.  
No action was taken under this section during 1938.

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

##### LABORATORY FACILITIES.

Laboratory facilities are dealt with in the Annual Report on the Municipal Hospital, page 76.

##### AMBULANCE FACILITIES.

Ambulances are available as follows :—

- (a) For infectious cases—  
1 ambulance.
- (b) For non-infectious cases, accident cases and maternity cases—  
4 ambulances.

These ambulances have been established and are maintained by the Willesden Borough Council. The garage is situated at the Municipal Hospital, Brentfield Road, Neasden, N.W.10.

An all-night service is in operation.

A detailed report on the service for the financial year 1937-38 will be found on page 80.

##### NURSING IN THE HOME.

There have been no changes in the arrangements for the above, outlined in the 1931 Annual Report, page 13, Home Nursing Service.

##### TREATMENT CENTRES AND CLINICS.

The work of the Clinics appears in other parts of the Report. The capacity of the Clinic premises and the number of staff employed are inadequate for dealing with the patients who attend these Clinics. The question of Health Centre accommodation has again been under consideration by the Council throughout the year.

##### HOSPITALS.

Since the 1st April, 1936, the operative treatment of enlarged tonsils and adenoids and the treatment of children suffering from marasmus has been carried out at the Willesden Municipal Hospital.

##### MIDWIFERY AND MATERNITY SERVICES.

###### *Midwifery.*

In accordance with Section 10 of the Midwives Act, 1902, 60 Midwives gave notice in 1938 of their intention to practise in Willesden.

The provision made for a domiciliary Service of Midwives in pursuance of the Midwives Act 1936 is dealt with in the 9th Annual Report on the Supervision of Midwives, page 61.

###### *Maternity Service.*

The Service is dealt with in other parts of the Report.



## INSTITUTIONAL PROVISION FOR MOTHERS OR CHILDREN.

There are no developments or changes to record.

## HEALTH VISITORS—CHILD LIFE PROTECTION—DENTAL AND ORTHOPÆDIC CASES.

There is nothing to record except what is set out elsewhere in the Report.

## SUPERVISION AND INSPECTION OF REGISTERED MATERNITY AND OTHER NURSING HOMES.

This is dealt with in the 9th Annual Report on the Registration of Nursing Homes, page 67.

## SANITARY ADMINISTRATION.

*List of Local Acts, Adoptive Acts, Bye-laws and local Regulations in force in the District, with date of adoption.*

### *Local Acts :—*

- Willesden Local Board Act, 1876. Royal Assent 27.6.1876.
- Willesden Local Board Act, 1887. Royal Assent 8.8.1887.
- Willesden Sewerage Act, 1896. Royal Assent 14.8.1896.
- \*Willesden Urban District Council Act, 1903. Royal Assent 11.8.1903.

### *Adoptive Acts :—*

- \*Public Health Acts Amendment Act, 1890, Part III. Adopted 11.11.1890.
- \*Public Health Acts Amendment Act, 1907, Parts II., IV., and X. Adopted 24.1.1911.
- Public Health Acts Amendment Act, 1907, Part VI. Adopted 1925.
- \*Public Health Act, 1925.
- Burial Acts, 1852-1900.
- Public Libraries Acts, 1892-1901. Adopted 19.2.1891.

### *Bye-laws :—*

- \*Common Lodging Houses (Public Health Act, 1875, s. 80). Revised and adopted 10.1.35.
- \*Houses Let in Lodgings (Housing Act, 1936, s. 6). Allowed 1.9.1938.
- \*Slaughter Houses (Public Health Act, 1875, s. 169, and Towns Improvement Clauses Act, 1847, s. 128). Revised and adopted 10.1.35.
- \*Prevention of Nuisances (Public Health Act, 1875, s. 44). Revised and adopted 10.1.35.
- New Streets and Buildings (Public Health Act, 1875, s. 157, and Public Health Acts Amendment Act, 1890, s. 23). Revised and adopted 1.5.28. Amended and allowed 22.5.1930.
- New Sewers (Willesden Local Board Act, 1887). Adopted 9.10.1888.
- Pleasure Grounds (Public Health Act, 1875, s. 164). Adopted 28.1.1896.
- \*Rag and Bone Dealer (Public Health Act, 1875, s. 113). Revised and adopted 10.1.35.
- \*For the Regulation of Black Smoke (Public Health (Smoke Abatement) Act, 1926, s. 2). Adopted 22.5.30.

### *Local Regulations :—*

- Small Holdings and Allotment Act, 1908. Adopted 25.11.1913.
- \*Relating to underground sleeping rooms. Housing, Town Planning, etc., Act, 1909, s. 17 (7). Adopted 23.9.1913, and amended to conform with Section 18, Housing Act, 1925.

\* These are administered wholly or partly by the Health Committee.  
The unstarred are administered by other Committees of the Council.

## SANITARY CIRCUMSTANCES OF THE AREA.

**WATER.**—The water supply of Willesden is derived from the mains of the Metropolitan Water Board and the Colne Valley Water Company. The service is constant and the water of excellent quality.

**RIVERS AND STREAMS.**—The River Brent forms the Northern and Western boundary of the district. The Mitchell Brook, a tributary of the Brent, is a small stream running in a westward direction through the district. A large sheet of water known as the Welsh Harp is formed at the extreme northern boundary by the damming up of the Brent, thus forming a reservoir about a mile in length and about a quarter of a mile in width, or 160 acres in extent. The boundary line between the Boroughs of Willesden and Wembley passes through the length of this reservoir, leaving an area of about 68 acres of it in Willesden.

In the Autumn it was discovered that a small sewer was discharging in the Welsh Harp Reservoir. The source of this pollution was traced and appropriate remedial measures taken.

**CLOSET ACCOMMODATION.**—All houses are supplied with closets on the water carriage system.

Each house has at least one water closet, and in the better class tenement house there is generally a water closet provided on each floor.

**PUBLIC CLEANSING.**—Since the year 1919-20, the Health Department has not been responsible for the removal and disposal of house refuse, that work having been taken over by the Engineer's Department.

Quite 99 per cent. of the houses in the district are provided with movable receptacles. Fixed receptacles in the older houses are rapidly decreasing in number, and during the next few years should entirely disappear.

The Borough Engineer's Department collect refuse from all premises at least once weekly.



There have been no extensions or improvements during the past year in connection with the methods of Public Cleansing, Cesspool Cleansing, etc.

During the past year certain demonstrations were carried out on the Twyford Tip with a Tractor and Bulldozer, with a view to the disposal of refuse being carried out in a more hygienic manner. These demonstrations proved this machine could spread and at the same time consolidate the whole of the refuse collected each day, and finally cover the refuse with suitable material each night. Previously men were engaged spreading this refuse, which meant they were standing in refuse the whole of the day. The Council has purchased one of these machines and it is working satisfactorily.

It is now only necessary to have one tipping face open at a time, but prior to the tractor working on the tip, it was necessary to have as many as four tipping faces open each day, thus increasing the amount of refuse exposed to the atmosphere.

Four modern refuse collecting vehicles have been purchased, one being of special design, for use in connection with the removal of refuse from large blocks of flats, Council Schools and Cinemas, etc., whereby the refuse is stored in suitable containers, these being removed from the premises to the vehicle by means of a rubber-tyred trolley. The containers are then raised into the vehicle ready for discharge, by means of an electric hoist, after which they are then placed over a washing tray, fitted at the rear of the vehicle, water being delivered under pressure for the cleansing of containers, before being returned to the premises.

**DRAINAGE AND SEWERAGE.**—The culverting of the Harlesden Brook has been completed and Section 1 of the Mitchell Brook is at present in progress. Sections 6 and 7 of the latter Brook will be commenced shortly.

Flood Relief Works have been carried out in Oxgate Lane and Lennox Gardens, and it is proposed to carry out similar work at The Circle, Neasden. A scheme is also in course of preparation for the construction of a storm-water intercepting sewer in Church Road.

The reconstruction of the old brick sewer in Rudolph Road has been completed, and similar reconstruction in Cambridge Road is in progress.

**SWIMMING BATHS AND POOLS.**—The Council have three open-air swimming pools and one covered bath, viz. :—

- Craven Park Bath.—Open Air.
- Gladstone Park Bath.—Open Air.
- King Edward VII Bath.—Open Air.
- Granville Road Bath.—Covered Bath.

**Craven Park, Harlesden.**—Constructed and opened in 1935. Pool is 165 ft. long by 60 ft. wide and is 2 ft. 6 ins. deep at the ends and 10 ft. deep in the centre; holding 400,000 gallons. There is accommodation for approximately 1,000 bathers, and refreshments are available on the premises. A laundry is provided for the washing of towels and attendants' overalls. The water is cleansed by passing it continuously through a battery of pressure filters so designed as to filter the whole volume of water every four hours. Sterilisation is carried out by means of Wallace and Tiernan Chloramine Apparatus and aeration by means of two cascades.

The circulating pumps are in duplicate and can be run independently in the event of the breakdown of one. Similarly the filters can be used individually and together, and can be cleansed when necessary without cessation of filtration in the main battery.

The condition of the water was found to be satisfactory.

**Gladstone Bath.**—Constructed 1903. Length 235 ft. Width 80 ft.

Capacity 400,000 gallons. This bath is provided with a Filtration Plant capable of circulating the contents in 8 hours.

On all but two occasions during the year the chlorine content at the outlet end has been below the recommended minimum of 0.2 parts per million. In order to obtain this minimum it is necessary to increase the chlorine content at the inlet to an amount in excess of the recommended maximum. In spite of this the bacteriological condition of the water was on the whole satisfactory except on one occasion following the use of the bath by a large number of bathers on a bank holiday.

**King Edward Bath.**—Constructed 1911. Length 165 ft. Width 75 ft.

Capacity 365,000 gallons. This bath is provided with a Filtration Plant capable of circulating the contents in 6 hours.

The condition of the water was found to be bacteriologically satisfactory for the whole year. On a few occasions the water was allowed to become too acid; as this condition affects the efficient filtration of the water it was necessary to add to the water soda ash.

**Granville Road Baths.**—Constructed 1936/1937. The water in this Swimming Pool is purified by constant Filtration and Aeration. It is sterilized by the continuous addition of Chlorine and Ammonia during the filtering process.

During the year the condition of the water was found to be satisfactory. There was one mechanical breakdown on the chlorine feed at the end of May, and this was rectified in the course of a few days.



Samples of water for bacteriologist's examination are taken twice weekly during the season. The following table shows the number of samples so taken during 1938 :—

	Examined at Municipal Laboratory.	Examined by Counties Public Health Labs.
Craven Park ... ..	36	4
Gladstone Park ... ..	30	4
King Edward VII ... ..	30	4
Granville Road... ..	92	6
	188	18

ERADICATION OF BED BUGS.—Dwellers in Clearance Areas and in overcrowded houses to be removed to Council houses or flats and the disinfestation of privately-owned houses.

The schemes for dealing with these cases were set out in Appendices M, N and Q, in the Annual Report for 1935, and have been in operation during the year.

Particulars of the action taken for the eradication of bed bugs, including information as to :—

1. Number of Council properties found to be infested	... 45 houses, 11 flats.
Number of Council properties disinfested	... 45 houses, 11 flats.
Number of other houses found to be infested	... 202
Number of other houses disinfested	... 202

The methods employed for freeing infested houses from bed bugs :—

Council Houses.—The total number of houses and flats found to be infested in some degree was 45 houses and 11 flats. It must be appreciated that the greater part of these dwellings found to be infested were only affected to a slight degree, often no more than one or two bugs being found. In order that infestation may be dealt with in its early stages, tenants are encouraged to report the first evidence of bugs.

All the 45 houses and 11 flats found to be infested were disinfested during the year.

A workman has been specially trained to undertake this work. The affected house is sprayed thoroughly with a strong insecticide. All woodwork is loosened, flamed with a blow lamp and any papered walls are stripped. The rooms are then re-sprayed and further spraying is done at intervals until a negative result is obtained on several visits.

The co-operation of the tenant is sought in affecting a thorough cleaning of the premises and frequent visits are made after disinfestation, to ensure that cleanliness is being maintained. When disinfestation is complete, the walls and ceilings are distempered.

Eleven houses have been disinfested by a private contracting firm.

A workman is employed on the maintenance staff for disinfestation. Supervision is carried out by the Housing Manager and Housing Assistant.

Privately-owned houses.—Houses found to be infested on house-to-house inspection or investigation on complaint numbered 202.

Of this number 122 were disinfested by the owners and 80 by the Council at the owners' request. 537 reinspections were made by the Disinfector and 308 by the Sanitary Inspectors to ascertain if the measures taken had been successful.

The method used by the Department for freeing infested houses from bed bugs was sulphur fumigation. This was used in 166 rooms, a second application being necessary in 5 rooms.

Prior to the disinfestation of the house either by the Council or the owner the bedding is removed for steam disinfection by the Council (excepting in a few cases where infestation is slight and there is no evidence of vermin in the bedding), the wall papers stripped, mouldings and architraves removed and any defective plastering made good, the flame of a plumber's blow lamp is applied to all cracks and crevices.

Methods employed for ensuring that the belongings of the tenants are free from vermin before removal to Council houses—

The belongings of tenants from Slum Clearance Areas and from overcrowded premises are removed in special vans under an agreement by a Contractor.

Furniture and bedding is removed to the Municipal Hospital where the bedding is steam disinfested and the contents of the van treated with hydro-cyanic acid gas and later in the day the whole is taken to the new premises allocated to the tenant, 5 families from the Slum Clearance, 175 families from overcrowded premises, and 122 from other premises being so removed during the year.

After disinfestation all privately-owned houses are usually revisited by the Disinfector or Sanitary Inspector twice at intervals of ten days, twice at intervals of three weeks and twice at intervals of three months.

At these visits the furniture and bedding are examined and the occupiers are instructed where to search for vermin and how to keep their belongings clean.

## SANITARY INSPECTION OF THE AREA.

*Tabular summary of the work of the Sanitary Department during the year and action taken under the Public Health Acts, Housing Acts, etc.*

*Inspections :*

Number of premises inspected on complaint ... ..	3,140
Number of premises inspected in connection with infectious diseases ... ..	38
Number of periodical inspections of premises... ..	3,907
Houses inspected from House to House (Housing Acts) ... ..	1,514
For Certificates or Reports under the Rent Acts ... ..	3
Public House Urinals ... ..	174
Mews and Stables ... ..	412
Miscellaneous ... ..	622
Total number of inspections and re-inspections made ... ..	35,575
Smoke Observations ... ..	266

*Action under Rent and Mortgage Interest (Restriction) Acts, 1920-1933 :*

Number of applications received for Certificates ... ..	4
Number of Certificates granted... ..	3
Number of Certificates refused ... ..	—
Number of applications withdrawn ... ..	1
Number of applications for Reports ... ..	—
Number of Reports granted ... ..	—

*Action taken (under Housing Acts and Health Acts) :*

Notice to Inspect (Section 157, Housing Act, 1936) ... ..	3,343
Cautionary or Intimation Notices issued ... ..	2,971
Number complied with ... ..	2,596
Statutory Orders issued ... ..	244
Number complied with ... ..	172*
Summonses served ... ..	3
Number of convictions obtained ... ..	3
Summonses withdrawn ... ..	0
„ dismissed ... ..	0

\* Includes a certain number issued in 1937.

*Houses Let in Lodgings (Tenement Houses) :*

Number registered under Bye-laws ... ..	0
Number of contraventions ... ..	0

*Common Lodging Houses :*

Number registered under Bye-laws ... ..	1
Number of Inspections made ... ..	27
Number of contraventions ... ..	0
Number remedied ... ..	0

*Canal Boats used as Dwellings :*

Number of contraventions of Regulations ... ..	—
Number remedied... ..	—

*Movable Dwellings, Caravans, Tents, etc. :*

Number observed during the year ... ..	0
Number of nuisances therefrom abated ... ..	0
Number removed from district ... ..	0

*Bakehouses :*

Number in district ... ..	62
Number of Inspections ... ..	184
Contraventions of Factory Acts ... ..	30
Contraventions remedied ... ..	25

*Slaughter-houses :*

Number on register ... ..	3
Inspections of carcasses, etc. ... ..	180
Contraventions of Bye-laws ... ..	1
Contraventions remedied ... ..	1

*Cowsheds :*

Number on register ... ..	0
Number of milch cows in district ... ..	0



*Dairies and Milkshops :*

Number of dairymen on register	...	...	...	...	...	...	...	281
Number of itinerant milk sellers registered	...	...	...	...	...	...	...	47
Number of inspections made	...	...	...	...	...	...	...	204
Contraventions of Milk and Dairies Order, 1926	...	...	...	...	...	...	...	10
Contraventions remedied	...	...	...	...	...	...	...	10

*Unsound Food :*

Meat (including organs) seized and surrendered	...	...	...	...	262 lbs. + 2 beasts' heads.
Fish (wet and dried) surrendered	...	...	...	...	222 lbs. + 10 craw fish
Poultry surrendered	...	...	...	...	142 lbs.
Bacon surrendered	...	...	...	...	295 lbs.
Tinned and Cooked Meat surrendered	...	...	...	...	965 lbs.
Fruit surrendered	...	...	...	...	111 lbs.
Method of disposal	...	...	...	...	Destroyed.

*Offensive Trades :*

Number of premises in district (Rag and Bone Dealers)	...	...	...	...	6
Number of inspections made	...	...	...	...	3
Contravention of Bye-laws	...	...	...	...	—
Contravention remedied	...	...	...	...	—

*Water Supply and Water Service :*

Percentage of houses supplied on constant system	...	...	...	...	100
Cisterns :—					
New provided	...	...	...	...	17
Cleansed, repaired, covered, etc.	...	...	...	...	274
Draw-taps placed on mains	...	...	...	...	141

*Drainage and Sewerage of existing Buildings :*

Water Closets :—					
Number of water closets substituted for dry receptacles	...	...	...	...	0
Repaired, supplied with water or otherwise improved	...	...	...	...	919
Additional Closets constructed	...	...	...	...	103
Percentage of houses provided with water closets	...	...	...	...	100
Waterclosets aerielly disconnected from sculleries, living rooms and bedrooms	...	...	...	...	32
Drains :—					
Examined, tested, exposed, etc.	...	...	...	...	251
Unstopped, repaired, trapped, etc.	...	...	...	...	391
Waste pipes, rain-water pipes, disconnected, repaired, etc.	...	...	...	...	1,008
New soil pipes or ventilating shafts fixed	...	...	...	...	213
Existing soil pipes or ventilating shafts repaired	...	...	...	...	291
Disconnecting traps or chambers inserted	...	...	...	...	122
Reconstructed	...	...	...	...	72
New manhole covers	...	...	...	...	2
Cesspools :—					
Rendered impervious, emptied, cleansed, etc.	...	...	...	...	0
Abolished and drain connected to sewer	...	...	...	...	0
Percentage of houses draining into sewers	...	...	...	...	100

*Disinfection and Disinfestation :*

Rooms disinfected :—					
(a) Phthisis	...	...	...	...	48
(b) Other diseases and conditions	...	...	...	...	735
Articles disinfected or destroyed :—					
(a) Phthisis	...	...	...	...	207
(b) Other diseases and conditions	...	...	...	...	563

*Dust (House Refuse) :*

New bins provided	...	...	...	...	576
Periodical frequency of dust removal	...	...	...	...	weekly
Method of disposal	...	...	...	...	by tipping

*Sundry Nuisances abated :*

Overcrowding (under Public Health Acts) ... ..	4
Smoke ... ..	3
Accumulations of refuse ... ..	99
Foul ditches, ponds, etc., and stagnant water ... ..	—
Fowls, pigs, and other animals ... ..	3
Dampness ... ..	1,559
Yards and forecourts paved, repaved or repaired ... ..	908
Walls and ceilings cleansed ... ..	8,868
Verminous rooms purified ... ..	533
Leaky roofs made watertight ... ..	1,241
Additional ventilation provided under floors ... ..	371
Dilapidated plaster repaired ... ..	3,419
Flooring and other woodwork repaired ... ..	2,974
Damp-proof courses inserted ... ..	625
Water supply reinstated... ..	33
Washhouse floors repaired or repaved ... ..	345
Fireplaces and stoves repaired ... ..	1,320
Decayed brickwork repaired and repointed ... ..	905
Sinks provided or replaced ... ..	511
Additional light and ventilation provided to staircases ... ..	168
Larders or food cupboards provided or ventilated ... ..	1,196
Gutters and rainwater pipes repaired or renewed ... ..	1,194
New sash cords and glass provided to windows ... ..	3,820
Miscellaneous ... ..	2,345
Total number of Nuisances abated ... ..	35,786
<i>Inspection of Premises where Food is prepared :</i>	
Butchers', Provision, and General shops ... ..	749
Fish shops (wet, dried and fried) ... ..	270
Eating houses ... ..	130
Greengrocers' shops ... ..	304
Ice-cream premises ... ..	98
Stalls ... ..	314
Special inspections under Meat Regulations ... ..	19

CANAL BOATS ACT, 1877, AND PUBLIC HEALTH ACT, 1936.—The number of boats inspected during the year 1938 was 12 (16 inspections).

No contraventions of the Regulations were found.

No legal proceedings were taken during the year.

No case of infectious disease was notified or traced and no boats were detained for cleansing.

OFFICES.—During the year a survey was made to ascertain the number of offices in the District.

It was found there are about 400 offices, 250 of which are in connection with factories and the remainder in connection with municipal offices, banks and premises occupied by solicitors, surveyors, etc.

As a result of an inspection of these offices action was taken to remedy certain unsatisfactory conditions found.

OFFENSIVE TRADES.—There are 6 Rag and Bone Dealers carrying on this business in the district, all complying with the Bye-laws.

BYE-LAWS RELATING TO HOUSES LET IN LODGINGS.—Bye-laws were made by the Council of the Borough of Willesden with respect to houses which are occupied by persons of the working classes and let in lodgings or occupied by members of more than one family. These were allowed by the Minister of Health on 1st September, 1938, and came into operation on the 1st October, 1938. These Bye-laws repealed those made by the Urban District Council of Willesden on the 26th July, 1927, and by the Urban District Council of Wembley on the 2nd April, 1931, and which were confirmed by the Minister of Health on the 18th April, 1928, and the 25th June, 1931, respectively, so far as Willesden is concerned.

UNDERGROUND ROOMS.—There are approximately 1,229 houses in Willesden with basement rooms coming under the definition of "underground rooms." These 1,229 houses contain 2,017 basement rooms.

Of 1,396 rooms which can be made to comply with the basement regulations 386 have been dealt with, leaving 1,010 still to be brought up to the standard required by the regulations of 1909.

Of 348 rooms which could not comply 97 rooms have been closed; 44 of these being closed during 1938, leaving 251 awaiting consideration by the local authority. Of the 97 rooms which have been closed, 7 were permitted to be used as stores, 64 rooms have been vacated, and 26 rooms are still in occupation.

Six Appeals were made against Closing Orders, one of which was withdrawn. Five Appeals were made respecting front and back basement rooms of five houses, the Judge varied the Closing Orders so that in each case the Orders applied only to the front basement rooms. The Judge excluded the back basement rooms because he was of the opinion that the Council's Regulations originally made under the Act of 1908 could only apply to rooms habitually used as sleeping places.



As the result of the decisions of the Court in these Appeals the Council applied to the Ministry of Health for the omission of the words "habitually used as a sleeping place," in their regulations under the 1909 Act. The Ministry did not give their consent to this proposal because they stated new regulations were being drafted by them. These draft model regulations have now been issued and these draft regulations are now under consideration by the Council.

**DISPOSAL OF THE DEAD.**—The Council at present own a cemetery within the district and it is estimated that a further 6,004 grave spaces could be laid out before that cemetery is full; the average number of burials therein annually for the past ten years has been approximately 1,496. The Council realising that the accommodation of their present cemetery will within a few years be exhausted, purchased a site in 1929 in the Kingsbury Urban District, now the Borough of Wembley, practically abutting on the north-western boundary of the district.

There are two Jewish cemeteries situate in the district, one in Beaconsfield Road and another in Pound Lane, and it is estimated there are sufficient grave spaces to last approximately 30 and 65 years respectively before these cemeteries are full.

**SCHOOLS.**—The whole of the schools in Willesden have a good and sufficient water supply and sanitary accommodation.

**RAG FLOCK ACTS, 1911-28.**—There are no premises in the district on which rag flock is manufactured, and no sampling under these Acts has been carried out during the year.

#### HOUSING.

Number of inhabited houses\* in Willesden (end of 1938) according to the Rate Books, 42,418.

\* Flat separately assessed counted as one house.

Number of houses† in Willesden (end of 1938), 34,322 (approx.).

† Smaller flats contained under one roof are counted as one house, larger flats in blocks being counted separately.

The following table shows building activities during the periods stated :—

TABLE NO. 10.

Year.	For working classes.		Not for working classes.	Total.
	Houses and flats erected by the Council.	Houses and flats erected by private enterprise.	Houses and flats erected by private enterprise.	
1921-30 ...	998	1,687	3,643	6,328
1931-36 ...	304	1,873	910	3,087
1937 ...	115	1	252	368
1938 ...	272	11	816	1,099
Total for 18 years	1,689	3,572	5,621	10,882

#### HOUSING STATISTICS FOR THE YEAR 1938.

Number of New Houses erected during the Year :—

(a) Total (including numbers given separately under (b)) :—

(i.) By the Local Authority ... ..	Houses ... ..	22
	Flats ... ..	250
(ii.) By other Local Authorities ... ..	... ..	Nil
(iii.) By other bodies and persons ... ..	Working class houses	2
	Working class flats ... ..	9
	Other houses ... ..	17
	Other flats ... ..	799

(b) With State assistance under the Housing Acts :—

(i.) By the Local Authority.

(a) For the purpose of the Housing Act of 1930 and

1935 ... ..	Houses... ..	22
	Flats ... ..	250

(ii.) By other bodies or persons ... .. Nil

#### 1.—INSPECTION OF DWELLING-HOUSES DURING THE YEAR :—

(1) (a) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts) ... ..	4,608
(b) Number of inspections made for the purpose ... ..	24,518
(2) (a) Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 and 1932 ... ..	1,514
(b) Number of inspections made for the purpose ... ..	12,649

(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation ... ..	2
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation ... ..	1,299
2.—REMEDY OF DEFECTS DURING THE YEAR WITHOUT SERVICE OF FORMAL NOTICES :—	
Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers... ..	2,478
3.—ACTION UNDER STATUTORY POWERS DURING THE YEAR :—	
(a).—Proceedings under sections 9, 10 and 16 of the Housing Act, 1936 :	
(1) Number of dwelling-houses in respect of which notices were served requiring repairs ... ..	128
(2) Number of dwelling-houses which were rendered fit after service of formal notices :—	
(a) By owners ... ..	*136
(b) By local authority in default of owners ... ..	20
* Includes a certain number of Notices served in 1937.	
(b).—Proceedings under Public Health Acts :	
(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied ... ..	52
(2) Number of dwelling-houses in which defects were remedied after service of formal notices :—	
(a) By owners ... ..	28
(b) By local authority in default of owners ... ..	5
(c).—Proceedings under sections 11, 13 and 14 of the Housing Act, 1936 :	
(1) Number of dwelling-houses in respect of which Demolition Orders were made	0
(2) Number of dwelling-houses demolished in pursuance of Demolition Orders	0
(d).—Proceedings under section 12 of the Housing Act, 1936 :	
(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made ... ..	*44 rooms
(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit ... ..	0
* Appeals were heard respecting ten rooms which were the subject of Closing Orders. The Judge varied the Closing Orders to apply to the five front rooms only and not to the five back rooms.	
4.—HOUSING ACT, 1936.—OVERCROWDING :—	
(a) (i) Number of dwellings overcrowded at the end of the year ... ..	1,526
(ii) Number of families dwelling therein ... ..	1,526
(iii) Number of persons dwelling therein ... ..	7,902
(b) Number of new cases of overcrowding reported during the year ... ..	12
(c) (i) Number of cases of overcrowding relieved during the year ... ..	184
(ii) Number of persons concerned in such cases ... ..	1,112
(d) Particulars of any cases in which dwelling-houses have again become overcrowded after the Council have taken steps for the abatement of overcrowding—No cases reported.	
5.—(a) Number of cases of overcrowding in houses owned by the Council which have been relieved during the year ... ..	7
(b) Number of cases of overcrowding which have been relieved in the course of slum clearance operations ... ..	Nil

## INSPECTION AND SUPERVISION OF FOOD.

MILK SUPPLY.—There are 2 wholesale dealers and 281 retail milk purveyors in the district. Their premises and utensils are frequently inspected.

In addition there are 47 milk sellers whose premises are situate outside Willesden.

The following table shows the number of licences granted for the sale of graded milk under the Milk (Special Designations) Order, 1936, during the year 1938 :—

TABLE NO. 11.

(a) " Tuberculin Tested " ... ..	14
(b) " Accredited " ... ..	1
(c) " Pasteurised " ... ..	29
(d) " Tuberculin Tested " Bottling Establishment ... ..	1
(e) " Pasteurised " milk (supplementary) ... ..	—
(f) " Pasteurisers " ... ..	2

There were no refusals or revocations of licences under the Milk (Special Designations) Order, 1936, during the year.



12 samples of Pasteurised Milk were examined during the year, and found to comply with the bacterial standard ; two of these were also subjected to the phosphatase test and proved satisfactory.

28 samples of " Tuberculin Tested " milk were also examined ; 24 of these proved satisfactory and 4 proved unsatisfactory. These 28 samples were taken from a large multiple firm licensed by the Council to bottle " Tuberculin Tested " milk.

The samples were taken from the milk of 9 different producers, the method being to take one sample from the churn and another sample from the same producer after the milk had been through the bottling machine. The results indicated that the bottling plant was not at fault.

The County Medical Officer of Health of the district in which the milk was produced was informed and the firm sampled took the matter up with the wholesalers who undertook to eliminate all senders of milk from whom unsatisfactory samples had been taken, and they themselves refused to take any milk from the producers supplying unsatisfactory milk.

Forty-eight samples of milk were taken during the year for examination for the presence of tubercle bacilli under the Milk and Dairies (Consolidation) Act, 1915.

One sample (No. 0/585, representing 2 per cent. of the total number sampled) was found to contain tubercle bacilli, and action was taken resulting in an examination of the herds at the supplying farm situate in the county of Buckingham.

The other 47 samples showed no evidence of tuberculosis.

MEAT INSPECTION.—The Inspectors visit the slaughter-houses at the times set apart for slaughtering and examine the carcasses and organs for evidence of disease. Shops and stalls are also kept under close observation.

The number of private slaughter-houses in use in the area at the dates mentioned was :—

TABLE NO. 12.

	In 1920.	1925.	1938.
Registered ... ..	4	4	1
Licensed ... ..	5	4	2
TOTAL ... ..	9	8	3

TABLE NO. 13.

The following Table shows the number of carcasses inspected and the number of condemnations :—

	Cattle, excluding cows.	Cows.	Calves.	Sheep and lambs.	Pigs.
Number killed ... ..	85	—	26	652	250
Number inspected ... ..	73	—	18	537	234
<i>All diseases (except T.B.).</i>					
Whole carcass condemned	—	—	—	—	—
Carcasses where part or organs condemned ... ..	6 organs	—	—	3 organs	6
Percentage of number in- spected affected other than T.B. ... ..	8.2	—	—	5.6	2.6
<i>Tuberculosis only.</i>					
Whole Carcasses condemned	—	—	—	—	—
Carcasses, part, or organs condemned ... ..	6	—	—	—	9
Percentage of number in- spected affected with tu- berculosis ... ..	8.2	—	—	—	3.8

INSPECTION AND SUPERVISION OF OTHER FOODS.—Inspections were made of all the bake-houses and other premises in the district where food is prepared.

The 62 bakehouses in the district were inspected on 184 occasions, Notices being served in 30 instances for minor contraventions of the Factory and Workshop Act.

BASEMENT BAKEHOUSES.—The Medical Officer of Health reported to the Council the result of examination of every basement bakehouse in the District in respect of which a certificate of suitability had been issued by the Council under the Factory and Workshop Act, 1901.

The Council were satisfied that 14 bakehouses are suitable for use as such, and notice in writing was given to the proprietors that the certificates issued under the Factory and Workshop Act, 1901, shall continue to operate so long as the bakehouse may otherwise lawfully be used, but without prejudice to the power of the Council to revoke the certificate as a result of a subsequent examination under Section 54 (2) Factories Act, 1937.

**SALE OF BEER IN PUBLIC HOUSES.**—An inspection has been made of some 52 public houses in this area. The conditions found were generally satisfactory. The cellars are regularly washed down and the walls regularly limewashed. The glasses used are cleansed after use and the wash-up sinks for this purpose are fitted with hot and cold water supplies. The pumps and pipe lines are dismantled weekly, soaked in hot soda water overnight and rinsed in cold water next morning. In some cases glass or stainless steel is used instead of lead piping and in other cases it was stated that the lead piping would be replaced by one or other of these materials. The surplus beer from the serving returns to the barrels through the utiliser filter and this appears to be a satisfactory arrangement. Waste beer, on the other hand, is specially collected in a separate barrel and returned to the brewers.

In this area the brewers send their own inspectors frequently round the public houses. These inspectors examine and report on the cleanliness of bars, engines, pipe lines, cellars, temperature and storage. A record card of each inspection and report is kept by the publican and a number of these have been seen by the Sanitary Inspectors of this Department.

**FOOD AND DRUGS ACTS.**—These Acts are administered by the Middlesex County Council and I am indebted to Mr. R. Robinson, Chief Officer, Public Control Department, for the following tabular statement, showing the number of samples taken in Willesden and the result of prosecutions instituted under the Acts during the year 1938:—

TABLE NO. 14.  
LIST OF SAMPLES TAKEN DURING THE YEAR ENDED 31ST DECEMBER, 1938.

Article.	Taken.	Adulterated.
Milk ... ..	555	2
Apples ... ..	1	—
Cream Pastries ... ..	3	—
Gin ... ..	3	1
Hake ... ..	1	—
Jam tarts ... ..	1	—
Mussels, bottled ... ..	1	—
Sausages ... ..	3	—
Sheep's liver ... ..	12	—
Whisky ... ..	3	—
White Precipitate Ointment ... ..	2	2
	585	5
Number of Prosecutions ... ..	1	
Number of Convictions ... ..	1	

ARTIFICIAL CREAM ACT, 1929.

PUBLIC HEALTH (CONDENSED AND DRIED MILK) REGULATIONS, 1923.

Inspections were made under the above in order to see that the requirements with respect to labelling were complied with, but no infringements were discovered.

ADMINISTRATION OF FACTORY AND WORKSHOP ACT, 1901  
AND THE FACTORIES ACT, 1937 (which superseded the Act of 1901 on 1st July, 1938).

The following tables show the number of premises visited in pursuance of the provisions of the above-mentioned Acts and the action taken in connection therewith.

TABLE NO. 15.

FACTORIES.

INSPECTIONS for purposes of provisions as to health made by Sanitary Inspector.

Premises. (1)	Number of		
	Inspections. (2)	Written Notices. (3)	Occupiers Prosecuted. (4)
Factories with mechanical power ... ..	762	44	—
Factories without mechanical power ... ..	146	3	—
Other Premises under the Act (including works of building and engineering con- struction but not including outworkers' premises) ... ..	34	—	—
Total ... ..	942	47	—



TABLE NO. 16.—DEFECTS FOUND.

Particulars. (1)	Number of Defects.			Number of defects in respect of which Prosecutions were instituted. (5)
	Found. (2)	Remedied. (3)	Referred to H.M. Inspector. (4)	
Want of cleanliness (S.1) ... ..	4	3	—	—
Overcrowding (S.2) ... ..	Nil	Nil	—	—
Unreasonable temperature (S.3) ... ..	Nil	Nil	—	—
Inadequate ventilation (S.4) ... ..	2	2	—	—
Ineffective drainage of floors (S.6) ... ..	1	Nil	—	—
Sanitary Conveniences {	Insufficient ... ..	7	6	—
	Unsuitable or defective ... ..	32	28	—
	Not separate for sexes ... ..	3	3	—
Other offences ... ..	Nil	Nil	—	—
(Not including offences relating to Home-Work or offences under the Sections mentioned in the Schedule to the Ministry of Health (Factories and Workshops Transfer of Powers) Order, 1921, and re-enacted in the Third Schedule to the Factories Act, 1937.)				
Total ... ..	49	42	—	—

TABLE NO. 17.

## REGISTERED FACTORIES.

On the register at the end of the year.

Factories with mechanical power ... ..	669
Factories without ... ..	243
Other factories (including building operations) ... ..	34

TABLE NO. 18.

Homeworkers and Outworkers ... ..	459
-----------------------------------	-----

TABLE NO. 19.—OTHER MATTERS.

Class. (1)	Number. (2)
Matters notified to H.M. Inspector of Factories :—	
Failure to affix Abstract of the Factory and Workshop Act (s. 133) ... ..	—
Action taken in matters referred by H.M. Inspector as remediable under the Public Health Acts, but not under the Factory and Workshop Act (s. 5) :—	
Notified by H.M. Inspector ... ..	14
Reports (of action taken) sent to H.M. Inspector ... ..	14
Other ... ..	—
Underground Bakehouse (s. 101) :—	
Certificates granted during the year ... ..	—
In use at the end of the year ... ..	14

# THE THIRTY-FIRST ANNUAL REPORT

FOR THE

Year ending 31st December, 1938,

ON THE

## HEALTH OF CHILDREN ATTENDING THE PUBLIC ELEMENTARY SCHOOLS IN WILLESDEN.

*Giving the Tables required by the Board of Education.*

TABLE NO. 20.—CORRESPONDING TO TABLE I OF THE BOARD OF EDUCATION'S MEDICAL STATISTICAL TABLES.

Return of Medical Inspections for the year ended 31st December, 1938 :—

### A.—ROUTINE MEDICAL INSPECTIONS.

Number of Inspections in the prescribed Groups :—

Entrants ... ..	2,484
Second Age Group ... ..	2,382
Third Age Group ... ..	1,545
Total ... ..	6,411

Number of other Routine Inspections ... .. 0

Grand Total ... .. 6,411

### B.—OTHER INSPECTIONS.

Number of Special Inspections ... .. 7,054

Number of Re-inspections ... .. 15,639

Total ... .. 22,693

### C.—CHILDREN FOUND TO REQUIRE TREATMENT.

NUMBER OF *individual children* FOUND AT Routine Medical Inspection TO REQUIRE TREATMENT (excluding Defects of Nutrition, Uncleanliness and Dental Diseases).

Group.	For defective Vision (excluding squint).	For all other con- ditions recorded in Table IIA.	Total.*
(1)	(2)	(3)	(4)
Entrants ... ..	10	548	550
Second Age Group ... ..	198	379	526
Third Age Group ... ..	113	176	278
Total (Prescribed Groups) ... ..	321	1103	1,354
Other Routine Inspections ... ..	0	0	0
Grand Total ... ..	321	1103	1,354

\* NOTE.—No individual child is counted more than once in any column of this table. A child suffering from defective vision and from adenoids appears once in column (2), once in column (3), and once only in column (4). A child suffering from two defects other than defective vision appears once only in column (3) and once in column (4).



TABLE No. 21.—CORRESPONDING TO TABLE II. OF THE BOARD OF EDUCATION'S MEDICAL STATISTICAL TABLES.

A.—RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED 31ST DECEMBER, 1938.

Defect or Disease.  (1)	Routine Inspections.		Special Inspections.		
	No. of Defects.		No. of Defects.		
	Requiring treatment. (2)	Requiring to be kept under observation but not requiring treatment. (3)	Requiring treatment. (4)	Requiring to be kept under observation but not requiring treatment. (5)	
Skin {	(1) Ringworm—Scalp ... ..	2	—	1	—
	(2) „ Body ... ..	—	—	13	—
	(3) Scabies ... ..	9	—	174	—
	(4) Impetigo ... ..	8	—	219	—
	(5) Other Diseases (non-tuberculous)	38	3	814	—
TOTAL (Heads 1 to 5) ...		57	3	1,221	—
Eye {	(6) Blepharitis ... ..	17	1	73	—
	(7) Conjunctivitis ... ..	4	—	92	—
	(8) Keratitis ... ..	—	—	—	—
	(9) Corneal Opacities ... ..	—	—	—	—
	(10) Other Conditions (excluding Defective Vision and Squint) ...	23	2	127	—
TOTAL (Heads 6 to 10) ...		44	3	292	—
Ear {	(11) Defective Vision (excluding Squint) ... ..	321	57	296	—
	(12) Squint ... ..	25	3	61	—
	Spectacles broken ... ..	—	—	173	—
	Spectacles lost ... ..	—	—	16	—
	(13) Defective Hearing ... ..	16	1	12	—
Nose and Throat {	(14) Otitis Media ... ..	—	—	144	—
	(15) Other Ear Diseases ... ..	33	1	160	—
	(16) Chronic Tonsillitis only ... ..	401	223	109	—
Nose and Throat {	(17) Adenoids only ... ..	48	2	33	—
	(18) Chronic Tonsillitis and Adenoids	79	10	263	—
	(19) Other Conditions ... ..	86	26	469	—
(20) Enlarged Cervical Glands (non-tuberculous) ...	52	8	99	—	
(21) Defective Speech ... ..	3	5	2	—	
Heart Disease :—					
Heart and Circulation {	(22) Organic ... ..	—	—	—	—
	(23) Functional ... ..	3	168	2	—
	(24) Anæmia ... ..	6	2	15	—
Lungs {	(25) Bronchitis ... ..	14	4	58	—
	(26) Other Non-Tuberculous Diseases	1	4	17	—
Pulmonary :—					
Lungs {	(27) Definite ... ..	—	—	—	—
	(28) Suspected ... ..	—	1	15	—
Non-Pulmonary :—					
Tubercul'sis {	(29) Glands ... ..	—	—	—	—
	(30) Bones and Joints ... ..	—	—	—	—
	(31) Skin ... ..	—	—	—	—
	(32) Other Forms ... ..	—	—	—	—
	Suspected—Glands ... ..	—	—	1	—
	„ Bones and Joints ... ..	—	—	—	—
„ Other Forms ... ..	—	—	—	—	
TOTAL (Heads 29 to 32) ...		—	—	1	—
Nervous System {	(33) Epilepsy ... ..	—	—	2	—
	(34) Chorea ... ..	1	—	7	—
	(35) Other Conditions ... ..	11	4	15	—
Deformities {	(36) Rickets ... ..	—	—	—	—
	(37) Spinal Curvature ... ..	11	9	18	—
	(38) Other Forms ... ..	146	73	123	—
(39) Other Defects and Diseases (excluding Defects of Nutrition, Uncleanliness and Dental Diseases)	198	52	2,557	—	
TOTAL NUMBER OF DEFECTS...		1,556	659	6,180	—

B.—CLASSIFICATION OF THE NUTRITION OF CHILDREN INSPECTED DURING THE YEAR IN THE  
ROUTINE AGE-GROUPS.

(See Administrative Memorandum No. 124, dated 31st December, 1934.)

Age-groups.	Number of Children Inspected.	A (Excellent).		B (Normal).		C (Slightly subnormal).		D (Bad).	
		No.	%	No.	%	No.	%	No.	%
Entrants ... ..	2,484	178	7.2	2,143	86.3	163	6.5	0	0.0
Second Age-group ... ..	2,382	260	10.9	1,953	82.0	168	7.1	1	0.0
Third Age-group ... ..	1,545	140	9.1	1,294	83.7	110	7.1	1	0.1
Other Routine Inspections ... ..	—	—	—	—	—	—	—	—	—
<b>TOTAL ... ..</b>	<b>6,411</b>	<b>578</b>	<b>9.0</b>	<b>5,390</b>	<b>84.1</b>	<b>441</b>	<b>6.9</b>	<b>2</b>	<b>0.0</b>

TABLE CORRESPONDING TO TABLE III OF THE BOARD OF EDUCATION'S MEDICAL STATISTICAL TABLES.—

RETURN OF ALL EXCEPTIONAL CHILDREN IN THE AREA—*vide* THE FIFTH ANNUAL REPORT ON THE WORK IN  
CONNECTION WITH ABNORMAL CHILDREN, PAGE 40.

TABLE NO. 22.—CORRESPONDING TO TABLE IV. OF THE BOARD OF EDUCATION'S MEDICAL STATISTICAL  
TABLES.

RETURN OF DEFECTS TREATED DURING THE YEAR ENDED 31ST DECEMBER, 1938.

TREATMENT TABLES.

GROUP I.—MINOR AILMENTS (EXCLUDING UNCLEANLINESS, FOR WHICH SEE TABLE VI).

Disease or Defect.	NUMBER OF DEFECTS TREATED, OR UNDER TREATMENT DURING THE YEAR.		
	Under the Authority's Scheme.	Otherwise.	Total.
(1)	(2)	(3)	(4)
Skin :—			
Ringworm—Scalp :—			
(i) X-ray Treatment. If none, indicate by dash ...	1	—	1
(ii) Other Treatment ... ..	2	—	2
Ringworm—Body ... ..	14	3	17
Scabies ... ..	197	15	212
Impetigo ... ..	345	12	357
Other Skin Diseases ... ..	1,852	24	1,876
Minor Eye Defects (external and other, but excluding cases falling in Group II) ... ..	399	12	411
Minor Ear Defects ... ..	412	46	458
Miscellaneous ( <i>e.g.</i> , Minor Injuries, Bruises, Sores, Chil- blains, etc.) ... ..	4,592	254	4,846
<b>TOTAL ... ..</b>	<b>7,814</b>	<b>366</b>	<b>8,180</b>



GROUP II.—DEFECTIVE VISION AND SQUINT (EXCLUDING MINOR EYE DEFECTS TREATED AS MINOR AILMENTS—GROUP I).

TABLE A.

(1)	NUMBER OF DEFECTS DEALT WITH		
	Under the Authority's Scheme. (2)	Otherwise. (3)	Total. (4)
Errors of Refraction (including squint) ... .. (operations for squint should be recorded separately in the body of the School Medical Officer's Report).	1,030	98	1,128
Other defect or disease of the eyes (excluding those recorded in Group I) ... ..	—	—	—
TOTAL ... ..	1,030	98	1,128
	Under the Authority's Scheme.	Otherwise.	Total.
No. of children for whom spectacles were—			
(a) Prescribed ... ..	721	82	803
(b) Obtained ... ..	438	188	626

In the above table the figures of 1,030 and 98 represent the cases submitted to refraction or in which spectacles were prescribed without refraction during the year, no matter whether they were new cases or cases arising out of re-examination. One individual child may be submitted to refraction more than once during the year and would appear in the above table on each occasion.

TABLE B.

The following table shows the cases dealt with during the year whether they were submitted to refraction or not and includes new cases, cases seen for purposes of re-examination, and also cases (whether seen by the oculist or not) receiving attention on account of lost or broken spectacles.

Defect or Disease. (1)	NUMBER OF DEFECTS DEALT WITH		
	Under the Authority's Scheme. (2)	Otherwise. (3)	Total. (4)
Errors of Refraction (including squint) ... ..	2,086	149	2,235
Other defect or disease of the eyes (excluding those recorded in Group I) ... ..	—	—	—
TOTAL ... ..	2,086	149	2,235

GROUP III.—TREATMENT OF DEFECTS OF NOSE AND THROAT.

Number of Defects.

Received Operative Treatment.				Received other forms of Treatment. (4)	Total number treated. (5)					
Under the Authority's Scheme in Clinic or Hospital. (1)		By private practitioner or Hospital, apart from the Authority's Scheme. (2)				Total. (3)				
(i)	(ii)	(iii)	(iv)	(i)	(ii)	(iii)	(iv)			
3	12*	421 <sup>o</sup>	9	110				555	889	1,444

(i) Tonsils only. (ii) Adenoids only. (iii) Tonsils and adenoids. (iv) Other defects of the nose and throat.

\* Includes 6 cases of adenoids with antrum puncture.

<sup>o</sup> Includes 27 cases of enlarged tonsils and adenoids with antrum puncture and washout.

## GROUP IV.—ORTHOPÆDIC AND POSTURAL DEFECTS.

	Under the Authority's Scheme.			Otherwise.			Total* number treated.
	Residential treatment with education.  (i)	Residential treatment without education.  (ii)	Non- residential treatment at an orthopædic clinic. (iii)	Residential treatment with education.  (i)	Residential treatment without education.  (ii)	Non- residential treatment at an orthopædic clinic. (iii)	
No. of children treated	8 ordinary elementary school children	0	308	0	0	6	316

\*A child may be recorded in more than one category and, therefore, the total number of children treated will not necessarily be the same as the sum of the figures in the separate categories.

TABLE V.—DENTAL INSPECTION AND TREATMENT.

Vide 21st Annual Report on Dental Work in connection with school children, expectant and nursing mothers and children under 5 years, herewith, page 54.

TABLE VI.—UNCLEANLINESS AND VERMINOUS CONDITIONS.

(i.)	Average number of visits per school made during the year by the School Nurses ...	17
(ii.)	Total number of examinations of children in the schools by School Nurses ...	52,857
(iii.)	Number of individual children found unclean at the School Cleanliness Inspections ...	1,755*
(iv.)	Number of individual children cleansed under Section 87 (2) and (3) of the Education Act, 1921 ...	206†
(v.)	Number of cases in which legal proceedings were taken :—	
	(a) Under the Education Act, 1921 ...	19
	(b) Under the School Attendance Bye-laws ...	0
(vi.)	Number of school sessions at which inspections were conducted ...	572
(vii.)	(i.) Original Inspections :—	
	Children examined ( <i>i.e.</i> , cases not individual children) ...	45,763
	Found unclean ...	2,573
	Percentage found unclean ...	5.6
	Excluded on account of uncleanliness ...	—
	(ii.) Re-inspections :—	
	Children examined ( <i>i.e.</i> , cases not individual children) ...	7,094
	Found unclean ...	4,476
	Percentage found unclean ...	63.1
	Excluded on account of uncleanliness ...	3

\* The total number of individual children found unclean = 1,804.

† The total number of individual children cleansed = 379.

Board of Education's Medical Statistical Tables. Notes on Table VI.

"A statement as to the arrangements made by the Local Education Authority for cleansing verminous children and a record of the cases in which legal proceedings were taken should be included in the body of the School Medical Officer's Report."

The Authority has established a cleansing room at each of its three Municipal Centres. Children suffering from nitty or verminous conditions are given the opportunity of being cleansed at these Centres. The mothers are encouraged to attend with the children, so that they may see how the cleansing should be carried out. Steel nit combs are sold at the Centres at cost price.

Thorough domestic cleansing of the home is advised by the Health Visitor, disinfection not being generally resorted to in verminous cases.

Baths are also given for scabies and other skin conditions as necessary.

Record of cases in which legal proceedings were taken :—

The following information has been supplied by the Director of Education to whom cases for prosecution are referred.

## CASES UNDER SECTION 87 OF THE EDUCATION ACT, 1921.

No. of Cases.				
Fined.	Amount of Fine.	Bound over.	Dismissed.	Standing adjourned at end of Year.
14	5/-	0	0	1
5	10/-			



## CERTAIN STATISTICAL DATA.

### I.—GENERAL.

Public Elementary Schools—excluding Special Schools and Nursery Classes.

Number of Public Elementary Schools, excluding two Special Schools, at December, 1938 ...	33
Number of School Departments at December, 1938 ... ..	68
Average Public Elementary School Roll, excluding two Special Schools, year ended 31st March, 1938 ... ..	18,708
Total number of children medically inspected at Routine and Special Inspections ... ..	13,465
Total number of children dentally inspected ... ..	16,303
Total number of Defects of every description " followed up " during 1938 ... ..	23,932
Total number of Defects of every description for which treatment was obtained during 1938 :—	
Medical or Dental Treatment ... ..	15,826
Domestic Treatment ... ..	2,982
TOTAL ———	18,808
Total number of Attendances at the School Clinics during 1938 ... ..	92,634

TABLE NO. 23.

Return showing No. of School Cases referred for following-up in 1938 and previous years with the view of Medical Treatment being obtained, Remedial Measures carried out, or other action taken.

Year.	Referred by				Total.
	Medical Inspection and Officers of Health Department.	Head Teachers.	Attendance Officers.	Others.	
1938	4,343	1,069	69	7,411	12,892
1937	4,188	670	76	8,710	13,644
1936	4,324	899	64	8,799	14,086
1935	4,609	1,129	50	8,918	14,706
1934	4,441	1,384	58	7,514	13,397
1933	5,481	1,617	62	7,956	15,116
1932	5,073	1,087	86	7,487	13,733
1931	4,928	1,426	89	7,036	13,479
1930	5,233	1,541	105	6,700	13,579
1929	5,293	2,558	88	5,597	13,536
1928	5,890	2,643	122	6,253	14,908
1927	6,305	2,925	114	6,354	15,698
1926	6,937	3,152	131	5,982	16,202
1925	6,224	4,003	121	4,939	15,287
1924	6,142	4,983	116	3,927	15,168
1923	4,900	4,230	131	4,715	13,976
1922	4,004	5,720	236	4,580	14,540
1921	4,203	4,779	248	5,711	14,941
1920	2,949	4,774	353	5,354	13,430
1919	1,796	4,167	451	3,538	9,952
1918	1,674	4,163	395	1,150	7,382
1917	1,227	3,372	441	427	5,467
1916	1,436	3,264	313	394	5,407
1915	1,308	3,429	109	298	5,144
1914	2,322	2,401	108	140	4,971
1913					1,092
1912					1,102
1911					1,030
1910					941







No.	Date	Particulars	Debit		Credit		Balance	Remarks
			Rs.	P.	Rs.	P.		
1	1911	...	...	...	...	...	...	
2	1912	...	...	...	...	...	...	
3	1913	...	...	...	...	...	...	
4	1914	...	...	...	...	...	...	
5	1915	...	...	...	...	...	...	
6	1916	...	...	...	...	...	...	
7	1917	...	...	...	...	...	...	
8	1918	...	...	...	...	...	...	
9	1919	...	...	...	...	...	...	
10	1920	...	...	...	...	...	...	
11	1921	...	...	...	...	...	...	
12	1922	...	...	...	...	...	...	
13	1923	...	...	...	...	...	...	
14	1924	...	...	...	...	...	...	
15	1925	...	...	...	...	...	...	
16	1926	...	...	...	...	...	...	
17	1927	...	...	...	...	...	...	
18	1928	...	...	...	...	...	...	
19	1929	...	...	...	...	...	...	
20	1930	...	...	...	...	...	...	
21	1931	...	...	...	...	...	...	
22	1932	...	...	...	...	...	...	
23	1933	...	...	...	...	...	...	
24	1934	...	...	...	...	...	...	
25	1935	...	...	...	...	...	...	
26	1936	...	...	...	...	...	...	
27	1937	...	...	...	...	...	...	
28	1938	...	...	...	...	...	...	
29	1939	...	...	...	...	...	...	
30	1940	...	...	...	...	...	...	
31	1941	...	...	...	...	...	...	
32	1942	...	...	...	...	...	...	
33	1943	...	...	...	...	...	...	
34	1944	...	...	...	...	...	...	
35	1945	...	...	...	...	...	...	
36	1946	...	...	...	...	...	...	
37	1947	...	...	...	...	...	...	
38	1948	...	...	...	...	...	...	
39	1949	...	...	...	...	...	...	
40	1950	...	...	...	...	...	...	
41	1951	...	...	...	...	...	...	
42	1952	...	...	...	...	...	...	
43	1953	...	...	...	...	...	...	
44	1954	...	...	...	...	...	...	
45	1955	...	...	...	...	...	...	
46	1956	...	...	...	...	...	...	
47	1957	...	...	...	...	...	...	
48	1958	...	...	...	...	...	...	
49	1959	...	...	...	...	...	...	
50	1960	...	...	...	...	...	...	

This account is for the year ending 31st March 1960. The balance brought forward is Rs. 100.00. The total amount received is Rs. 1000.00. The total amount paid is Rs. 900.00. The balance carried forward is Rs. 100.00.



## II.—HEALTH CENTRES.

## ATTENDANCES.

TABLE NO. 25.

## MEDICAL AND DENTAL TREATMENT—ATTENDANCES AT HEALTH CENTRES, 1938.

Condition.	Mothers, and Children under Five.					Total (Cols. 2—5).	School Children.	Grand Total (Cols. 7 and 8).
	Expectant Mothers.	Nursing Mothers.	Children under Five.					
			0—1.	1—5.	Total (Cols. 4 and 5).			
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
1. Cleansing ... ..	—	2	1	7	8	10	339	349
2. Throat, Nose and Ear Diseases	2	5	66	1,377	1,443	1,450	11,337	12,787
3. Minor Ailments ... ..	72	259	1,462	3,650	5,112	5,443	39,120	44,563
4. Eye Diseases ... ..	5	7	266	633	899	911	5,228	6,139
5. Skin Diseases ... ..	32	53	286	215	501	586	949	1,535
6. Artificial Sunlight Treatment	—	—	774	3,373	4,147	4,147	5,150	9,297
7. Orthopaedics ... ..	2	96	452	1,850	2,302	2,400	5,089	7,489
8. Medical Consultations ... ..	15,351	33,601	34,284	16,134	50,418	99,370	—	99,370
9. Diphtheria Immunisation ... ..	—	—	—	452	452	452	599	1,051
10. Total (1—9) ... ..	15,464	34,023	37,591	27,691	65,282	114,769	67,811	182,580
11. Dental Consultations ... ..	2,467	1,785	—	1,013	1,013	5,265	11,541	16,806
12. Total (10—11) ... ..	17,931	35,808	37,591	28,704	66,295	120,034	79,352	199,386
13. School for Mothers ... ..	—	—	—	—	—	4,877	—	4,877
14. Nursery ... ..	—	—	—	—	—	4,387	—	4,387
15. Miscellaneous ... ..	—	—	—	—	—	29,595	13,881	43,476
16. Grand Total (12—15) ... ..	17,931	35,808	37,591	28,704	66,295	158,893	93,233	252,126*

(1)	Health Centre (1)			Health Centre (2)			Health Centre (3)			Grand Total. (11)
	Mothers and Children under Five. (2)	School Children (3)	Total. (4)	Mothers and Children under Five. (5)	School Children (6)	Total. (7)	Mothers and Children under Five. (8)	School Children (9)	Total. (10)	
17. Medical Attendances	18,589	16,849	35,438	50,855	20,218	71,073	45,325	30,744	76,069	182,580
18. Dental Attendances	1,102	2,160	3,262	1,767	3,395	5,162	2,396	5,986	8,382	16,806
19. School for Mothers	2,018	—	2,018	1,273	—	1,273	1,586	—	1,586	4,877
20. Nursery Attendances	2,438	—	2,438	910	—	910	1,039	—	1,039	4,387
21. Miscellaneous ... ..	13,238	4,255	17,493	10,034	6,081	16,115	6,323	3,545	9,868	43,476
22. Total ... ..	37,385	23,264	60,649	64,839	29,694	94,533	56,669	40,275	96,944	252,126*

\* In addition 2,710 attendances were made by secondary and technical school children and the following attendances by adults :—Cleansing 104, Skin Diseases 65, Diphtheria Immunisation 21, Varicose Ulcers 870, Eye Diseases 1, and Orthopaedics under Section 181 of the Public Health Act 1936 65, making a total of 3,836 which together with the 252,126 above makes a grand total of 255,962.

TABLE No. 26.

Showing attendances at the Municipal Centres each year since 1913.

Year.	Mothers and Children under 5 years.			School Children.			Total.	School for Mothers.	Nursery.	Miscellaneous.	Grand Total.
	Medical.	Dental.	Total.	Medical.	Dental.	Total.					
1913	0	0	0	299	0	299	299	0	0		299
1914	0	0	0	2,517	0	2,517	2,517	0	0		2,517
1915	0	0	0	5,674	0	5,674	5,674	0	0		5,674
1916	389	0	389	9,593	0	9,593	9,982	0	0		9,982
1917	8,641	0	8,641	9,448	0	9,448	18,089	0	0		18,089
1918	32,169	1,165	33,334	15,811	2,403	18,214	51,548	44	220		51,812
1919	32,870	878	33,748	46,179	11,024	57,203	90,951	1,089	2,814		94,854
1920	51,468	1,823	53,291	64,588	10,670	75,258	128,549	2,354	3,452		134,355
1921	41,562	1,667	43,229	57,032	7,718	64,750	107,979	1,716	2,356		112,051
1922	27,505	894	28,399	39,989	7,025	47,014	75,413	1,616	2,190		79,219
1923	23,271	533	23,804	40,381	3,599	43,980	67,784	2,761	3,270		73,815
1924	17,082	520	17,602	34,845	2,460	37,305	54,907	2,896	2,808		60,611
1925	26,119	936	27,055	41,695	5,123	46,818	73,873	4,074	3,812		81,759
1926	39,084	1,491	40,575	47,786	5,909	53,695	94,270	4,126	3,645		102,041
1927	40,958	1,593	42,551	47,199	6,583	53,782	96,333	3,847	3,291		103,471
1928	40,787	1,733	42,520	43,956	6,484	50,440	92,960	4,485	3,355		100,800
1929	43,419	1,598	45,017	39,698	6,307	46,005	91,022	4,523	3,446		98,991
1930	59,372	2,341	61,713	49,610	10,537	60,147	121,860	5,958	5,371		133,189
1931	76,395	3,473	79,868	65,942	15,180	81,122	160,990	6,928	6,985	21,884	196,787
1932	84,342	4,385	88,727	67,964	16,094	84,058	172,785	6,536	6,227	28,817	214,365
1933	84,782	4,791	89,573	71,587	15,652	87,239	176,812	5,297	5,268	27,256	214,633
1934	88,472	5,036	93,508	62,212	13,095	75,307	168,815	5,337	4,726	30,139	209,017
1935	92,666	5,596	98,262	63,666	12,447	76,113	174,375	5,343	5,299	32,553	217,570
1936	96,728	5,752	102,480	67,736	12,325	80,061	182,541	5,198	4,985	38,440	231,164
1937	108,715	5,143	113,858	71,621	11,250	82,871	196,729	4,257	4,092	42,169	247,247
1938	114,769	5,265	120,034	67,811	11,541	79,352	199,386	4,877	4,387	47,312*	255,962

\* This includes the 2,710 attendances made by Secondary and Technical School children and the 1,126 by adults and others under Section 181 of the Public Health Act, 1936, which are shown in the footnote to Table No. 25.

1 School Child and no children under 5 years of age were treated under the Council's Scheme by X-rays for Ringworm of the Scalp.

10,279	Individual Public Elementary School Children	attended the Municipal Centres during 1938.
6,196	„ Children under 5 years of age	attended the Municipal Centres during 1938.
2,747	„ Expectant Mothers	„ „ „ „ „ „
3,543	„ Nursing Mothers	„ „ „ „ „ „

### III.—HOSPITAL TREATMENT OF CHILDREN UNDER THE COUNCIL'S SCHEME.

Excluding Orthopædic Treatment which is dealt with in Appendix E and excluding cases of Infectious Disease.

#### A.—SCHOOL CHILDREN.

TABLE No. 27.

No. of School Children in Willesden Municipal Hospital at 31st December, 1937	...	...	0
„ „ „ admitted during 1938...	...	...	445
„ „ „ under treatment during 1938	...	...	445
„ „ „ discharged during 1938	...	...	445
„ „ „ died in Hospital during 1938	...	...	0
„ „ „ remaining in Hospital at 31st December, 1938	...	...	0



TABLE NO. 28.

## SCHOOL CHILDREN UNDER TREATMENT IN HOSPITAL DURING 1938.

Condition.	Brought forward.	Admitted during Year.	Total under treatment.	TREATMENT COMPLETED.					Remain- ing in Hospital at end of Year.
				Forms of Treatment.		Results of Treatment.			
				Opera- tive.	Gen- eral.	Re- medied.	Im- proved or Un- changed.	Died.	
Deflected Septum ... ..	—	—	—	—	—	—	—	—	—
Enlarged Tonsils & Adenoids	—	403	403	403	—	403	—	—	—
Enlarged Tonsils & Adenoids & Antrum Puncture ...	—	33	33	33	—	33	—	—	—
Antrum Puncture ... ..	—	3	3	3	—	3	—	—	—
Mastoid ... ..	—	5	5	5	—	5	—	—	—
Ethmoidectomy & Nasal Polypi ... ..	—	1	1	1	—	1	—	—	—
Total ... ..	—	445	445	445	—	445	—	—	—

## B.—CHILDREN UNDER 5 YEARS OF AGE.

TABLE NO. 29.

	Willesden Municipal Hospital.	Other Hospitals.	Total.
No. of Children in Hospital at 31st December, 1937	10	—	10
No. of Children admitted during 1938 ... ..	118	—	118
Total number of Children under treatment during 1938 ... ..	128	—	128
No. of Children discharged during 1938 ... ..	120	—	120
No. of Children died in Hospital during 1938 ...	1	—	1
No. of Children remaining in Hospital at 31st December, 1938 ... ..	7	—	7

TABLE NO. 30.

## CHILDREN UNDER 5 YEARS UNDER TREATMENT IN HOSPITAL DURING 1938.

Condition.	Brought forward.	Admitted during Year.	Total under Treatment.	Treatment Completed.					Remain- ing in Hospital at end of Year.
				Forms of Treatment.		Results of Treatment.			
				Opera- tive.	Gen- eral.	Re- medied.	Improved or Un- changed.	Died.	
Marasmus ... ..	8	33	41	—	41	12	21	1	7
Enlarged Tonsils and Adenoids...	2	82	84	84	—	84	—	—	—
Antrum Puncture	—	1	1	1	—	1	—	—	—
Mastoid Disease...	—	1	1	1	—	1	—	—	—
Chronic Otorrhœa	—	1	1	—	1	1	—	—	—
Total ... ..	10	118	128	86	42	99	21	1	7

## IV.—EMPLOYMENT OF CHILDREN IN ENTERTAINMENTS RULES, 1933.

Particulars as to applications received in 1938 for certificates from the School Medical Officer.

	<i>No. of Applications.</i>			<i>No. Granted.</i>		
	Boys.	Girls.	Total.	Boys.	Girls.	Total.
Original applications ... ..	1	2	3	1	2	3
Applications for renewals ... ..	5	9	14	5	9	14
	6	11	17	6	11	17

# THE FIFTH ANNUAL REPORT

FOR THE

Year ending 31st December, 1938,

ON THE

## WORK IN CONNECTION WITH ABNORMAL CHILDREN.

Up to the year 1934 a summary of the work done in connection with these children was incorporated in the body of the Report.

**ABNORMAL CHILDREN.**—Under this category are included the following classes of children: Merely dull or backward, mentally defective (feeble-minded), imbecile, moral defective, idiot, physically defective, blind or partially blind, deaf-mute or semi-mute or semi-deaf and epileptic.

These cases are reported to the Authority by Parents, Head Teachers, Health Nurses, School Attendance Officers, Hospitals and similar institutions, voluntary societies and private medical practitioners. They are submitted to a special medical examination and are placed in a Special Day or Residential School or ordinary elementary school, according to the character and degree of the abnormality.

During the year 1938, 1,124 special children were examined or re-examined. Of the 315 original examinations included in the 1,124 examined, 59 were found to be physically defective, 16 mentally defective, 2 partially blind, 20 dull and backward, 168 anæmic and debilitated, 23 defective speech, 4 deaf or partially deaf, 12 normal, and 11 cases of behaviour problem.

**LEINSTER MENTALLY DEFECTIVE SCHOOL.**—The certified accommodation at this school is for 140 children and during the year under review the average number on the roll was 114. The actual number on the roll at the 31st December, 1938, was 121 (including 33 children from the Middlesex area). The average attendance for the year was 98. There were no children awaiting admission to this school at the end of the year.

The staff consists of one Head Teacher, one full-time Assistant Master, and four full-time Assistant Mistresses. There are in addition three part-time Instructors—one for boot-making, one for handicraft and one for domestic economy.

Five children were allowed to leave school before reaching the age of 16 years, 2 children were transferred to residential institutions and 6 children were notified to the Middlesex County Council, which is the local authority under the Mental Deficiency Acts, 1913-27, as requiring supervision or guardianship.

The Certifying Medical Officer visits the school weekly for the purpose of revision of classification and for medical examination of the children. 101 such examinations were made during 1938.

The school dinners are brought from Furness Road Feeding Centre and served in the school hall. On an average 70 children take the school dinners and the remainder bring their own meal.

During the year routine medical and dental inspection of the children attending this school was carried out. 92 children were medically examined and 82 were dentally inspected. Nine were



found to require medical treatment and 56 were found to require dental treatment, and the following table gives a return of the defects found at medical and dental inspection :—

TABLE NO. 31.

Defects.	Found to require treatment.	Requiring to be kept under observation but not requiring treatment.
Anæmia ... ..	—	—
Malnutrition ... ..	—	—
Skin Disease ... ..	2	—
Eye—Blepharitis ... ..	—	—
Defective vision (excluding squint) ... ..	1	—
Squint ... ..	—	—
Other conditions ... ..	1	—
Ear—Defective hearing ... ..	—	—
Other ear diseases ... ..	—	—
Nose and Throat—Enlarged tonsils only ... ..	—	—
Adenoids only ... ..	—	—
Enlarged tonsils and adenoids ... ..	—	—
Other conditions ... ..	1	—
Enlarged cervical glands (non-tuberculous) ... ..	—	—
Defective speech ... ..	—	—
Defective Teeth ... ..	56	—
Heart and Circulation—Heart disease, functional ... ..	—	—
Anæmia ... ..	—	—
Lungs—Bronchitis ... ..	—	—
Other non-tuberculous diseases ... ..	—	—
Deformities—Spinal curvature ... ..	1	—
Other forms ... ..	2	—
Other defects and diseases ... ..	1	—
TOTAL ... ..	65	—

OLDFIELD ROAD PHYSICALLY DEFECTIVE SCHOOL.—The certified accommodation at this school is for 165 children. During the year under review the average number on the roll was 168, the actual number on the roll on the 31st December, 1938, being 167 (including 36 children from the Middlesex area). The average attendance for the year was 135. There were no children awaiting admission at the 31st December, 1938.

The school takes physically defective children between 5 and 16 years of age. The staff consists of one Head Teacher and seven full-time Assistants.

During the year 12 children were allowed to leave school before reaching the age of 16 years, 27 children were allowed to attend ordinary elementary schools and 1 child was transferred to a residential institution.

The school dinners are brought from Gibbons Road Feeding Centre and are served in the School Hall. On an average 120 of the children take the school dinners.

One trained Nurse is attached to the school. She treats minor ailments as required and supervises the personal cleanliness and the care of the teeth and hair of the children. She arranges for the repair of surgical instruments and boots. She also gives the children the nutritive drugs ordered by the doctor.

The school is visited by the Certifying Medical Officer once a fortnight, and each child is seen every six months. The parents are notified of any defects found which require attention.

The majority of the children at this school who are actually crippled attend periodically at an Orthopædic Hospital or an Orthopædic Department of a General Hospital; and, in addition, facilities for treatment of this kind are available at the Stonebridge Health Centre where a Specialist visits weekly and the requisite nursing staff is in daily attendance.

CONVALESCENCE.—The Education Committee have made arrangements with the Russell-Cotes School of Recovery, Parkstone, near Bournemouth, for the reservation of places for 9 boys and 4 girls. This home was provided by the donors as a country residence near the sea for poor town boys and girls who are anæmic and debilitated, and who are physically defective within the meaning of the Education Act, 1921; and it is recognised by the Board of Education as a Special Residential School. The boys and girls are selected both from the physically defective and the ordinary elementary schools, and the duration of the stay is six weeks, except in special cases when an additional six weeks' stay can be arranged. All the cases which have been to the institution have shown a distinct improvement on their return home. In all 56 boys and 25 girls were admitted to the school during the year.



The Education Committee have also made arrangements for the reservation of 4 places for boys and 11 places for girls at St. Dominic's Open Air School, Godalming, and St. Patrick's Open Air School, Hayling Island, respectively. The children are selected from both the physically defective and the ordinary elementary schools, and the duration of stay is six weeks. All the cases sent have shown a definite improvement on their return home. In all 57 boys and 70 girls were admitted during the year.

**DEFECTIVE VISION AND SQUINT.**—During the year 1938, 70 children attending the Special Schools were examined in respect of errors of refraction (including squint). 67 were dealt with under the Authority's scheme and 3 otherwise. Spectacles were prescribed for 27 children under the authority's scheme and for 2 otherwise. Nineteen obtained them under the Authority's scheme, and 8 otherwise.

**DEFECTS OF NOSE AND THROAT.**—During the year 3 children attending Special Schools received operative treatment apart from the Authority's scheme. Thirteen children received other forms of treatment.

**ORTHOPÆDIC AND POSTURAL DEFECTS.**—During the year 30 children attending the Special Schools were treated; 2 of these received residential treatment with education, under Section 80 of the Education Act, 1921, and 30 non-residential treatment at an orthopædic clinic under the Authority's scheme. In addition 8 children received residential treatment with education under the Special Schools vote.

**FOLLOWING-UP.**—During the year there were 163 Special School cases referred for following up with the view of medical treatment being obtained, remedial measures carried out, or other action taken.

**WORK OF THE WILLESDEN BRANCH OF THE INVALID CHILDREN'S AID ASSOCIATION, 1938.**—191 new cases were referred to this Association during the year, 60 of these being referred by the Willesden Health Department. The majority of the patients were suffering from anæmia and debility. In addition 7 surgical appliances were supplied.

**CHILDREN SUFFERING FROM SPEECH DEFECTS.**—There are three classes for children suffering from stammering and other speech defects, held twice weekly at Bridge Road, Carlton Vale and Chamberlayne Wood Road Schools, and conducted by a qualified teacher. The class at Carlton Vale School consists of boys, and the classes at Bridge Road and Chamberlayne Wood Road Schools include both boys and girls. Each class lasts one hour and there is accommodation for 10 children. Cases of stammering and other speech defects are referred to the Health Department for examination as to their suitability for admission to a stammering class. After a period of treatment before discharge from the class, the child is re-examined at the Health Department and has to satisfy the Medical Officer as well as the special teacher before he ceases to attend. Cases of speech defect are followed up for two terms after they have ceased to attend the class, through the Head Teachers. Should a child relapse and the defect recur, he is re-admitted to the class for further treatment. The attendance of children at the classes is not for any specified period of time, as experience has shown that some children may be cured after a few months' treatment, while others need to attend for a much longer period.

**CHILD GUIDANCE.**—Children who may be described as "difficult," "maladjusted," "unmanageable," are referred in the first instance to the Health Department for examination and, if suitable, are then referred by the School Medical Officer to the North Western Child Guidance Clinic, Sheldon Road, Cricklewood, for further investigation and, if necessary, treatment. In March, 1935, the Education Committee, with the subsequent approval of the Board of Education, acceded to a request from the North Western Child Guidance Clinic to recognise it as a school clinic for child guidance, and to pay to it a fee of 10s. 6d. for the first investigation of a case, and 2s. 6d. for each subsequent attendance of the case for treatment, this arrangement to pertain in the first instance for a period of twelve months. At the end of the first twelve months a report on the working of the arrangements was sent to the Board of Education and stating that the Council proposed to continue to send school children to the Clinic. The Board of Education in reply gave their approval to the proposal.

During the year, 8 new cases were referred to the Clinic, and the following report shows the results of treatment in three of these cases.

*D. V. (9-6-32).* A girl of six years with uncontrollable bouts of temper, both in school and at home, when she would smash anything within reach. Her home life was not satisfactory, as among other disadvantages there were parental quarrels over the children. It was found that her tempers were a reaction to an obsession that she was persecuted by everyone, especially her family. As a result of treatment of the child and of explanation to the mother, the child is now much improved.

*E. S. (17-8-29).* This boy was of normal behaviour in school, but away from school was disobedient to a degree and addicted to wandering. It was found that he was an intelligent boy playing upon his mother's fears. The mother was shown where she was at fault in her management of the boy with a consequent great improvement in his behaviour.

*J. J. (28-6-24).* This boy, although of a mild nature usually, suffered from violent outbursts of temper, besides being addicted to wandering and petty pilfering. The magistrates referred him for treatment, as he had come before them for unprovoked physical violence. In the course of prolonged treatment it was found that he harboured a number of fantastic fears. These were allayed and his conduct has been satisfactory since. He has now left school and is in congenial employment.



TABLE No. 32.—CORRESPONDING TO TABLE III. OF THE BOARD OF EDUCATION'S MEDICAL STATISTICAL TABLES.

## RETURN OF EXCEPTIONAL CHILDREN IN THE AREA.

This Table is compiled from the list of exceptional children as it stands on the last day of the calendar year. No child is entered under more than one heading.

**BLIND CHILDREN.**—A blind child is defined by Section 69 of the Education Act, 1921, as one who is "too blind to be able to read the ordinary school books used by children." This definition covers some children who are totally, or almost totally, blind and can only be appropriately taught in a school for blind children, and others who have partial sight and can be appropriately taught in a school for partially sighted children. Only the first class are included in this section.

At Certified Schools for the Blind ... ..	3
At Public Elementary Schools ... ..	—
At other Institutions ... ..	—
At no School or Institution ... ..	—
Total ... ..	3

**PARTIALLY SIGHTED CHILDREN.**—Entered in this Section are only children who, though they cannot read ordinary school books or cannot read them without injury to their eyesight, have such power of vision that they can appropriately be taught in a school for the partially sighted.

Children who are able by means of suitable glasses to read the ordinary school books used by children without fatigue or injury to their vision are not included in this Table.

At Certified Schools for the Blind ... ..	6
At Certified Schools for the Partially Sighted ... ..	7
At Public Elementary Schools ... ..	—
At other Institutions ... ..	—
At no School or Institution ... ..	—
Total ... ..	13

**DEAF CHILDREN.**—A deaf child is defined by Section 69 of the Education Act, 1921, as one who is "too deaf to be taught in a class of hearing children in an elementary school." This definition covers some children who are totally, or almost totally, deaf and can only be appropriately taught in a school for deaf children, and others who have partial hearing and can be appropriately taught in a class for partially deaf children. Only the first type are included in this section.

At Certified Schools for the Deaf ... ..	20
At Public Elementary Schools ... ..	—
At other Institutions ... ..	—
At no School or Institution ... ..	—
Total ... ..	20

**PARTIALLY DEAF CHILDREN.**—Entered in this Section are children who can appropriately be taught only in a class for the partially deaf.

At Certified Schools for the Deaf and Partially Deaf ... ..	5
At Public Elementary Schools ... ..	—
At other Institutions ... ..	—
At no School or Institution ... ..	—
Total ... ..	5

**MENTALLY DEFECTIVE CHILDREN.**—*Feeble-minded Children.*—Mentally Defective children are children who, not being imbecile and not being merely dull or backward, are incapable by reason of mental defect of receiving proper benefit from the instruction in the ordinary Public Elementary Schools but are not incapable by reason of that defect of receiving benefit from instruction in Special Schools for mentally defective children.

The following Table includes all such children except those who have been notified to the Local Authority under the Mental Deficiency Act in accordance with Article 3 of the Mental Deficiency (Notification of Children) Regulations, 1928. Particulars relating to these children are entered in Table 33, page 45.

At Certified Schools for Mentally Defective Children ... ..	87
At Public Elementary Schools ... ..	—
At other Institutions ... ..	1
At no School or Institution ... ..	—
Total ... ..	88

**EPILEPTIC CHILDREN.**—*Children suffering from Severe Epilepsy.*—In this part of the Table only those children are included who are epileptic within the meaning of the Act, i.e., children who, not being idiots or imbeciles, are unfit by reason of severe epilepsy to attend the ordinary Public Elementary Schools.

For practical purposes the Board of Education are of opinion that children who are subject to attacks of major epilepsy in school should be recorded as "severe" cases and excluded from ordinary Public Elementary Schools.

At Certified Special Schools ... ..	3
At Public Elementary Schools ... ..	—
At other Institutions ... ..	—
At no School or Institution ... ..	—
Total ... ..	3



**PHYSICALLY DEFECTIVE CHILDREN.—(a) Tuberculous Children.**—Tuberculous children in areas other than Counties or County Boroughs who have been ascertained by the County Tuberculosis Officer should not appear in the Table for the County but in the Table for the appropriate area.

Only children diagnosed as tuberculous and requiring treatment for tuberculosis at a sanatorium, a dispensary, or elsewhere are recorded in this category. Children suffering from crippling due to tuberculosis which is regarded as being no longer in need of treatment are recorded as crippled children, provided that the degree of crippling conforms to the description of a crippled child given at the head of section C below. All other tuberculous children who are regarded as being no longer in need of treatment are recorded as delicate children provided the Medical Officer is prepared to certify under Section 55 of the Education Act, 1921, that they are incapable by reason of physical defect of receiving proper benefit from the instruction in the ordinary Public Elementary Schools.

(i.) *Children suffering from Pulmonary Tuberculosis.* (Including pleura and intra-thoracic glands.)

At Certified Special Schools ... ..	—
At Public Elementary Schools† ... ..	—
At other Institutions ... ..	6
At no School or Institution ... ..	—
Total ... ..	6

(ii.) *Children suffering from Non-pulmonary Tuberculosis.* (This category includes tuberculosis of all sites other than those shown in (i.) above.)

At Certified Special Schools ... ..	6
At Public Elementary Schools † ... ..	—
At other Institutions ... ..	1
At no School or Institution ... ..	1
Total ... ..	8

† It is essential that tuberculous children who are, or may be, a source of infection to others should be promptly excluded from Public Elementary Schools.

(b) *Delicate Children.*—This Section is confined to children (except those included in other groups) whose general health renders it desirable that they should be specially selected for admission to an Open Air School. Such children are included irrespective of the actual provision of Open Air Schools in the area, or of the practicability in present circumstances of sending the children to Residential Schools. At the same time children are not regarded as suitable for admission to an Open Air School unless the Medical Officer certifies under Section 55 of the Education Act, 1921, that they are incapable by reason of physical defect of receiving proper benefit from the instruction in the ordinary Public Elementary Schools.

At Certified Special Schools ... ..	77
At Public Elementary Schools ... ..	302*
At other Institutions ... ..	—
At no School or Institution ... ..	—
Total ... ..	379

\* Total number of children referred during the year for convalescent treatment.

(c) *Crippled Children.*—This Section is confined to children (other than those diagnosed as tuberculous and in need of treatment for that disease) who are suffering from a degree of crippling sufficiently severe to interfere materially with a child's normal mode of life, i.e., children who generally speaking are unable to take part, in any complete sense, in physical exercises or games or such activities of the school curriculum as gardening or forms of handwork usually engaged in by other children, and in whose case the Medical Officer is prepared to certify under Section 55 of the Education Act, 1921, that they are incapable by reason of such physical defect of receiving proper benefit from the instruction in the ordinary Public Elementary Schools.

At Certified Special Schools ... ..	58
At Public Elementary Schools ... ..	—
At other Institutions ... ..	1
At no School or Institution ... ..	—
Total ... ..	59

(d) *Children with Heart Disease.*—This Section is confined to children in whose case the Medical Officer is prepared to certify, under Section 55 of the Education Act, 1921, that they are incapable by reason of such physical defect of receiving proper benefit from the instruction in the ordinary Public Elementary Schools.

At Certified Special Schools ... ..	49
At Public Elementary Schools ... ..	—
At other Institutions ... ..	1
At no School or Institution ... ..	—
Total ... ..	50



CHILDREN SUFFERING FROM MULTIPLE DEFECTS.—Information is only given in respect of children suffering from any combination of the following types of defect :—

Blindness (excluding partially sighted children).	Active Tuberculosis.
Deafness (excluding partially Deaf children).	Crippling (as defined in Section C above).
Mental Defect (Feeble-minded).	Heart Disease.
Severe Epilepsy.	

The clinical condition causing the defect is not to be specified. The actual combination of defects is stated in the table below, together with the type of School attended.

Combination of Defect.	At Certified Special Schools.	At Public Elementary Schools.	At other Institutions.	At no School or Institution.	Total.
Crippled and Feeble-minded ...	3	—	—	—	3
Heart Disease and Feeble-minded	2	—	—	—	2
Deaf and Feeble-minded ...	1	—	—	—	1

TABLE NO. 33.

STATEMENT OF THE NUMBER OF CHILDREN NOTIFIED DURING THE YEAR ENDED DECEMBER 31ST, 1938, BY THE LOCAL EDUCATION AUTHORITY TO THE LOCAL MENTAL DEFICIENCY AUTHORITY.

Total Number of Children notified : 13.

## ANALYSIS OF THE ABOVE TOTAL.

Diagnosis.	Boys.	Girls.
1.—(i.) Children incapable of receiving benefit or further benefit from instruction in a Special School :		
(a) Idiots ... ..	—	—
(b) Imbeciles ... ..	1	1
(c) Others ... ..	1	1
(ii.) Children unable to be instructed in a Special School without detriment to the interests of other children :		
(a) Moral defectives ... ..	—	—
(b) Others ... ..	—	—
2.—Feeble-minded children notified on leaving a Special School on or before attaining the age of 16 ... ..	7	2
3.—Feeble-minded children notified under Article 3 of the 1928 Regulations, i.e., "special circumstances cases" ... ..	—	—
4.—Children who in addition to being mentally defective were blind or deaf ... ..	—	—
TOTAL ... ..	9	4

## SPECIAL (DAY) SCHOOLS IN WILLESDEN.

Number of Physically Defective Schools ... ..	1
Number of Mentally Defective Schools ... ..	1

TABLE NO. 34.

Number of children attending certified Special (Day and Residential) Schools during 1938 :—

	Special Schools in Willesden.	Special Schools outside Willesden.	Total.
Blind and Partially Blind ... ..	—	22	22
Deaf ... ..	—	27	27
Mentally Defective ... ..	146**	8	154
Epileptic... ..	—	4	4
Physically Defective ... ..	236†	287*	523*
TOTAL ... ..	382	348*	730*

\* 236 of these were debilitated children sent to Certified Residential Schools for six weeks' convalescence.

\*\* 37 of these children lived in the Middlesex area and attended the school by arrangement with the Middlesex Education Committee.

† 45 do. do. do. do.

TABLE 10. - STATEMENT OF THE NUMBER OF CHILDREN RECEIVING SPECIAL SERVICES THROUGH THE LOCAL EDUCATION AUTHORITY IN THE LOCAL EDUCATION AUTHORITY AREA, 1988-89

Classification of children	Special Schools		Special Units		Total
	Special Schools	Special Units	Special Schools	Special Units	
Special and Fee-paying	1	1	1	1	2
Special and Fee-paying	1	1	1	1	2
Special and Fee-paying	1	1	1	1	2

TABLE 11. - STATEMENT OF THE NUMBER OF CHILDREN RECEIVING SPECIAL SERVICES THROUGH THE LOCAL EDUCATION AUTHORITY IN THE LOCAL EDUCATION AUTHORITY AREA, 1988-89

Classification of children	Special Schools		Special Units		Total
	Special Schools	Special Units	Special Schools	Special Units	
Special and Fee-paying	1	1	1	1	2
Special and Fee-paying	1	1	1	1	2
Special and Fee-paying	1	1	1	1	2

TABLE 12. - STATEMENT OF THE NUMBER OF CHILDREN RECEIVING SPECIAL SERVICES THROUGH THE LOCAL EDUCATION AUTHORITY IN THE LOCAL EDUCATION AUTHORITY AREA, 1988-89

Classification of children	Special Schools		Special Units		Total
	Special Schools	Special Units	Special Schools	Special Units	
Special and Fee-paying	1	1	1	1	2
Special and Fee-paying	1	1	1	1	2
Special and Fee-paying	1	1	1	1	2

TABLE 13. - STATEMENT OF THE NUMBER OF CHILDREN RECEIVING SPECIAL SERVICES THROUGH THE LOCAL EDUCATION AUTHORITY IN THE LOCAL EDUCATION AUTHORITY AREA, 1988-89

Classification of children	Special Schools		Special Units		Total
	Special Schools	Special Units	Special Schools	Special Units	
Special and Fee-paying	1	1	1	1	2
Special and Fee-paying	1	1	1	1	2
Special and Fee-paying	1	1	1	1	2

TABLE 14. - STATEMENT OF THE NUMBER OF CHILDREN RECEIVING SPECIAL SERVICES THROUGH THE LOCAL EDUCATION AUTHORITY IN THE LOCAL EDUCATION AUTHORITY AREA, 1988-89

Classification of children	Special Schools		Special Units		Total
	Special Schools	Special Units	Special Schools	Special Units	
Special and Fee-paying	1	1	1	1	2
Special and Fee-paying	1	1	1	1	2
Special and Fee-paying	1	1	1	1	2

TABLE 15. - STATEMENT OF THE NUMBER OF CHILDREN RECEIVING SPECIAL SERVICES THROUGH THE LOCAL EDUCATION AUTHORITY IN THE LOCAL EDUCATION AUTHORITY AREA, 1988-89

Classification of children	Special Schools		Special Units		Total
	Special Schools	Special Units	Special Schools	Special Units	
Special and Fee-paying	1	1	1	1	2
Special and Fee-paying	1	1	1	1	2
Special and Fee-paying	1	1	1	1	2





TABLE NO. 2  
SPECIAL SCHOOL

Medical history obtained for following up on former school program. Cases seen by school health officer.

Case No.	Sex	Age	Present illness			Duration of illness	Cause of illness	Treatment	Remarks
			Onset	Duration	Course				
1	Male	12	10/15	2 weeks	Acute	Scarlet fever	10 days	Recovered	
2	Female	11	11/1	3 weeks	Acute	Diphtheria	14 days	Recovered	
3	Male	13	12/1	4 weeks	Acute	Scarlet fever	12 days	Recovered	
4	Female	10	11/15	2 weeks	Acute	Diphtheria	10 days	Recovered	
5	Male	14	12/15	3 weeks	Acute	Scarlet fever	11 days	Recovered	
6	Female	9	11/1	2 weeks	Acute	Diphtheria	9 days	Recovered	
7	Male	15	12/15	4 weeks	Acute	Scarlet fever	13 days	Recovered	
8	Female	8	11/1	2 weeks	Acute	Diphtheria	8 days	Recovered	
9	Male	16	12/15	5 weeks	Acute	Scarlet fever	14 days	Recovered	
10	Female	7	11/1	2 weeks	Acute	Diphtheria	7 days	Recovered	
11	Male	17	12/15	6 weeks	Acute	Scarlet fever	15 days	Recovered	
12	Female	6	11/1	2 weeks	Acute	Diphtheria	6 days	Recovered	
13	Male	18	12/15	7 weeks	Acute	Scarlet fever	16 days	Recovered	
14	Female	5	11/1	2 weeks	Acute	Diphtheria	5 days	Recovered	
15	Male	19	12/15	8 weeks	Acute	Scarlet fever	17 days	Recovered	
16	Female	4	11/1	2 weeks	Acute	Diphtheria	4 days	Recovered	
17	Male	20	12/15	9 weeks	Acute	Scarlet fever	18 days	Recovered	
18	Female	3	11/1	2 weeks	Acute	Diphtheria	3 days	Recovered	
19	Male	21	12/15	10 weeks	Acute	Scarlet fever	19 days	Recovered	
20	Female	2	11/1	2 weeks	Acute	Diphtheria	2 days	Recovered	
21	Male	22	12/15	11 weeks	Acute	Scarlet fever	20 days	Recovered	
22	Female	1	11/1	2 weeks	Acute	Diphtheria	1 day	Recovered	
23	Male	23	12/15	12 weeks	Acute	Scarlet fever	21 days	Recovered	
24	Female	0	11/1	2 weeks	Acute	Diphtheria	0 days	Recovered	
25	Male	24	12/15	13 weeks	Acute	Scarlet fever	22 days	Recovered	
26	Female	-1	11/1	2 weeks	Acute	Diphtheria	-1 days	Recovered	
27	Male	25	12/15	14 weeks	Acute	Scarlet fever	23 days	Recovered	
28	Female	-2	11/1	2 weeks	Acute	Diphtheria	-2 days	Recovered	
29	Male	26	12/15	15 weeks	Acute	Scarlet fever	24 days	Recovered	
30	Female	-3	11/1	2 weeks	Acute	Diphtheria	-3 days	Recovered	
31	Male	27	12/15	16 weeks	Acute	Scarlet fever	25 days	Recovered	
32	Female	-4	11/1	2 weeks	Acute	Diphtheria	-4 days	Recovered	
33	Male	28	12/15	17 weeks	Acute	Scarlet fever	26 days	Recovered	
34	Female	-5	11/1	2 weeks	Acute	Diphtheria	-5 days	Recovered	
35	Male	29	12/15	18 weeks	Acute	Scarlet fever	27 days	Recovered	
36	Female	-6	11/1	2 weeks	Acute	Diphtheria	-6 days	Recovered	
37	Male	30	12/15	19 weeks	Acute	Scarlet fever	28 days	Recovered	
38	Female	-7	11/1	2 weeks	Acute	Diphtheria	-7 days	Recovered	
39	Male	31	12/15	20 weeks	Acute	Scarlet fever	29 days	Recovered	
40	Female	-8	11/1	2 weeks	Acute	Diphtheria	-8 days	Recovered	
41	Male	32	12/15	21 weeks	Acute	Scarlet fever	30 days	Recovered	
42	Female	-9	11/1	2 weeks	Acute	Diphtheria	-9 days	Recovered	
43	Male	33	12/15	22 weeks	Acute	Scarlet fever	31 days	Recovered	
44	Female	-10	11/1	2 weeks	Acute	Diphtheria	-10 days	Recovered	
45	Male	34	12/15	23 weeks	Acute	Scarlet fever	32 days	Recovered	
46	Female	-11	11/1	2 weeks	Acute	Diphtheria	-11 days	Recovered	
47	Male	35	12/15	24 weeks	Acute	Scarlet fever	33 days	Recovered	
48	Female	-12	11/1	2 weeks	Acute	Diphtheria	-12 days	Recovered	
49	Male	36	12/15	25 weeks	Acute	Scarlet fever	34 days	Recovered	
50	Female	-13	11/1	2 weeks	Acute	Diphtheria	-13 days	Recovered	
51	Male	37	12/15	26 weeks	Acute	Scarlet fever	35 days	Recovered	
52	Female	-14	11/1	2 weeks	Acute	Diphtheria	-14 days	Recovered	
53	Male	38	12/15	27 weeks	Acute	Scarlet fever	36 days	Recovered	
54	Female	-15	11/1	2 weeks	Acute	Diphtheria	-15 days	Recovered	
55	Male	39	12/15	28 weeks	Acute	Scarlet fever	37 days	Recovered	
56	Female	-16	11/1	2 weeks	Acute	Diphtheria	-16 days	Recovered	
57	Male	40	12/15	29 weeks	Acute	Scarlet fever	38 days	Recovered	
58	Female	-17	11/1	2 weeks	Acute	Diphtheria	-17 days	Recovered	
59	Male	41	12/15	30 weeks	Acute	Scarlet fever	39 days	Recovered	
60	Female	-18	11/1	2 weeks	Acute	Diphtheria	-18 days	Recovered	
61	Male	42	12/15	31 weeks	Acute	Scarlet fever	40 days	Recovered	
62	Female	-19	11/1	2 weeks	Acute	Diphtheria	-19 days	Recovered	
63	Male	43	12/15	32 weeks	Acute	Scarlet fever	41 days	Recovered	
64	Female	-20	11/1	2 weeks	Acute	Diphtheria	-20 days	Recovered	
65	Male	44	12/15	33 weeks	Acute	Scarlet fever	42 days	Recovered	
66	Female	-21	11/1	2 weeks	Acute	Diphtheria	-21 days	Recovered	
67	Male	45	12/15	34 weeks	Acute	Scarlet fever	43 days	Recovered	
68	Female	-22	11/1	2 weeks	Acute	Diphtheria	-22 days	Recovered	
69	Male	46	12/15	35 weeks	Acute	Scarlet fever	44 days	Recovered	
70	Female	-23	11/1	2 weeks	Acute	Diphtheria	-23 days	Recovered	
71	Male	47	12/15	36 weeks	Acute	Scarlet fever	45 days	Recovered	
72	Female	-24	11/1	2 weeks	Acute	Diphtheria	-24 days	Recovered	
73	Male	48	12/15	37 weeks	Acute	Scarlet fever	46 days	Recovered	
74	Female	-25	11/1	2 weeks	Acute	Diphtheria	-25 days	Recovered	
75	Male	49	12/15	38 weeks	Acute	Scarlet fever	47 days	Recovered	
76	Female	-26	11/1	2 weeks	Acute	Diphtheria	-26 days	Recovered	
77	Male	50	12/15	39 weeks	Acute	Scarlet fever	48 days	Recovered	
78	Female	-27	11/1	2 weeks	Acute	Diphtheria	-27 days	Recovered	
79	Male	51	12/15	40 weeks	Acute	Scarlet fever	49 days	Recovered	
80	Female	-28	11/1	2 weeks	Acute	Diphtheria	-28 days	Recovered	
81	Male	52	12/15	41 weeks	Acute	Scarlet fever	50 days	Recovered	
82	Female	-29	11/1	2 weeks	Acute	Diphtheria	-29 days	Recovered	
83	Male	53	12/15	42 weeks	Acute	Scarlet fever	51 days	Recovered	
84	Female	-30	11/1	2 weeks	Acute	Diphtheria	-30 days	Recovered	
85	Male	54	12/15	43 weeks	Acute	Scarlet fever	52 days	Recovered	
86	Female	-31	11/1	2 weeks	Acute	Diphtheria	-31 days	Recovered	
87	Male	55	12/15	44 weeks	Acute	Scarlet fever	53 days	Recovered	
88	Female	-32	11/1	2 weeks	Acute	Diphtheria	-32 days	Recovered	
89	Male	56	12/15	45 weeks	Acute	Scarlet fever	54 days	Recovered	
90	Female	-33	11/1	2 weeks	Acute	Diphtheria	-33 days	Recovered	
91	Male	57	12/15	46 weeks	Acute	Scarlet fever	55 days	Recovered	
92	Female	-34	11/1	2 weeks	Acute	Diphtheria	-34 days	Recovered	
93	Male	58	12/15	47 weeks	Acute	Scarlet fever	56 days	Recovered	
94	Female	-35	11/1	2 weeks	Acute	Diphtheria	-35 days	Recovered	
95	Male	59	12/15	48 weeks	Acute	Scarlet fever	57 days	Recovered	
96	Female	-36	11/1	2 weeks	Acute	Diphtheria	-36 days	Recovered	
97	Male	60	12/15	49 weeks	Acute	Scarlet fever	58 days	Recovered	
98	Female	-37	11/1	2 weeks	Acute	Diphtheria	-37 days	Recovered	
99	Male	61	12/15	50 weeks	Acute	Scarlet fever	59 days	Recovered	
100	Female	-38	11/1	2 weeks	Acute	Diphtheria	-38 days	Recovered	

Discontinuation in report of infectious cases after last and before first case of same kind was



TABLE No. 36.—Corresponding to Appendix E of the Annual Report of the Chief Medical Officer of the Board of Education for 1919.

## FORM OF ANNUAL RETURN OF THE AFTER-CAREERS OF CHILDREN UNDER 21 YEARS OF AGE FORMERLY ATTENDING SPECIAL SCHOOLS.

	Oldfield Road Physically Defective School.		Leinster Mentally Defective School.	
	Boys.	Girls.	Boys.	Girls.
1. Number of children who have left the school and are under 21 years ... ..	53	62	61	36
2. Number who :—				
(a) Have since died ... ..	1	3	2	1
(b) Are known to be incapable by reason of mental or physical defect of undertaking employment ... ..	3	3	6	1
(c) Are in attendance at an Institution for further education (give details), and ... ..	†1	—	§1	††4
(d) Are in any other Institution (specify Asylum, Workhouse, Colony for Epileptics, etc.) ... ..	—	—	**7	*10
3. Number who are employed in :—				
(a) Industrial or manual occupations ...	15	23	26	8
(b) Agricultural or rural occupations ...	—	—	—	—
(c) Domestic occupations including those who are helping in the domestic work at home ... ..	—	6	—	6
(d) Commercial, professional, or clerical work ... ..	3	7	—	—
(e) Blind alley or other precarious occupations ... ..	3	1	1	—
4. Number who have left the neighbourhood or whose after-careers have not been traced ... ..	27	19	18	6

\* Nine are in Institutions for mental defectives and one is in Harefield Sanatorium.

† Attending Cripples' Training College.

§ In attendance at an occupation centre.

†† Two are attending an occupation centre and two are receiving education at home.

\*\* In institutions for mental defectives.

Five physically defectives and seven mentally defectives are unemployed.

## DENTAL DEFECTS.

*Vide*, 21st Annual Report on Dental Work in connection with School Children, Expectant and Nursing Mothers, and children under 5 years, page 54.

# THE EIGHTH ANNUAL REPORT

ON

## NURSERY CLASSES AND NURSERY SCHOOLS

FOR THE

Year ending 31st December, 1938.

At the end of 1938 there were 12 Nursery Classes at 11 Public Elementary Schools and 1 Nursery School.

The Curzon Crescent Nursery School was opened on 28th November, 1938, and is the first Nursery School to be established in Willesden. Medical inspection was not commenced at this School until 1939.

During the year, 266 children were examined and the following table shows the numbers and percentages of defects found:—

TABLE NO. 37.

Age Period.	2 years.	3 years.	4 years.	5 years.	Total.	Percentage.
Number of children inspected ... ..	4	121	136	5	266	
Malnutrition (including slight degrees) ...	—	14	12	—	26	9·8
Skin conditions ... ..	—	9	5	—	14	5·3
Eyes—Blepharitis and Conjunctivitis ...	—	1	2	—	3	} 3·8
Squint ... ..	—	2	5	—	7	
Other conditions ... ..	—	—	—	—	—	
Ears, Otitis Media ... ..	—	1	3	—	4	1·5
Nose and Throat—Enlarged tonsils or adenoids or both ... ..	1	37	36	1	75	28·2
Enlarged cervical glands ... ..	—	3	9	—	12	4·5
Teeth—Dental diseases ... ..	—	14	32	2	48	18·0
Heart and circulation (including anæmia) <sup>1</sup> ...	—	3	5	—	8	3·0
Lung Disease (non-tubercular) ... ..	—	10	3	—	13	4·9
Nervous system (including functional conditions) ... ..	—	7	8	—	15	5·6
Deformities—Rickets ... ..	—	1	1	—	2	0·8
Others ... ..	3	7	13	2	25	9·4
Other defects... ..	—	8	7	—	15	5·6

Twenty-six children were found nitty or verminous at the school cleanliness inspections.

During the year children attending the Nursery Classes were followed up in respect of 394 defects.

Two hundred and seventeen of these defects were treated under the Council's scheme, 11 were treated otherwise, 64 received domestic treatment only, 83 were untreated at the end of the year and 19 did not need treatment or were lost sight of.



# THE NINETEENTH ANNUAL REPORT

FOR THE

Year ending 31st December, 1938,

ON THE

## HEALTH OF PUPILS ATTENDING SECONDARY AND JUNIOR TECHNICAL, ETC., SCHOOLS IN WILLESDEN.

*Giving the Tables required by the Board of Education.*

Secondary and Technical Schools are under the control of the Middlesex County Council.

Medical Inspection has been carried out at the Secondary and Technical Schools, by agreement with the Middlesex County Council, in accordance with the arrangements set out in the 1930 Annual Report.

The Middlesex County Council's Scheme for Dental Inspection and Treatment of Dental Defects and for Ophthalmic Treatment came into operation during 1935. Secondary and Junior Technical, etc., School Pupils are now inspected annually by the Council's Dental Surgeons, and Dental and Ophthalmic Treatment are available at the Council's Health Centres.

TABLE No. 38.—Corresponding to Table I. of the Board of Education's Medical Statistical Tables.  
RETURN OF MEDICAL INSPECTIONS FOR THE YEAR ENDED 31ST DECEMBER, 1938.

### A.—ROUTINE MEDICAL INSPECTIONS.

Number of Inspections in the prescribed Groups.\*

Pupils examined. Aged.	Secondary Schools.			Junior Technical, etc., Schools.			TOTAL.		
	Boys.	Girls.	Total.	Boys.	Girls.	Total.	Boys.	Girls.	Total.
10 years	3	6	9	—	—	—	3	6	9
11 ..	71	116	187	—	—	—	71	116	187
12 ..	182	185	367	—	1	1	182	186	368
13 ..	—	9	9	86	59	145	86	68	154
14 ..	—	8	8	97	84	181	97	92	189
15 ..	133	175	308	170	123	293	303	298	601
16 ..	1	1	2	—	—	—	1	1	2
17 ..	—	—	—	—	—	—	—	—	—
Total	390	500	890	353	267	620	743	767	1,510

Note that in the above table a pupil examined as an entrant, and subsequently as having attained his or her birthday during the preceding term, is counted twice, that is as 2 cases.

\* During 1938 the following groups have been submitted to Routine Medical Inspection at the Secondary and Junior Technical, etc., Schools in Willesden:—

(a) All entrants.

(b) Pupils aged 12 years.

(c) Pupils aged 15 years.

### B.—OTHER INSPECTIONS.

	Secondary Schools.			Junior Technical, etc., Schools.			TOTAL.		
	Boys.	Girls.	Total.	Boys.	Girls.	Total.	Boys.	Girls.	Total.
Number of Special Inspections	22	18	40	4	7	11	26	25	51
Number of Re-inspections ...	117	194	311	110	174	284	227	368	595
Total ...	139	212	351	114	181	295	253	393	646





B.—CLASSIFICATION OF THE NUTRITION OF PUPILS INSPECTED DURING THE YEAR  
IN THE ROUTINE AGE GROUPS.

	Ages in years.	Number of Pupils Inspected.	A (Excellent) No.	B (Normal) No.	C (Slightly sub- normal.) No.	D (Bad) No.
Secondary Schools ... ..	10	9	—	9	—	—
	11	187	14	164	9	—
	12	367	36	321	10	—
	13	9	2	7	—	—
	14	8	3	5	—	—
	15	308	69	227	11	1
	16	2	—	2	—	—
Total ...		890	124	735	30	1
Junior Technical, etc., Schools	12	1	—	1	—	—
	13	145	13	132	—	—
	14	181	25	153	3	—
	15	293	54	237	2	—
Total ...		620	92	523	5	—
GRAND TOTAL...		1,510	216	1,258	35	1

C.—PUPILS FOUND TO REQUIRE TREATMENT.

NUMBER OF INDIVIDUAL PUPILS FOUND AT ROUTINE MEDICAL INSPECTION TO REQUIRE TREATMENT  
(EXCLUDING DEFECTS OF NUTRITION, UNCLEANLINESS AND DENTAL DISEASES).

Group.	No. of pupils		Percentage of Pupils found to require treatment.
	Inspected.	Found to require treatment.	
Secondary Schools ... ..	890	106	11·9
Junior Technical, etc., Schools ... ..	620	110	17·7
Total ... ..	1,510	216	14·3

TABLE No. 40.—Corresponding to Table IV. of the Board of Education's Medical Statistical Tables.  
RETURN OF DEFECTS TREATED DURING THE YEAR ENDED 31ST DECEMBER, 1938.  
TREATMENT TABLES.

GROUP I.—MINOR AILMENTS (EXCLUDING UNCLEANLINESS, FOR WHICH SEE GROUP VI.).  
NUMBER OF DEFECTS TREATED OR UNDER TREATMENT DURING THE YEAR.

Two defects were treated during the year:—2 were cases of Skin Disease other than Ring-worm, Scabies or Impetigo. These cases received treatment from a private practitioner.

GROUP II.—DEFECTIVE VISION AND SQUINT (EXCLUDING MINOR EYE DEFECTS TREATED AS MINOR AILMENTS—GROUP I.).

NO. OF DEFECTS DEALT WITH.

	Secondary Schools.			Junior Technical, etc., Schools.			Total.		
	Under the Authority's Scheme.	Other-wise.	Total.	Under the Authority's Scheme.	Other-wise.	Total.	Under the Authority's Scheme.	Other-wise.	Total.
Errors of refraction (including Squint) ... (Operations for Squint should be recorded separately in the body of the School Medical Officer's Report.)	105	12	117	101	15	116	206	27	233
Other Defect or Disease of the Eyes (excluding those recorded in Group I) ...	—	—	—	—	—	—	—	—	—
Total ...	105	12	117	101	15	116	206	27	233
No. of Children for whom Spectacles were :—									
(a) Prescribed	55	25	80	55	13	68	110	38	148
(b) Obtained	9	60	69	6	47	53	15	107	122

GROUP III.—TREATMENT OF DEFECTS OF NOSE AND THROAT.

*Secondary Schools.*—In six instances the School Medical Inspector noted on re-inspection that the tonsils had been removed.

*Junior Technical, etc., Schools.*—Nil.

GROUP IV.—ORTHOPÆDIC AND POSTURAL DEFECTS.

The Middlesex County Council has not arranged for orthopædic work in connection with the Secondary Schools in Willesden but a few Secondary School children are dealt with by the Willesden Council under Section 181 (2) (a) of the Public Health Act, 1936.

GROUP V.—DENTAL DEFECTS.

*Vide* 21st Annual Report on Dental Work in connection with school children, expectant mothers and nursing mothers and children under 5 years herewith page 54.

GROUP VI.—UNCLEANLINESS AND VERMINOUS CONDITIONS.

Inspection and treatment of uncleanness are not undertaken by the School Nurses in the Secondary and Technical, etc., Schools.



TREATMENT OF OTHER TYPES OF DEFECTS.

(a) The measures adopted for providing treatment or for securing improvement.

No measures have been adopted by the Authority for providing treatment.

Notices were sent to parents informing them of the conditions requiring treatment, and the Head Teachers were notified of conditions requiring special exercises and the like. Pupils with defects referred for treatment or requiring to be kept under observation were referred for re-examination at a subsequent visit of the School Medical Inspector.

(b) The effect of the measures taken.

The School Medical Inspector noted as follows :—

TABLE NO. 41.

Defect.	Secondary schools.	Junior Technical etc., schools.	Result.
Heart Disease—Functional ... ..	4	6	Restricted exercises.
	—	3	Under treatment by private doctor.
	—	1	Improved with restricted games.
" " —Organic ... ..	—	1	Under private doctor.
Nose and Throat—Nasal Catarrh ... ..	1	—	Under hospital treatment.
Enlarged Cervical Glands ... ..	1	—	Under hospital treatment.
Deformities—Flat Foot ... ..	34	5	Having exercises.
	—	2	Under hospital treatment.
Flat Chest ... ..	5	2	Having breathing exercises.
Spinal Curvature ... ..	1	2	Under hospital treatment.
Round Shoulders ... ..	1	1	Having exercises.
Postural Defects ... ..	19	7	Having exercises.
Tuberculosis—Knee ... ..	—	1	Under hospital treatment.
Asthma ... ..	—	2	Under hospital treatment.
Other Defects and Diseases ... ..	5	1	Under treatment by private doctor.
	7	8	Under hospital treatment.

# THE TWENTY-FIRST ANNUAL REPORT

FOR THE  
YEAR 1938,

ON

DENTAL WORK in connection with SCHOOL CHILDREN,  
EXPECTANT and NURSING MOTHERS and CHILDREN  
under 5 years.

By E. A. JENNINGS, L.D.S., R.C.S.Eng.

There is no change to report on the working of the dental services. These continue to be operated by the same four dental officers, four nurses and anaesthetist, on similar lines as in previous years.

## THE YEAR'S WORK.

The total working sessions amounted to 1,942, which were utilised as follows:—

Treatment sessions at the Centres	...	...	...	...	1,600
Routine inspection sessions	...	...	...	...	317
Administration sessions	...	...	...	...	25
Total	...	...	...	...	1,942

Sessions attended by Anaesthetist ... .. 185

21,377 mothers, infants, elementary and secondary school children were inspected. 16,021 or 75 per cent. were defective, an improvement on last year of 6 per cent.

5,616 or 35 per cent. of these defective cases were treated at the centres.

14,895 teeth were extracted, 9,265 fillings done and 4,241 incidental operations producing a total of 28,401 treatments.

This is an increase of 1,069 on the corresponding figure of last year.

19,079 attendances were registered by these patients.

A precis of the year's work is given in the table below, together with the years 1936 and 1937.

TABLE NO. 42.

*Comparative Table of Work done for Years 1936, 1937 and 1938.*

	1936.	1937.	1938.
1. Mothers, Infants and School Children	21,858	20,548	21,377
2. Number defective	15,419	16,498	16,021
3. Number treated	5,606	5,830	5,616
4. Teeth removed	15,118	14,207	14,895
5. Teeth filled	9,030	9,019	9,265
6. Sundry operations	6,540	4,106	4,241
7. General anaesthetics	4,127	3,876	3,699
8. Treatment sessions	1,610	1,590	1,600
9. Inspection sessions...	337	325	317

The average work done on a sessional basis is set out in the following Table, together with the years 1936 and 1937.

TABLE NO. 43.

*Comparative Table of Work per Session.*

Year.	Attendances.	Fillings.	Extractions.	Sundries.	Total operations per Session.
1936	10.9	5.6	9.4	4.0	19.0
1937	11.5	5.6	8.9	2.5	17.0
1938	11.9	5.7	9.3	2.6	17.6

It is evident from the above Table that work per session continues to vary very little from year to year.

This year shows a slight increase in all columns over the year 1937.



## GENERAL ANÆSTHETICS.

General anæsthetics continue to be used extensively for tooth extraction. Methods adopted and apparatus used have been described in previous reports and there is no need to again refer to them. The Anæsthetist attended on 185 sessions, and administered to 3,699 cases, an approximate average of 20 cases per session. 7 patients were anæsthetised for pulp extirpation and cervical cavity preparation in anterior teeth.

The total number of dental anæsthetic cases administered by the Anæsthetist during the eight complete years of his appointment amount to 31,197.

## ELEMENTARY, NURSERY AND SPECIAL SCHOOLS.

## INSPECTION.

*Routine.*—16,070 children out of a total roll of approximately 18,708 were inspected at the schools during the 284 visits, an average of 56 per session.

12,309 children or 76 per cent. were found defective and referred for treatment.

Complete recording of all defects found was done, and "Care of the Teeth" pamphlets were issued to all scholars, which is the same procedure as in former years.

*Special cases.*—861 children were inspected at the Centres. Included in this figure are cases of minor defect which had developed between the routine inspections, together with those children leaving school and seeking a final treatment. Every effort was made for those children to complete their treatment.

## TREATMENT.

Out of a total of 12,309 referred as defective, 4,091, a decrease of 330 on last year's figure, were treated at the Centres.

9,787 teeth were extracted of which 1,741 were permanent.

5,590 fillings were done on permanent teeth and 745 on temporary teeth, making a total of 6,335.

For this work, increasing use is being made of local anæsthesia. Also 2,043 sundry treatments were performed. These include root fillings to anterior teeth, minor gum treatments, dressings of zinc oxides and sedatives, together with silver nitrate applications.

3 patients received orthodontic treatment under the Council's scheme.

11,540 attendances were recorded.

Treatment sessions totalled 963, and the average work done is indicated in the following Table.

TABLE No. 44.

*Work done per Session.*

Attendances.	Fillings.	Extractions.	Sundries.	Total operations.
12.0	6.6	10.2	2.1	18.9

Fillings per 100 children = 154. Extractions per 100 children = 239.

## TABLES DEALING WITH THE WORK ON ELEMENTARY SCHOOL CHILDREN DURING THE YEAR.

Table 45, corresponding to Table IV of the Board of Education's Statistical Tables, Group V—

*Dental Inspection and Treatment.*

## 1. Number of children who were inspected by the Dentist.

## (a) Routine age-groups—

Aged :	Children attending Public Elementary Schools.	Children attending Special Schools.	Children attending Nursery Schools.
2	—	—	1
3	—	—	70
4	—	—	110
5	966	8	58
6	1,630	18	—
7	1,684	15	—
8	1,870	33	—
9	1,853	21	—
10	1,799	41	—
11	1,441	38	—
12	1,482	35	—
13	1,484	43	—
14	1,267	103	—
15	—	—	—
16	—	—	—
	<b>TOTAL</b>		
	15,476	355	239
b. Specials	827	9	25
c. Total (Routine and Specials)	16,303	364	264

	Children attending Public Elementary Schools.	Children attending Special Schools.	Children attending Nursery Schools.
2. Number found to require treatment ... ..	11,903	257	149
3. Number actually treated at the Authority's Health Centres ... ..	3,990	41	60
4. Attendances made by children for treatment ...	11,313	106	121
5. Half days devoted to Inspection ... ..	272	6	6
Treatment ... ..	938	10	15
TOTAL ... ..	1,210	16	21
6. Fillings—Permanent teeth ... ..	5,541	49	—
Temporary teeth ... ..	715	2	28
TOTAL ... ..	6,256	51	28
7. Extractions—Permanent teeth ... ..	1,692	49	—
Temporary teeth ... ..	7,848	50	148
TOTAL ... ..	9,540	99	148
8. Administration of general anæsthetics for ex- tractions ... ..	2,572	33	47
,, Local Anæsthetics ... ..	205	—	—
TOTAL ... ..	2,777	33	47
9. Other operations—Permanent teeth ... ..	1,549	8	—
Temporary teeth ... ..	479	—	7
TOTAL ... ..	2,028	8	7

TABLE NO. 46.

RETURN SHOWING THE NUMBER OF DENTAL DEFECTS REFERRED FOR FOLLOWING-UP, AND THE EXTENT TO WHICH REMEDIAL MEASURES WERE CARRIED OUT DURING 1938 AT HEALTH VISITOR'S LAST VISIT.

Total number of defects coming under observation during 1938 :

	Children attending Public Elementary Schools.	Children attending Special Schools.	Children attending Nursery Schools.
Brought forward, 1937 ... ..	742	—	2
New during year ... ..	6,303	68	85
TOTAL ... ..	7,045	68	87
Number of defects treated :—			
Health Centre ... ..	4,385	38	72
Otherwise ... ..	80	1	—
TOTAL ... ..	4,465	39	72
Percentage of defects followed up needing treatment which were known to have received treatment ...	64%	59%	84%
No report available ... ..	30	1	—
Number of defects for which no treatment had been undertaken at Health Visitor's final visit ...	1,955	21	11
Carried forward to 1939 ... ..	553	6	3
Number not needing treatment ... ..	42	1	1

#### WILLESDEN SECONDARY AND JUNIOR TECHNICAL, ETC., SCHOOLS. INSPECTION.

2,484 pupils were inspected at the Schools, and 19 at the Health Centres, making a total of 2,503 for the year, which is an increase of 107 above the corresponding figure for last year. 33 visits were made to the Schools to inspect 2,484 pupils, an average of 75 per session. 1,835 or 73 per cent. of the total inspected were found defective.



## TREATMENT.

615 or 33·5% of the total defective were treated at the Health Centres. The number of teeth extracted amounted to 410 and the number of fillings were 1,733. Thus each pupil had an average of ·6 teeth extracted and 2·8 fillings done.

Total attendances recorded were 2,284, and the estimated number of treatment sessions 190.

1 pupil was supplied with a two-teeth upper denture at a cost of £1 11s. 6d., which was equally borne between the Middlesex County Council and the parent.

TABLE NO. 47.

## 1. Number of pupils who were inspected by the Dentist—

a. Routine age-groups.						Willesden Junior Technical, etc., Schools.	Willesden Secondary Schools.	Total.
Aged :								
11	...	...	...	...	—	97	97	
12	...	...	...	...	1	330	331	
13	...	...	...	...	46	307	353	
14	...	...	...	...	245	368	613	
15	...	...	...	...	281	322	603	
16	...	...	...	...	127	237	364	
17	...	...	...	...	2	101	103	
18	...	...	...	...	—	17	17	
19	...	...	...	...	—	3	3	
TOTAL						702	1,782	2,484
b. Specials						19	—	19
TOTAL						721	1,782	2,503
2. Number found to require treatment						531	1,304	1,835
3. Number actually treated at the Authority's Health Centres						175	440	615
4. Attendances made by pupils for treatment						563	1,721	2,284
5. Half-days devoted to Inspection						9	24	33
Treatment						47	143	190
TOTAL						56	167	223
6. Fillings—Permanent teeth						463	1,270	1,733
Temporary teeth						—	—	—
TOTAL						463	1,270	1,733
7. Extractions—Permanent teeth						123	239	362
Temporary teeth						12	36	48
TOTAL						135	275	410
8. Administrations of general anæsthetics for ex- tractions						61	149	210
Administrations of local anæsthetics						6	—	6
TOTAL						67	149	216
9. Other operations—Permanent teeth						121	565	686
Temporary teeth						—	—	—

*Average Session's Work.*

New Cases.	Attendances.	Fillings.	Extractions.	Sundry operations.	Total.
3·2	12	9	2	3·6	14·6

## MATERNITY AND CHILD WELFARE.

It is generally recognised that mothers, particularly the expectant mother, are very prone to develop acute inflammation of the gums, associated with loosening of the teeth, a condition which predisposes to chronic sepsis and becomes a source of danger to the body through absorption of poisons.

Any attempt likely to abort or relieve this infected state must be of great importance, particularly when the welfare of mothers is a primary concern.

An effort has been made to deal with this complaint on the lines advocated by many of the leading authorities on this subject.

*Methods.*—Mild cases were treated with zinc oxide and eugenol cotton packs, firmly secured between the teeth for one week, and reapplied if necessary. In this way unhealthy matter in this area (which is the seat of infection) is destroyed, or at least rendered innocuous.

Advanced cases need to be more drastically dealt with, and were treated by excision of all redundant gum tissue, followed by cauterization and dressing the cut surfaces with zinc oxide-eugenol-cotton wraps.

53 mothers received the treatment as outlined above. 33% of these were cases of acute gingivitis and were treated by packs and cautery only, while the remainder with advanced pyorrhoea by excision.

Advice and instruction on oral hygiene were given to all these patients on completion of treatment. Stress was laid on the importance of gum frictions by a medium stiff brush impregnated with sodium bicarbonate, and the use of wood pick gum drill between the teeth.

*Results.*—All cases appeared to quickly improve under this treatment. The gum was restored to its normal healthy pink colour, and the condition arrested with complete regularity.

It is difficult to attempt to forecast on the permanency of these results, but one is tempted to remark that the gums will remain healthy just as long as conscientious oral cleanliness is carried out by the patient.

This seems to be borne out by the re-examination of patients after a lapse of six months.

All these cases have, at least for a time, been spared the ordeal of extensive tooth extractions and the wearing of artificial substitutes.

Incidentally, the cost of some 20 to 30 dentures has been saved, and one is inclined to the belief that a far greater number could be rendered unnecessary by these methods.

A full summary of the year's work is given in the tables below.

TABLE NO. 48.  
EXPECTANT AND NURSING MOTHERS AND CHILDREN UNDER FIVE.

	E.M.	N.M.	0-5	Total.
Number inspected ... ..	1,015	398	530	1,943
Number brought forward from previous year ... ..	263	151	64	478
Total number under observation during year ... ..	1,278	549	594	2,421
Number completed ... ..	279	244	338	861
Number partially completed ... ..	40	2	7	49
Number not availing themselves of treatment ... ..	675	236	153	1,064
Number treated by other agencies ... ..	—	1	—	1
Number carried forward ... ..	266	62	52	380
Number with no defect ... ..	18	4	44	66
Number of attendances ... ..	2,471	1,771	1,013	5,255
Number of teeth removed ... ..	1,964	1,580	1,154	4,698
Number of teeth filled ... ..	583	360	254	1,197
Number of other operations on the gums and teeth ... ..	755	677	80	1,512
Number of general anæsthetics ... ..	314	235	288	837
Number of local anæsthetics ... ..	106	91	5	202
Number of treatment sessions ... ..	—	—	—	447

NUMBER OF PATIENTS WHO RECEIVED DENTURES DURING 1938.

TABLE NO. 49.

At cost to Council.	At cost to Applicant.	At part cost to Applicant.	Total.
161	1	54	216
REPAIRS.			
6	—	—	6
Total 167	1	54	222



# THE TWENTY-FOURTH ANNUAL REPORT

FOR THE

Year ending 31st December, 1938,

ON THE

## PROVISION OF MEALS TO SCHOOL CHILDREN IN WILLESDEN.

**FEEDING CENTRES.**—Meals have been supplied at the four feeding centres under the control of the Education Committee, namely: Gibbons Road, Furness Road, Strode Road and Lower Place, and at one voluntary centre at Granville Road. Dinners are taken from the Gibbons Road feeding centre to Oldfield Road Physically Defective School, and to the Oldfield Road Infants School, and from Furness Road feeding centre to Leinster Mentally Defective School, College Road. Dinners are served in the main hall at each school. A new feeding centre with seating accommodation for 140 was opened at Gibbons Road on 26th July, 1937. On 3rd February, 1934, the feeding of school children on seven days a week instead of on five days a week, was commenced in the four feeding centres controlled by the Education Committee.

**BREAKFASTS.**—The practice of serving breakfasts has been continued throughout the year at Carlton Vale School House. On 30th April, 1934, breakfasts were commenced at all the Education Committee's Centres, and also at the Granville Road Voluntary Centre.

The Corporation of Willesden decided to raise the economic scale 1/- per head on 1st April, 1934, and to allow all children in receipt of free dinners to receive free breakfasts. The breakfasts consist of cocoa made with milk, brown or white bread and butter with jam or marmalade or currant bread and butter.

**STAFFING.**—The staff employed at each of the feeding centres is approximately one assistant to every 50 children fed.

**SELECTION OF CHILDREN.**—Recommendations are accepted from School Teachers, Health Nurses, and the Medical Staff, subject to review by investigation of the economic circumstances of the family. The total number of application forms presented to the Education Committee's Centres throughout the year was 1,346.

**KILBURN FEEDING CENTRE DINNERS.**—The children of South Kilburn area are fed at the Voluntary Centre established at the Presbyterian Mission Hall, Granville Road.

**KILBURN BREAKFASTS.**—Breakfasts have also been supplied at the Voluntary Centre, Granville Road, on five days a week, as from 30th April, 1934.

The total number of application forms received from the South Kilburn area for the year was 450.

**MEALS.**—A 15-day menu was commenced in all feeding centres on 2nd April, 1934.

This provides two soup dinners, two cheese, one fish, one roast and one boiled meat, two stews, three pie or pudding, and three minced meat dinners, each being followed by a pudding or stewed fruit and custard.

Fresh fruit is served once each week.

The price charged per meal by the Local Authority to non-necessitous cases is 5d.

**MILK.**—The provision of one-third-pint of milk to all children who are receiving free meals was commenced on 24th May, 1937. The children drink the milk at school during the mid-morning recess.

**NURSERY SCHOOLS.**—Meals were commenced at the Lower Place Nursery Class on 17th October, 1938. These meals are supplied from the Lower Place Feeding Centre. Curzon Crescent Nursery School opened on 28th November, 1938. The necessitous children attending this school have received free meals and milk from that date.

## STATISTICAL INFORMATION, YEAR ENDING 31st DECEMBER, 1938.

TABLE NO. 50.—NO. OF MEALS SUPPLIED.

Supplied to:—	Breakfasts.	Dinners.		Total.
	Free.	Free.	Paying.	
Education Committee's Centres ... ..	4,527	162,142	2,391	169,060
Kilburn Voluntary Centre ... ..	28,826	81,613	—	110,439
Special Schools ... ..	—	15,773	16,433	32,206
Feeding Centre Assistants ... ..	3,980	4,463	—	8,443
	37,333	263,991	18,824	320,148

TABLE NO. 51.—OCCUPATION LIST, 1938.

Occupation.	No. of Children Fed during 1938.	No. of Families Involved.		Percentage.	
		1937.	1938.	1937.	1938.
Unemployed ... ..	1,299	394	568	47·93	57·84
Widows ... ..	160	82	91	9·97	9·26
Deserted wives ... ..	52	21	36	2·55	3·66
Orphans ... ..	5	1	5	·12	·50
Labourers ... ..	370	177	139	21·53	14·15
Railwaymen ... ..	19	11	6	1·34	·61
Hawkers ... ..	34	17	12	2·07	1·22
Others ... ..	233	119	125	14·48	12·73
	2,172	822	982		



# THE NINTH ANNUAL REPORT

FOR THE

Year ending 31st December, 1938,

ON THE

SUPERVISION OF MIDWIVES.

TABLE No. 52.

NUMBER OF MIDWIVES WHO GAVE NOTICE OF THEIR INTENTION TO PRACTISE IN WILLESDEN  
IN 1937 AND 1938 RESPECTIVELY.

	1937	1938
<i>In Willesden—</i>		
1. Private District Midwives ... ..	12*	5
2. Municipal Midwives ... ..	2	8†
3. Queen Charlotte's District Home, 40, Princess Road, Kilburn, N.W.6. ...	8	6
4. Central Middlesex County Hospital ... ..	25	22
<i>Outside Willesden—</i>		
1. Private District Midwives ... ..	12	9
2. Queen Charlotte's District Home, 176, Ladbroke Grove, Kensington ...	5	0
3. Kilburn and West Hampstead District Nursing Association, 20, Dennington Park Road, Hampstead, N.W.6 ... ..	10	10
Total ... ..	74	60

\* Of these 12 Midwives, 3 became Municipal Midwives in Willesden as from the 31st October, 1937, and 4 surrendered their Central Midwives Board Certificates under the Midwives Act, 1936 (2 voluntary surrender and 2 compulsory surrender).

† Of the 8 Municipal Midwives who notified their intention to practise in 1938, 1 voluntarily surrendered her Central Midwives Board Certificate under the Midwives Act, 1936, 1 resigned and 1 acted as relief Midwife for holiday duties and was subsequently appointed as a permanent Municipal Midwife.

In addition 5 Midwives at the Willesden Maternity Hospital have notified their intention to practise in respect of patients who were confined in their own homes as labour was too far advanced when the ambulance was called.

TABLE No. 53.

NUMBER OF CASES ATTENDED BY MIDWIVES PRACTISING AND LIVING IN WILLESDEN DURING 1938

Name.	No. of Cases attended Total.		Remarks.
	As Midwife.	As Maternity Nurse.	
Private District Midwives ... ..	59	19	5 Midwifery and 5 Maternity Nursing cases were attended outside Willesden.
Municipal Midwives ... ..	447	None	In addition to the 447 cases, 71 cases were booked and subsequently cancelled for various reasons, i.e., complications of pregnancy or labour and leaving the district. In all these cases some hours of work have been put in by the Midwives.
Midwives attached to Queen Charlotte's Hospital District Home, 40, Princess Road, N.W.6.	301	None	Of the 301 cases, 166 were attended in Willesden and 135 outside Willesden. In addition to the 166 cases, 9 cases were booked and cancelled for various reasons during the year. A certain amount of work was done in connection with each of the 9 cases.

TABLE No. 53 (Contd.)

Name.	No. of Cases attended Total.		Remarks.
	As Midwife.	As Maternity Nurse.	
Midwives attached to Willesden District Nursing Association, 17-19, Park Avenue, N.W.2.	None	280	This figure of 280 includes approximately 6 cases which were cancelled prior to the confinement but where a certain amount of work had been undertaken.
Midwives at the Central Middlesex County Hospital, Acton Lane, N.W. 10.	729	56	These 785 patients were all confined in the Central Middlesex County Hospital and come from a number of areas.
TOTAL ...	1,536	355	=1,891 in all.

TABLE No. 54.

NUMBER OF CASES ATTENDED BY MIDWIVES PRACTISING IN BUT LIVING OUTSIDE WILLESDEN DURING 1938.

Name.	Number of cases attended in Willesden		Remarks.
	As Midwife.	As Maternity Nurse.	
Private District Midwives ...	5	2	
Midwives at Willesden Maternity Hospital.	22	None	
Midwives attached to Kilburn and West Hampstead District Nursing Association, 20, Dennington Park Road, Hampstead, N.W.6.	15	None	
TOTAL ...	42	2	

TABLE No. 55.

NOTIFICATIONS RECEIVED FROM MIDWIVES IN ACCORDANCE WITH THE RULES OF THE CENTRAL MIDWIVES BOARD, 1ST JANUARY TO 31ST DECEMBER, 1938.

	Living in Willesden.			TOTAL	Living outside Willesden	GRAND TOTAL
	Muni- pal Mid- wives.	Queen Charlottes Hospital District H.	In- dependent Mid- wives.			
Notifications of :—						
Sending for medical help ...	122	41	12	175	6	181
Death of child ...	2	1	0	3	—	3
Still birth ...	5	6	0	11	—	11
Having laid out a dead body ...	2	4	0	6	—	6
Liability to be a source of Infection	6	0	2	8	—	8
Artificial Feeding ...	6	0	2	8	—	8
TOTAL ...	143	52	16	211	6	217



TABLE No. 56.  
REASONS FOR SENDING FOR MEDICAL HELP.

For Mother.	Medical Help sought by Midwives.		For Child.	Medical Help sought by Midwives.	
	Living in Willesden.	Living outside Willesden.		Living in Willesden.	Living outside Willesden.
Adherent placenta ...	3	—	Abnormal ankle ...	1	1
Ante-partum hæmorrhage ...	7	—	Abnormal thumb on right hand ...	1	—
Abdominal tenderness	3	—	Asphyxiated baby	1	—
Albumen in urine ...	4	—	Convulsions ...	1	—
Breathlessness ...	1	—	Cold ...	1	—
Bruised knee following fall ...	1	—	Difficult breathing	1	—
Delayed 2nd stage of labour ...	10	—	Discharging eyes	13	—
Delayed labour ...	17	—	Foetal distress ...	1	—
Extending arms in a breech ...	1	—	Jaundiced baby ...	3	—
Extended breech ...	4	—	Malæna at birth ...	1	—
Fall during pregnancy complaining of pain	1	—	Mongolian ...	1	—
Inflamed veins ...	1	—	Premature baby ...	4	—
Inflammation of breast ...	3	—	Sudden collapse ...	1	—
Miscarriage ...	3	—	Slight rash ...	1	—
Marginal placenta prævia ...	1	—	Spina bifida ...	1	—
Prolapsed arm (twins)	1	—	Skin eruption ...	1	—
Puffiness of hands and face ...	1	—	Tooth at birth ...	1	—
Pyrexia ...	10	—	Unsatisfactory condition ...	4	—
Persistent red lochia	1	—			
Rapid pulse rate, persistent ...	1	—			
Ruptured perineum	51	3			
Severe headache ...	2	—			
Sub-involution of uterus ...	1	—			
Shoulder presentation	3	—			
Swollen legs ...	2	—			
Swelling in joint of hand ...	—	1			
Severe pain in legs ...	1	—			
Threatened abortion	3	—			
Varicose veins ...	—	1			
TOTAL ...	137	5		38	1

TABLE No. 57.

FEES PAID TO MEDICAL PRACTITIONERS UNDER SECTION 14 OF THE MIDWIVES ACT, 1918.  
1ST JANUARY TO 31ST DECEMBER, 1938.

Number of notifications of Sending for Medical Help ... ..	181
"    "    "    in respect of which fees paid ... ..	148
Total fees paid by Council ... ..	£179 6s. 6d.

TABLE NO. 58.

The following information was sent to the Ministry of Health on Form M.C.W. 96 (revised) :—

	Domiciliary Midwives.	Midwives in Institutions.	Totals.
<b>*1. Total number of Midwives practising at the end of the year in the area of the Local Supervising Authority :—</b>			
(a) Employed by the Local Supervising Authority† ... ..	6	17	23
(b) Employed by other Welfare Councils—			
(i) under arrangements made with the Local Supervising Authority in pursuance of Section 1 of the Midwives Act, 1936 ... ..	—	—	—
(ii) others—Middlesex County Council in the Central Middlesex County Hospital ... ..	—	14	14
(c) Employed by Voluntary Associations—			
(i) under arrangements made with the Local Supervising Authority in pursuance of Section 1 of the Midwives Act, 1936 ... ..	7½	—	7½
(ii) others ... ..	4	—	4
(d) In private practice ... ..	9	—	9
TOTALS ... ..	26½	31	57½

	Domiciliary Cases.	Cases in Institutions.	Totals.
<b>*2. Number of cases in the area of the Local Supervising Authority attended during the year by midwives :—</b>			
(a) Employed by the Council†			
{ As Midwives ... ..	469	930	1,399
{ As Maternity Nurses ... ..	—	103	103
(b) Employed by other Welfare Councils—			
(i) under arrangements made with the Local Supervising Authority in pursuance of Section 1 of the Midwives Act, 1936 ... ..			
{ As Midwives ... ..	—	—	—
{ As Maternity Nurses ... ..	—	—	—
(ii) others—Middlesex County Council in the Central Middlesex County Hospital ... ..			
{ As Midwives ... ..	—	729	729
{ As Maternity Nurses ... ..	—	56	56
(c) Employed by Voluntary Associations—			
(i) under arrangements made with the Local Supervising Authority in pursuance of Section 1 of the Midwives Act, 1936			
{ As Midwives ... ..	166	—	166
{ As Maternity Nurses ... ..	280	—	280
(ii) others ... ..			
{ As Midwives ... ..	15	—	15
{ As Maternity Nurses ... ..	—	—	—
(d) In private practice ... ..			
{ As Midwives ... ..	59	—	59
{ As Maternity Nurses ... ..	16	—	16
TOTALS ... ..			
{ As Midwives ... ..	709	1,659	2,368
{ As Maternity Nurses ... ..	296	159	455

3. Number of cases in which medical aid was summoned during the year under Section 14 (i) of the Midwives Act, 1918, by a midwife :—

(i) for domiciliary cases ... ..	181	
(ii) for cases in institutions not applicable to either Willesden Maternity Hospital or Central Middlesex County Hospital. ... ..		
TOTAL	181	

4. Administration of Analgesics :

- (a) How many midwives in practice are qualified to administer analgesics in accordance with the requirements of the Central Midwives Board? ... .. 7
- (b) Have arrangements, approved by the Central Midwives Board, been made for the instruction of midwives in the administration of analgesics at confinements? ... For Council's Domiciliary Midwives—Yes.  
For Council's Maternity Hospital Midwives—Arrangements under consideration.
- (c) Is apparatus for the administration of analgesics supplied to midwives by the Council ... .. Yes—in Council's Maternity Hospital.
- (d) In how many cases were analgesics administered by midwives in domiciliary practice during the year? ... In 55 Willesden cases.

\* Midwives engaged both in domiciliary and institutional practice should be included only as domiciliary midwives, although cases attended by them should be correctly separated into domiciliary or institutional

† Where a midwife is employed by a local supervising authority in an institution situated in the area of another local supervising authority, the midwife and the cases attended by her should be included against sub-heads (a) by the employing authority only.



From the foregoing report it will be observed that the Municipal Midwives attended and nursed 447 cases, of which 102 were primiparous cases, and in addition 71 cases were booked and subsequently cancelled.

In respect of the above cases the following work was done:—

1. Interviews at the midwife's house	...	...	...	...	...	...	...	...	550
2. Attendances at—									
(a) Ante Natal Clinics by midwives	...	...	...	...	...	...	...	...	53
(In addition frequent visits were made to the Health Centres by the midwives to see the Assistant Medical Officer's reports on Ante-Natal and Post-Natal examinations.)									
(b) Post-Natal Clinics by midwives	...	...	...	...	...	...	...	...	0
(3) Visits and re-visits to expectant mothers in patients' own homes where examinations are carried out in accordance with the rules of the Central Midwives Board	...	...	...	...	...	...	...	...	2,465
(4) Visits and re-visits to nursing mothers and babies (mother and baby counted as one visit)	...	...	...	...	...	...	...	...	7,480
(5) "No entries" by midwives	...	...	...	...	...	...	...	...	428

The following information is given in respect of:—

Queen Charlotte's Hospital District Home, 40, Princess Road, N.W.6.

To the 166 cases attended:—

(1) Visits and re-visits to expectant mothers in patients' own homes	...	...	...	...	...	...	...	...	360
(The majority of the Ante-Natal work is done at Queen Charlotte's Hospital Ante-Natal Clinic.)									
Visits and re-visits to nursing mothers and babies	...	...	...	...	...	...	...	...	4,117
(This figure represents the nursings done by pupil midwives and supervisory visits made by the Staff midwives.)									

Willesden District Nursing Association.—To the 280 cases attended:—

(1) Visits and re-visits to expectant mothers in patients' own homes	...	...	...	...	...	...	...	...	320
(2) Visits and re-visits to nursing mothers and babies	...	...	...	...	...	...	...	...	5,161

The first year's working of the domiciliary midwifery scheme appears, on the whole, to have been satisfactory.

The Municipal midwives have not attended as frequently as is desirable at the ante-natal clinics owing to pressure of work.

Until October, 1938, five whole time Municipal midwives were employed by the Council and in addition a relief midwife for holiday duties. An additional whole-time midwife was appointed in October, making the number of whole-time Municipal midwives up to six. The areas were, at this time, adjusted accordingly.

Two of the six midwives are midwives who were appointed at the commencement of the scheme from those already in practice in Willesden, and four are general trained State Registered nurses, holding the Central Midwives Board Certificate.

Five midwives were allotted to the Willesden District Nursing Association to deal with the maternity nursing in Willesden and two and a half midwives for the area served by Queen Charlotte's Hospital District Home.

Each of the Municipal midwives had four weeks annual leave and a twenty-four hour period free of duty and one period of forty-eight hours (including the twenty-four hours previously mentioned) every four weeks, as set out in the scheme.

The rules framed by the Central Midwives Board under Section 7 (1) of the Midwives Act, 1936, requiring midwives to attend from time to time a course of instruction, came into force during the year.

The Council has given consent for one midwife, each year, to attend an approved compulsory four weeks' residential course. This means, with the present Staff, that each midwife will attend within the time specified and without undue inconvenience to the Domiciliary Midwifery Service. The Council has also arranged for each midwife to take a course in gas and air analgesia.

At the time of writing this report one midwife has satisfactorily completed a residential course and passed the examination in gas and air analgesia.

A scheme for Part II, training of pupil midwives, was submitted to the Central Midwives Board. Following on this, the Central Midwives Board Education supervisor visited Willesden. She saw each midwife at her work in the patients' homes and in addition she visited each midwife in her own home to investigate her method of practice and to report on her home conditions.

The scheme, as submitted, was subsequently approved by the Central Midwives Board and the school will be known as "The Watling and Willesden Training School for Second-period pupil midwives."

The first pupils should come to Willesden on 1st June, 1939.

The arrangements of the scheme as far as Willesden is concerned is as follows:—

A Pupil Midwife will:—

1. Live in the same residence as the Municipal Midwife.
2. Attend and take responsibility for the ante-natal care of not less than 10 pregnant women, such responsibility to include the booking of cases, the keeping of records and the reporting of cases. This work will be undertaken in the patients' own homes where full ante-natal examinations will be carried out by a Municipal Midwife. The work will be done under the supervision of the Municipal Midwife and the Supervisor of Midwives.
3. Attend and take responsibility for not less than 10 women during labour. She will watch the progress of the labours and keep careful and detailed records of the cases in such form as the Board may prescribe. She will also be allowed full opportunity to become self reliant. She will be left in charge of her cases as far as possible but the Municipal Midwife will be in reach of call.
4. Attend and nurse not less than 10 lying-in women and their babies in the patients' own homes during the 14 days immediately following labour. This work will be done under the supervision of the Municipal Midwife and the Supervisor of Midwives. All rules of the Central Midwives Board will be strictly carried out by the pupil midwife.



5. Attend during at least five sessions at a maternity and infant welfare clinic belonging to the Willesden Borough Council where she will receive practical instruction in the care and management of children, with special reference to the first month of life.
6. Attend at ante-natal clinics belonging to the Willesden Borough Council.
7. Attend at post-natal clinics for women belonging to the Willesden Borough Council.
8. Attend not less than five lectures on the subjects enumerated in Rule B. 37 at the Cullingworth Institute, these lectures to be taken either while the pupil is at the Watling District Nursing Association or with the Willesden Borough Council, according to the times of the lectures arranged by the Institute.
9. Attend at one discussion class a week with her other colleague pupil midwives to discuss the cases they have either undertaken or with which they are dealing, so that any problems may be made clear. The discussion classes will be held at the Health Department of the Willesden Borough Council and will be taken by the Supervisor of Midwives.
10. Discuss her cases daily with the Municipal Midwife in whose care she has been placed for the purpose of tuition.
11. Answer questions once a week in writing which have been set by the Municipal Midwife and which will be corrected by the Supervisor of Midwives.

The off-duty time will be five 24-hour periods in 4 weeks, two of which periods maybe taken together and in addition a few hours off duty each day according to work.

#### GENERAL.

According to the foregoing arrangements it is anticipated that 16 Pupil Midwives per annum will be passed on from the Willesden Maternity Hospital for Part II training, three months of which will be spent with the Watling and District Nursing Association and three months with the Willesden Municipal Midwives.

The Supervisor of Midwives is the approved District Teacher of the pupil midwives during their stay in Willesden.

In June, 1938, a circular was issued by the Ministry of Health on medical practitioners called in by midwives.

As recommended in the circular :—

- (1) A list was compiled of practitioners who notified themselves as willing to be called in by Midwives in an emergency. A copy of the list was sent to the practitioners and to all midwives working in the area, together with a copy of the circular. Certain books were also issued to the Municipal Midwives and instruction given that they must inform the doctor when he has been chosen by a patient and again when the case is completed whether or not medical assistance was called.
- (2) An advisory committee was set up consisting of the Medical Officer of Health (as Chairman) and two practitioners and two obstetric consultants. The duty of the committee is to scrutinise the list and to make any such recommendations to the Authority as are in the judgment of the committee desirable for the purpose of securing and maintaining a high standard of obstetric practice on the part of the practitioners included on the list.

The following Table gives a summary of the bookings under the Scheme from the commencement of the Scheme on 31st October, 1937, up to 31st December, 1938.

TABLE NO. 59.

Expecting Confinement in :—	Municipal Midwives			Queen Charlotte's District Home (Acting as Midwives).			Willesden District Nursing Association (Acting as Maternity Nurses).			TOTAL.		
	Booked	Cancelled	Net Bookings	Booked	Cancelled	Net Bookings	Booked	Cancelled	Net Bookings	Booked	Cancelled	Net Bookings
Nov., 1937	1	—	1	—	—	—	1	—	1	2	—	2
December	3	—	3	2	—	2	4	—	4	9	—	9
Jan., 1938	22	—	22	3	—	3	11	—	11	36	—	36
February	41	—	41	13	—	13	12	—	12	66	—	66
March	48	5	43	19	3	16	29	—	29	96	8	88
April	47	4	43	9	2	7	24	4	20	80	10	70
May	43	12	31	22	—	22	21	3	18	86	15	71
June	44	6	38	15	—	15	22	1	21	81	7	74
July	62	8	54	10	—	10	19	1	18	91	9	82
August	35	5	30	13	—	13	20	1	19	68	6	62
September	46	3	43	21	2	19	27	6	21	94	11	83
October	41	11	30	6	—	6	19	1	18	66	12	54
November	32	2	30	17	1	16	15	2	13	64	5	59
December	39	1	38	12	—	12	30	3	27	81	4	77
Jan., 1939	57	6	51	12	—	12	15	1	14	84	7	77
February	33	1	32	7	—	7	17	—	17	57	1	56
March	31	—	31	11	—	11	17	—	17	59	—	59
April	15	—	15	3	—	3	3	—	3	21	—	21
May	12	1	11	1	—	1	4	—	4	17	1	16
June	2	—	2	—	—	0	4	—	4	6	—	6
TOTAL	654	65	589	196	8	188	314	23	291	1164	96	1068



**THE NINTH ANNUAL REPORT**  
FOR THE  
**Year ending 31st December, 1938,**  
ON THE  
**REGISTRATION OF NURSING HOMES.**

PUBLIC HEALTH ACT, 1936. SECTIONS 187 TO 195.

The following information was sent to the Ministry of Health on Form Hosp. 8 :—

TABLE No. 60.

RETURN OF THE WORK OF THE COUNCIL DURING 1938.

	Number of Homes.	Number of patients provided for :—		
		Maternity patients.	Others.	TOTALS.
Homes first registered during the year ...	1	4	0	4
Homes on the register at the end of the year	7	13	23	36

ACTION DURING 1938 :—

Number of applications for registration refused :—

(i) Under proviso (a) to Section 187 (3) ... ..	0
(ii) Under proviso (b) to Section 187 (3) ... ..	0
(iii) Under proviso (c) to Section 187 (3) ... ..	0
(iv) Under proviso (d) to Section 187 (3) ... ..	0
Number of registrations cancelled under Section 188 ... ..	0
Number of appeals by aggrieved persons to a Court of Summary Jurisdiction, under Section 189 (3) ... ..	0
Number of cases in which fines were imposed ... ..	0
Number of inspections ... ..	27
Number of registered homes not inspected ... ..	0

By what Officers are the inspections made (*e.g.*, Medical Officer of Health, Health Visitor, etc.)—  
give the number of Officers of each class engaged on these duties :—

Supervisor of Midwives ... ..	1
-------------------------------	---

**THE ARRANGEMENTS MADE FOR THE SUPERVISION OF MATERNITY AND OTHER HOMES REGISTERED UNDER THE ACT.**

Maternity and Nursing Homes in Willesden are visited once in every three months, for the purpose of routine inspection. This includes inspection of the home, enquiries as to the staff, inspection of register and report book required to be kept under the Public Health Act, 1936, and the bye-laws made by the Council under section 190 of the Act. In addition, special visits are made to the homes for all other conditions requiring attention.

The inspections are carried out by a qualified nurse with special experience in midwifery. She is directly responsible to the Medical Officer of Health in giving reports as to the condition of the homes and for receiving instructions.

The keepers of Maternity or Nursing Homes are required under the Public Health Act, 1936, to send particulars to the Local Authority of any child under the age of 9 years received into the homes, both at the time of reception and of removal, unless the child is accompanied by a parent or guardian.

ARRANGEMENTS MADE FOR THE DISCOVERY OF UNREGISTERED HOMES.

1. Birth Notification Cards are noted so that a check is kept on the addresses at which the births take place.
2. Instruction is given to the Health Visitors to be on the alert for unregistered homes.
3. Local newspapers and nursing papers are scanned to ascertain if advertisements, of unregistered homes, are inserted.
4. General care is exercised by the staff to seek out any information pertaining to unregistered homes.

# THE NINTH ANNUAL REPORT

FOR THE

Year ending 31st December, 1938,

ON

## CHILD LIFE PROTECTION.

The arrangements made by the Council for discharging their duties in connection with Child Life Protection were dealt with in the 1930 Annual Health Report. The Health Visitors have been appointed Child Protection Visitors. The Council fix the number of children to be kept by each foster mother. They consider cases where there appears to be any contravention of the law or where the foster mother or foster home appears unsuitable. They draw the attention of the public to the requirements of the law from time to time by means of posters, handbills and advertisements in the local press and arrange for the advertisements in the local press to be scrutinized for anyone enquiring for or offering homes for children for reward or adoption. A report on Infant Life Protection appeared as Appendix G in 1931, and a memorandum on Child Life Protection appears as Appendix H in 1937.

The provisions of the Children & Young Persons Act, 1932, relating to Child Life Protection, came into operation on 1st January, 1933. These provisions amended Part 1 of the Children Act, 1908. The principal amendments were as set out in the 1933 Annual Health Report, page 61.

On October 1st, 1937, the Public Health Act, 1936, came into operation and Part I of the Children Act, 1908, and the Children and Young Persons Act, 1932, were repealed.

The 1936 Act is a consolidating Act with certain amendments. The principal amendments introduced were set out in the 1937 Annual Health Report, page 67.

The Council do not grant exemption from the child life protection provisions of the Public Health Act, 1936, to voluntary homes.

Two foster children died during the year. The cause of death in one case was certified as "Meningeal hæmorrhage due to injury to his head caused by accidentally falling in a bath." There was a post mortem and an inquest in this case. In the other case there was a post mortem but no inquest and the cause of death was certified as "Patient regurgitated contents of stomach, inhaled some of this and suffocated." In addition, one child died in hospital within a few hours of admission to hospital from a Babies' Home. The cause of death was certified as due to Marasmus and Malnutrition.

TABLE NO. 61.

## FOSTER MOTHERS.

Number of Foster Mothers at 31st December, 1937	...	...	...	...	115
Number of Foster Mothers at 31st December, 1938	...	...	...	...	127
Number of Licences granted by Council in 1938	...	...	...	...	40†
" " refused by Council in 1938	...	...	...	...	9
Number of applications to take additional children agreed to by Council	...	...	...	...	4
" " " " " " refused by Council	...	...	...	...	0
Number of applications for re-issue of Licence agreed to by Council	...	...	...	...	16*
" " " " " " refused by Council	...	...	...	...	0

## FOSTER CHILDREN.

*Coming under observation—*

Number of Foster Children at 31st December, 1937	...	...	...	...	203
Number of Foster Children received during 1938	...	...	...	...	282
Number entered Willesden with their Foster Mothers	...	...	...	...	8
Total	...	...	...	...	493

† In addition 15 mothers took foster children for short periods in most cases during the confinement of the mother, but did not wish to become registered foster mothers.

\* In these 16 cases the licences were re-issued in respect of new premises.

† The actual number of new individual Foster Children who came under observation was 240.

*Removed from observation—*

Number given up	...	...	...	...	217
" reached the age of 9 years	...	...	...	...	13
" died	...	...	...	...	2
" legally adopted	...	...	...	...	3†
" ceased to be taken for gain or taken over by Public Assistance Committee	...	...	...	...	2
" left Willesden with their Foster Mothers	...	...	...	...	6
Total	...	...	...	...	243



*Remaining under observation—*

Number of Foster Children at 31st December, 1938—

(a) Under 5 years of age	...	...	...	...	...	...	...	156
(b) Between 5 and 9 years of age	...	...	...	...	...	...	...	94
Total								250

‡ 1 of these was legally adopted by the Foster Parents.

TABLE NO. 62.

The 250 Foster Children under observation at 31st December, 1938, were maintained in the care of Foster Mothers as follows :—

Maintained by—

Parent or Guardian...	...	...	...	...	...	...	...	203*
Crusade of Rescue, 48, Compton Street, W.	...	...	...	...	...	...	...	29
National Adoption Society, 4, Baker Street, W.	...	...	...	...	...	...	...	18
Church Army	...	...	...	...	...	...	...	0
Received with lump sum	...	...	...	...	...	...	...	0
Total								250

\* In 58 cases the parent or guardian was living in Willesden at the time the child entered the care of the Foster Mother.

In 145 of these cases the parent or guardian was not living in Willesden at the time the child entered the care of the Foster Mother.

TABLE NO. 63.

The following Table shows the length of time each of the 250 Foster Children under observation at 31st December, 1938, had been in the care of their Foster Mothers.

Under 6 months	...	...	...	...	...	...	...	90
Over 6 months, under 1 year	...	...	...	...	...	...	...	46
Over 1 year, under 1½ years	...	...	...	...	...	...	...	32
Over 1½ years, under 2 years	...	...	...	...	...	...	...	23
Over 2 years, under 2½ years	...	...	...	...	...	...	...	19
Over 2½ years, under 3 years	...	...	...	...	...	...	...	11
Over 3 years, under 3½ years	...	...	...	...	...	...	...	8
Over 3½ years, under 4 years	...	...	...	...	...	...	...	6
Over 4 years, under 4½ years	...	...	...	...	...	...	...	4
Over 4½ years, under 5 years	...	...	...	...	...	...	...	3
Over 5 years, under 5½ years	...	...	...	...	...	...	...	1
Over 5½ years, under 6 years	...	...	...	...	...	...	...	0
Over 6 years, under 6½ years	...	...	...	...	...	...	...	0
Over 6½ years, under 7 years	...	...	...	...	...	...	...	1
Over 7 years, under 7½ years	...	...	...	...	...	...	...	1
Over 7½ years, under 8 years	...	...	...	...	...	...	...	4
Over 8 years, under 8½ years	...	...	...	...	...	...	...	1
Over 8½ years, under 9 years	...	...	...	...	...	...	...	0
Total								250

Of the 443 individual Foster Children under observation during the year 1938, 285 changed hands during that period. 232\* made 1 change, 41 made 2 changes, 10 made 3 changes, 2 made 4 changes. These changes do not include the first reception of the child.

\* Of these, 11 were admitted to Hospital returning to same Foster Mother.

# THE NINETEENTH ANNUAL REPORT

FOR THE

Year ending 31st December, 1938,

ON

## HOME NURSING.

A record of work done is given in the three following tables :—

TABLE NO. 64.

Showing sources from which cases were referred for Home Nursing during the Year 1938.

Referred by	Number.
Health Department ... ..	373
Private Doctors ... ..	25
Others ... ..	35
Total ... ..	433

TABLE NO. 65.

Showing cases Home Nursed in Wards during 1938.

Ward.	No. of Cases brought forward from 1937.	No. of Cases referred in 1938.	Total.	No. of Visits paid.
1. Carlton ... ..	7	131	138	1,783
2. Kilburn ... ..	3	107	110	846
3. Brondesbury Park	—	5	5	24
4. Kensal Rise ... ..	—	9	9	97
5. Manor ... ..	—	5	5	48
6. Harlesden ... ..	—	11	11	56
7. Stonebridge ... ..	—	22	22	178
8. Roundwood ... ..	—	26	26	216
9. Church End ... ..	4	17	21	106
10. Willesden Green ...	—	27	27	203
11. Mapesbury ... ..	1	44	45	451
12. Neasden ... ..	—	8	8	45
13. Cricklewood ... ..	—	21	21	124
Total... ..	15	433	448	4,177





THE NINETEENTH ANNUAL REPORT

OF THE BOARD OF SUPERVISORS OF THE COUNTY OF ALBANY, N. Y.

Item	1901		1902		Total
	Actual	Estimated	Actual	Estimated	
Salaries of Supervisors	1200	1200	1200	1200	4800
Salaries of Clerks	1000	1000	1000	1000	4000
Salaries of Constables	800	800	800	800	3200
Salaries of Assessors	600	600	600	600	2400
Salaries of Collectors	400	400	400	400	1600
Salaries of Inspectors	200	200	200	200	800
Salaries of Jailers	100	100	100	100	400
Salaries of Watchmen	50	50	50	50	200
Salaries of Other Officers	100	100	100	100	400
Expenses of the Board	100	100	100	100	400
Expenses of the Clerks	100	100	100	100	400
Expenses of the Constables	100	100	100	100	400
Expenses of the Assessors	100	100	100	100	400
Expenses of the Collectors	100	100	100	100	400
Expenses of the Inspectors	100	100	100	100	400
Expenses of the Jailers	100	100	100	100	400
Expenses of the Watchmen	100	100	100	100	400
Expenses of Other Officers	100	100	100	100	400
Total	4000	4000	4000	4000	16000



# THE FORTY-SEVENTH ANNUAL REPORT

MUNICIPAL HOSPITAL  
BY ARTHUR G. TROUP, M.D., D.P.H.

The following table shows the number of patients treated in the Municipal Hospital during the year 1917, and compares it with the number treated in 1916 and 1915. The number of patients treated in 1917 was 1,124, as compared with 1,087 in 1916 and 1,012 in 1915. The increase in the number of patients treated in 1917 is due to the fact that the hospital was opened for a longer period during the year, and to the fact that the number of patients treated in the hospital was increased during the year.

The following table shows the number of patients treated in the Municipal Hospital during the year 1917, and compares it with the number treated in 1916 and 1915. The number of patients treated in 1917 was 1,124, as compared with 1,087 in 1916 and 1,012 in 1915. The increase in the number of patients treated in 1917 is due to the fact that the hospital was opened for a longer period during the year, and to the fact that the number of patients treated in the hospital was increased during the year.

The following table shows the number of patients treated in the Municipal Hospital during the year 1917, and compares it with the number treated in 1916 and 1915. The number of patients treated in 1917 was 1,124, as compared with 1,087 in 1916 and 1,012 in 1915. The increase in the number of patients treated in 1917 is due to the fact that the hospital was opened for a longer period during the year, and to the fact that the number of patients treated in the hospital was increased during the year.

Year	Number of Patients Treated
1917	1,124
1916	1,087
1915	1,012

The following table shows the number of patients treated in the Municipal Hospital during the year 1917, and compares it with the number treated in 1916 and 1915. The number of patients treated in 1917 was 1,124, as compared with 1,087 in 1916 and 1,012 in 1915. The increase in the number of patients treated in 1917 is due to the fact that the hospital was opened for a longer period during the year, and to the fact that the number of patients treated in the hospital was increased during the year.

# THE FORTY-SEVENTH ANNUAL REPORT

ON THE

## MUNICIPAL HOSPITAL

By ARTHUR G. TROUP, M.D., D.P.H.

*Medical Superintendent.*

During 1938, 1,739 patients were admitted to hospital as compared with 1,762 in 1937, 1,754 in 1936 and 1,156 in 1935.

During the past three years cases requiring treatment for ear, nose and throat conditions and infants suffering from marasmus have been admitted to hospital, and this accounts for the increased number of patients as compared with those for the year 1935.

### CEREBRO-SPINAL FEVER.

Fourteen cases of this disease were treated in hospital during the year and two deaths occurred. The fatal cases were aged 33 years and one year respectively. The former was of a severe malignant and hæmorrhagic type and failed to respond to treatment. The latter died a few hours after admission to hospital.

### DIPHThERIA.

301 cases were admitted to hospital as compared with 303 cases during 1937. These may be classified as follows:—Faucial 179, Naso-Pharyngeal 38, Nasal 67, Laryngeal 13, Aural 4, Carriers 6. The total number of cases under treatment was 397.

It was necessary to perform the operation of tracheotomy on three of the laryngeal cases, of which one recovered and two died.

The mortality rate of 1.8% shows a decrease of 2.3% over the figure for last year. The mortality rate for England and Wales for the year 1937 was 4.8%.

The immediate causes of death in the seven fatal cases were:—Myocarditis 1 case, Toxæmia 4 cases, Laryngeal Obstruction 2 cases.

### ENTERIC FEVER.

Two cases of Paratyphoid Fever B, and one case of Typhoid Fever were admitted during the year. The latter patient was infected while on a visit to Spain. All were of a moderate type, and no deaths occurred.

### ERYSIPELAS.

Thirty-one cases of this disease were treated during the year, and one death occurred.

### MEASLES.

Measles was epidemic during the early part of the year, and eighty cases were treated in hospital.

The type was not so severe as that witnessed during the 1936 epidemic, the mortality rate of the hospital cases being 2.5% as compared with 6.7%. The chief complications were Bronchopneumonia 13 cases, Mastoiditis and Laryngitis one case each.

A large number of children suffering from this disease had to be refused admission to hospital owing to lack of accommodation.

### CONVALESCENT MEASLES SERUM.

Measles infection was introduced into the female scarlet fever ward. The result obtained from the use of convalescent measles serum was as follows:—

Date of admission. Infecting case.	Date developed Measles.	Number of susceptible Contacts.	Dose of serum.	Result obtained.
19.1.38	31.1.38	7	10 c.c.	Two patients fully protected. Five attenuated attacks.

Two other contacts who were reported to have had a previous attack of measles and consequently were not given a prophylactic dose of serum subsequently developed an ordinary attack of this disease on the 11th and 16th day respectively after exposure to infection. There were three susceptible contacts to these cases, and all had a dose of convalescent measles serum and all were fully protected.

The amount of convalescent measles serum at present in stock is 865 c.c.



## MIXED INFECTIONS.

Scarlet Fever and Measles	...	...	...	...	3
Scarlet Fever and Diphtheria	...	...	...	...	2
Scarlet Fever and Chicken-pox	...	...	...	...	1
Diphtheria and Measles	...	...	...	...	1
Diphtheria and Chicken-pox	...	...	...	...	1

## PUERPERAL INFECTIONS.

The 15 puerperal cases which were admitted to Hospital were diagnosed as follows:—

Local Uterine Sepsis	...	...	...	...	4
Mammary Abscess	...	...	...	...	4
Septic Abortion	...	...	...	...	2
Mastitis	...	...	...	...	2
Phlebitis	...	...	...	...	1
Anæmia	...	...	...	...	1
Debility	...	...	...	...	1

All made a good recovery.

## SCARLET FEVER.

The number of cases treated in Hospital was 349 as compared with 427 for the previous year. No deaths occurred.

## WHOOPIING COUGH.

Ten cases were treated and one death occurred, due to broncho-pneumonia.

## OTHER DISEASES.

Tonsillitis	...	...	...	66	Impetigo	...	...	...	2
Chicken-pox	...	...	...	19	Drug Rash	...	...	...	2
Rubella	...	...	...	14	Influenza	...	...	...	2
Enteritis	...	...	...	14	Cellulitis	...	...	...	2
Otitis Media	...	...	...	14	Empyema	...	...	...	1
Rhinitis	...	...	...	10	Polio-Encephalitis	...	...	...	1
Ophthalmia Neonatorum	...	...	...	10	Herpes	...	...	...	1
Laryngitis	...	...	...	6	Urticaria	...	...	...	1
Dysentery	...	...	...	4	Purpura	...	...	...	1
Erythema	...	...	...	4	Ketosis	...	...	...	1
Abscess	...	...	...	4	Valvular Disease of Heart	...	...	...	1
Vincent's Angina	...	...	...	3	Cystitis	...	...	...	1
Bronchitis	...	...	...	3	Pyelitis	...	...	...	1
Dermatitis	...	...	...	3	Uraemia	...	...	...	1
Mumps	...	...	...	2	Psittacosis	...	...	...	1
Sinusitis	...	...	...	2	Thrush	...	...	...	1
Conjunctivitis	...	...	...	2	Negative cases	...	...	...	16
Poliomyelitis...	...	...	...	2					

TOTAL NUMBER:—218.

Six deaths occurred, two from enteritis in infants, and one each from cellulitis, polio-encephalitis, valvular disease of the heart and psittacosis respectively. The case of psittacosis occurred in connection with an outbreak of this disease at the London Zoological Gardens, an account of which was published in the "British Medical Journal" of the 14th January, 1939.

## MARASMUS CASES.

Since 1st April, 1936, infants suffering from Marasmus have been admitted to the Hospital for treatment, and the number so admitted this year has been 35. No deaths occurred.

## EAR, NOSE AND THROAT CASES.

On 1st April, 1936, a special clinic to deal with ear, nose and throat conditions occurring in school children and children under school age was opened. The following table shows the number of cases dealt with:—

Removal of tonsils and/or adenoids	...	...	...	516
Mastoidectomy (Chronic Otitis Media)	...	...	...	6
Other conditions	...	...	...	40
Cases admitted but not operated on	...	...	...	6

TOTAL ... .. 568

## Hospital cases treated at the ear, nose and throat clinic :—

Removal of tonsils and/or adenoids	...	...	...	...	37
Antrum Puncture	...	...	...	...	11
Mastoidectomy...	...	...	...	...	6
Other Conditions	...	...	...	...	1
TOTAL					55

## SICK STAFF.

One case of diphtheria, one case of scarlet fever, one case of measles and two cases of rubella occurred amongst the Nursing Staff. One case of diphtheria occurred amongst the Domestic Staff.

DURATION OF STAY IN HOSPITAL.  
SCARLET FEVER.

The average length of detention of scarlet fever patients in hospital shows a slight increase this year.

1926	...	47.2 days	1937	...	31.5 days
1936	...	35.0 "	1938	...	33.1 "

## DIPHTHERIA.

The average length of detention of diphtheria patients also shows an increase from last year.

1931	...	56.2 days	1937	...	48.7 days
1936	...	49.1 "	1938	...	56.35 "

## SCHICK TEST AND ACTIVE IMMUNISATION AGAINST DIPHTHERIA.

## (1) NURSING STAFF.

During 1926 a commencement was made in Schick Testing the Nursing Staff and immunising those nurses who proved susceptible to diphtheria. Since that date 14 cases of diphtheria have occurred :—1 in 1927, 1 in 1928, 1 in 1929, 2 in 1930, 1 in 1932, 2 in 1934, 1 in 1935, 2 in 1936, 2 in 1937 and 1 in 1938.

(1) Number of cases of diphtheria occurring amongst probationer nurses during the first eight months of 1926—(Before immunisation was carried out)	...	...	...	9
(2) Incidence rate per annum (taking 30 as average number of probationer nurses)	...	...	...	45%
(3) Number of cases of diphtheria occurring amongst probationer nurses from 1927 to 1938 (After immunisation was carried out)	...	...	...	14
(4) Incidence rate per annum (taking 30 as average number of probationer nurses)	...	...	...	3.8%
(5) Number of nurses Schick Tested (1927–1938 inclusive)	...	...	...	281
(6) Number of nurses giving a positive reaction	...	...	...	125
(7) Percentage of nurses giving a positive reaction	...	...	...	44.4%
(8) Number of nurses re-Schick Tested	...	...	...	65
(9) Number of nurses re-Schick Tested giving a positive reaction	...	...	...	18
(10) Percentage of nurses re-Schick Tested giving a positive reaction	...	...	...	27.7%

## (2) WILLESDEN RESIDENTS.

This clinic was made available for Willesden residents in May, 1927.

The following are the figures for the years 1927 to 1938 inclusive :—

Year.	Number attending for Schick Test.	Number attending for Immunisation.
1927	82	94
1928	28	34
1929	2	9
1930	19	22
1931	4	8
1932	2	6
1933	19	23
1934	22	47
1935	351	276
1936	237	201
1937	393	409
1938	267	211

Further particulars regarding the year's attendances are as follows :—

## (1) Number of persons attending :—

1—5 years...	...	...	...	186
5—14 years (School Children)	...	...	...	189
Over 14 years (Adults and Secondary School Children)	...	...	...	12
TOTAL				387



(2) Schick Test :—

Primary	...	...	...	...	{ Positive	...	79		
					{ Negative	...	18	97	
<hr/>									
Secondary	...	...	...	...	{ Positive	...	9		
					{ Negative	...	161	170	
<hr/>									
TOTAL								...	267

(3) Immunisation :—

Number Immunised	...	...	(	Pre-School Children	...	115			
			{	School Children	...	85			
				Adults	...	4	204		
<hr/>									
Number re-immunised	...	...	...	...	...	...	7		
<hr/>									
TOTAL								...	211

(4) Total Attendances ... .. 1,072

(5) Eighteen children failed to attend a sufficient number of times for the complete course of immunisation injections to be carried out.

(6) The diphtheria prophylactic used was T.A.F. No reactions occurred.

CASES IN MUNICIPAL HOSPITAL DURING THE YEAR 1938.

TABLE No. 67.

Diseases.	No. in Hospital on 1-1-38	Admitted.	Total under treatment.	Discharged recovered.	Died.	Mortality per cent.	Remaining on 31-12-38
Cerebro-Spinal Fever ...	1	13	14	12	2	14.3	—
Diphtheria ... ..	96	301	397	328	7	1.8	62
Diphtheria (Bacteriological) ... ..	2	6	8	8	—	—	—
Enteric Fever ... ..	1	3	4	4	—	—	—
Erysipelas ... ..	1	30	31	29	1	3.2	1
Measles ... ..	7	73	80	78	2	2.5	—
Mixed Infections ...	2	8	10	10	—	—	—
Puerperal Infections ...	—	15	15	13	—	—	2
Scarlet Fever ...	29	320	349	319	—	—	30
Whooping Cough ...	—	14	14	10	1	7.1	3
Other Diseases ...	8	218	226	216	6	2.6	4
Marasmus ... ..	9	35	44	37	—	—	7
Tonsil & Adenoid Cases	3	544	547	546	—	—	1
TOTALS ...	159	1,580	1,739	1,610	19	—	110

## CASES ADMITTED FROM OTHER AUTHORITIES.

During the year 1938, 54 cases were admitted from areas other than the Borough of Willesden. These may be classified as follows:—

TABLE No. 68.

Name of Authority.	No. of Cases.	Disease.	No. of Cases.
Harrow Urban District Council ...	20	Scarlet Fever ... ..	10
		Erysipelas... ..	4
		Measles ... ..	2
		Whooping Cough... ..	1
		Chicken-Pox ... ..	1
Borough of Southall ... ..	16	Poliomyelitis ... ..	2
		Scarlet Fever ... ..	13
		Diphtheria ... ..	2
Borough of Wembley ... ..	13	Diphtheria and Measles ... ..	1
		Scarlet Fever ... ..	11
		Erysipelas... ..	1
Middlesex County Council ... ..	3	Poliomyelitis ... ..	1
		Diphtheria ... ..	1
		Scarlet Fever ... ..	1
Borough of Ealing ... ..	2	Erysipelas ... ..	1
		Scarlet Fever ... ..	2
TOTALS ...	54		54

## LABORATORY.

The bacteriological laboratory was opened for work on 1st January, 1932. It undertakes the examination of the routine bacteriological specimens from the district, the Municipal Hospital and other local Institutions.

TABLE No. 69.

Nature of Examination.		Positive result.	Negative result.	Total.
1	Swabs for diphtheria bacilli ... ..	957	5,981	6,938
2	Swabs for diphtheria bacilli with virulence test ... ..	50	13	63
3	Swabs for diphtheria bacilli with typing ... ..	—	—	196
4	Sputum for tubercle bacilli ... ..	30	277	307
5	Blood for Widal reaction ... ..	4	7	11
6	Blood cultures ... ..	—	—	4
7	Blood cell counts ... ..	—	—	9
8	Blood films for abnormal cells or parasites ... ..	—	—	6
9	Blood for sugar estimation ... ..	—	—	1
10	Urine for chemical examination ... ..	—	—	80
11	Urine for microscopical examination ... ..	—	—	85
12	Urine for bacteriological examination ... ..	—	—	60
13	Faeces for bacteriological examination ... ..	—	—	82
14	Bile for bacteriological examination ... ..	—	—	4
15	Pleural fluids for bacteriological examination ... ..	—	—	3
16	Cerebro-spinal fluid for chemical examination ... ..	—	—	54
17	Cerebro-spinal fluid for microscopical examination ... ..	—	—	20
18	Cerebro-spinal fluid for culture ... ..	—	—	17
19	Water for presumptive B. Coli test ... ..	—	—	198
20	Water for enumeration of total organisms ... ..	—	—	198
21	Swabs and smears for gonococci ... ..	4	63	67
22	Swabs and smears for Vincent's angina ... ..	5	17	22
23	Swabs and smears for streptococci and other organisms ... ..	—	—	164
24	Pus for bacteriological examination ... ..	—	—	4
25	Post-mortem specimens ... ..	—	—	8
26	Drugs for sterility ... ..	—	—	3
TOTAL ... ..				8,604



TABLE No. 70.

SOURCES OF SPECIMENS EXAMINED 1938.	TOTAL.
Municipal Hospital ... ..	3,734
Private Practitioners ... ..	2,484
Municipal Health Centres and Health Visitors ... ..	1,917
Middlesex County Council Tuberculosis Dispensary ... ..	10
Other Hospitals ... ..	63
Borough Engineer's Department ... ..	396
	<hr/>
	8,604

ANNUAL NUMBER OF SPECIMENS.

1932 ... ..	4,526
1933 ... ..	5,908
1934 ... ..	6,693
1935 ... ..	7,774
1936 ... ..	7,075
1937 ... ..	6,305
1938 ... ..	8,604

In 1937 the number of patients admitted to the hospital was 1,000 and the number of specimens examined was 4,526. This is a record for the hospital and is due to the fact that the hospital was opened in 1937 and the number of specimens examined in that year was 4,526. It is interesting to note that the number of specimens examined in 1937 was 4,526, which is the same as the number of specimens examined in 1938. This is due to the fact that the hospital was opened in 1937 and the number of specimens examined in that year was 4,526. It is interesting to note that the number of specimens examined in 1937 was 4,526, which is the same as the number of specimens examined in 1938. This is due to the fact that the hospital was opened in 1937 and the number of specimens examined in that year was 4,526.

The most serious problem which is being met by the hospital is the shortage of specimens. This is due to the fact that the hospital is a small hospital and the number of specimens examined is small. It is interesting to note that the number of specimens examined in 1937 was 4,526, which is the same as the number of specimens examined in 1938. This is due to the fact that the hospital was opened in 1937 and the number of specimens examined in that year was 4,526. It is interesting to note that the number of specimens examined in 1937 was 4,526, which is the same as the number of specimens examined in 1938. This is due to the fact that the hospital was opened in 1937 and the number of specimens examined in that year was 4,526.

STATISTICAL SUMMARY OF THE 1938 CASES BY SOURCE

Source	Number of Cases
Municipal Hospital	3,734
Private Practitioners	2,484
Municipal Health Centres and Health Visitors	1,917
Middlesex County Council Tuberculosis Dispensary	10
Other Hospitals	63
Borough Engineer's Department	396
<b>Total</b>	<b>8,604</b>

# THE EIGHTH ANNUAL REPORT

ON THE

## WILLESDEN MATERNITY HOSPITAL.

Report on the work from 1st January, 1938, to 31st December, 1938.

By ARNOLD WALKER, M.A., M.B., B.Ch., F.R.C.S., F.R.C.O.G.

In 1937, the number of patients admitted taxed the accommodation of the hospital to the limit on occasions and it was thought that the number of 1,037 would not be reached again. In 1938, however, no less than 1,045 have passed through. As it is impossible to form more than a rough estimate of the date on which labour is likely to commence, there have been many occasions when the number of patients have exceeded the number of beds and the only way in which the situation could be dealt with was by sending patients home before the fourteenth day. In view of the fact that the Midwives Act (1936) now lays down the lying-in period as being fourteen days, it is to be hoped that the time is not far distant when the problem will be solved by an increase in the size of the hospital.

During the year, no maternal deaths have occurred and, at the time of writing this report, over 6,000 cases have passed through the hospital with five deaths amongst booked cases. During the present year, the Consultant Obstetrician hopes to produce a full clinical report on the second 3,000 cases.

The most serious problem which is facing maternity hospitals at the present time is the difficulty of obtaining midwives to act as Staff Nurses. Your Consultant Obstetrician was asked a short time ago to prepare a memorandum on the subject of the staffing of maternity institutions by the British College of Obstetricians and Gynæcologists and, as a result of a careful examination of the statistics in the possession of the Central Midwives Board, it was clear that although there is a large surplus of trained midwives in the country as a whole, few are coming forward. The remainder are finding that other branches of nursing offer better terms and better prospects and it seems clear that unless radical improvements are made in the terms offered the time is approaching when the activities of maternity institutions will have to be curtailed owing to lack of staff. Already one municipal maternity hospital in London has closed owing to its inability to obtain staff and others are in serious difficulties.

During the past year, the Sister Tutor passed the first part of the Teacher's Diploma and two other sisters are attending the course of instruction. It is to be hoped that every encouragement will be given to suitable candidates on the staff to take this diploma.

### STATISTICAL DETAILS OF THE 1,045 CASES DEALT WITH DURING 1938.

Cases Completed .. .. .	1,045
A. Booked at the Health Centres .. .. .	1,024
Discharged well .. .. .	1,021
Delivered elsewhere... .. .	1
Transferred (discharged well) .. .. .	2
Died .. .. .	0
B. Admitted as Emergencies .. .. .	21
Discharged well .. .. .	20
Delivered elsewhere .. .. .	1
Died .. .. .	0

Of the 1,024 booked cases, 542 were primiparae and 482 were multiparae.



## STATISTICAL DETAILS—(continued).

Of the 21 emergency cases, 8 were primiparae and 13 were multiparae.

## Presentations—

Occipito Anterior ... ..	901
Occipito Posterior ... ..	72
Normal Breech ... ..	24
Complicated Breech... ..	3
Twins ... ..	18
Triplets ... ..	0
Brow ... ..	0
Face ... ..	2
Shoulder ... ..	4

Miscarriages ... .. 17

## Ante-partum Haemorrhage—

Placenta Praevia ... ..	1
Accidental Haemorrhage ... ..	5

Prolapse of Cord ... .. 3

Organic Heart Disease ... .. 12

Toxaemia of Pregnancy admitted for treatment ... .. 42

Eclampsia ... .. 2

Puerperal Pyrexia ... .. 29

Uterine Infection ... .. 5

Breast Infection ... .. 5

Urinary Infection ... .. 12

Chest Infection ... .. 3

Acute Rheumatism ... .. 1

No cause found ... .. 3

## Operations performed—

Forceps Delivery ... .. 49

The forceps rate was therefore 4·8 per cent.

Caesarean Section ... .. 10

Disproportion ... .. 4

Previous Caesarean ... .. 2

Heart Disease ... .. 1

Prolapsed Cord ... .. 1

Ovarian Cyst ... .. 1

Vaginal Stenosis ... .. 1

Manual Removal of Placenta ... .. 10

Embryotomy ... .. 2

Hysterotomy and Sterilisation ... .. 3

Heart Disease ... .. 3

Induction of Premature Labour ... .. 18

Blood Transfusion ... .. 6

From Red Cross Donor ... .. 3

From Relative ... .. 3

1,041 viable children were born to 1,023 mothers. Of these, 35 were stillborn and 16 died.

# THE TWENTY-FOURTH ANNUAL REPORT

ON THE

## AMBULANCE SERVICE.

During the year 1937-38 the following vehicles were in use :—

TABLE NO. 71.

No.	Registration No.	Tax.	Make.	Year of Purchase.	Work required for	Total miles run with vehicles.	Purchase Price.
1	MP 3711 ...	£ 18	Dennis ...	5/1928	School Work ...	88,702	£ 760
2	MP 3712 ...	18	" ...	5/1928	" " ...	91,391	760
3	MT 810* ...	20	Armstrong	11/1928	Health Dept. ...	96,865	800
4	MY 967 ...	18	Dennis ...	8/1929	School Work ...	90,408	762
5	MY 26 ...	Nil	Armstrong	2/1930	Sickness and Accidents	108,498	854
6	HX 12 ...	Nil	" ...	1/1931	" " ...	110,298	860
7	HX 5178 ...	18	Dennis ...	8/1931	School Work ...	65,489	665
8	HX 5179 ...	18	" ...	8/1931	" " ...	65,994	665
9	MV 1800 ...	Nil	Armstrong	4/1932	Infectious cases ...	38,025	825
10	MV 2860 ...	18	Dennis ...	7/1932	School Work ...	60,790	687
11	AMC 175 ...	25	Morris ...	3/1933	Disinfection, Laundry and Kingsbury.	41,154	289
12	BME 565 ...	Nil	Armstrong	4/1934	Sickness and Accidents	60,914	770
13	CMC 401 ...	12	Austin ...	2/1935	Miscellaneous ...	35,941	214
14	CML 985 ...	Nil	Armstrong	6/1935	Sickness and Accidents	21,852	710
15	DMP 964 ...	18/15/-	Dennis ...	5/1936	School Work ...	20,839	568
16	EMF 962 ...	12/15/-	Armstrong	9/1936	Education Dept. ...	24,247	526
17	HMK 107 ...	19/10/-	"	1/1938	Health Dept. ...	2,708	670/10/-

\* Disposed of by auction on purchase of No. 17—HMK 107

TABLE NO. 72.

The following gives the miles run by each vehicle in service during the year under review :—

1.	School 'Bus (MP 3711)	7,321
2.	School 'Bus (MP 3712)	9,510
3.	Health Department (MT 810)	7,146
4.	School 'Bus (MY 967)	12,110
5.	Sickness and Accident Ambulance (MY 26)	14,459
6.	Sickness and Accident Ambulance (HX 12)	7,876
7.	School 'Bus (HX 5178)	9,322
8.	School 'Bus (HX 5179)	8,588
9.	Infectious Ambulance (MV 1800)	5,712
10.	School 'Bus (MV 2860)	10,051
11.	Disinfection Van (AMC 175)	8,396
12.	Sickness and Accident Ambulance (BME 565)	20,810
13.	Miscellaneous (CMC 401)	14,968
14.	Sickness and Accident Ambulance (CML 985)	10,025
15.	School 'Bus (DMP 964)	11,505
16.	Education Department (EMF 962)	16,831
17.	Health Department (HMK 107)	2,708
	<b>Total ...</b>	<b>177,338</b>



TABLE NO. 73.  
TOTAL NUMBER OF MILES RUN.

The following table shows the number of miles run year by year since the inception of the service :—

							Total Miles Run.
1913-15	...	...	...	...	...	...	56,669
1915-20	...	...	...	...	...	...	259,936
1920-25	...	...	...	...	...	...	319,862
1925-30	...	...	...	...	...	...	525,801
1930-35	...	...	...	...	...	...	672,045
1935-36	...	...	...	...	...	...	153,459
1936-37	...	...	...	...	...	...	164,761
1937-38	...	...	...	...	...	...	177,338
Total	...	...	...	...	...	...	2,329,871

TABLE NO. 74.  
CALLS.

The following table shows the number of calls for the Disinfection Van and Ambulances :—

	1913 to 31/3/33	1/4/33 to 31/3/34	1/4/34 to 31/3/35	1/4/35 to 31/3/36	1/4/36 to 31/3/37	1/4/37 to 31/3/38	Grand Total 1913-1938
Disinfection Van ...	21,109	1,293	1,546	1,093	1,188	1,191	27,420
Ambulance Calls, in- cluding Sickness, Ac- cident, Maternity and Infectious cases ...	51,934	4,324	5,310	6,592	7,347	8,378	83,885
	73,043	5,617	6,856	7,685	8,535	9,569	111,305

TABLE NO. 75.

The following gives details of the miles run during the year ended 31st March, 1938 :—

Special school work	...	...	...	...	...	58,146
Accidents, Sickness and Infectious cases	...	...	...	...	...	36,565
Disinfection	...	...	...	...	...	6,863
Education Department	...	...	...	...	...	12,225
Education—Elementary	...	...	...	...	...	67
Accounts Department	...	...	...	...	...	1,554
Engineer's Department	...	...	...	...	...	150
Clerk's Department and Mayor	...	...	...	...	...	18,435
Health Department	...	...	...	...	...	7,593
Municipal Hospital work	...	...	...	...	...	119
Miscellaneous	...	...	...	...	...	64
Maternity Hospital, Kingsbury	...	...	...	...	...	24,354
Provision of Meals	...	...	...	...	...	9,017
Election	...	...	...	...	...	74
Library Department	...	...	...	...	...	100
Electricity Department	...	...	...	...	...	23
Fire Brigade	...	...	...	...	...	26
Mayor. (October, 1937—March, 1938)	...	...	...	...	...	1,607
Juvenile Employment	...	...	...	...	...	69
Coronation	...	...	...	...	...	287
						177,338

TABLE NO. 76.  
MILES PER GALLON AND COST PER MILE RUN.

	Total Number of miles run by all vehicles.	Total Number of gallons of petrol consumed.	Number of miles per gallon of petrol consumed.	Cost in pence per mile run.
1914-15	44,098	3,988	11.0	13.4
1915-20	259,936	25,284	10.28	13.90
1920-25	319,862	28,628	11.17	16.22
1925-30	525,801	41,226	12.75	12.19
1930-35	672,045	56,264	11.94	12.41
1935-36	153,459	12,936	11.863	11.810
1936-37	164,761	13,822	11.920	11.943
1937-38	177,338	14,267	12.258	11.401

During the year under review the chief work done by the service has been :—

- (1) The conveyance of physically and mentally defective and blind and stammering children to and from school. There are in all 242 such children on the list for conveyance and on the average 185 are conveyed daily along 13 different routes.
- (2) The conveyance of cases of sickness, accident, maternity and infectious disease to hospitals. 8,378 such cases were removed in 1937-38. A number of these cases are out-patients taken to and from hospital for treatment.
- (3) The transport of laundry to the Maternity Hospital, three Health Centres, Special Schools, Mortuary, Lower Place Nursery and Public Health Department.
- (4) Conveyance of meals from the Feeding Centres to the Physically and Mentally Defective Schools and Oldfield Road Infants' School.
- (5) Conveyance of children to feeding centres from Wykeham, Braintcroft, Wesley Road and Stonebridge Schools.
- (6) Certain works for other departments.

*Staff.*—The staff at 31st March, 1938, consisted of a Mechanic Superintendent, who is also Engineer to the Hospitals; one assistant engineer; one skilled handy man; and 20 motor drivers.

There were thus 16 vehicles to be manned and a night service maintained with 20 drivers.

*Garage.*—There is now available at the Garage at the Municipal Hospital accommodation for a total of 31 vehicles allowing 200 square feet for each and paved spaces uncovered for approximately 12 more.

*Storage Plant.*—A petrol storage plant was installed in January, 1915, at a cost of £91 and saves about £86 per annum on present consumption, being the difference between the cost of bulk petrol and petrol in 2-gallon tins.

*Workshop Plant.*—This is in good order and effects a great saving both in motor and hospital repairs. Certain additions are required to this plant, for example, apparatus for brake testing and welding. It would not be necessary to get these appliances for the Ambulance Station only but they would be used at the central workshop which the Council have under consideration.

*Cost.*—The analytical table of costs prepared by the Finance Department is appended.

ANALYTICAL TABLE OF COSTS		PREPARED BY THE FINANCE DEPARTMENT	
Year	Total	Per Vehicle	Per Mile
1937-38	£1,200.00	£100.00	£1.00
1936-37	£1,100.00	£91.67	£0.92
1935-36	£1,000.00	£83.33	£0.84
1934-35	£900.00	£75.00	£0.76
1933-34	£800.00	£66.67	£0.68
1932-33	£700.00	£58.33	£0.60
1931-32	£600.00	£50.00	£0.51
1930-31	£500.00	£41.67	£0.43
1929-30	£400.00	£33.33	£0.34
1928-29	£300.00	£25.00	£0.26
1927-28	£200.00	£16.67	£0.17
1926-27	£100.00	£8.33	£0.09
1925-26	£50.00	£4.17	£0.04
1924-25	£25.00	£2.08	£0.02
1923-24	£12.50	£1.04	£0.01
1922-23	£6.25	£0.52	£0.00
1921-22	£3.12	£0.26	£0.00
1920-21	£1.56	£0.13	£0.00
1919-20	£0.78	£0.06	£0.00
1918-19	£0.39	£0.03	£0.00
1917-18	£0.19	£0.02	£0.00
1916-17	£0.09	£0.01	£0.00
1915-16	£0.05	£0.00	£0.00
1914-15	£0.02	£0.00	£0.00
1913-14	£0.01	£0.00	£0.00
1912-13	£0.00	£0.00	£0.00
1911-12	£0.00	£0.00	£0.00
1910-11	£0.00	£0.00	£0.00
1909-10	£0.00	£0.00	£0.00
1908-09	£0.00	£0.00	£0.00
1907-08	£0.00	£0.00	£0.00
1906-07	£0.00	£0.00	£0.00
1905-06	£0.00	£0.00	£0.00
1904-05	£0.00	£0.00	£0.00
1903-04	£0.00	£0.00	£0.00
1902-03	£0.00	£0.00	£0.00
1901-02	£0.00	£0.00	£0.00
1900-01	£0.00	£0.00	£0.00









## APPENDICES.

## APPENDIX A.—VITAL STATISTICS.

## APPENDIX A.—TABLE I.

## VITAL STATISTICS OF WHOLE DISTRICT DURING 1938 AND PREVIOUS YEARS; VITAL STATISTICS OF THE WARDS DURING 1938.

YEAR.	Population estimated to Middle of each Year. Whole District.	BIRTHS.			TOTAL DEATHS REGISTERED IN THE DISTRICT.		TRANSFERABLE DEATHS		NETT DEATHS BELONGING TO THE DISTRICT.			
		Un-corrected Number.	Nett.		Number.	Rate per 1,000 population.	of non-residents registered in the District.	of residents not registered in the District.	Under 1 Year of Age.		At all Ages.	
			Number.	Rate per 1,000 population.					Number.	Rate per 1,000 Nett Births.	Number.	Rate per 1,000 population.
1911 ...	156,572	3,863	4,001	25·6	1,618	10·3	10	240	495	124	1,848	11·8
1912 ...	159,868	3,912	4,075	25·5	1,307	8·7	27	233	328	80	1,603	10·02
1913 ...	163,644	3,891	4,037	24·7	1,449	8·9	23	251	325	80	1,677	10·24
1914 ...	166,634	3,971	4,115	24·7	1,501	9·0	32	283	337	82	1,752	10·51
1915 ...	166,840	3,641	3,775	22·6	1,792	10·7	44	282	344	91	2,030	12·16
1916 ...	167,810	3,557	3,668	21·9	1,436	8·55	34	308	283	77	1,710	10·19
1917 ...	169,344	2,704	2,816	16·6	1,571	9·27	45	292	309	110	1,818	10·73
1918 ...	169,358	2,520	2,651	15·65	1,975	11·66	35	338	258	97	2,278	13·45
1919 ...	170,625	2,843	2,924	17·13	1,519	8·90	39	286	242	83	1,766	10·35
1920 ...	170,892	4,203	4,232	24·76	1,427	8·35	50	295	274	65	1,672	9·78
1921 ...	165,674*	3,442	3,464	20·91	1,469	8·87	54	262	255	74	1,677	10·12
1922 ...	168,900	3,106	3,160	18·71	1,570	9·30	59	273	188	59	1,784	10·56
1923 ...	169,831	2,977	3,063	18·04	1,380	8·13	72	280	162	53	1,588	9·35
1924 ...	171,161	2,685	2,843	16·61	1,574	9·20	78	286	208	73	1,782	10·41
1925 ...	172,503	2,552	2,755	15·97	1,465	8·49	83	304	170	62	1,686	9·77
1926 ...	173,854	2,444	2,700	15·53	1,422	8·18	88	319	143	53	1,653	9·51
1927 ...	175,217	2,286	2,568	14·66	1,513	8·64	78	296	151	59	1,731	9·88
1928 ...	176,589	2,326	2,666	15·10	1,509	8·55	79	298	151	57	1,727	9·78
1929 ...	177,973	2,318	2,714	15·25	1,787	10·04	107	339	165	61	2,019	11·34
1930 ...	179,368	2,462	2,869	15·99	1,518	8·46	83	327	175	61	1,762	9·82
1931 ...	185,704	2,066	2,838	15·28	1,676	9·03	133	392	171	60	1,935	10·42
1932 ...	188,216	1,945	2,745	14·58	1,653	8·78	163	348	168	61	1,838	9·77
1933 ...	190,875	1,855	2,671	13·99	1,716	8·99	213	383	123	46	1,885	9·88
1934 ...	195,295	1,924	2,743	14·05	1,908	9·77	322	354	119	43	1,940	9·93
1935 ...	198,433	1,883	2,848	14·35	1,987	10·01	438	384	188	66	1,933	9·74
1936 ...	202,505	1,919	2,835	14·00	2,156	10·65	436	393	170	60	2,113	10·43
1937 ...	203,385	1,943	3,058	15·04	2,042	10·04	465	403	197	64	1,979	9·73
1938 ...	203,734	1,815	2,968	14·57	1,880	9·23	406	367	160	54	1,841	9·04

\* Census population—Re-adjusted by Registrar-General to 167,200.

## WARDS.

1. Carlton	18,152	238	340	18·73	164	9·03	—	66	24	70·59	230	12·67
2. Kilburn	16,410	124	249	15·17	113	6·89	—	41	16	64·26	154	9·38
3. Bron-desbury Park	11,687	61	151	12·92	96	8·21	9	27	3	19·87	114	9·75
4. Kensal Rise	13,368	80	169	12·64	108	8·08	1	20	4	23·67	127	9·50
5. Manor	13,510	92	179	13·25	97	7·18	—	20	8	44·69	117	8·66
6. Harl'n	16,332	135	240	14·70	151	9·25	25	26	18	75·00	152	9·31
7. Stone-bridge	18,441	461	255	13·83	451	24·46	327	16	14	54·90	140	7·59
8. Round-wood	13,437	149	278	20·69	125	9·30	—	19	22	79·14	144	10·72
9. Church End	15,929	104	232	14·56	118	7·41	2	22	9	38·79	138	8·66
10. Wille'n Green	14,042	136	275	19·58	152	10·82	—	31	23	83·64	183	13·03
11. Mapes-bury	20,199	107	240	11·88	141	6·98	5	38	5	20·83	174	8·61
12. Neas-den	14,195	58	167	11·76	50	3·52	1	20	6	35·93	69	4·86
13. Crickle-wood	18,032	70	193	10·70	114	6·32	36	21	8	41·45	99	5·49

Area of District in acres (land and inland water) ... 4,632·5

Total population at all ages ... † 185,300 at Census, 1931.

† Re-adjusted by the Registrar-General to 185,300 from 184,410 because of movement of population.

APPENDIX A.—TABLE II.—DEATHS OF WILLESDEN RESIDENTS DURING THE YEAR 1938.

CAUSE OF DEATH. (1)	All Ages. (2)	0	1	5	10	15	20	25	35	45	55	65	75	85	Total deaths, whether of "Residents" or "Non-Resi- dents" in Institutions in the District. (16)
		to 1 (3)	to 5 (4)	to 10 (5)	to 15 (6)	to 20 (7)	to 25 (8)	to 35 (9)	to 45 (10)	to 55 (11)	to 65 (12)	to 75 (13)	to 85 (14)	Up. (15)	
All Causes. { Certified ... .. { Uncertified ... ..	1,839 2	159 1	42 —	8 —	10 —	24 —	46 —	92 —	97 —	180 —	295 —	429 1	344 —	113 —	1,225 —
<i>1.—Infectious and Parasitic Diseases.</i>															
Typhoid Fever ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Paratyphoid Fever ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Typhus Fever ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Relapsing Fever ("Spirillum Obermeieri") ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Undulant Fever ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Small Pox ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles ... ..	6	2	3	—	—	—	—	—	1	—	—	—	—	—	6
Scarlet Fever ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Whooping Cough ... ..	3	2	1	—	—	—	—	—	—	—	—	—	—	—	2
Diphtheria ... ..	8	1	4	2	—	—	—	—	—	1	—	—	—	—	8
Influenza ... ..	9	1	1	—	—	—	—	—	1	1	1	1	—	3	1
Cholera ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Dysentery ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Plague ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Erysipelas ... ..	2	1	—	—	—	—	—	—	—	—	—	—	—	—	3
Acute Poliomyelitis ... ..	1	—	—	—	—	—	—	—	—	—	—	1	—	—	1
Encephalitis Lethargica ... ..	3	—	—	—	—	—	—	—	1	—	1	—	—	1	2
Cerebro-spinal Fever ... ..	4	1	—	—	1	—	—	—	1	—	1	—	—	—	4
Glanders ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Anthrax ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Rabies ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Tetanus ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Tuberculosis of the Respiratory System ... ..	101	—	1	1	—	5	22	26	13	15	11	6	1	—	62
Tuberculosis of the Central Nervous System ... ..	6	—	3	1	—	—	—	—	1	—	—	—	—	—	7
Tuberculosis of the intestines and peritoneum ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Tuberculosis of the vertebral column ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Tuberculosis of other bones and joints ... ..	1	—	—	—	—	—	—	—	1	—	—	—	—	—	—
Tuberculosis of skin and subcutaneous tissues ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Tuberculosis of lymphatic system (abdominal and bronchial glands excepted) ... ..	1	—	—	—	—	—	—	—	—	—	—	1	—	—	—
Tuberculosis of genito-urinary system ... ..	1	—	—	—	—	—	—	—	—	1	—	—	—	—	2





APPENDIX A.—TABLE II.—DEATHS OF WILLESSEN RESIDENTS (continued).

CAUSE OF DEATH. (1)	All Ages. (2)	0 to 1 (3)	1 to 5 (4)	5 to 10 (5)	10 to 15 (6)	15 to 20 (7)	20 to 25 (8)	25 to 35 (9)	35 to 45 (10)	45 to 55 (11)	55 to 65 (12)	65 to 75 (13)	75 to 85 (14)	85 Up (15)	Total deaths, whether of "Residents" or "Non-Resi- dents," in Institutions in the District. (16)
<i>4.—Diseases of the Blood and Blood-forming Organs.</i>															
Hæmorrhagic conditions... ..	1	—	—	—	—	—	—	—	1	—	—	—	—	—	1
Anæmia Chlorosis ... ..	7	—	—	—	—	—	1	—	—	1	1	2	2	—	3
Leukæmia, Aleukæmia ... ..	1	—	—	—	—	—	—	—	—	—	1	—	—	—	3
Diseases of the Spleen ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2
Other diseases of the blood and blood-forming organs ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
<i>5.—Chronic Poisoning.</i>															
Alcoholism (acute or chronic) ... ..	1	—	—	—	—	—	—	—	1	—	—	—	—	—	—
Chronic poisoning by other organic substances	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Chronic poisoning by mineral substances ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
<i>6.—Diseases of the Nervous System and Sense Organs.</i>															
Encephalitis ... ..	1	—	—	—	—	1	—	—	—	—	—	—	—	—	1
Meningitis ... ..	2	—	—	—	—	—	—	—	1	—	1	—	—	—	5
Tabes Dorsalis (Locomotor ataxy) ... ..	2	—	—	—	—	—	—	—	—	—	1	—	—	1	1
Other diseases of the spinal cord ... ..	7	—	—	—	—	—	—	1	1	3	1	1	—	—	4
Cerebral hæmorrhage, Apoplexy, etc. ... ..	71	1	—	—	—	—	—	2	1	4	14	26	19	4	60
General Paralysis of the Insane ... ..	2	—	—	—	—	—	—	—	1	1	—	—	—	—	2
Other forms of Insanity ... ..	5	—	—	—	—	—	—	—	2	1	2	—	—	—	—
Epilepsy ... ..	7	—	—	—	—	1	1	—	—	—	1	1	3	—	6
Infantile convulsions (under 5 years of age) ...	1	—	1	—	—	—	—	—	—	—	—	—	—	—	1
Other diseases of the nervous system ... ..	9	—	—	—	—	—	1	—	—	1	1	3	3	—	6
Diseases of the eye and annexa ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diseases of the ear and of the mastoid sinus ...	8	3	1	—	—	—	—	2	2	—	—	—	—	—	9
<i>7.—Diseases of the Circulatory System.</i>															
Pericarditis ... ..	1	—	—	—	—	—	—	1	—	—	—	—	—	—	2
Acute endocarditis ... ..	8	—	—	1	—	1	—	3	1	1	—	1	—	—	3
Chronic endocarditis, Valvular disease... ..	43	—	—	—	—	—	2	2	3	8	4	15	9	—	13
Diseases of the Myocardium ... ..	216	—	—	—	—	1	—	1	1	8	36	63	70	36	51



Diseases of the coronary arteries, Angina pectoris ... ..	54	—	—	—	—	—	—	—	4	7	9	28	6	—	22
Other diseases of the heart ... ..	26	—	—	—	—	—	—	—	2	2	4	8	6	4	16
Aneurysm ... ..	12	—	—	—	2	—	—	—	—	1	4	4	—	1	9
Arterio-sclerosis ... ..	101	—	—	—	—	—	—	—	—	4	10	37	39	11	53
Gangrene ... ..	2	—	—	—	—	—	—	—	—	—	1	1	—	—	2
Other diseases of the arteries ... ..	3	—	—	—	—	—	—	1	1	—	—	—	1	—	2
Diseases of the veins (varix, hæmorrhoids, phlebitis, etc.) ... ..	1	—	—	—	—	—	—	—	—	1	—	—	—	—	—
Diseases of the lymphatic system (lymphangitis, etc.) ... ..	1	—	—	—	—	—	—	—	1	—	—	—	—	—	1
Abnormalities of blood pressure ... ..	9	—	—	—	—	—	—	—	—	2	2	3	2	—	12
Other diseases of the circulatory system ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
<b>8.—Diseases of the Respiratory System.</b>															
Diseases of the nasal fossæ and annexa ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2
Diseases of the larynx ... ..	1	—	1	—	—	—	—	—	—	—	—	—	—	—	1
Bronchitis ... ..	55	2	—	—	—	—	—	1	—	4	9	6	24	9	19
Broncho-Pneumonia ... ..	87	19	7	—	—	3	2	3	5	7	18	16	7	—	86
Lobar Pneumonia ... ..	50	—	2	—	1	2	6	4	8	10	9	8	—	—	41
Pneumonia (not otherwise defined) ... ..	9	2	1	—	—	—	2	1	—	1	—	2	—	—	2
Pleurisy ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Congestion and hæmorrhage infarct of lung, etc.	4	—	—	—	—	—	—	—	1	—	—	2	1	—	3
Asthma ... ..	5	—	—	—	—	—	—	—	1	2	1	—	1	—	5
Pulmonary Emphysema ... ..	2	—	—	—	—	—	—	—	—	—	1	—	—	1	2
Other diseases of the respiratory system ... ..	3	—	—	—	—	—	1	—	1	1	—	—	—	—	3
<b>9.—Diseases of the Digestive System.</b>															
Diseases of the buccal cavity, pharynx, etc. ... ..	2	—	—	—	—	—	—	—	—	1	—	—	1	—	4
Diseases of the œsophagus ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Ulcer of the stomach or duodenum ... ..	25	—	—	—	—	—	—	1	4	4	11	4	—	1	29
Other diseases of the stomach ... ..	1	—	—	—	—	—	—	—	—	—	—	—	1	—	3
Diarrhœa and Enteritis ... ..	45	31	4	—	—	2	—	—	1	2	4	—	—	1	34
Appendicitis ... ..	11	—	—	1	2	2	—	2	—	1	1	2	—	—	13
Hernia, Intestinal obstruction ... ..	16	—	2	—	—	—	—	1	2	—	3	6	2	—	18
Other diseases of the intestines ... ..	2	—	—	—	—	—	—	—	—	—	—	—	2	—	3
Cirrhosis of the Liver ... ..	4	—	—	—	1	—	—	—	—	1	—	1	1	—	2
Other diseases of the Liver ... ..	2	—	—	—	—	—	—	—	1	1	—	—	—	—	1
Biliary calculi ... ..	1	—	—	—	—	—	—	—	—	—	—	1	—	—	3
Other diseases of the gall bladder and ducts ... ..	3	—	—	—	—	—	—	—	—	1	—	1	1	—	3
Diseases of the pancreas ... ..	1	—	—	—	—	—	—	—	—	—	1	—	—	—	3
Peritonitis without stated cause ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

APPENDIX A.—TABLE II.—DEATHS OF WILLESDEN RESIDENTS (continued).

CAUSE OF DEATH. (1)	All Ages. (2)	0 to 1 (3)	1 to 5 (4)	5 to 10 (5)	10 to 15 (6)	15 to 20 (7)	20 to 25 (8)	25 to 35 (9)	35 to 45 (10)	45 to 55 (11)	55 to 65 (12)	65 to 75 (13)	75 to 85 (14)	85 Up. (15)	Total deaths, whether of "Residents" or "Non-Residents," in Institutions in the District. (16)
<i>10.—Non-Veneral Diseases of the Genito-urinary System and Annexa.</i>															
Acute nephritis ... ..	4	—	—	—	—	1	—	1	—	1	1	—	—	—	4
Chronic nephritis ... ..	44	—	—	—	—	1	—	2	2	6	10	14	6	3	18
Nephritis not stated to be acute or chronic ... ..	3	—	—	—	—	—	—	—	—	—	1	2	—	—	3
Other diseases of the kidney and annexa ... ..	10	3	—	—	—	—	—	—	—	—	3	3	1	—	8
Calculi of the urinary passages ... ..	2	—	—	—	—	—	—	1	—	1	—	—	—	—	1
Diseases of the bladder ... ..	5	—	—	—	—	—	—	—	—	—	1	—	3	1	4
Diseases of the urethra, urinary abscess, etc. ... ..	1	—	—	—	—	—	—	—	—	—	—	1	—	—	1
Diseases of the prostate ... ..	18	—	—	—	—	—	—	—	—	1	1	8	8	—	22
Diseases of the male genital organs ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diseases of the female genital organs ... ..	5	—	—	—	—	—	1	1	—	2	1	—	—	—	5
<i>11.—Diseases of Pregnancy, Childbirth and the Puerperal State.</i>															
Post-abortive sepsis ... ..	2	—	—	—	—	—	1	—	1	—	—	—	—	—	3
Abortion not returned as septic ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Ectopic gestation ... ..	1	—	—	—	—	—	—	—	1	—	—	—	—	—	1
Other accidents of pregnancy ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal hæmorrhage ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal sepsis ... ..	1	—	—	—	—	—	—	1	—	—	—	—	—	—	1
Puerperal albuminuria and convulsions ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other toxæmias of pregnancy ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Puerperal phlegmasia alba dolens, embolism, and sudden death ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Other accidents of childbirth ... ..	1	—	—	—	—	—	—	1	—	—	—	—	—	—	1
Other or unspecified conditions of the puerperal state ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
<i>12.—Diseases of the Skin and Cellular Tissue.</i>															
Carbuncle, Boil ... ..	3	—	—	—	—	—	—	1	—	—	—	2	—	—	5
Cellulitis, Acute abscess ... ..	1	1	—	—	—	—	—	—	—	—	—	—	—	—	3
Other diseases of the skin and its annexa ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—



	1900	1901	1902	1903	1904	1905	1906	1907	1908	1909	1910	1911	1912	1913	1914	1915	1916	1917	1918	1919	1920	Total
<b>13.—Diseases of the Bones and Organs of Locomotion.</b>																						
Acute infective osteomyelitis and periostitis ...	1	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	3
Other diseases of the bones ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Diseases of the joints and other organs of locomotion ...	1	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	1
<b>14.—Congenital Malformation.</b>																						
Congenital malformations ...	25	22	1	—	—	1	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	14
<b>15.—Diseases of Early Infancy.</b>																						
Congenital debility ...	3	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2
Premature birth ...	40	40	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	33
Injury at birth ...	5	5	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	4
Other diseases peculiar to early infancy ...	9	9	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	4
<b>16.—Old Age.</b>																						
Old age ...	70	—	—	—	—	—	—	—	—	—	—	—	1	6	39	24	—	—	—	—	—	61
<b>17.—Deaths from Violence.</b>																						
Suicide by solid or liquid poisons and corrosive substances ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Suicide by poisonous gas ...	12	—	—	—	—	—	1	2	1	5	1	2	—	—	—	—	—	—	—	—	—	—
Suicide by hanging or strangulation ...	3	—	—	—	—	—	—	—	—	—	1	2	—	—	—	—	—	—	—	—	—	—
Suicide by drowning ...	3	—	—	—	—	—	—	—	—	1	2	—	—	—	—	—	—	—	—	—	—	—
Suicide by firearms ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Suicide by cutting or piercing instruments ...	2	—	—	—	—	—	—	—	—	—	—	—	1	1	—	—	—	—	—	—	—	—
Suicide by jumping from high place ...	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Suicide by crushing ...	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Suicide by other means ...	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Infanticide (under one year) ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Homicide by firearms ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Homicide by cutting or piercing instruments ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Homicide by other means ...	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Attack by venomous animals ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Food poisoning ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Accidental absorption of irrespirable or poisonous gas ...	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other acute accidental poisoning (not by gas) ...	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Conflagration ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Accidental burns (Conflagration excepted) ...	3	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Accidental mechanical suffocation ...	3	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

APPENDIX A.—TABLE II.—DEATHS OF WILLESDEN RESIDENTS (continued).

CAUSE OF DEATH. (1)	All Ages. (2)	0	1	5	10	15	20	25	35	45	55	65	75	85	Total deaths, whether of "Residents" or "Non-Resi- dents," in Institutions in the District. (16)
		to 1 (3)	to 5 (4)	to 10 (5)	to 15 (6)	to 20 (7)	to 25 (8)	to 35 (9)	to 45 (10)	to 55 (11)	to 65 (12)	to 75 (13)	to 85 (14)	Up. (15)	
Accidental drowning ... ..	2	—	1	—	1	—	—	—	—	—	—	—	—	—	1
Accidental injury by firearms ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Accidental injury by cutting or piercing instru- ments ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Accidental injury by fall, crushing, etc. ... ..	36	—	2	1	—	3	4	7	1	1	5	5	6	1	28
Cataclysm ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Injury by animals (poisoning by venomous animals excepted) ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Hunger or thirst ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Excessive cold ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Excessive heat ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Lightning ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Electricity (lightning excepted) ... ..	1	—	—	—	—	—	—	1	—	—	—	—	—	—	—
Other and un stated forms of accidental violence	5	4	—	—	—	—	—	—	—	—	—	1	—	—	1
Violent deaths of un stated nature (i.e., acci- dental, suicidal, etc.) ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Wounds of war ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Execution of civilians by belligerent armies ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Execution ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
<i>18.—Ill-Defined Diseases.</i>															
Sudden death ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Cause of death un stated or ill-defined ... ..	3	—	1	—	—	—	—	—	—	—	—	1	1	—	2
	1,841	160	42	8	10	24	46	92	97	180	295	430	344	113	1,225



## APPENDIX A.—TABLE II (A).

CAUSES OF DEATH IN BOROUGH OF WILLESDEN AS CIRCULATED  
BY REGISTRAR-GENERAL.—1938.

Causes of Death.	M.	F.
All Causes ... ..	944	907
1. Typhoid and paratyphoid fevers ... ..	—	—
2. Measles ... ..	3	3
3. Scarlet fever ... ..	—	—
4. Whooping cough ... ..	1	2
5. Diphtheria ... ..	2	5
6. Influenza ... ..	5	4
7. Encephalitis lethargica ... ..	—	3
8. Cerebro-spinal fever ... ..	3	1
9. Respiratory tuberculosis ... ..	53	49
10. Other tuberculosis ... ..	7	9
11. Syphilis ... ..	3	2
12. General paralysis of the insane, etc. ... ..	3	1
13. Cancer ... ..	163	167
14. Diabetes ... ..	9	17
15. Cerebral hæmorrhage ... ..	28	38
16. Heart disease ... ..	176	184
17. Aneurysm ... ..	9	3
18. Other circulatory diseases ... ..	60	48
19. Bronchitis ... ..	28	30
20. Pneumonia ... ..	95	58
21. Other respiratory diseases ... ..	7	7
22. Peptic ulcer ... ..	16	9
23. Diarrhœa, etc. (under 2 years) ... ..	21	9
24. Appendicitis ... ..	6	5
25. Cirrhosis of liver ... ..	4	2
26. Other diseases of liver ... ..	5	1
27. Other digestive diseases ... ..	17	26
28. Nephritis ... ..	29	32
29. Puerperal sepsis ... ..	—	3
30. Other puerperal causes ... ..	—	2
31. Congenital causes, etc. ... ..	55	31
32. Senility ... ..	29	37
33. Suicide ... ..	14	10
34. Other violence ... ..	31	28
35. Other defined causes ... ..	62	81
36. Ill-defined causes ... ..	—	—
Special Causes (included in No. 35 above) :—		
Small-pox ... ..	—	—
Poliomyelitis ... ..	—	—
Polioencephalitis ... ..	—	1
Anthrax ... ..	—	—
Deaths of Infants under 1 year { Total ... ..	108	55
{ Legitimate ... ..	95	46
{ Illegitimate ... ..	13	9





APPENDIX A. TABLE III.—INFANT MORTALITY DURING 1938.

Net Deaths from Stated Causes at various ages under 1 year of age.

Net Deaths from all causes under 1 year of age classified in Wards.

Cause of Death. (1)	Net Deaths from Stated Causes at various ages under 1 year of age.										Net Deaths from all causes under 1 year of age classified in Wards.													
	Under 1 Week. (2)	1-2 Weeks. (3)	2-3 Weeks. (4)	3-4 Weeks. (5)	Total under 4 Weeks. (6)	4 Weeks and under 2 Months. (7)	3 Months and under 6 Months. (8)	6 Months and under 9 Months. (9)	9 Months and under 12 months. (10)	Total Deaths under 1 Year. (11)	Carlton. (12)	Kilburn. (13)	Brondesbury Park. (14)	Kensal Rise. (15)	Manor. (16)	Harlesden. (17)	Stonebridge. (18)	Roundwood. (19)	Church End. (20)	Willesden Green. (21)	Mapesbury. (22)	Neasden. (23)	Cricklewood. (24)	
All Causes { Certified ... .. Uncertified ... ..	51 1	13 —	5 —	2 —	71 1	37 —	28 —	15 —	8 —	159 1	23 1	16 —	3 —	4 —	8 —	18 —	14 —	22 —	9 —	23 —	5 —	6 —	8 —	
Small Pox ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Chicken Pox ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Scarlet Fever ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Whooping Cough ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria and Croup ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Erysipelas ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Tuberculous Meningitis ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Abdominal Tuberculosis (a) ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other Tuberculous Diseases ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Meningitis (not Tuberculous) ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Convulsions ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Laryngitis ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Bronchitis ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Pneumonia (all forms) ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diarrhoea ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Enteritis ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Gastritis ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Syphilis ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Rickets ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Suffocation, overlying ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Injury at birth ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Atelectasis ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Congenital Malformations (b) ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Premature Birth ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Atrophy, Debility and Marasmus ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other Causes ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Total Deaths ... ..	52	13	5	2	72	37	28	15	8	160	24	16	3	4	8	18	14	22	9	23	5	6	8	
Deaths—Legitimate ... ..	50	10	5	1	66	26	25	14	8	139	22	10	3	2	6	14	13	21	9	21	4	6	8	
Illegitimate ... ..	2	3	—	1	6	11	3	1	—	21	2	6	—	2	2	4	1	1	—	2	1	—	—	
Births—Legitimate ... ..	—	—	—	—	—	—	—	—	—	2,849	317	233	148	162	174	230	249	270	224	266	224	164	188	
Illegitimate ... ..	—	—	—	—	—	—	—	—	—	119	23	16	3	7	5	10	6	8	8	9	16	3	5	
Total Births ... ..	—	—	—	—	—	—	—	—	—	2,968	340	249	151	169	179	240	255	278	232	275	240	167	193	
Infant Mortality Rate—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Legitimate ... ..	—	—	—	—	—	—	—	—	—	48.79	69.40	42.92	20.27	12.35	34.48	60.87	52.21	77.78	40.18	78.95	17.86	36.59	42.55	
Illegitimate ... ..	—	—	—	—	—	—	—	—	—	176.47	86.96	375.00	—	285.71	400.00	400.00	166.67	125.00	—	222.22	62.50	—	—	
Infant Mortality Rate ... ..	—	—	—	—	—	—	—	—	—	53.91	70.59	64.26	19.87	23.67	44.69	75.00	45.90	79.14	38.79	83.64	20.83	35.93	41.45	
Population ... ..	—	—	—	—	—	—	—	—	—	203,734	18,152	16,410	11,687	13,368	13,510	16,332	18,441	13,437	15,929	14,042	20,199	14,195	18,032	

(a) Under Abdominal Tuberculosis are included Deaths from Tuberculous Peritonitis, and Enteritis, and from Tabes Mesenterica.  
(b) Want of Breast Milk is included under Atrophy and Debility.

APPENDIX A—TABLE IV.—CASES OF INFECTIOUS DISEASE NOTIFIED DURING THE YEAR 1938.

NOTIFIABLE DISEASE.	Number of Cases Notified.													Total Cases Notified in each Ward.													
	At all Ages.	At ages—Years.												Carlton.	Kilburn.	Brondesbury Park.	Kensal Rise.	Manor.	Harlesden.	Stonebridge.	Roundwood.	Church End.	Willesden Green.	Mapesbury.	Neasden.	Cricklewood.	Total Cases removed to Willesden Municipal Hospital.
		Under 1.	1 and under 2.	2 and under 3.	3 and under 4.	4 and under 5.	5 and under 10.	10 and under 15.	15 and under 20.	20 and under 35.	35 and under 45.	45 and under 65.	65 and over.														
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)	(20)	(21)	(22)	(23)	(24)	(25)	(26)	(27)	(28)
Smallpox ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Cholera (C) Plague (P) ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria (including Membranous Croup).	415	3	16	18	27	48	181	64	21	27	3	5	2	60	21	18	10	3	33	85	77	47	19	11	17	14	397
Erysipelas... ..	72	6	2	1	2	1	3	2	2	14	7	15	17	11	3	3	2	4	9	9	8	6	4	4	5	4	30
Scarlet fever ... ..	371	5	8	30	25	36	149	56	16	32	12	2	—	46	28	20	31	7	19	30	35	35	50	21	28	21	322
Typhus fever ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Enteric fever ... ..	11	—	—	—	—	—	—	1	3	2	3	1	1	—	1	1	1	2	1	1	—	—	—	—	2	2	8
Relapsing fever (R) ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal pyrexia ... ..	47	—	—	—	—	—	—	—	5	36	5	1	—	8	7	1	1	2	3	10	4	—	4	3	2	2	6
Cerebro-spinal meningitis	19	3	4	1	—	1	3	1	2	2	1	1	—	4	—	1	—	2	1	3	1	2	3	2	—	—	14
Poliomyelitis ... ..	4	—	—	2	—	—	1	1	—	—	—	—	—	—	1	—	—	—	—	2	—	—	—	1	—	—	—
Ophthalmia neonatorum	26	26	—	—	—	—	—	—	—	—	—	—	—	2	2	—	2	2	3	4	1	1	5	3	—	1	11
Pulmonary tuberculosis...	241	—	3	1	—	1	10	8	24	104	34	46	10	38	24	17	22	12	17	19	23	11	12	17	10	19	—
Other forms of tuberculosis	62	—	2	2	3	—	5	5	10	22	5	6	2	10	8	8	6	4	1	6	6	4	1	5	2	1	—
Whooping cough ... ..	277	32	33	35	31	25	113	4	—	2	1	1	—	25	40	17	30	18	19	10	23	9	27	27	17	15	19
Pneumonia ... ..	284	10	18	12	10	13	36	10	14	52	26	49	34	47	15	12	20	14	22	52	31	19	25	13	5	9	7
Malaria ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Dysentery... ..	37	2	4	3	2	3	6	2	—	9	—	6	—	4	3	2	1	—	4	4	3	3	10	1	1	1	10
Encephalitis lethargica ...	1	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	1	—	—
Acute polio-encephalitis...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Anthrax ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Totals ... ..	1,867	87	90	105	100	128	507	154	97	302	97	133	67	255	153	100	126	70	132	235	212	137	160	108	90	89	824



## APPENDIX B.

SHOWING ACTS OF PARLIAMENT, LOCAL GOVERNMENT ORDERS, MEMORANDA, AND CIRCULAR LETTERS ISSUED BY GOVERNMENT DEPARTMENTS WITH REGARD TO THE PUBLIC HEALTH, MATERNITY AND CHILD WELFARE AND SCHOOL MEDICAL SERVICES DURING THE YEAR 1938.

*Statutes :—*

- Increase of Rent and Mortgage Interest (Restrictions) Act, 1938.  
 Housing (Rural Workers) Amendment Act, 1938.  
 Children and Young Persons Act, 1938.  
 Mental Deficiency Act, 1938.  
 Food and Drugs Act, 1938.

*Ministry of Health :—**Circulars :—*

- No. 1674.—Registration of Nursing Homes.  
 No. 1678.—Midwives Act, 1936.  
 No. 1693.—Midwifery Training.  
 No. 1677.—Public Health (Aircraft) Regulations, 1938.  
 No. 1675.—Public Health (Imported Food) Regulations, 1937.  
 No. 1681.—1. Blind Persons Bill.  
 No. 1684.—Water Supplies.  
 No. 1690.—Public Health (Imported Food) Regulations, 1937.  
 No. 1694.—Health Visitors : Training.  
     Bacteriological Investigation with reference to puerperal sepsis.  
 No. 1702.—Departmental Committee on the cost of hospitals.  
 No. 1709.—Increase of Rent and Mortgage Interest (Restrictions) Act, 1938.  
 No. 1695.—Interference with Radio receptions caused by electro medical apparatus.  
 No. 1707.—Public Health (Imported Food) Regulations, 1937.  
 No. 1705.—Maternal Mortality.  
 No. 1724.—Small Pox.  
 No. 1740.—Report on the Management of Municipal Housing Estates.  
 No. 1741.—Public Health (Imported Food) Regulations, 1937.  
 No. 1755.—Food and Drugs Act, 1938.  
 No. 1727.—Public Health (Imported Food) Regulations, 1937.  
 No. 1719.—Public Health (Imported Food) Regulations, 1937.  
 No. 1716.—Housing (Rural Workers) Amendment Act, 1938.  
 No. 1714.—Midwives Act, 1936.

*Orders :—*

- No. 217.—The Milk and Dairies Amendment Order, 1938.  
 No. 218.—The Milk (Special Designations) Amendment Order, 1938.  
 No. 689.—The Midwives (Certifying Hospitals and Institutions) Order (No. 2), 1938.

*Memoranda :—*

- 211/M.C.W.—Conditions upon which Grants will be made in aid of Midwifery Training.  
     Duties of Local Authorities under the Factories Act, 1937.  
 No. 215/Med.—Small Pox.

*Regulations :—*

No. 32.—The Public Health (Nursing Homes Registration Forms) Regulations, 1938.

No. 299.—The Public Health (Aircraft) Regulations, 1938.

*Home Office :—**Rules :—*

The Poisons (Amendment) Rules, 1938.

*Regulations :—*

No. 611.—The Sanitary Accommodation Regulations, 1938.

*Orders :—*

The Poisons List (Amendment) Order, 1938.

*Ministry of Agriculture and Fisheries :—**Orders :—*

Rabies Order, 1938.

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**APPENDIX C.**

**REPORT ON DERMATOLOGICAL AND ACTINOTHERAPEUTIC DEPARTMENT FOR THE  
YEAR ENDED 31st DECEMBER, 1938.**

By H. D. HALDIN-DAVIS, M.D., F.R.C.P., F.R.C.S.

The chief development which has taken place in the work of the dermatological department during 1938, is that arrangements have been made for doing minor operations in the department, and we are now able to deal with various cases such as plantar warts, naevi, etc., ourselves, instead of having to send them on to hospitals to be treated. The diathermy apparatus has been extremely useful. The total number of anæsthetics administered during the year is 44.

Clinically, an outstanding feature is the large number of cases of warts, both of the hands and feet, and also in other situations, which have presented themselves for treatment during the last year. There is no doubt that this complaint is far more frequent among children than it used to be, and Willesden is by no means the only Borough where the increase has been noted. Fortunately warts are not difficult to deal with, and can be cured satisfactorily in every case if surgical measures are employed. They are, however, disfiguring, and sometimes persist for a good many months if only treated with caustics and other local applications.

The clinic for the treatment of varicose ulcers has now been in existence eight years, and has undoubtedly brought relief and, in many cases, cure, to numbers of the working women of the Borough. We no longer see the terrible cases of large ulcers which were not uncommon in its early days.



ARTIFICIAL SUNLIGHT TREATMENT, 1938.

Conditions.	Cases brought forward from 1937, i.e., Treatments, Waiting List Observation Cases.		New Cases.		Total Cases Treated.		Discharged not Treated, i.e., Unable to attend, Unsuitable, Left District		Waiting List.		RESULTS OF TREATMENT.										Cases carried forward to 1938, i.e., Treatments, Waiting List Observation Cases.		Attendances Treated.		
	(1)		(2)		(3)		(4)		(5)		(6)		(7)		(8)		(9)		(10)		(11)		(12)		
	0-5	Sch.	0-5	Sch.	0-5	Sch.	0-5	Sch.	0-5	Sch.	0-5	Sch.	0-5	Sch.	0-5	Sch.	0-5	Sch.	0-5	Sch.	0-5	Sch.	0-5	Sch.	
Pre T.B. ... ..	—	1	1	1	—	2	1	—	—	—	—	—	—	1	—	—	—	—	—	1	—	1	—	48	
	—	1	1	1	—	2	1	—	—	—	—	—	—	1	—	—	—	—	—	1	—	1	—	48	
Debility ... ..	49	39	139	113	165	136	17	14	6	2	1	1	82	68	33	16	7	6	42	45	49	48	2301	2,625	
Anæmia ... ..	—	7	5	10	3	15	2	1	—	1	—	1	7	—	5	—	1	—	2	2	3	44	234		
Rickets ... ..	15	—	37	—	49	—	3	—	—	—	—	—	27	—	10	—	1	—	10	—	11	—	1,103	—	
Enlarged Glands ... ..	—	3	2	4	2	7	—	—	—	—	—	—	3	1	3	—	1	—	1	—	1	—	37	63	
Rheumatism ... ..	—	2	2	4	2	6	—	—	—	—	—	—	3	—	2	—	—	—	2	1	2	1	96	151	
Nerves ... ..	1	2	3	15	3	16	1	1	—	—	—	2	1	4	—	4	—	—	2	6	2	8	43	274	
	85	53	188	146	224	180	23	16	6	3	4	3	111	85	44	30	8	8	57	54	67	60	3,624	3,347	
Chronic Blepharitis ... ..	—	1	2	3	2	3	—	1	—	—	—	—	2	1	—	—	1	—	1	1	—	1	—	12	44
	—	1	2	3	2	3	—	1	—	—	—	—	2	1	—	—	1	—	1	1	—	1	—	12	44
Asthma ... ..	—	4	2	13	2	16	—	—	—	1	—	—	9	1	5	—	—	—	1	2	1	3	19	425	
Bronchitis ... ..	5	13	8	26	11	39	2	—	—	—	—	—	8	14	1	5	—	1	2	19	2	19	199	724	
	5	17	10	39	13	55	2	—	—	1	—	—	8	23	2	10	—	1	3	21	3	22	218	1,149	
Alopecia Areata ... ..	—	2	—	2	—	4	—	—	—	—	—	—	2	—	1	—	—	1	—	—	—	—	—	99	—
Urticaria ... ..	—	—	1	—	1	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	7	—
	—	2	1	2	1	4	—	—	—	—	—	—	1	2	—	1	—	1	—	—	—	—	—	7	99
Enuresis ... ..	2	1	1	4	3	5	—	—	—	—	—	—	1	2	1	1	—	2	1	—	1	—	18	51	
Chilblains ... ..	—	—	—	1	—	1	—	—	—	—	—	—	1	1	—	—	—	2	1	—	—	—	—	12	
Furunculosis ... ..	—	1	—	3	—	4	—	—	—	—	—	—	1	—	—	1	—	—	1	1	—	2	5	47	
Otorrhea ... ..	—	2	1	1	1	3	—	—	—	—	—	—	2	—	—	—	—	1	1	—	1	—	21	62	
Septic Spots ... ..	—	—	—	2	—	2	—	—	—	—	—	—	2	—	—	—	—	—	—	—	—	—	—	23	
Tulipes Valgus ... ..	—	—	1	—	1	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	10	
Genu Valgum ... ..	—	—	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	7	
	2	4	4	11	6	15	—	—	—	—	1	1	7	2	2	—	4	3	1	3	2	51	205		
Total ... ..	72	78	206	202	246	259	26	17	6	4	4	4	121	120	49	43	8	15	64	77	74	85	3,912	4,892	
	150		408		505		43		10		8		241		92		23		141		159		8,804		

TOTAL NUMBER OF ATTENDANCES, YEAR 1938.

	0-5	School.	Total.
Attended and Treated ... ..	3,912	4,892	8,804
Attended for examination, e.g., new cases, cases treated and still under observation, unsuitable cases ... ..	235	258	493
Total ... ..	4,147	5,150	9,297

Total number of sessions ... .. 429  
 Average attendance per session ... .. 22  
 Average treatment per child ... .. 21

CASES REFERRED BY:—

	0-5	School.	Total.
Clinic Doctors ... ..	193	180	373
Private Doctors ... ..	11	18	29
Hospital ... ..	2	4	6
Total ... ..	206	202	408

UNITED STATES DEPARTMENT OF AGRICULTURE

Commodity	1911		1912		1913		1914		1915		Total
	Quantity	Value	Quantity	Value	Quantity	Value	Quantity	Value	Quantity	Value	
Wheat	1,200,000	120,000,000	1,100,000	110,000,000	1,300,000	130,000,000	1,400,000	140,000,000	1,500,000	150,000,000	5,500,000
Corn	800,000	80,000,000	750,000	75,000,000	850,000	85,000,000	900,000	90,000,000	950,000	95,000,000	3,800,000
Oats	600,000	60,000,000	550,000	55,000,000	650,000	65,000,000	700,000	70,000,000	750,000	75,000,000	2,900,000
Barley	400,000	40,000,000	350,000	35,000,000	450,000	45,000,000	500,000	50,000,000	550,000	55,000,000	2,100,000
Rye	200,000	20,000,000	180,000	18,000,000	220,000	22,000,000	250,000	25,000,000	280,000	28,000,000	1,000,000
Other	100,000	10,000,000	120,000	12,000,000	110,000	11,000,000	130,000	13,000,000	140,000	14,000,000	500,000
<b>Total</b>	<b>3,300,000</b>	<b>330,000,000</b>	<b>3,000,000</b>	<b>300,000,000</b>	<b>3,500,000</b>	<b>350,000,000</b>	<b>3,800,000</b>	<b>380,000,000</b>	<b>4,000,000</b>	<b>400,000,000</b>	<b>15,000,000</b>

The above figures are based on the best available information and are subject to revision as more complete data are received.

1911	1,200,000
1912	1,100,000
1913	1,300,000
1914	1,400,000
1915	1,500,000
<b>Total</b>	<b>5,500,000</b>

Value of wheat exports to foreign countries, 1911-1915. The value of wheat exports to foreign countries has increased steadily from 1911 to 1915, with a total value of \$150,000,000 in 1915.

Wheat	1,200,000	120,000,000
Corn	800,000	80,000,000
Oats	600,000	60,000,000
Barley	400,000	40,000,000
Rye	200,000	20,000,000
Other	100,000	10,000,000
<b>Total</b>	<b>3,300,000</b>	<b>330,000,000</b>



## APPENDIX D.

REPORT ON WORK IN THE EYE DEPARTMENT FOR THE YEAR ENDED  
31ST DECEMBER, 1938.By B. R. MEDLYCOTT, D.O.M.S., M.B., B.S. (Lond.), M.R.C.S., L.R.C.P.,  
Ophthalmic Surgeon to the Council.

The total figures for the year are shown below. Those for the preceding seven years are given for comparison.

					<i>Cases seen by</i>	<i>Total attendances.</i>
					<i>Ophthalmic Surgeon.</i>	
1931	...	...	...	...	6,083	6,118
1932	...	...	...	...	7,292	7,303
1933	...	...	...	...	6,323	7,385
1934	...	...	...	...	5,681	6,482
1935	...	...	...	...	5,365	6,404
1936	...	...	...	...	6,015	6,574
1937	...	...	...	...	5,567	6,482
1938	...	...	...	...	5,357	6,533

*Refraction Cases.*

	<i>Appointments made.</i>		<i>Appointments kept.</i>		<i>Percentage Attendance.</i>
1931	...	1,427	...	1,220	85.5%
1932	...	1,782	...	1,546	86.7%
1933	...	1,525	...	1,352	88.7%
1934	...	977	...	858	87.8%
1935	...	831	...	737	88.7%
1936	...	1,055	...	916	86.8%
1937	...	941	...	821	87.2%
1938	...	870	...	741	82.8%

The figures for the year are as follows:—

TABLE I.

	<i>Cases seen by</i>			<i>Number of</i>	<i>Average Number of</i>
	<i>Ophthalmic Surgeon.</i>			<i>Sessions.</i>	<i>Attendances per Session.</i>
Clinic 1	...	...	...	46	38.2
Clinic 2	...	...	...	47	37.9
Clinic 3	...	...	...	48	37.9

*Refraction Cases.*

TABLE II.

	<i>Appts.</i>	<i>Average</i>	<i>Appts.</i>	<i>Average</i>	<i>Percentage</i>
	<i>made.</i>	<i>per Session.</i>	<i>kept.</i>	<i>per Session.</i>	<i>Attendances.</i>
Clinic 1	259	5.6	215	4.6	83.1
Clinic 2	298	6.3	266	5.7	89.3
Clinic 3	313	6.5	260	5.5	83.0

The following table shows an analysis of diseases and congenital abnormalities found in new cases during the year:—

TABLE III.

## DISEASES OF THE EYELIDS, CONJUNCTIVA AND LACHRYMAL APPARATUS.

<i>Disease.</i>	<i>No. of cases.</i>				
	1934	1935	1936	1937	1938
Conjunctivitis	116	164	138	122	135
Hordeolum	18	38	30	23	18
Blepharitis	40	30	48	38	61
Meibomian Cyst	13	18	11	19	7
Sebaceous Cyst	—	1	4	2	1
Injuries and Infections of lids	11	27	26	17	19
Ophthalmia Neonatorum	4	4	3	1	4
Warts	1	1	1	2	—
Subconjunctival Ecchymosis	3	2	9	2	3
Obstruction and Infection of Lachrymal Passages	13	17	28	32	30

Type of Squint.	CONCOMITANT SQUINT.				
	1934	1935	1936	1937	1938
Alternating Convergent ... ..	13	15	26	19	16
Alternating Divergent... ..	1	2	1	1	—
Right Convergent ... ..	48	55	44	43	35
Right Divergent ... ..	3	—	2	3	1
Left Convergent ... ..	86	87	50	68	56
Left Divergent ... ..	3	2	3	5	2
Right Upward ... ..	—	1	—	—	1
Left Upward ... ..	1	1	—	—	—

Disease.	DISEASES OF THE EYEBALL.				
	1934	1935	1936	1937	1938
Corneal Ulcer and Abrasion ... ..	21	12	8	13	15
Interstitial Keratitis ... ..	—	1	1	1	2
Foreign Body ... ..	6	9	9	14	10
Iridocyclitis ... ..	1	—	1	3	—
Cataract ... ..	1	—	—	1	1
Retina (Diseases of) ... ..	3	2	5	3	2
Choroid (Diseases of) ... ..	—	2	1	1	3

Defect.	CONGENITAL MALFORMATIONS.				
	1934	1935	1936	1937	1938
Congenital Nystagmus ... ..	5	5	3	3	5
Microphthalmos ... ..	1	1	3	2	2
Buphthalmos ... ..	1	1	—	—	—
Epicanthus ... ..	2	4	6	2	7
Ptosis ... ..	2	3	2	4	5
Persistent Pupillary Membrane ... ..	1	—	1	2	—
Congenital Cataract ... ..	3	4	2	4	1
Dislocation of Lens ... ..	1	1	1	1	—
Coloboma of Iris ... ..	1	1	—	1	—
Congenital Abnormalities of Retina and Optic Disc ... ..	2	2	2	2	5
Dermoid Cyst ... ..	—	1	1	1	3

Number of cases	NEUROLOGICAL CASES.				
	1934	1935	1936	1937	1938
...	5	4	3	10	5

The following cases were admitted to Hospital for operation or treatment:—

Squint ... ..	8
Ophthalmia Neonatorum ... ..	2
Interstitial Keratitis ... ..	1
Corneal Ulcer ... ..	1
Total ... ..	12

The work of the nursing staff, optician and district visitors has been efficiently maintained.

During the year an important new measure has been introduced, whereby all children suffering from progressive myopia, or any other condition requiring supervision, may continue to receive treatment after leaving school. Although the conditions of their employment render it impossible for some cases to take advantage of this scheme, most parents appreciate the services offered, and are anxious to avail themselves of the extended supervision. As in previous years, several cases of squint have attended the Orthoptic Department of the Royal Westminster Ophthalmic Hospital.

The Council have undertaken to pay the Royal Westminster Ophthalmic Hospital at the rate of £2 2s. per week less contributions received by the Hospital on behalf of the patient for children sent by the Ophthalmic Surgeon for in-patient treatment.



## APPENDIX E.

REPORT ON THE WORK OF THE ORTHOPÆDIC CENTRE FOR THE YEAR ENDED  
31ST DECEMBER, 1938.

By H. J. SEDDON, F.R.C.S., Orthopædic Surgeon to the Council.

The Orthopædic Clinic was opened in June, 1930, and I think the time is opportune for a general review of the work of the department during the eight and one half years of its existence.

To what extent has the incidence of crippling conditions diminished, or the severity of such conditions as continue to appear?

Statistics dealing with admissions to hospital ought to be valuable in this connection; one would expect that preventive work should lead to a gradual fall in the number of patients admitted year by year. Yet examination of these figures has proved inconclusive. Many of the patients requiring hospital treatment were new to the district and came to Willesden with untreated or imperfectly treated disabilities. Another factor is that the surgical treatment of a number of conditions has not stood still during the past eight years, and one cannot say that a group of patients treated in a certain way eight years ago would be dealt with in exactly the same manner to-day. Lastly, there is a group of cases treated at other hospitals and I have no figures dealing with them; even if they were available I doubt if a conclusive analysis could be made.

The most helpful figures are those dealing with attendances at the clinic; these are shown below. The figures for 1930 have been doubled in order to give an approximately correct value for the year.

Year.	Population (in 1,000's).	Number of new cases seen.	Number of treatments given.
1930 (6 months) ... ..	179	466 (233 × 2)	8,372 (4,186 × 2)
1931 ... ..	186	436	11,954
1932 ... ..	188	489	10,534
1933 ... ..	191	467	10,684
1934 ... ..	195	417	9,518
1935 ... ..	198	503	9,743
1936 ... ..	202	610	9,630
1937 ... ..	203	750	8,345
1938 ... ..	204	599	6,832

The early peak figures were due to our dealing with a population not previously subjected to regular inspection and preventive treatment. The number of treatments given remained high for several years, but the steady fall since 1935 may safely be interpreted as a sign of effective preventive work.

The orthopædic clinic cannot claim all the credit for this notable drop; it is possible that factors such as better nutrition may have caused a fall in the incidence of rickets in infants and postural deformities in older children. The figures are as yet too small to permit of reliable analysis along these lines, but it will make an interesting study some years hence. Where we can confidently count on the clinic having a favourable influence is in the many conditions that respond in an encouraging way if treated early. This may properly be called preventive treatment. Club foot and congenital dislocation of the hip, for example, are not usually serious problems if recognised and treated at an early stage. But if neglected they are a never-ending source of trouble.

The new cases seen during the past year may be divided into the following groups:—

Cases with a recognisable crippling condition actual or potential	... ..	63.3%
Cases showing some slight departure from the average but with normal limits	... ..	22.2%
Cases in which there was no orthopædic defect ascertainable	... ..	14.5%

The present state of orthopædics in Willesden is in many ways most satisfactory for there is an attitude of vigilance which is making the preventive work thoroughly effective.

APPENDIX I

REPORT ON THE WORK OF THE ORTHO-RHINO-CENTRE FOR THE YEAR 1931

By H. J. SEDGWICK, F.R.C.S., Orthopaedic Surgeon to the General Hospital, Glasgow

The Orthopaedic Clinic was opened in June, 1929, and I think the time is opportune to review the work of the department during the first and one half years of its existence.

To what extent has the hospital of orthopaedic patients diminished, or the severity of such conditions as compared to former years?

Statistics dealing with orthopaedic hospital admissions are valuable in this connection; one would expect that progressive work should lead to a gradual fall in the number of patients admitted each year. Yet examination of these figures has proved inconclusive. Many orthopaedic hospitals treat patients who come to the hospital and some to the hospital with various degrees of disability. Another factor is that the surgical treatment of a number of conditions has not stood still during the past years, and one cannot say that a group of patients treated in a certain way would be dealt with in exactly the same manner in subsequent years.

The most helpful figures are those dealing with admissions at the clinic. These are shown below. The figures for 1930 have been changed in order to give an approximately correct value for the year.

Year	Number of new cases	Population (in 1000s)	Year
1930 (approx.)	408	170	1930 (approx.)
1929	428	168	1929
1928	430	166	1928
1927	461	165	1927
1926	417	163	1926
1925	502	161	1925
1924	610	159	1924
1923	700	158	1923
1922	709	157	1922

The early years show a marked increase in the number of patients admitted to the clinic, but the steady fall since 1925 may again be interpreted as a sign of effective preventive work.

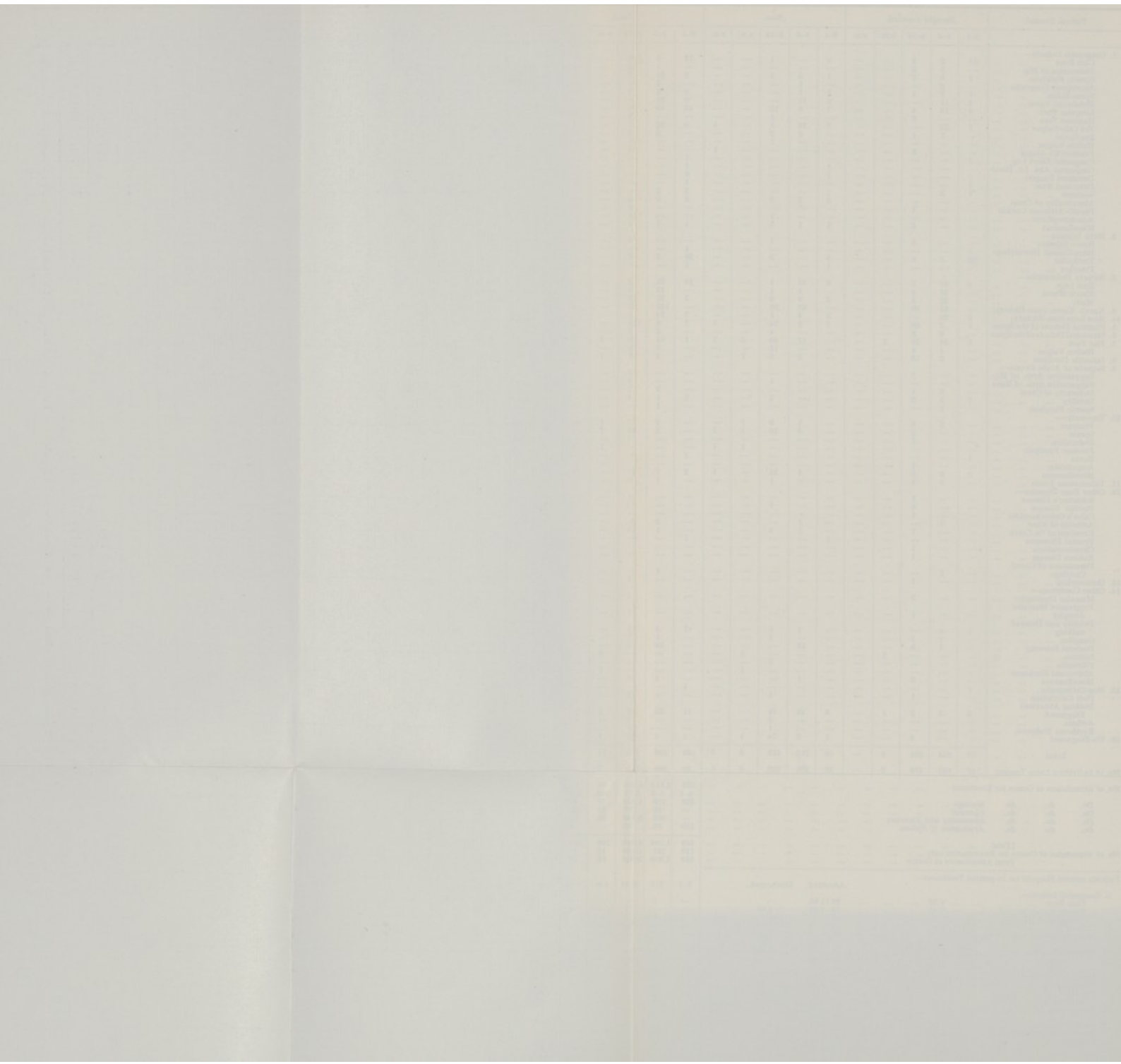
The orthopaedic clinic cannot claim all the credit for this notable drop; it is possible that factors such as better nutrition may have caused a fall in frequency of certain conditions in other children. The figures are so far too small to permit of reliable analysis along these lines, but it will make an interesting study some years hence.

When we can confidently claim on the one hand a reduction in the number of patients admitted to the orthopaedic hospital, and on the other hand a reduction in the number of patients admitted to the orthopaedic hospital, we are in a position to say that the orthopaedic hospital is doing its work.

The general state of orthopaedics in Glasgow is in many ways most satisfactory for there is an attitude of vigilance which is making the progressive work thoroughly effective.









## APPENDIX F.

REPORT ON THE WORK OF THE EAR, NOSE AND THROAT DEPARTMENT  
FOR THE YEAR ENDED 31ST DECEMBER, 1938.

By G. H. LIVINGSTONE, F.R.C.S., Ear, Nose and Throat Surgeon to the Council.

The total number of children referred to the Throat Specialist from the three Health Centres was 1,516.

The total number of cases referred for operation on tonsils and adenoids was 785.

The total number of operations carried out at the Hospital was 522.

		Centre 1	Centre 2	Centre 3.	Total.	1937.
<i>No. of cases seen.</i>	M.C.W.	57	106	102		
	S.M.S.	270	461	520		
		—	—	—		
		327	567	622	1,516	1,284
<i>No. of cases referred for operation.</i>	M.C.W.	22	60	49		
	S.M.S.	130	254	270		
		—	—	—		
		152	314	319	785	906
<i>No. of operations performed.</i>	M.C.W.	17	29	61		
	S.M.S.	91	161	163		
		—	—	—		
		108	190	224	522	605

## MUNICIPAL HOSPITAL—EAR, NOSE AND THROAT CASES ADMITTED DURING 1938.

	Boys.	Girls.	Total.	1937
For :				
Removal of tonsils and adenoids ... ..	252	252	504	560
Removal of adenoids only ... ..	6	6	12	27
Mastoidectomy ... ..	4	2	6	15
Other conditions ... ..	20	20	40	8
Cases admitted, but not operated on for various reasons ... ..	5	1	6	8
	—	—	—	—
	287	281	568	618
Patients in Hospital operated on for :				
Tonsils and adenoids ... ..	19	18	37	16
Antrum puncture ... ..	3	8	11	1
Mastoidectomy ... ..	2	4	6	3
Other conditions ... ..	—	1	1	—
	—	—	—	—
	24	31	55	20
	—	—	—	—

It will be noticed that although the total number of attendances has increased from 1,284 in 1937 to 1,516 in 1938, the number of tonsil operations has decreased from 605 to 522, and mastoid operations from 15 to 6. This decrease in cases referred for operation is due in part to the improvement obtained by the breathing exercise classes and by the careful daily treatment at the Centres of the ear conditions which may give rise to mastoid suppuration.

FEEs PAYABLE TO DOCTORS CALLED IN TO MIDWIFERY EMERGENCIES  
OTHERWISE THAN BY MIDWIVES.

REPORT OF THE MEDICAL OFFICER OF HEALTH.

As instructed by the Hospital Visiting Sub-Committee at its meeting on the 29th December, 1937, I beg to report on the above matter.

Where a doctor is called in to see a woman in pregnancy or during labour or afterwards by a midwife, fees are paid by the Willesden Borough Council in accordance with the scale of fees prescribed by the Minister of Health (herewith).

Apart from the cases in which a doctor is called in by a midwife, a doctor would be called in in the following circumstances :—

- (a) Where a pregnant woman or a woman in labour or during the puerperium has made no arrangements whatsoever for her care and where an emergency arises.
- (b) Where a pregnant woman or a woman in labour or during the puerperium has made arrangements for her care but for some reason or other these arrangements are not available.

Section 177 (1) of the Public Health Act, 1936, states :—

“ A local authority may, with the approval of the Minister, provide a temporary supply of medicine and medical assistance for the poorer inhabitants of their district.”

Section 204 (1) of the Public Health Act, 1936, states :—

“ A welfare authority may, subject to the general approval of the Minister, make arrangements for the care of expectant and nursing mothers and of children who have not attained the age of five years and are not being educated in schools recognised by the Board of Education :

Provided that nothing in this section shall authorise the establishment by such an authority of a general domiciliary service by medical practitioners.”

M.C.W.4, page 16, No. (4), states that grants are available for

“ The provision, for necessitous women, of a doctor for illness connected with pregnancy and for aid during the period of confinement for mother and child.”

Paragraph 5 of Circular 1072 of the Ministry of Health dated 12th February, 1930, states :—

“ The authority for other services commonly provided as part of the arrangements for Maternity and Child Welfare, such for instance as health visiting, a midwifery service, maternity nursing and nursing for expectant mothers and young children, home helps, day nurseries, and the supply of milk or meals, must be found in Section 1 of the Act of 1918, and the Minister is advised that his sanction will still be necessary to the provision of any of these services. But in all cases in which any one of these services has already been provided by a Local Authority with his approval, he hereby sanctions the extension of that service to such an extent, and in such a manner, as the Authority think desirable.”

I would recommend that the scale of fees prescribed by the Minister for medical practitioners called in by midwives be adopted for the payment of doctors called in as above.

GEORGE F. BUCHAN,

*Medical Officer of Health.*

*Observations of the Town Clerk.*

I have considered the matter raised in your memorandum of the 5th January and I append my observations for incorporation in the report to the Hospital Visiting Sub-Committee :—

“ The above quoted Section 204 (1) of the Public Health Act, 1936, undoubtedly confers wide powers, and such authority as there may be for making provision in the circumstances contemplated in the report of the Medical Officer of Health seems to me to be contained therein. I know of no other enactment under which the case could be met.

The Section lays down an important qualification precluding the establishment of a general domiciliary service by Medical Practitioners but regrettably no definition is given either in the Public Health Act or elsewhere as to what constitutes such a service. While I am of opinion that the Section would cover the payment by the Council of a Doctor's fee where a woman is unable to take advantage of arrangements made in advance of the confinement, it would not, in my view, be in accordance with the Act to undertake a similar payment where the patient has failed to make any arrangements whatsoever. In either event I would advise that the Minister's approval be sought before the proposed scheme is operated.”

E. A. PRATT,

*Town Clerk.*



## LETTER TO MINISTRY OF HEALTH, DATED 25TH FEBRUARY, 1938.

Sir,

## PAYMENT OF DOCTORS' FEES IN MIDWIFERY CASES.

I am directed by the Willesden Town Council to apply to the Minister of Health for approval of the following scheme for the payment of fees to doctors called to cases of confinement in circumstances other than calls for medical aid by the midwives under the Midwives Acts, 1902 to 1936.

The following is a copy of the resolution of the Council in the matter :—

" The Midwives Acts, 1902 to 1936, provide that where a midwife calls in to her assistance a registered medical practitioner, the Council, as the local supervising authority, shall pay the doctor's fee according to a scale laid down in pursuance of the Act, and arising out of a case reported to us at our last meeting, we have considered the desirability of the Council's undertaking to pay the fees of doctors called into midwifery emergencies otherwise than by midwives.

Apart from cases in which a midwife requests professional assistance, a doctor could be called in the following circumstances :—

- (a) Where a pregnant woman or a woman in labour or during the puerperium has made no arrangements whatsoever for her care and where an emergency arises ;
- (b) Where a pregnant woman or a woman in labour or during the puerperium has made arrangements for her care, but for some reason or other these arrangements are not available.

We are of opinion that on application by the patient or doctor, financial assistance should be provided to the benefit of patients in cases of this kind, and we therefore recommend that the scale of fees operating under the Medical Practitioners (Fees) Regulations, 1936, be adopted for the payment of fees to doctors called in as above.

In view of the lack of definition of the Council's powers to institute such a scheme, we recommend that it be made conditional upon the prior approval of the Minister of Health."

I shall be glad to receive, in due course, the sanction of the Minister so far as this may be necessary under Section 204 of the Public Health Act, 1936, or any other enactment authorising the Council to make such arrangements.

I am, Sir,

Your obedient Servant,

(Signed) E. A. PRATT,

*Town Clerk.*

## LETTER FROM MINISTRY OF HEALTH TO THE TOWN CLERK, DATED 30TH MARCH, 1938.

Sir,

I am directed by the Minister of Health to refer to your letter of the 25th February (JG/ENJ) requesting the approval of the Minister to the payment of fees to doctors called in to attend women during pregnancy, labour, or the puerperium in certain circumstances other than those provided for by Section 14 of the Midwives Act, 1918.

The Minister does not consider, having regard to the proviso of Sub-section (1) of Section 204 of the Public Health Act, 1936, that it is open to him to give approval under that Section to arrangements of the nature proposed, nor is he aware of any other powers for the purpose. Moreover, it appears to him that the institution by the Council of general arrangements of this kind would tend to encourage expectant mothers to neglect the making of proper arrangements in advance for their confinements, for which the Council's institutional and domiciliary midwifery service is provided.

If, in an exceptional case, a woman has made arrangements to enter an institution for her confinement, or for a midwife to attend her in her home, but owing to quite special circumstances the arrangement breaks down and the summoning of a doctor by relatives is found to have been justifiable, it might be possible for the Minister in a necessitous case to consider granting a special sanction under the proviso to Sub-section (1) of Section 228 of the Local Government Act, 1933, to the payment by the Council of part or the whole of the doctor's fees, but it appears to the Minister that occasion for such an application should be rare.

I am, Sir,

Your obedient Servant,

(Signed) J. N. DARK.

## HEALTH DEPARTMENT.

## SUMS PAYABLE PER ANNUM TO THE WILLESDEN DISTRICT NURSING ASSOCIATION.

Service.	Payments in accordance with existing agreements or otherwise.		Proposed payments.		Amount in dispute.
	£	s. d.	£	s. d.	£
Local Government Act, 1929.					
Nursing of miscarriage cases and complications of pregnancy and the puerperium ... ..	40	0 0	—	—	40*
Maternity nursing including the ante-natal visits in connection therewith ... ..	140	0 0	—	—	—
Nursing of children under 5 years of age ... ..	120	0 0	120	0 0	—
Midwives Act, 1936.					
Maternity Nursing—					
5 Midwives for attendance on women in their own homes as Maternity Nurses in childbirth and afterwards as may be necessary ... ..	1,615	0 0	1,615	0 0	—
Public Health Act, 1936.					
Nursing of infectious cases ... ..	78	15 0	78	15 0	—
	<u>£1,993 15 0</u>		<u>£1,813 15 0</u>		<u>£40</u>

\* Mrs. Acworth asks that if full grant of £40 is not paid that it will not be reduced to a sum less than £25 or £30.

## MATERNITY NURSING AND MIDWIFERY.

The Scheme prepared under the Midwives Act, 1936, requires the Willesden District Nursing Association and the Willesden Borough Council each to employ 5 Midwives.

The following table indicates the work to be carried out by these bodies since the scheme became operative on 31st October, 1937 :—

## NET BOOKING OF CASES.

	W.B.C.	W.D.N.A.
From 31-10-37 to 26-2-38 ... ..	214	104
Cases booked prior to 31-10-37 to be dealt with before 31-12-37 ... ..	Not included in Scheme.	Not included in Scheme.
Cases booked prior to 31-10-37 to be dealt with on and after 1-1-38 ... ..	—	27*
	<u>214</u>	<u>131</u>

\* The W.D.N.A. retained a sum of £22 3s. in respect of these 27 cases and are due to pay an equal sum to the W.B.C.

## TREND OF MIDWIFERY.

The following table shows the trend of midwifery :—

Year.	Domiciliary cases attended by Midwives.	Domiciliary cases attended by Doctors.	Births in Hospitals and Nursing Homes.	Total Births notified.
1931 ... ..	515	1,174	1,110	2,799
1932 ... ..	457	997	1,220	2,674
1933 ... ..	532	776	1,357	2,665
1934 ... ..	610	680	1,436	2,726
1935 ... ..	589	568	1,706	2,863
1936 ... ..	646	516	1,745	2,907
1937 ... ..	760	465	1,906	3,131

The Council in preparing their scheme under the Midwives Act, 1936, had only the figures up to 1935 on which to base their calculations. They assumed the round figure of 600 per annum as doctors' cases and they considered it likely that two-thirds or 400 of these would engage Maternity Nurses. In respect of this number the W.D.N.A. were required to employ 5 midwives and receive £1,615 per annum from the Council.



Having regard to the above figures of booking and the trend of midwifery it would appear that the estimate of the Maternity Nursing to be done by the W.D.N.A. for 1938 could reasonably be put at :—

As per booking (103 by 3) ... ..	309
Maternity Nursing previously done by Municipal Midwives or Independent Practising Midwives who have surrendered their certificates ... ..	50
	359

In addition there will be some cases to be nursed by the W.D.N.A. who now have handy women.

Having regard to these figures and comparing them with the work of the W.B.C. Midwives, it is quite fair to say that the £1,615 covers all the work of the Association for nursing pregnant and puerperal women including the nursing of complications of pregnancy and the puerperium.

I would, therefore, suggest that the foregoing proposition form the basis for discussion with the W.D.N.A. and that the figure of £1,615 be fixed to cover all such nursing until March, 1939, and that it be reviewed prior to the expiry of this period with the view of arriving at a new figure for the financial year, 1939-40.

GEORGE F. BUCHAN,  
*Medical Officer of Health.*

5th April, 1938.

#### APPENDIX I.

##### MUNICIPAL HOSPITAL. NURSING STAFF RE-ORGANISATION. 48-HOUR WEEK.

###### *Memorandum by Medical Officer of Health.*

The Council has provided £3,300 in its estimates for 1938-39 for the provision of a 48-hour week for the nurses at the Municipal Hospital.

The Committee will remember that in connection with this subject certain alterations were suggested, namely :—

- (a) A bathroom for Matron to be provided by the conversion of an existing bedroom into a bathroom.
- (b) Sisters' Sitting Room to be provided by extending the present sitting room to include the adjacent bedroom.
- (c) Staff Nurses' Sitting Room to be provided by converting an existing double-bedded bedroom into a sitting room.
- (d) Senior Sister and Sister Tutor—A sitting room to be provided for this officer by converting an existing bedroom into a sitting room.
- (e) Cloakroom for nurses to be provided by building a suitable room in connection with the side entrance to the home.
- (f) Heating—The low temperature in the older part of the nurses' home in the winter time to be overcome by electric radiators.

##### NURSES' HOME.

I understand that it is the desire of the Committee that the nurses to be employed at the Municipal Hospital shall live in. It will, therefore, be necessary to provide a new nurses' home. It was estimated that it was likely that some 12 or so additional nurses would be required in connection with the running of the Municipal Hospital as it now is. The new nurses' home, however, has to be built to take the additional nurses required (12) and the nurses now living out (4), to provide for displaced beds (6) and to allow some spare beds for illness and other emergencies (say, 6). This means that a nurses' home to accommodate 28 nurses is required for present purposes.

##### OTHER CONSIDERATIONS.

Before finally determining the best method for giving effect to the 48-hour week, I think it is necessary that the Committee should have before them all the aspects of the Hospital problem.

## ACCOMMODATION FOR INFECTIOUS CASES GENERALLY.

The Committee will remember that I reported in March, 1935, as to the actual accommodation in the Hospital as shown in the following table :—

Ward.	Ministry of Health Standard. (144 sq. ft. per patient.)	Standard with 30 cubicles. (120 sq. ft. per patient.)
B ... ..	12	15
C ... ..	16	20
D ... ..	28	32
E ... ..	16	20
F ... ..	21	25
G ... ..	21	25
H ... ..	18	22
M1 (Cubicles) ... ..	10	10
M2 (Cubicles) ... ..	10	10
M3 (Cubicles) ... ..	10	10
Total ... ..	162	189

Since that date the Council has provided M4 with 10 cubicles, bringing the total available beds in the Hospital to 199, but at the same time they have withdrawn from use for infectious disease purposes B Ward with 15 beds for throat, nose and ear conditions and M4 with 10 cubicles for cases of marasmus or a total of 25 beds, leaving only 174 beds for infectious disease purposes. The Committee are aware that the standard of beds for infectious disease purposes is one per 1,000 population and that therefore 200 such beds are required for Willesden. It will be appreciated that with only 174 beds for infectious disease purposes the accommodation from time to time is so fully occupied that cases which really should be admitted to Hospital are refused.

During the winter 1937-38 the Hospital has been able to admit all cases of scarlet fever and diphtheria occurring in the district requiring removal. The prevalence of diphtheria has been above the average and fortunately the prevalence of scarlet fever has been below the average. On the other hand, measles has been prevalent during the winter and many applications for the removal of cases have been made, but have been refused. The County Medical Officer, as well as a number of private practitioners, have made application for the removal of these cases. The County Medical Officer wrote to me in this connection on 17th February, 1938, as under :—

## " MEASLES.

" I have been somewhat disturbed recently at the number of applications from doctors in Willesden for the admission of Willesden infants and children to the Central Middlesex County Hospital on account of measles. Careful enquiry has shown that either the serious condition of the patients, or some special environmental circumstances, have rendered removal to hospital imperative, yet, in practically all cases, the County Council's officers have been informed that application to the Willesden Borough Council for accommodation in the Council's isolation hospital has met with definite refusal.

" I feel sure you will agree that a general hospital such as the Central Middlesex County Hospital is most unsuitable for the reception of cases of infectious disease, and although the County Council has, in fact, received the patients mentioned above, it has done so at considerable risk to the other children who are in the hospital on account of non-infectious illness, frequently of most serious characters

" It appears to me that in a borough the size of Willesden, some facilities should be available for dealing with serious and complicated cases of measles under suitable conditions of isolation, and I shall feel greatly obliged if you will kindly give the matter your consideration and let me know in due course whether your Council is able to deal with the problem."

## HEATING AND HOT WATER.

Heating is provided at the present time by the following means :—

- (a) by the central boilers for some parts of the hospital ;
- (b) by independent boilers for the cubicles ; and
- (c) by electric heating for Ward E and the nurses' annexe.

Hot water is provided :—

- (a) by the central boilers for some parts of the hospital ;
- (b) by independent boilers for the cubicles ; and
- (c) by gas geysers for the nurses' annexe, the dispensary and the laboratory.

The existing central boilers are fully taxed and even now do not provide the head of steam in the laundry which the laundry requires. This means that articles have to be passed twice through the calenders, including the last calender installed.



Having regard to these other considerations, it seems to me probable that the Committee would prefer to consider a plan for the gradual development of the Hospital to its full needs. I would accordingly suggest for the consideration of the Committee:—

- (1) That they build at the present time a nurses' home to accommodate 40 nurses.
- (2) That they ask the Engineer to report on the heating and hot-water arrangements at the Hospital with a view to unification at the present time and provision for meeting the needs of the new nurses' home and 3 additional cubicle wards.
- (3) That at later dates the Council provide the 3 additional cubicle wards—10 cubicles in each ward—as may be considered desirable.

#### SUGGESTED VISITS.

Recently new nurses' homes have been established at a number of hospitals and I would suggest that the Committee visit the following:—

Mogden Isolation Hospital.  
Westminster General Hospital.  
Romford Isolation Hospital.

GEORGE F. BUCHAN,  
*Medical Officer of Health.*

5th April, 1938.

### APPENDIX J.

#### SANITARY WORK.

#### MEMORANDUM BY THE MEDICAL OFFICER OF HEALTH.

##### OVERCROWDING.

The Committee will remember that I reported on the 8th June, 1937, on matters relating to overcrowding and basement dwellings. The Committee then decided that landlords should receive intimation of the "permitted number" of persons permitted to occupy their houses and for that purpose a temporary clerk and a temporary typist were retained until the 31st March, 1938.

Landlords have now been notified in respect of 40,000 dwellings and approximately 2,000 notifications have still to go out. It will be understood that with the ever-changing allocation of rooms to tenants in sub-let houses it can never be said of this work that it is finished.

The position in Willesden is that any overcrowding which has come into being since the 1st July, 1937, is an offence under the Housing Act of 1936. In addition, of course, any family which remains overcrowded after suitable alternative accommodation has been offered is liable to prosecution.

The Committee will also remember that they gave instructions for letters to be sent to landlords of houses from which overcrowded families were removed and to the agents of multiple properties asking for their co-operation in connection with re-letting so as to relieve or avoid overcrowding. A number of letters from landlords have been received indicating that they are prepared to assist the Council in this matter. Nevertheless, according to the records kept by the Department some 1,572 families are still overcrowded within the meaning of the Act.

##### BASEMENT DWELLINGS.

The Committee will also remember that they gave instructions for this work to be begun and to be carried out within the limits of their powers under the Housing Act, 1936. It was begun on 6th July, 1937, and up to 22nd March, 1938, 78 basement rooms have been closed, of which 23 rooms have been vacated. 88 basement rooms have been made to comply with the Council's Regulations and 5 basement rooms have been permitted by the Committee to be used for purposes other than for living. There still, however, remain 270 basement rooms used as dwellings which are likely to be closed. These will result in about 162 families having to seek other accommodation.

(NOTE.—It should be noted that even after the work of closing basements has been completed there will still be some 1,395 basement rooms remaining in use as dwellings in conformity with the regulations as to underground rooms.)

##### ATTIC ROOMS.

So far Closing Orders have been made on 8 attic rooms. It is not possible to say how many attic rooms will be found not to comply with the Council's Bye-laws as the result of routine inspection and measurement but probably in the region of 600.

## HOUSES REQUIRED.

It should be noted that the Council are not bound to provide accommodation for overcrowded families or for families displaced from basement dwellings or attics but it will be realised that in the absence of such accommodation for these persons existing conditions will not be materially improved for a long time to come.

In this connection a duty periodically to review housing conditions in their area and to frame proposals is laid upon the local authority by Section 71 of the Housing Act, 1936, which is as follows:—

“It shall be the duty of every local authority to consider the housing conditions in their district and the needs of the district with respect to the provision of further housing accommodation for the working classes and for that purpose to review the information which has been brought to their notice, either as a result of inspections and surveys carried out under section 5 of this Act or otherwise, and as often as occasion arises, or within three months after notice has been given to them by the Minister to prepare and submit to the Minister proposals for the provision of new houses for the working classes, distinguishing those houses which the authority propose to provide for the purpose of rendering accommodation available for persons to be displaced by, or in consequence of, action taken by the authority under this Act.”

The preliminary overcrowding survey revealed 1,845 cases of overcrowding and on further investigation and measurement of houses 581 more cases were discovered, making a total of 2,426 families overcrowded. The present position is that out of the 2,526 known cases of overcrowding, 671 cases have been abated by reason of (a) reduction in size of family, (b) increased accommodation found by the family, and (c) families having removed from the district; 183 overcrowded families have been rehoused by the Council, leaving so far as is known, 1,572 families still overcrowded.

It seems that it would be desirable on the part of the Council to consider the provision of houses so that the overcrowding in the aforementioned 1,591 families may be abated as quickly as possible and ejected basement and attic dwellers may be given homes to which to go. This, of course, is a considerable task.

## RECONDITIONING.

Routine house-to-house inspection has been carried on for a number of years and the total number of houses inspected each year is about 1,200. As a result of such inspection these houses are reconditioned at a cost to the owner of anything from £20 to £300.

Reconditioning includes making basement rooms to comply with the Regulations where practicable, the addition of one or more waterclosets to serve the upper floor in sublet houses, the addition of one or more sinks with water supply to serve the upper floors and in a number of cases the entire stripping and relaying of roofs. It also comprises such works as the extensive renewal of decayed or perished plaster, the removal of gutters and downspouts, the repointing and in some cases the rebuilding of brickwork, the retreading of stair treads, the renewing of floor boards, the renewal of wooden and stone sills, stripping, making good and distempering walls, washing and whitening ceilings, renewal of stoves, sash cords, locks, etc.

It must be remembered that whatever reconditioning or repair work is done, its durability is dependent on two factors, firstly, the class of workmanship and secondly, the usage to which the premises are subjected. Every effort is made to obtain a high standard of workmanship but where there is abnormal wear and tear of the property because of overcrowding or other reasons, the owner not unnaturally becomes discouraged or even wroth. So that whilst streets of houses have been reconditioned at considerable expense, it is found that some streets require reconditioning often within a period of four or five years, whereas similar work in other streets will last seven, eight or ten years.

## STAFF.

Mr. Frank Sheriff, who is a Sanitary Inspector and has been employed on the indoor staff for a number of years on account of deafness, retires on 9th May, 1938. In anticipation of his retirement, provision has been made in the estimates to replace him by a second-class clerk and a shorthand typist to carry out the work he has hitherto been doing and to cope with the increased work arising out of the increased inspectorial staff from 9 to 13 during the past 4½ years.

GEORGE F. BUCHAN,

*Medical Officer of health.*



10th May, 1938.

## APPENDIX K.

## SWIMMING BATH WATER ANALYSIS.

The Borough Engineer and the Medical Officer are not satisfied as to the present arrangements for this analysis. They have conferred together and are of opinion that the definite responsibility for reporting on any unsatisfactory sample should be placed upon the Medical Officer of Health. They are further of opinion that once a month corroborative analysis should be made by an independent firm specialising in water analysis. The procedure which they would suggest for adoption is as follows :—

- (1) The Health Department to take samples of bath water and convey them to the Municipal Hospital Laboratory for analysis. These samples to be taken periodically by the Health Department at suitable intervals and at such other times on request from the Borough Engineer.
- (2) The Municipal Hospital Laboratory to analyse the samples.
- (3) The results of the analysis to be submitted to the Medical Officer of Health by the Medical Superintendent together with the Medical Superintendent's observations on the analysis.
- (4) The Medical Officer of Health to report to the Engineer in all cases in which circumstances arise requiring the attention of the Engineer.
- (5) Corroborative analysis to be made once a month by an independent firm specialising in water analysis. The cost of these examinations is estimated at £60 per annum.

F. WAYMAN BROWN,  
*Borough Engineer.*

GEORGE F. BUCHAN,  
*Medical Officer of Health.*

## APPENDIX L.

10th May, 1938.

MEMORANDUM BY THE MEDICAL OFFICER OF HEALTH ON A MEMORIAL FROM RESIDENTS OF HARLEY ROAD COMPLAINING OF SULPHUR, ASHES AND COAL DUST FROM L.M.S. RAILWAY NEAR HARLEY ROAD AND GENERATING STATION OF LONDON POWER COMPANY, ACTON LANE, WILLESDEN, N.W.10.

## L.M.S. RAILWAY, NEAR HARLEY ROAD, ELEVATOR.

In September, 1930, complaints were received from residents in Harley Road of a nuisance from noise and coal dust caused by this elevator. The matter was investigated and certain proposals were put to the Company, these included :—

- A. Use of apparatus between the hours of 7 a.m. to 7 p.m.
- B. Use of hard coals, free from dust.
- C. Lengthen period of wetting coal in wagon.
- D. Spraying coal at top of elevator.
- E. Enclosing elevator at top.

By April, 1931, A., B. and C. were carried out, also a portion of the hopper was lined with wood to deaden noise.

The Company stated D. was not practicable.

The Company experimented on E. at Derby but without success.

During the past seven years no further complaints have been received and the Sanitary Inspectors have not noted any dust emission but have noted there is very little noise.

The present memorial is signed by 50 residents in Harley Road, who complain of sulphur, ashes, and coal dust from the coal elevator and from the drawing of fires from the engines.

## SULPHUR.

The Sanitary Inspector reports that the sulphur fumes in this area have been very greatly reduced by the works to the washing tower, carried out at the London Power Company, Acton Lane, and only occasionally has he noticed faint sulphur odours in this area.

## ASHES.

These come from the locomotive fires and were formerly dropped into a hopper by lifting the fire bars, but since October, 1937, it is stated the ashes are withdrawn by clinker shovels and thrown into ash hoppers, whence they are taken to a conveyor for loading into trucks.

Mr. Sheridan (Locomotive Superintendent) stated when interviewed on 21-4-38 that he was surprised to have complaints of this, as he had had nine additional spraying points installed, making 12 in all, to damp down these ashes and prevent the escape of "fly dust."

## COAL DUST.

Mr. Carter, of 4, Harley Villas (one of the memorialists), informed the Chief Sanitary Inspector that in his opinion dust came from the wagons when tilted, as the coal had not been sufficiently wetted, due to the necessity of rushing the wagons through. The Chief Sanitary Inspector made observation on this matter of dust on 21-4-38 but did not see dust escaping when the wagons were tilted.

Mr. Sheridan, however, stated he would immediately investigate to see if his instructions as to wetting were being carried out. He stated that sprays had been fitted at the outlet end of the hopper (where the tenders are loaded) to arrest the dust at this point and if these sprays were not used, it was neglect on the part of the operators.

The Chief Sanitary Inspector asked permission to inspect at the respective sources of the complaints, viz., where engine fires are drawn, where wagons are wetted and at elevator, but Mr. Sheridan stated he must obtain authority from headquarters before he could give permission. He stated he would make full enquiries into the complaints.

## LONDON POWER COMPANY.

*Smoke.*—On 22-4-38 the Chief Sanitary Inspector visited these works and formed the opinion that the new gas washing plant completed in October, 1937, was doing good work; the flue gases after washing are now discharged into the atmosphere from the new stack 236 ft. high and appear to be lightly tinted vapour—sulphur fumes were not noticeable. Work on a duplicate washing chamber is in hand.

*Coal Tipping.*—At these works the coal wagons are tipped into a pit at ground level and lifted to the feeding hoppers by means of a bucket conveyor, no dust escapes from these buckets.

There was a quantity of coal dust on the ground near where the wagons are tipped due to the coal having been exceptionally dry due to the long drought, but this dust does not appear to travel any distance owing to the surrounding buildings.

The coal at these works is not wetted, the reasons given being :—

- (1) The coal used is a washed coal and has little dust.
- (2) That excessive wetting makes the coal cake in the buckets which do not empty.

## GENERAL.

An examination of Harley Road and district reveals slight deposits of dust such as occur in the vicinity of busy railway lines, especially during dry weather.

Observations are being kept on the elevator.

In October, 1930, the Town Clerk set out the legal position with regard to nuisance from Statutory Undertakings as follows :—

"It must be borne in mind that the Public Health Acts do not create fresh nuisances but only provide a procedure for dealing with certain nuisances in a summary manner. One has, therefore, to look to the Common Law, and in the case of Statutory Undertakings such as Railway Companies, to the construction which the Courts have placed on the various Statutes authorising such undertakings. It will be appreciated that Railway Companies are under a statutory obligation to run their trains and to do such acts as may be necessary for carrying out that duty, and a Railway Company which is given power by Statute to do an act which would otherwise amount to an interference with the rights of the public, e.g., an actionable common law nuisance, are not liable to proceedings for a public nuisance nor does an action lie against a Railway Company for doing an act which is authorised by statute but which would be a nuisance if not so authorised. Further where the Company is under a statutory duty it is only bound to exercise its powers in the performance of such duty with moderation and discretion in a proper manner and without negligence."

GEORGE F. BUCHAN,  
Medical Officer of Health.



## APPENDIX M.

22nd June, 1938.

## MEMORANDUM ON DOMICILIARY MIDWIFERY.

## NEED FOR AN ADDITIONAL MUNICIPAL MIDWIFE.

When this scheme was framed the figures for midwifery were available up to the end of 1935. The following table shows the figures up to the end of 1937:—

Year	Domiciliary cases attended by Midwives.	Domiciliary cases attended by Doctors.	Births in Hospitals and Nursing Homes.	Total Births notified.
1931 ... ..	515	1,174	1,110	2,799
1932 ... ..	457	997	1,220	2,674
1933 ... ..	532	776	1,357	2,665
1934 ... ..	610	680	1,436	2,726
1935 ... ..	589	568	1,706	2,863
1936 ... ..	646	516	1,745	2,907
1937 ... ..	760	465	1,906	3,131

On the basis of the figures up to the end of 1935 it was assumed that the Council would require to deal with 400 cases of midwifery per annum by five Municipal Midwives and Queen Charlotte's Hospital would require to deal with 200 cases of midwifery per annum by two and a half Midwives employed by Queen Charlotte's Hospital.

The scheme has been in operation since the 31st October, 1937, and from the returns supplied by the Municipal Midwives and Queen Charlotte's Hospital the number of cases dealt with is approximately 520 per annum for the five Municipal Midwives and approximately 200 per annum for the two and a half Midwives employed by Queen Charlotte's Hospital.

The following table shows the average time spent on a midwifery case (a) as originally estimated, and (b) from information supplied by the Municipal Midwives from actual experience:—

	(a) As originally estimated.*	(b) From midwives' actual experience.
1. Primary interview at Midwife's home ... ..	—	$\frac{1}{4}$ hour.
Ante-Natal Visits at $\frac{3}{4}$ hour each ... ..	6 $4\frac{1}{2}$ hours. (Visits)	8 6 hours. (Visits)
Confinement ... ..	8 hours	8 hours.
Post-Natal Visits at 1 hour each ... ..	16 16 hours. (Visits)	17 17 hours. (Visits)
Clerical work, telephone calls, ineffectual visits, attendances at Health Centres ... ..	—	$2\frac{3}{4}$ hours.
Total ... ..	$28\frac{1}{2}$ hours.	34 hours.

\* As submitted in the Council's letter to the Ministry of Health dated 14/4/37.

As each Municipal Midwife has on the average 104 Midwifery cases per annum her actual hours of work total 3,536 per annum.

In these circumstances the employment of an additional Municipal Midwife is urgently necessary.

GEORGE F. BUCHAN,  
Medical Officer of Health.

4th July, 1938.

## APPENDIX N.

## SUNDAY MEALS.

Memorandum by the Medical Officer of Health.

Arrangements are made for providing breakfasts and dinners at Gibbons Road, Strode Road and Lower Place Feeding Centres. No dinners or breakfasts are provided on Sundays in the South Kilburn area, but these will be available when the Committee's South Kilburn Centre is opened.

## SUNDAY BREAKFASTS.

Very few Sunday breakfasts are supplied—none having been supplied at Gibbons Road, none at Strode Road and only 56 at Lower Place since 1st January, 1938. These breakfasts consist of bread and butter with jam or marmalade or currant bread and butter with cocoa and milk and as

the Feeding Centre Assistants have to be on duty for the preparation of the mid-day meal, it makes no difference to staff whether the children attend for breakfasts or not.

#### SUNDAY DINNERS.

The following table shows the dinners which have been supplied at Gibbons Road, Strode Road and Lower Place on each Sunday since the beginning of the year :—

	<i>Gibbons Road.</i>	<i>Strode Road.</i>	<i>Lower Place.</i>
January 9th ... ..	37	30	15
„ 16th ... ..	36	33	21
„ 23rd ... ..	39	41	11
„ 30th ... ..	38	38	13
February 6th ... ..	44	40	19
„ 13th ... ..	43	40	19
„ 20th ... ..	42	32	20
„ 27th ... ..	35	31	21
March 6th ... ..	43	22	18
„ 13th ... ..	46	30	21
„ 20th ... ..	40	25	21
„ 27th ... ..	36	33	19
April 3rd ... ..	34	36	16
„ 10th ... ..	31	31	17
„ 17th ... ..	43	28	18
„ 24th ... ..	42	31	16
May 1st ... ..	61	27	17
„ 8th ... ..	59	27	13
„ 15th ... ..	59	38	10
„ 22nd ... ..	52	31	12

On the average it may be stated that the number of children attending for Sunday dinners is approximately 17 per cent. of those who come during the week.

Having regard to these figures it would be possible to carry the Lower Place children to Gibbons Road, but this arrangement would mean an increased cost as shown by the following statement, which excludes the cost of food, as this cost would be the same in either case :—

	Costs of running school bus from Lower Place to Gibbons Road so that Lower Place children may be fed at Gibbons Road.	Costs at Lower Place Centre of feeding children under the present arrangement.
	£ s. d.	s. d.
Driver—2 hours ... ..	6 4	—
Attendant—2 hours ... ..	2 11	—
Bus running costs ... ..	1 0	—
Extra Assistant at Gibbons Road ... ..	12 3	—
Assistant ... ..	—	12 3
Gas ... ..	—	3 0
	<u>£1 2 6</u>	<u>15 3</u>

GEORGE F. BUCHAN,  
*Medical Officer of Health.*

7th July, 1938.

#### APPENDIX O.

##### PREVENTION OF BLINDNESS.

###### CIRCULAR 1621 OF THE MINISTRY OF HEALTH.

This Circular was before the Committee in September, 1937, when I was instructed to prepare a report on the prevention of blindness which was submitted to the Committee on the 12th October, 1937. This report, the Committee will remember, dealt mainly with the subject of the prevention of blindness where efforts to prevent blindness are likely to be most effective, namely, in connection with maternity and child welfare work.

The Circular comes before the Committee again in a letter from the County Medical Officer, dated 14th June, 1938, dealing with the prevention of blindness in relation to adolescence. The letter is as follows :—

“ DEAR DR. BUCHAN,

##### PREVENTION OF BLINDNESS.

###### *Circular 1621 of the Ministry of Health.*

“ In the early part of this year I submitted a report upon the above Circular, an extract from which is as follows :—

“ ‘ Section 12—Adolescence.

“ ‘ The Committee are impressed with the need for the continued ophthalmic supervision of children with defective eyesight, particularly those with high or progressive myopia, through the period of adolescence.’



" The present position with regard to children suffering from low or moderate degrees of myopia attending school in the Council's elementary education area, is that they are called up by the Council's part-time ophthalmic surgeons for re-examination about every twelve months.

" High myopes are usually dealt with by being sent to special schools for partially sighted children where their visual condition also is kept under close supervision.

" At the age of 14, in the case of the former group, and at the age of 16 in the latter group, the supervision ceases.

" Myopia under certain conditions is prone to progress until the age of 18 or 20, and periodical examination, advice, and if necessary, change of lenses, are matters of very considerable importance.

" Section 176 of the Public Health Act, 1936, is as follows :—

" (1) A county council or local authority may make such arrangements as they think desirable for assisting in the prevention of blindness, and in particular for the treatment of persons ordinarily resident within their area, who are suffering from any disease of, or injury to, the eyes.

" (2) Any expenses incurred under this section by a county council shall, if the Minister by order so directs, be defrayed as expenses for special county purposes charged on such part of the county as may be provided by the order, but any such order may be revoked or varied by a subsequent order.

" I think consideration might be given to the question of asking the County Council to implement this section to the extent of offering facilities for periodical re-examination and treatment at the Council's School Ophthalmic Clinics to any adolescent ascertained at school to be suffering from defective vision, who, in the opinion of the Council's Ophthalmic Surgeons, should be kept under supervision for a few years after leaving school.

" So far as the Council's elementary education area is concerned, this could be done with very little, if any, extension of the existing scheme. Cases requiring continued supervision after the age of 14 would not be very many, and not all of those to whom it is offered would, perhaps be able or willing to avail themselves of the service.

" So far as the ' Part 3 ' areas are concerned, these authorities (who already are carrying out ophthalmic examination and treatment of children attending secondary, etc., schools in their areas), might be asked to undertake the work on behalf of the County Council on payment of the same charges as already have been agreed.

" The Public Health Committee of the County Council have agreed to the proposal submitted, and have entered into an arrangement with the Education Committee of the County Council in order that children ascertained at school to be suffering from defective vision who, in the opinion of the Council's ophthalmic surgeon, should continue under supervision, may attend the ophthalmic clinics set up by the Middlesex Education Committee at intervals during their adolescence.

" I am writing to enquire if your Council would be willing to co-operate with the County Council in this measure, directed towards the prevention of blindness, by offering similar facilities to children attending elementary or secondary schools in your district. It is suggested that the County Council should pay to your authority the same fee per refraction as that which already has been agreed between your Council and the Education Committee of the County Council, namely, 7/6. The cost of any necessary glasses would be borne by the adolescents concerned or, if they were unable to bear this cost, the charge would be met by the County Council under its public assistance powers.

" I shall be glad to learn the decision of your Council on this matter in due course.

" Yours faithfully,

" J. TATE,

" *County Medical Officer.*"

*Notes for the information of the Health Committee by the Medical Officer of Health.*

All Willesden children with visual defects who attend the Eye clinics of the Authority are required to re-attend at intervals of three, six, nine or twelve months as may be directed by the Council's Ophthalmic Surgeon, depending on the nature of the visual defect.

" High Myope " comes within the definition " Blind " under Section 69 of the Education Act, 1921, which reads as follows :—

" The expression ' blind ' means too blind to be able to read the ordinary school books used by children."

All High Myopes who are discovered in the Public Elementary Schools are dealt with by the Children's Care Committee and suitable schools are found for them. Children attending these schools are under the supervision of the Ophthalmic Surgeon of the school.

In 1935, considerable correspondence took place between the Secretary of the Middlesex Education Committee and myself with regard to the method to be adopted in the examination of children about to leave schools for the blind in connection with their certification as blind within the meaning of the Blind Persons Act, 1920, as required by the Board of Education in Circular 1431 (5-10-33).



As a result of this correspondence it was agreed that during the school vacation preceding the last term at which a blind child attends school the child should be examined at the Middlesex County Council's Special Certifying Ophthalmic Clinic so as to ascertain if the child were blind within the meaning of the Blind Persons Act, 1920. This procedure is being duly carried out in respect of Willesden children in attendance at schools for the blind and partially blind.

At the present time the Willesden Authority undertake on behalf of the County Authority certain ophthalmic treatment in connection with secondary, etc., pupils for which they receive payment, namely :—

7/6 per pupil submitted for refraction ;

5/- per pair for spectacles, if provided ; and the actual cost of repairs when carried out.

It will be observed from the letter of the County Medical Officer that it is suggested—

- (1) that myopic children on leaving the public elementary schools at the age of 14 years or over ;
- (2) that myopic children on leaving secondary, etc., schools at the age of 16 years or over ;
- (3) that high myopic children on leaving special schools at the age of 16 years or over who are not certifiable under the Blind Persons Act, 1920 ;

should continue to have supervision at the expense of the County Council on the basis already in operation for secondary, etc., pupils.

It should be observed that the scheme outlined by the County Council refers only to children who have attended rate-aided schools in Willesden or Middlesex whether elementary or secondary, etc., and probably high myopic children sent to special schools and that such children would require to attend the school clinics during their working hours.

A myopic child having attended a private school in Willesden or Middlesex or a rate-aided school outside Willesden or Middlesex would be excluded from the benefit. As the scheme is framed under a general Act referring to " persons ordinarily resident within their area " and as the total number of cases required to be dealt with in this way would not be large, it would appear that the benefit should be general.

GEORGE F. BUCHAN,  
*Medical Officer of Health.*

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#### APPENDIX P.

7th July, 1938.

#### MEMORANDUM BY THE MEDICAL OFFICER OF HEALTH ON SLAUGHTER HOUSES.

##### (I) PRESENT POSITION.

There are two classes of Slaughter Houses—Registered and Licensed.

A Registered Slaughter House is one that was in existence under the Towns Improvement Clauses Act, 1847, and prior to the Public Health Act, 1875, and so is registered for all time. Their existence depends upon their being in continuous use and occupation. Slaughtering in them may be forbidden for a period of two months on conviction for an offence against the Act or byelaws and may be absolutely forbidden on conviction for a second or subsequent offence. (Section 129/1847.) Willesden has one such Slaughter House, viz., Milton, Hersant & Sons, 36, High Street, Harlesden, Bullocks, calves, sheep and pigs are slaughtered and the premises are kept in excellent condition.

Licensed Slaughter Houses are divided into two classes—those licensed after the Public Health Act, 1875, and those licensed after the adoption of the Public Health Acts Amendment Act, 1890. The former is a personal licence and lapses on the death or retiral from business of the original licensee. The latter is licensed for a period of not less than twelve months. (Section 29/1890.) These licences may also be suspended or revoked as in the case of the registered premises. (Section 31/1890.) Willesden has two licensed Slaughter Houses, each being granted an annual licence, viz., (Mrs.) Walter Beard, 345, High Road, Kilburn, and Smith & Spalding, Holly Lane, Willesden. Sheep only are slaughtered at Beards, averaging some 4 or 5 sheep and lambs per week. Horses only are slaughtered at Smith & Spaldings but during the past few years only occasionally has a horse been slaughtered, the main business being carried on at Markfield Road, Tottenham, and the Cattle Market, Islington. Beards' premises are kept in a satisfactory condition. Smith & Spaldings' premises were kept satisfactorily on the few occasions when in use. For the past two years these latter premises have been occupied by a greengrocer and fruiterer who uses the Slaughter House as a storage for foodstuffs and covered wagon and the lairage as a stable. The premises are kept in a cleanly condition. Smith & Spalding have applied yearly for their licence in order that they may have premises in this part of London to meet the requirements of their business. Apart from the desirability of abolishing such places I know of no good reason why their licence should be refused.



## (II) EFFECT OF FOOD AND DRUGS BILL.

The Food and Drugs Bill now before the House of Lords is expected to come into operation in January, 1939, and provides, *inter alia* :—

Section 57 (1). The occupier of a registered or licensed Slaughter House or Knacker's Yard in use immediately before the passing of the Act shall be deemed to hold a licence granted under the Section. Such licence will expire three months after the commencement of the Act. A renewal of such licence shall not be refused unless the Authority are satisfied that the applicant or the premises are not suitable (2 (b)). Notice of a refusal to grant or renew a licence is to be given to the applicant (4) and an aggrieved person may appeal to a court of summary jurisdiction (5).

Section 58 (2). A person convicted of an offence against any byelaw in addition to other penalty may have his licence cancelled.

Section 62 (1). A Local Authority may :—

- (a) acquire by agreement any Slaughter House and discontinue its use ;
- (b) agree with the persons interested for the discontinuance of its use.

Section 62 (2). A Local Authority who have provided a public Slaughter House may (after proper resolution and with the approval of the Minister) determine that no fresh licences be granted and all licences then in force shall not be renewed.

GEORGE F. BUCHAN,  
*Medical Officer of Health.*

7th July, 1938.

## APPENDIX Q.

## THE INVESTIGATION OF ATMOSPHERIC POLLUTION.

EPITOME OF THE REPORT OF THE STANDING CONFERENCE TO THE CO-OPERATING BODIES  
FOR THE YEAR 1937-38.

For the year ended 31st March, 1938, 50 bodies co-operating in the investigation of atmospheric pollution appointed representatives to the Standing Conference. This number was made up of 43 municipal authorities, 4 industrial undertakings and 3 other institutions. In addition to these 50 bodies, 36 municipal authorities and one industrial undertaking, co-operated in the work though they did not appoint representatives to attend the Conference. The 87 co-operating bodies contributed between them £774 17s. towards the cost of the central services carried out for them by the Department ; and they operated during the year, at their own cost, 124 deposit gauges, 16 automatic filters, 11 sets of apparatus for measuring the amount of sulphur gases in the air, and 54 sets of apparatus for estimating the " activity " of sulphur in the air by the lead " peroxide " method.

The most important work which the Department is now carrying out as part of its " central services " is the survey of atmospheric pollution in and round Leicester. Routine measurements have now been undertaken for more than a year, and a large volume of data has been accumulated. At the same time advantage has been taken of the opportunities of doing further research on methods of measuring. The Conference have no doubt that the final outcome of this survey will be a standard body of knowledge such as would never have been established save by some co-operative scheme, like the present, enjoying as it does the support of practically all the more important authorities in the country. The Conference desire again, to record their gratitude to the City of Leicester, for the encouragement and practical assistance which it has given throughout to the work of the survey.

Two matters were considered by the Conference. The first was the problem of smoke from burning colliery spoilbanks. After a discussion on the causes and methods of handling such fires, the following resolution was carried unanimously :—

" That a protest be addressed to the Ministry of Health about the continuance of the nuisance arising from burning colliery spoilbanks with a request that action be taken to end the same."

The second question was that of the control of zinc oxide fumes which arise on the pouring of molten brass. After discussion of the problems involved the Conference unanimously passed the following resolution :—

" That the question of arranging for investigation into the control of zinc oxide fumes arising in the manufacture of brass, be referred to the Department of Scientific and Industrial Research for consideration and report."

The first meeting of the Conference was held on 23rd April, 1928, and in presenting this Report to the Co-operating bodies, the Conference wishes to draw attention to the fact that the co-operative scheme has now been in existence on its present basis for 10 years. The experience gained during this period has shown that the organisation is well suited to the work of investigating the nature and extent of atmospheric pollution. Research on instruments and new methods of measurement, as well as the research at Leicester into the fundamental facts of distribution of pollution is now in

progress. Each year the results of the measurements which have been made are carefully examined and analysed and the progress of the researches reviewed in the Annual Reports, to which references will be found in almost every article on atmospheric pollution published in technical and scientific journals.

The work of investigation is steadily producing a mass of knowledge, growing in extent and reliability, about the facts of atmospheric pollution, on which those whose responsibility it is to consider and to deal with the problem of smoke nuisance may base well-founded proposals for action in the administrative sphere. The Conference therefore feels fully justified in commending the Investigation to the earnest consideration of all local Authorities and in urging them to help it to grow in magnitude and usefulness.

The financial position is such as to cause the Conference to be somewhat anxious for the future. The income during the year was almost identical with that for the previous year, but to meet the total expenditure it was necessary to draw on the balance available from previous years' income to the extent of more than £400. Unless contributions increase the available balance is likely to be nearly if not quite exhausted by the end of March, 1939. Almost the whole of the expenditure is accounted for by the cost of the central services for the collection, examination and preparation for publication of the results of observations made by co-operating bodies, and by the cost of the Leicester Survey. It is hoped that by the middle of 1939 sufficient data will have been accumulated by the Survey to make it possible to discontinue the special observations at Leicester though much essential work will remain to be done in analysing and studying the very large mass of available data with a view to ensuring that the fullest value is obtained from them.

(Signed) L. H. DIBBLIN,  
*Chief Sanitary Inspector.*

5th September, 1938.

## APPENDIX R.

### SCHOOL MEALS.

BY THE MEDICAL OFFICER OF HEALTH.

As a result of a visit from Miss E. M. Langley, the Inspector of Provision of Meals arrangements, a letter dated 3rd May, 1938, was received by the Authority from the Board of Education submitting the following points for the consideration and observations of the Authority.

In view of the small percentage of children taking advantage of the Sunday meal service it seems advisable to consider means of improving the attendance or to abolish Sunday feeding.

The introduction of potato-peeling machines would save a great deal of tedious labour and the employment of steaming ovens, in the three Centres now without them, would be advantageous.

The provision of knives, when solid courses are served, would give an additional educational value to the service.

The dietary should be slightly revised with a view to improving the balance of the respective meals.

This communication came before the Children's Care Sub-Committee at their meeting on 30th May, 1938, when the Medical Officer was instructed to report on the subject matter of the letter, including the dietary and the economic circumstances scale.

"In view of the small percentage of children taking advantage of Sunday meals service it seems advisable to consider means of improving the attendance or to abolish Sunday feeding."

The Children's Care Sub-Committee had this matter before them at their meeting on the 4th July, 1938, and at the same time the following memorandum on Sunday Meals by the School Medical Officer:—

#### SUNDAY MEALS.

Arrangements are made for providing breakfasts and dinners at Gibbons Road, Strode Road and Lower Place Feeding Centres. No dinners or breakfasts are provided on Sundays in the South Kilburn area but these will be available when the Committee's South Kilburn Centre is opened.

#### *Sunday Breakfasts.*

Very few Sunday breakfasts are supplied—none having been supplied at Gibbons Road, none at Strode Road and only 56 at Lower Place since 1st January, 1938. These breakfasts consist of bread and butter with jam or marmalade or currant bread and butter with cocoa and milk, and as the Feeding Centre Assistants have to be on duty for the preparation of the mid-day meal, it makes no difference to staff whether the children attend for breakfasts or not.



*Sunday Dinners.*

The following table shows the dinners which have been supplied at Gibbons Road, Strode Road and Lower Place on each Sunday since the beginning of the year :—

	<i>Gibbons Road.</i>	<i>Strode Road.</i>	<i>Lower Place.</i>
9th January ... ..	37	30	15
16th .. .. .	36	33	21
23rd .. .. .	39	41	11
30th .. .. .	38	38	13
6th February ... ..	44	40	19
13th .. .. .	43	40	19
20th .. .. .	42	32	20
27th .. .. .	35	31	21
6th March ... ..	43	22	18
13th .. .. .	46	30	21
20th .. .. .	40	25	21
27th .. .. .	36	33	19
3rd April ... ..	34	36	16
10th .. .. .	31	31	17
17th .. .. .	43	28	18
24th .. .. .	42	31	16
1st May ... ..	61	27	17
8th .. .. .	59	27	13
15th .. .. .	59	38	10
22nd .. .. .	52	31	12

On the average it may be stated that the number of children attending for Sunday dinners is approximately 17 per cent. of those who come during the week.

Having regard to these figures it would be possible to carry the Lower Place children to Gibbons Road, but this arrangement would mean an increased cost as shown by the following statement which excludes the cost of food as this cost would be the same in either case :—

	Costs of running school bus from Lower Place to Gibbons Road so that Lower Place children may be fed at Gibbons Road.	Costs at Lower Place Centre of feeding children under the present arrangement.
	£ s. d.	s. d.
Driver—2 hours ... ..	6 4	—
Attendant—2 hours ... ..	2 11	—
Bus running costs ... ..	1 0	—
Extra Assistant at Gibbons Road ... ..	12 3	—
Assistant ... ..	—	12 3
Gas ... ..	—	3 0
	<hr/>	<hr/>
	£1 2 6	15 3

The Children's Care Sub-Committee reported to the Education Committee on the 26th July, 1938, when their report was adopted in the following terms :—

" With reference to our report on 22nd June, 1938 (p. 229, par. 9), arising out of a visit of the Board of Education Inspector on provision of meals for the area, we have had before us a memorandum by the Medical Officer showing the arrangements made for the provision of breakfasts and dinners at the feeding centres on Sundays, and the numbers of children receiving meals at these centres on Sundays, copy of which has been circulated to all members of the Education Committee. After consideration, we recommend—

" That the existing arrangements for the feeding of school children on Sundays remain in force and that the Board of Education be informed accordingly."

" The introduction of potato-peeling machines would save a great deal of tedious labour and the employment of steaming ovens for the three centres now without them would be an advantage."

*Potato Peeling Machines.*—Electric Potato Peelers could be installed at each of the four existing Centres of the Education Committee at an approximate cost of £25 per potato peeler or £100 in all. It is proposed that a potato peeler be installed at the new Feeding Centre to be established at Percy Road at an approximate cost of £40.

*Steaming Ovens.*—An electric steaming oven is provided at the Gibbons Road Feeding Centre.

At Furness Road, Strode Road and Lower Place Feeding Centres, however, the puddings are boiled and the results are quite satisfactory. If the Committee decided to instal steaming ovens it would be possible to place them at Furness Road and Strode Road Centres, but it is doubtful if there is room at Lower Place Feeding Centre. Gas is already installed at these Centres and the cost of a suitable gas steaming oven for these Centres would be £12 per annum (hire) with £5 for fixing per steaming oven.

It is proposed to instal two steaming ovens for puddings at the new Percy Road Feeding Centre.

If vegetables are to be steamed instead of boiled as at present, double the above installation would be required.

"Provision of knives when solid courses are served would give an additional value to the service."

Knives have always been provided at the Education Committee's Centres when solid courses are served except to the very young children. At the Granville Road Voluntary Centre, however, knives are not provided, but this will shortly be rectified when the new Feeding Centre is established at Percy Road.

"The dietary should be slightly revised with a view to improving the balance of the respective meals."

As the Children's Care Sub-Committee desire to have full information on this matter as well as the economic circumstances scale I have set out in the following pages a comprehensive review of the subject.

#### HISTORICAL SUMMARY.

So far as records are available it appears that the feeding of school children in day schools commenced during the last twenty years of the nineteenth century when funds were raised on a voluntary basis for this purpose.

The first official reference to the question of feeding school children is to be found in the Report of the Royal Commission of Physical Training which reported in 1903—

"We consider that the question of the proper and sufficient feeding of children is one which has the closest possible connection with any scheme which may be adopted for their physical and equally their mental work.

"It is evident that among the causes which tell against the physical welfare of the population, the lack of proper nourishment is one of the most serious. The subject demands special notice, not only as regards the existing state of affairs, but still more in view of any increase of physical training throughout the State aided schools which may commend itself."

In March, 1905, the President of the Board of Education appointed a Committee whose terms of reference were as follows:—

1. To ascertain and report on what is now being done and with what results in respect of medical inspection of children, and
2. Further to enquire into the methods employed, the sums expended and the relief given by various voluntary agencies for the provision of meals for children at Public Elementary Schools and to report whether relief of this character could be better organised.

The outcome of this Committee's report was the Education (Provision of Meals) Act, 1906, which has been made use of in the area administered by the Willesden Education Authority since it was passed.

On 7th August, 1914, the Education (Provision of Meals) Act, 1914, extended the operation of the original Act to the feeding of school children on days other than school days, removed the limit of a  $\frac{1}{2}$ d. rate as the total expenditure to be incurred by a local education authority and abolished the necessity for obtaining the sanction of the Board of Education to expenditure out of the rates on the provision of food.

The Education Act, 1921, re-enacted and consolidated previous legislation in Sections 82-85 and made it possible to arrange for the provision of meals for school children both on days when the school meets and other days.

The parent is required to contribute or defray the cost of the meals except in circumstances where the local education authority is satisfied that he is financially unable to do so, in which case the authority is empowered to defray from the rates the cost of such food as is used for these meals.

No obligation is placed on any teacher to assist or supervise or collect money as part of his duties.

Article 23 of the Special Service Regulations of the Board dated 1925, exhorts that children receiving meals must be properly selected and dietary arrangements and service must be sufficient and suitable. The school medical officer must assess and record the value of the meals and he must be associated with the administration and arrangements.

The recent interest in the physical condition of our children resulted in arrangements being made by the Minister of Agriculture for the provision of milk in schools outlined in Circular 1437 of the Board of Education dated September, 1934. This made available to school children milk at  $\frac{1}{2}$ d. per  $\frac{1}{3}$ rd of a pint and authorised the granting of free milk to necessitous cases. The school medical officer was required to approve the supply and urged to assess the results accruing.



Administrative Memo. 124 of December, 1934, revised the statistical classification of states of nutrition into four groups—excellent, normal, subnormal and bad. Medical officers are now required to assess the nutrition of children at routine inspections and place them in the appropriate group.

Circular 1443 of December, 1935, reiterates the necessity for close medical supervision and medical selection of recipients of free meals suggesting that "nutrition surveys" might be conducted in the school at frequent intervals to select those children requiring additional nourishment.

*Revision of Dietary.*

I beg to submit a revised dietary.

*Breakfasts.*

1. Brown or white bread and butter with jam, marmalade or golden syrup, or currant bread and butter. Cocoa made with milk.
  2. Boiled egg with brown or white bread and butter. Cocoa made with milk.
- Breakfast 1 to be given on four days a week.  
Breakfast 2 to be given on three days a week.

*Dinners.*

1. Lentil Soup. Bread and butter. Boiled currant pudding.
2. Meat pie, potatoes, peas. Brown bread and butter. Lemon rice and jam.
3. Brown stew and dumplings. Bread and butter. Baked jam roll or jam tart. Fresh fruit.
4. Roast mutton, potatoes, greens. Brown bread and butter. Stewed prunes and custard.
5. Baked fresh haddock, potatoes, parsley sauce. Bread and butter. Golden pudding.
6. Shepherds pie, haricot beans. Brown bread and butter. Rice and raisin pudding.
7. Boiled beef, potatoes, carrots. Bread and butter. Dutch apple tart.
8. Savoury salmon and cheese pie. Brown bread and butter. Jam roly-poly.
9. Roast beef, potatoes, butter beans. Bread and butter. Stewed fresh fruit and custard.
10. Minced meat, potatoes, greens. Brown bread and butter. Banana trifle.
11. Cheese pie, gravy, peas. Bread and butter. Strawberry blanc mange. Fresh fruit.
12. Italian casserole, potatoes. Brown bread and butter. Boiled chocolate pudding.

*Milk.*

The children on the feeding list each receive  $\frac{1}{3}$ rd pint of milk on each school day.

*Fresh Fruit.*

Each child on the feeding list receives an orange, apple, banana or other fruit in season once a week.

The new dietary as submitted above is improved as compared with the dietary now in use in the following main respects:—

- (1) More animal or first-class protein in the form of meat, fish or cheese is allowed in the dietary to the extent of about 1 oz. per child per day.
- (2) A roast mutton dinner is provided.
- (3) Haddock is given instead of cod as the latter is supplied large and coarse.
- (4) Only 1 soup dinner without meat occurs in the 12 menus as compared with 2 such dinners in 15 menus previously.
- (5) An egg is provided at breakfast 3 times a week.
- (6) Allowance has been made for wastage in the food as purchased so that the edible food may be of proper amount.

The average age of the children receiving meals is about 10 years and analysis of the revised dietary shows that each child receives approximately on the average the following quantities daily in the food as purchased:—

	Provided in the revised dietary in the food as purchased.					*Approx. total daily requirements in food as purchased.
	Breakfast.	Dinners.	Milk.	Fruit.	Total.	
Calories ... ..	858	1,422	126	—	2,406	2,800
Protein—						
Animal ... ..	2.5 gmes.	18 gmes.	6 gmes.	—	26.5 gmes.	25–30 gmes.
Vegetable ... ..	19.5 gmes.	19 gmes.	0 gmes.	—	38.5 gmes.	
Total ... ..	22.0 gmes.	37 gmes.	6 gmes.	—	65 gmes.	75 gmes.
Fat ... ..	30 gmes.	63 gmes.	7 gmes.	—	100 gmes.	80–100 gmes.
Carbohydrate ... ..	119 gmes.	167 gmes.	9 gmes.	—	295 gmes.	400 gmes.
Calcium ... ..	0.65 gmes.	0.49 gmes.	0.19 gmes.	—	1.33 gmes.	1 gme.
Phosphorus ... ..	0.99 gmes.	0.78 gmes.	0.16 gmes.	—	1.93 gmes.	1 gme.
Iron ... ..	6.0 mlgmes.	7.6 mlgmes.	—	—	13.6 mlgmes.	15 mlgmes.
Vitamins A, B, C, D	A.B.D.	A.B.C.D.	A.C.D.	C.	A sufficiency	A sufficiency

\* These figures are based on the requirements laid down by various authorities but it must be understood that they cannot in any sense be regarded as firm or absolute. They, however, give an excellent guide to the average daily requirements of the average child of about 10 years.



It will be understood that the meals supplied by the Education Committee are not intended to represent the complete daily food intake of the average child of 10 years. But as the economic circumstances of the families from which such children come are low it is desirable that they should be supplied with the essential and more expensive foodstuffs at school so that the supplementary feeding at home may be comparatively easy and cheap.

Having regard to these considerations I am of opinion that the dietary now submitted for the consideration of the Committee is a sound and proper dietary for the average child fed, namely, a child of 10 years, for the following reasons:—

- It provides about 6/7ths of the total calories requires.
- It provides nearly all the animal protein and about 4/5ths of the total protein required.
- It provides all the fat required.
- It provides about 3/4ths of the carbohydrate required.
- It provides all the mineral elements required.
- It provides vitamins in sufficient amount.

The dietaries might conceivably be criticised on the ground that there is an insufficiency of raw fruit and green salads but in my opinion the extra cost of these does not warrant their inclusion in the menus. These foodstuffs contain Vitamin C which is protective against scurvy but having regard to the fact that a case of scurvy is very seldom seen in the population nowadays I do not think there is any clamant need for any further addition of fresh fruit and salads to the dietaries submitted.

The average daily costs of the dietaries are:—

	<i>Pence.</i>
Breakfast ... ..	2·7
Dinners ... ..	3·8
Milk ... ..	0·5
Fruit ... ..	0·14
	—
	7·14
	—

The weekly cost is therefore 50d.

#### THE PROBLEM OF SELECTION.

Having decided upon the dietaries the next problem which the Local Authority have to solve is which children in their area are unable by reason of lack of food to take full advantage of the education provided for them.

It has been suggested that this selection may be made (a) by medical examination, or (b) by having regard to the economic circumstances of the family.

*Selection by Medical Examination.*—It should be observed that the state of nutrition depends on many factors, including, Previous Disease, for example, Rickets in early childhood leading to stunted growth; Existing Disease; Chronic Fatigue, due to prolonged hours of work or too little sleep; Environmental Conditions, for example, overcrowding or absence of mother at work; and Diet.

Selection of the undernourished child by medical examination has been the subject of much discussion and various methods have been tried for assessing the state of nutrition, including Anthropometric Measurements; Co-ordination Tests; Lung Capacity Tests; Volitional Tests; Fatigability Tests; Endurance Tests; Estimation of Hæmoglobin; and Clinical Assessment.

The Advisory Committee on Nutrition reporting to the Minister of Health in 1936 reported on the Assessment of the State of Nutrition in the following terms:—

“We have endeavoured to obtain information as to the measurement of the state of nutrition as we considered that the correlation of the state of nutrition with the diet consumed would be of assistance to us in our inquiries.

“We have had under review the various methods which have been tried or are in process of trial or have been suggested for the assessment of the nutritional state. We are unable to recommend any known method as reliable. So far as our present knowledge goes it would seem that the clinical method given in detail in Administrative Memorandum No. 124 of the Board of Education is the most promising, but the trial of this method has not been sufficiently prolonged to establish its reliability.”

The Clinical Method has received much attention recently and it is fair to say that confidence in this method is now considerably shaken. Different doctors have been asked to examine the same set of children and the results show that physicians differ widely in their estimates of the nutritional states of the same children. I shall quote only one such result of a nutritional survey of children of each sex conducted by school medical officers in Brecon, Glamorgan and Carmarthen. There were 6 doctors and the same children were examined by all of them. The comments of the County Medical Officer for Brecon on the results are:—

- (1) All six doctors only agreed unanimously on 19 children.
- (2) Five doctors agreed with one dissentient on 24 children.
- (3) Four doctors agreed with two dissentients on 43 children.
- (4) In no less than 17 instances the same child was assessed as “Excellent” by some and “Subnormal” by others, while other children were similarly labelled “Normal” by some and “Bad” by others.



The following table similarly suggests the inconsistency and unreliability of the results obtained by Clinical Assessment in Willesden, even allowing for the differing social circumstances of the area.

PERCENTAGE OF WILLESDEN CHILDREN EXAMINED, GROUPED ACCORDING TO THEIR STATE OF NUTRITION AS REQUIRED BY MEMORANDUM 124 OF THE BOARD OF EDUCATION.

WILLESDEN ELEMENTARY SCHOOLS.													
1935				1936				1937					
	Excel- lent	Normal	Slightly Sub- normal	Bad	Excel- lent	Normal	Slightly Sub- normal	Bad	Excel- lent	Normal	Slightly Sub- normal	Bad	
Dr. A ...	12	76	11	1.0	12	83	5	0.0	14	81.5	4.5	0.1	
Dr. B } ...	10	76	13.5	0.5	3	95	2	0.0	4	94	2	0.0	
Dr. C } ...	24	48	28	0.1	7	85	8	0.0	0.1	92	8	0.1	
Dr. D } ...	—	—	—	—	—	—	—	—	13	75	11	1	
Dr. F } ...													
Dr. D } ...													
Dr. G } ...													
WILLESDEN SECONDARY SCHOOLS.													
1935				1936				1937					
Dr. A ...	20	78	2	0.0	23.5	76	0.5	0.0	Not available.				
Dr. B ...	0.0	96.5	3.5	0.0	0.0	100.0	0.0	0.0					
Dr. C ...	35	58	7	0.0	20	79	1	0.0					
Dr. D ...	0.0	69	31	0.0	0.0	91	9	0.0					
Dr. E ...	4.5	90.5	5	0.0	—	—	—	—					
Dr. F ...	23.5	73	3.5	—	8	91.5	1.5	0.0					
Dr. G ...	—	—	—	—	17.0	80.0	3.0	0.0					

It may be that a clinical observer would be able to detect serious undernourishment in a child resulting from underfeeding over a period although having regard to the findings above quoted even this may be doubted. But whether this be so or not it should be remembered that it is unsound public health practice to wait until underfeeding has produced obvious malnutrition before applying the remedy. The child should be fed wherever the circumstances of the family are such that sufficient money at home is not available for the purchase of food.

*Selection by Economic Circumstances.*—In endeavouring to determine the need of children to be fed on account of economic circumstances it is necessary to find out how much it costs to keep the average unit in a family receiving school meals. Excluding Rent, Insurance, National Health Unemployment Insurance, Fares to and from work and Payments for the care of children, the costs of living fall under the following headings:—

- Food,
- Clothing,
- Heating and Lighting,
- Sundries, including cleaning materials, replacements, haircutting, postages, stationery, recreation and unforeseen expenditure.

*Food.*—The child of 10 years may be assumed to be the average unit so far as food is concerned in the families receiving school meals. Such a child requires some 2,800 calories in the food as purchased as compared with some 3,400 calories for the adult male doing light work.

It has been already shown that the weekly cost of the meals provided by the Education Committee at contract prices is 50d. per week. It is probable that 25 per cent. would be added to this cost if the foodstuffs were bought at retail prices in small quantities, thus bringing these costs up to 62½d. per week. This sum, however, only provides 2,400 calories and 2,800 calories are required which at the same rate could be purchased for 73d. It should be observed that the 400 calories to be supplied at home are cheaper calories than those supplied at school, but I think the figure of 73d. or 6/1 should be used so as to provide a margin.

The diet prescribed by the British Medical Association in its report in 1933 supplied 3,400 gross calories in suitable proportions of protein, fat and carbohydrate per average man. This diet has recently been examined and amended in the light of greater knowledge by R. F. George who, in his address on "A New Calculation of the Poverty Line" in 1937 to the Royal Statistical Society, revised the weekly cost in relation to prices obtaining in 1936 with the following result:—

Age in years.							
1-2	2-3	3-6	6-8	8-10	10-12	12-14	Adult man
3/2	3/11	4/4	4/7	5/2	5/9	6/5	6/9

These figures are slightly below the figure of 6/1 for the average child of 10 years given in this report but the cost of living index for food only has gone up from 29 in July, 1936, to 41 in August, 1938.

*Clothing.*—There are certain sources of information available about the cost of clothing. R. F. George, in the paper referred to above, comes to the following conclusions:—

	s.	d.
Annual cost in 1936 for a man ... ..	47	6
" " woman ... ..	34	0
" " child (10 years) ... ..	30	0

NOTE.—Mr. R. F. George states at the beginning of his paper: "It should be emphasised at the very outset that under no circumstances can the "Poverty Line" be regarded as a desirable level. It seeks to assess the cost of a standard of living so low, that while persons below it are in extreme poverty, those just above it would commonly be regarded as very poor."

The Willesden Education Authority with the approval of the Home Office pay under the Children and Young Persons Act, 1933, £4 per annum for clothing for children (under 14 years) and £6 per annum for clothing for young persons (14 and under 17 years).

Enquiries made by this department amongst a limited number of families receiving school meals show that the cost of clothing per head of the family is 1s. per week. This is probably a low average and is accounted for by the fact that in most of the families there were older children whose clothes were made down for the younger.

In view of these figures the cost of clothing per head of the family may be put at 1s. 6d. per week.

*Heating and Lighting.*—The figures given for Heating and Lighting by R. F. George in his paper referred to above for an average family of 4 or 5 are:—

Heating ... ..	9d. per head per week.
Lighting ... ..	1.25d per head per week.

Enquiries made in a limited number of Willesden families where the children were receiving school meals showed that the cost of heating and lighting averaged 1s. per head per week.

*Sundries.*—These include cleaning materials, replacements, haircutting, postages, stationery, recreation, unforeseen expenditure, etc. No figure for such sundries is included in the paper by R. F. George except for cleaning materials which is estimated at about 2d. per head per week for a family of 4 or 5 persons.

From the enquiries made in a limited number of families receiving school meals in Willesden the average cost of sundries as defined above was 9d. per head per week.

*Total Cost.*—Having regard to all the preceding factors it is therefore deduced that the weekly cost of upkeep of the average member of a family living with few, if any, of the comforts of life is:—

	s.	d.
Food ... ..	6	1
Clothing... ..	1	6
Heating and Lighting ... ..	1	0
Sundries, including cleaning materials, replacements, etc. ...	0	9
	<hr/>	
	9	4
	<hr/>	

#### ECONOMIC CIRCUMSTANCES OF FAMILIES RECEIVING SCHOOL MEALS.

The economic circumstances per head per week of families receiving school meals is a net figure obtained by deducting the outgoings from the income and dividing the result by the number in the family.

Income per week includes:—

- (1) Average income per week (average for last 4 weeks is taken) including amount paid for National Health and Unemployment Insurance by applicant.
- (2) Contributions from children under 14 years earning.
- (3) Relief received from Public Assistance Committee.
- (4) Pension or treatment or special diet allowance in the case of ex-service men.
- (5) Contributions from sons in Navy, Army or Air Force.
- (6) Union Unemployment money.
- (7) National Insurance Unemployment money.
- (8) National Insurance Sick Benefit.
- (9) Amount received from lodgers (children over 14 years of age working are reckoned as lodgers). Any amount over 12s. per lodger is reckoned as income.
- (10) Letting, the whole amount received taken as income.
- (11) Any other source.



Outgoings per week include :—

- (12) Rent.
- (13) Insurance.
- (14) National Health Unemployment Insurance (Parents only).
- (15) Fares to and from work (Parents only).
- (16) Payment for care of children.

Number in family means parents, children attending school, children under school age and members of the family unable to work.

Breakfasts and dinners are given to children attending Public Elementary Schools if the net figure per head per week of the family obtained as above is below the following :—

No. in family.							Net income per head per week.	
2	...	...	...	...	...	...	Not exceeding 10/6.	
3	...	...	...	...	...	...	..	.. 9/6.
4	...	...	...	...	...	...	..	.. 8/6.
5 or over	...	...	...	...	...	...	..	.. 7/6.

This means that such families are living per head per week on sums not exceeding the amount shown in the 2nd last column of the following table :—

No. in family as defined.	Probable No. fed.	Economic Circumstances per week per head of scale.	Economic Circumstances per week of family.	Additional value per week of food provided by Education Committee.	Total Economic Circumstances including value of meals provided by Education Committee per week.	Total Economic Circumstances per head per week.	Estimated Total Economic Circumstances required for maintenance per head per week.
2	1	10/6	21/-	5/2	26/2	13/1	9/4
3	2	9/6	28/6	10/5	38/11	13/-	9/4
4	2	8/6	34/-	10/5	44/5	11/1	9/4
5	2	7/6	37/6	10/5	47/11	9/7	9/4
6	3	7/6	45/-	15/7	60/7	10/1	9/4
7	3	7/6	52/6	15/7	68/1	9/9	9/4
8	4	7/6	60/-	20/10	80/10	10/1	9/4
9	4	7/6	67/6	20/10	88/4	9/10	9/4
10	5	7/6	75/-	26/0½	101/-	10/1	9/4

The present economic circumstances scale was last revised in April, 1934, when the cost of living index for all items was 39. The cost of living index in August, 1938, was 56.

#### COST OF THE FOREGOING PROPOSALS.

The estimated additional costs of the foregoing proposals for an improved menu would be £1,429 per annum as shown below :—

Estimates, 1938-39.			New Estimate on same basis.		
1,000 breakfasts per week at 1½d.	...	= £325	1,000 breakfasts per week at 2.7d.	...	= £585
5,500 dinners per week at 3d. including fruit	...	= £3,575	5,500 dinners per week at 3.8d.	...	= £4,528
Milk	...	= £400	1,000 fruit per week at 1d.	...	= £216
			Milk	...	= £400
		<u>£4,300</u>			<u>£5,729</u>

#### ADMINISTRATIVE ARRANGEMENTS.

Meals are prepared at the following Centres under the direct control of the Education Committee :—

##### Gibbons Road.

Breakfasts and dinners are prepared and served at this Centre on 7 days a week.

Dinners are also cooked and sent on 5 days a week to Oldfield Road Physically Defective School where they are served in the main hall.

Dinners are also cooked and sent on 5 days a week to Oldfield Road Infants' School where they are served in the main hall.

*Furness Road.*

Breakfasts and dinners are prepared and served at this Centre on 6 days a week.

Dinners are also cooked and sent on 5 days a week to Leinster Mentally Defective School where they are served in the main hall.

*Strode Road.*

Breakfasts and dinners are prepared and served at this Centre on 7 days a week.

*Lower Place.*

Breakfasts and dinners are prepared and served at this Centre on 7 days a week.

*Carlton Vale School House.*

Breakfasts only are prepared and served at this Centre on 6 days a week.

Meals are prepared at the following Centre under contract with the Education Committee:—

*Granville Road Voluntary Centre.*

Breakfasts and dinners are prepared and served at this Centre on 5 days a week.

*Developments.*

The following table gives certain particulars with regard to the Feeding Centres:—

<i>Feeding Centre.</i>	<i>Seating Capacity.</i>	<i>Approx. average No. fed daily at the Centre.</i>	<i>Approx. average No. of meals sent out daily from the Centre.</i>
Gibbons Road ... ..	140	224	100 to O.R.P.D. 50 to O.R.I. 65 to L.M.D.
Furness Road ... ..	80	90	—
Strode Road ... ..	100	136	—
Lower Place ... ..	85	150	—
*Percy Road ... ..	240	375	—

\* In course of erection.

Certain changes have occurred in the composition of the population and in the distribution of the children in the schools which makes it desirable to contemplate certain new arrangements in connection with the feeding of school children. The development of the Curzon Crescent Estate has overcrowded the Gibbons Road Feeding Centre and the 225 children who are fed daily at Gibbons Road Feeding Centre come from the following schools in the numbers shown:—

Gibbons Road ... ..	73
Bridge Road ... ..	76
Leopold Road ... ..	43
Oldfield Road Jr. M. ... ..	32
	224

The Curzon Crescent Estate is not yet fully occupied, something like 120 families still having to be transferred there and it is likely that not less than 80 additional children from this area will require to be fed. It would therefore appear desirable to establish a Feeding Centre near the Curzon Crescent area to deal with the children from the following schools:—

Leopold Road ... ..	43
Oldfield Road Jr. M. ... ..	32
Oldfield Road Infants ... ..	50
Estimated additional number when Curzon Crescent is fully occupied ... ..	80
	205

This means that a new Feeding Centre with a seating capacity of about 200 is required in this area.

The rearrangement of the schools has resulted in the senior children from the Lower Place area attending Wesley Road School, the consequence being that two 'buses are required at mid-day each doing two journeys to convey these children back to the Lower Place Feeding Centre for their meals. This Centre is worn out and is too small for its purpose. It is desirable to abolish this Centre and to establish a new Centre with a seating capacity of about 200 in the Stonebridge area near the Wesley Road or Stonebridge Schools. This would mean, however, that the infant children attending Lower Place School would require to be conveyed by 'bus but one 'bus would suffice to carry them.



If these arrangements were adopted the Feeding Centres, seating capacities and numbers fed would be in accordance with the following table:—

	Seating Capacity.	Approximate average No. fed daily at the Centre.	Approximate average No. of meals sent out daily from the Centre.
Gibbons Road ... ..	140	149	100 to O.R.P.D.
†Curzon Crescent ... ..	200	205	
Furness Road ... ..	80	90	65 to L.M.D.
Strode Road ... ..	100	136	
†Stonebridge ... ..	200	150	
*Percy Road ... ..	240	375	

† Proposed new Centre.

\* In course of erection.

#### MEALS SUPPLIED.

All children on the feeding list are eligible to receive breakfast and dinner daily except on Christmas Day. They also are eligible to receive one-third pint of milk on five days a week at school.

The following table shows the number of meals supplied during 1937-38:—

	BREAKFASTS	DINNERS		
	Free.	Free.	Paying.	Total.
Gibbons Road ... ..	1,283	42,835	647	44,765
Oldfield Road, P.D. ... ..		8,286	9,469	17,755
Furness Road ... ..	1,295	19,655	798	21,748
Leinster M.D. ... ..		6,482	5,821	12,303
Strode Road ... ..	1,082	34,016	18	35,116
Lower Place ... ..	2,174	41,151	200	43,525
Carlton Vale School House ... ..	4,626			4,626
Granville Road Voluntary Centre ... ..	26,391	78,401		104,792
Feeding Centre Assistants ... ..	3,625	4,029		7,654
	40,476	234,855	16,953	292,284

One-third pints of milk supplied free = 151,359.

#### STAFF AND SERVICE.

The staff employed at the feeding centres is approximately one to every 50 fed. The children are encouraged to come to meals clean and tidy, to say grace, and to behave at table in an orderly manner.

Each table of 10-12 children has a table monitor selected by the Superintendent from the children. The monitor fetches the food from the serving table and sees that each child has a nicely served dinner.

#### CHILDREN PLACED ON FEEDING LISTS—REVIEW OF ECONOMIC CIRCUMSTANCES.

Children are put on the feeding lists immediately on receipt of applications from parents, school teachers, health nurses, medical officers or school attendance officers, subject to review by investigation of the economic circumstances of the family.

The following table indicates the occupations of the parents of children who were fed during 1937 :—

Occupation.	Number of children fed during 1937.	Number of families involved.		Percentage.	
		1936.	1937.	1936.	1937.
Unemployed ... ..	937	289	394	48.41	47.93
Widows ... ..	156	52	82	8.71	9.97
Deserted Wives ... ..	36	33	21	5.53	2.55
Orphans ... ..	2	2	1	.33	.12
Labourers ... ..	452	108	177	18.09	21.53
Railwaymen ... ..	25	9	11	1.51	1.34
Hawkers ... ..	34	13	17	2.18	2.07
Others ... ..	241	91	119	15.24	14.48
	1,883	597	822		

#### ARRANGEMENTS FOR ATTENDANCE OF CHILDREN AT THE FEEDING CENTRES.

Centres are for the most part within short walking distance of the schools from which the children come. Children, however, are transported by 'bus from Stonebridge area to Lower Place Feeding Centre and from Neasden area to Strode Road Centre on account of the greater distances from the schools in these areas to the Centres.

#### SUMMARY OF MATTERS FOR CONSIDERATION BY THE COMMITTEE AND CERTAIN ADDITIONAL INFORMATION WHICH MAY BE HELPFUL TO THE COMMITTEE IN COMING TO THEIR DECISIONS.

(1) Potato Peelers—Cost £25 per Potato Peeler.

To be installed at Gibbons Road Feeding Centre.  
Furness Road Feeding Centre.  
Strode Road Feeding Centre.  
Lower Place Feeding Centre.

(2) Steaming Ovens for puddings—Cost for Gas Steaming Ovens: £12 per annum for hire. £5 for fixing.

To be installed at Furness Road Feeding Centre.  
Strode Road Feeding Centre.  
Lower Place Feeding Centre. (? if room for this.)

Puddings are supplied not more frequently than twice a week.

(3) Steaming Ovens for vegetables—Costs and installation as in (2) but as Gibbons Road Feeding Centre has electric installation the cost at this Centre would be £13 per annum for five years. (Hire purchase.)

To be installed at Gibbons Road Feeding Centre. (? if room for this.)  
Furness Road Feeding Centre.  
Strode Road Feeding Centre.  
Lower Place Feeding Centre. (? if room for this.)

Vegetables are used daily.

(4) If the complete dietary is adopted the estimated increased annual total cost is £1,429.

(5) If Sunday meals were no longer provided this estimated increased total annual cost of £1,429 would be reduced by approximately £561.

(NOTE.—66 Sunday breakfasts and 5,509 Sunday dinners or 5,575 Sunday meals in all were supplied in 1937-38 out of a total of 267,677 meals supplied to children receiving free meals. No Sunday meals were supplied at South Kilburn. It is estimated that when Percy Road Centre is open about 75 Sunday breakfasts and 125 Sunday dinners will be supplied at this Centre.)



- (6) If breakfasts were no longer provided this estimated increased total cost of £1,429 would be reduced by approximately £525.

(NOTE.—Without the breakfast but with the improved dinners, milk and fruit the average child of 10 years would receive daily

- about 5/11ths of the total calories required ;
- nearly all the animal protein required ;
- about 3/5ths of the total protein required ;
- about 3/4ths of the total fat required ;
- about 1/2 of the total carbohydrate required ;
- more than 1/2 of all the mineral elements required ; and
- vitamins in sufficient amount.)

(NOTE.—36,851 breakfasts were supplied in 1937-38 out of a total of 267,677 meals supplied to children receiving free meals.)

- (7) If an egg three times per week is omitted from the breakfast and breakfasts with this omission given this estimated total annual increase of £1,429 would be reduced approximately by £140.

The food properties of an egg are very desirable for the growing child as an egg contains animal protein, iron, vitamin D protective against rickets and is rich in vitamin A protective against infections and vitamin B.

- (8) The disposition of new Feeding Centres at:—

Estimated cost of building and equipment excluding land.

(a) Curzon Crescent with a seating capacity of 200 ...	£5,000
(b) Stonebridge with a seating capacity of 200 ...	£5,000

GRANT.—All the foregoing items of expenditure are subject to 50 per cent. grant from the Board of Education.

GEORGE F. BUCHAN,  
*Medical Officer of Health.*

## APPENDIX S.

6th December, 1938.

## HEALTH CENTRES.

## ELEMENTARY SCHOOLS.

The Council have made the following arrangements for the allocation of elementary schools to Health Centres :—

		Schools.	School Population, being the average number on the roll for the year ended 31-8-38 and including Nursery Classes.
Health Centre 1 ... ..	Kensal Rise ... ..	...	890
	Chamberlayne Wood Road	...	568
	Salisbury Road ... ..	...	858
	Holy Trinity ... ..	...	128
	Christchurch ... ..	...	346
	Total ... ..		2,790
Health Centre 2 ... ..	Oldfield Road ... ..	...	886
	St. Mary's ... ..	...	377
	Pound Lane ... ..	...	635
	Dudden Hill ... ..	...	1,008
	Gladstone Park ... ..	...	440
	St. Andrew's ... ..	...	467
	Willesden Green R.C. ... ..	...	312
	Total ... ..		4,125
Health Centre 3 ... ..	Furness Road ... ..	...	860
	Harlesden R.C. ... ..	...	290
	Keble Memorial ... ..	...	519
	Leopold Road ... ..	...	714
	Acton Lane ... ..	...	335
	Lower Place ... ..	...	226
	Stonebridge ... ..	...	933
	Wesley Road ... ..	...	513
	Gibbons Road ... ..	...	718
	Bridge Road ... ..	...	927
	Total ... ..		6,035
Health Centre 4 ... ..	Gordon Memorial ... ..	...	396
	Kilburn Park ... ..	...	216
	St. Mary's R.C. ... ..	...	383
	St. John's ... ..	...	313
	Princess Frederica ... ..	...	573
	Leinster M.D. ... ..	...	117
	Carlton Vale ... ..	...	608
	Percy Road ... ..	...	285
	Total ... ..		2,891
Health Centre 5 ... ..	Braintcroft ... ..	...	964
	Wykeham ... ..	...	1,011
	Neasden Council ... ..	...	12
	Neasden C. of E. ... ..	...	109
	Mora Road ... ..	...	1,058
	Total ... ..		3,154
GRAND TOTAL including Nursery Classes (all Willesden) ... ..			18,995



SECONDARY SCHOOLS.

The following table shows the secondary schools which would fall to the foregoing Health Centres:—

		Schools.	Number on the roll at 26-4-37.
Health Centre 1 ...	...	Brondesbury and Kilburn High School ...	575
	...	Kilburn Grammar School ...	475
	...	Kilburn Technical School ...	264
	...	Kilburn Junior Commercial School ...	
		Total ...	1,314
Health Centre 2 ...	...	Willesden Technical Art School ...	488
	...	Willesden Technical Building and Engineering School ...	
		Total ...	488
Health Centre 3 ...	...	Convent of Jesus and Mary, Harlesden ...	350
	...	Willesden County School ...	461
		Total ...	811
Health Centre 4 ...	...	—	—
Health Centre 5 ...	...	None at present but site reserved ...	—
		All Willesden	2,613

## MATERNITY AND CHILD WELFARE.

The following table shows the maternity and child welfare cases which would be under visitation from each Health Centre and the percentage of such cases attending existing Health Centres :—

Health Centre.	School.	Maternity and Child Welfare cases under visitation by Health Visitor at end of 1937.	Percentage of such cases attending existing Health Centres at end of 1937.
1.	Kensal Rise ... ..	628	50
	Chamberlayne Wood Road ... ..	598	40
	Salisbury Road ... ..	701	57
	Holy Trinity ... ..		
	Christchurch ... ..	761	65
		— 2,688	— 54
2.	Oldfield Road ... ..	1,100	49
	St. Mary's ... ..		
	Pound Lane ... ..	950	61
	Dudden Hill ... ..		
	Gladstone Park ... ..	1,087	64
	St. Andrew's ... ..		
Willesden Green R.C. ... ..	— 3,137	— 58	
3.	Furness Road ... ..	728	53
	Harlesden R.C. ... ..	776	53
	Keble Memorial ... ..		
	Leopold Road ... ..	672	45
	Acton Lane ... ..		
	Lower Place ... ..	640	46
	Stonebridge ... ..		
	Wesley Road ... ..	520	50
	Gibbons Road ... ..	762	43
Bridge Road ... ..	— 4,098	— 48	
4.	Gordon Memorial ... ..	572	28
	Kilburn Park ... ..	395	26
	St. Mary's R.C. ... ..		
	St. John's ... ..	648	46
	Princess Frederica ... ..		
	Leinster M.D. ... ..	533	27
	Carlton Vale ... ..		
Percy Road ... ..	— 2,148	— 33	
5.	Braintcroft ... ..	615	65
	Wykeham ... ..	772	59
	Neasden Council ... ..		
	Neasden C. of E. ... ..	750	55
	Mora Road ... ..		
		— 2,137	— 60
	ALL WILLESDEN ... ..	14,208	51

## HEALTH CENTRE 5.

I have been instructed to prepare a scheme for the inauguration of a clinic service in respect of Health Centre 5. Certain clinic services have been specially allocated as follows :—

*To Health Centre 2.*

Dental Mechanics, X-ray work, Skin Surgery } for the whole of Willesden.  
Work and Squint Clinic.

*To Health Centre 3.*

Orthopaedic Work ... .. for approximately half of Willesden.



## To Health Centre 4.

Orthopaedic Work ... .. for approximately half of Willesden.

Diphtheria immunisation is at present a central service carried on at existing Health Centre 1 but it would be better if this service were performed at each Health Centre and this report provides accordingly.

The work, therefore, which is common to all Health Centres includes the following :—

Medical examination and treatment of public elementary scholars.

Vocational medical examination for public elementary scholars. (Not done at present.)

Medical examination and certain treatments for secondary pupils. (Treatments at present are confined to ophthalmic treatment by the Middlesex County Council.)

Ante-natal supervision and examinations. (These examinations at the present time are not fitted in with the work of district midwives and will necessarily increase when this arrangement is operative.)

Infant Welfare to include toddlers. (Little systematic examinations of toddlers is carried out at present. Only 495 such examinations in respect of an estimated total of 9,000–10,000 children 1–5 years were performed in 1937.)

Mothercraft. (Incompletely dealt with. Sessions are available only 2 or 3 times a week at existing Health Centre 2.)

Post-natal examinations. (Regular sessions and examinations not provided at present.)

Test feeding. (Limited by accommodation.)

Nursery. (Limited by accommodation.)

Pharmacy.

Artificial sunlight. (None at existing Health Centre 2.)

Breathing exercises. (None at existing Health Centre 2.)

Diphtheria Immunisation.

Dental Work other than Dental Mechanics.

*Medical Work.*—In assessing the medical work to be undertaken at the new Health Centres regard has been given to the work indicated above and the following further factors have been taken into account :—

(1) That while the total number of cases personally seen by the doctor—i.e., cases relating to Cleansing, Throat, Nose and Ear conditions, Minor Ailments, Expectant Mothers, Nursing Mothers and Infant Welfare—has increased, the proportion of cases attending personally seen by the doctor has fallen greatly during the past 8 years, maternity and child welfare cases being seen at the expense of the school cases. The following table shows this :—

	M.C.W.			S.M.S.			TOTAL.		
	Attendances for H.C. Doctor.	Personally seen.	%	Attendances for H.C. Doctor.	Personally seen.	%	Attendances for H.C. Doctor.	Personally seen.	%
1930	54,257	40,461	75%	37,380	19,515	52%	91,637	59,976	65%
1931	68,569	45,638	67%	45,252	17,114	38%	113,821	62,752	55%
1932	76,002	49,044	65%	48,238	17,817	37%	124,240	66,861	54%
1933	77,449	47,569	61%	51,050	18,240	36%	128,499	65,809	51%
1934	80,948	45,999	57%	42,947	16,375	38%	123,895	62,374	50%
1935	84,112	48,651	58%	44,023	14,631	33%	128,135	63,282	49%
1936	87,816	52,784	60%	47,901	14,647	31%	135,717	67,431	50%
1937	99,553	56,701	57%	53,033	13,962	26%	152,586	70,663	46%

(2) That although the school attendances are likely to be increased by the provision of a greater number of health centres, the increase of school attendances will not be material as school children on the whole have not the same difficulty in getting to the Centres as mothers and babies—a 10 per cent. increase has been allowed.

(3) That with Centres nearer to the population the attendances of maternity and child welfare cases will increase both in respect of numbers of cases and in frequency of attendances of such cases.

*Numbers.*—Having regard to the fact that the percentage of maternity and child welfare cases attending, taking Willesden as a whole, is 51 and in the best attended areas, namely, Pound Lane—Dudden Hill 61 per cent., Gladstone Park—St. Andrews—Willem Green R.C. 64 per cent., Christchurch 65 per cent. and Braintcroft 65 per cent., it is likely that soon after the Clinics are established 66 per cent. of maternity and child welfare cases will attend and such percentage will gradually increase.

*Frequency of attendances.*—The frequency of attendances varies with the distance from the Health Centre. The relative figures of frequency of attendances at existing Health Centres are:—

Health Centre 1	...	...	18
Health Centre 2	...	...	20.5
Health Centre 3	...	...	20.3
Health Centre 4	...	...	17.5
Health Centre 5	...	...	15.9

This relative frequency figure is obtained by dividing the total maternity and child welfare attendances made during 1937 by the number of maternity and child welfare cases attending at the Health Centre at the end of the year.

(*Note.*—These observations (2) and (3) would apply only to those Health Centres which would deal with people from transferred areas, namely, Health Centre 1, Health Centre 4 and Health Centre 5.)

(4) The areas to attend Health Centre 2 and Health Centre 3 are areas at present attending these Centres and show respectively a total of 58 per cent. and 48 per cent. in respect of maternity and child welfare attendances. It is nevertheless likely that these percentages will increase to 66 per cent. as many people at the present time refrain from attending on account of the long waits at these Centres and because the Health Visitors are unable to visit them.

Having regard to all these factors the following table shows for each proposed Health Centre:—

1. The Health Centre.
2. The school population.
3. The number of maternity and child welfare cases.
4. Total of (2) and (3).
5. The estimated number of school attendances.
6. The estimated number of maternity and child welfare attendances.
7. Total of (5) and (6).
8. The number of doctors required.

Health Centre.	Total No. on school roll.	M.C.W. cases under visitation by Health Visitors at end of 1937.	Total School and M.C.W. cases to be looked after. (Cols. 2 & 3.)	Estimated approx. Health Centre attendances.			No. of doctors required.
				School.	M.C.W.	Total.	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
1	4,104	2,688	6,792	13,122	36,656	49,778	2
2	4,613	3,137	7,750	19,169	42,586	61,755	2 with provision for 3.
3	6,846	4,098	10,944	28,068	55,868	83,936	3 with provision for 4.
4	2,891	2,148	5,039	13,394	28,941	42,335	2
5	3,154	2,137	5,291	14,612	28,746	43,358	2
Totals ...	21,608	14,208	35,816	88,365	192,797	281,162	

It should be observed that the total estimated approximate Health Centre attendances of 281,162 compares with a total of 216,946 for 1937 or an increase of nearly 30 per cent. This increase has been arrived at by having regard mainly to the better disposition of Health Centres and does not take into account what might be termed the normal growth of clinic work. In the 7 years 1931–1937 clinic attendances have increased by more than 25 per cent. It has further to be noted that the school leaving age will be raised to 15 years on the 1st September, 1939, and that this increase in the school population has not been specifically taken into account. In these circumstances it will be appreciated that the estimated total attendances of 281,162 is more likely to err on the side of understatement than overstatement.



## NEW HEALTH CENTRE 2.

It will be observed from the foregoing table that the estimated attendances at Health Centre (2) are 61,755. 43,735 of these are the concern of the whole-time medical staff, the remaining 18,020 being dealt with by specialists, or nurses or other non-medical workers as follows:—

*Concerning the whole-time medical staff—*

Cleansing ... ..	96 attendances.
Throat, nose and ear conditions ... ..	2,868 ..
Minor ailments ... ..	11,879 ..
	<hr/>
	14,843 ..
Expectant mothers ... ..	4,136 ..
Nursing mothers ... ..	9,664 ..
Infant Welfare ... ..	15,092 ..
	<hr/>
	43,735 ..

*Concerning others—*

Eye conditions dealt with by the Council's Oculist ... ..	1,541 attendances.
Skin conditions dealt with by the Council's Dermatologist ... ..	354 ..
Artificial sunlight dealt with by the Council's Dermatologist and Nurse ... ..	2,542 ..
School for Mothers dealt with mainly by the Health visitor in charge and only occasionally by the whole-time medical staff	1,327 ..
Nursery dealt with by the nurse-attendant ... ..	1,275 ..
Miscellaneous attendances dealt with by various non-medical workers ... ..	10,981 ..
	<hr/>
	18,020 ..

*Cleansing, Throat, Nose and Ear Conditions and Minor Ailments.*—The whole-time medical staff would see 30 per cent. of the total of 14,843 attendances—or 4,453 attendances—made in respect of cleansing, throat, nose and ear conditions and minor ailments, the time allotted being 5 minutes per attendance. (*Note.*—In 1937 the time taken to each such attendance was  $4\frac{3}{4}$  minutes.) 4,453 attendances at 5 minutes per attendance will therefore occupy 371 hours of a doctor's time per annum.

*Expectant Mothers.*—4,136 attendances in respect of expectant mothers would be made and all these attendances would require to be seen by the doctor. 10 minutes per attendance is allowed. (*Note.*—In 1937 the average time given to an expectant mother by a doctor was  $7\frac{1}{2}$  minutes. But this was too short and I have accordingly increased the time to 10 minutes.) This means that  $4,136 \times 10$  minutes or 689 hours of a doctor's time per annum are required.

*Nursing Mothers.*—9,664 attendances are made and 60 per cent. of these—or 5,798 attendances—would require to be seen by the whole-time medical staff. 6 minutes is the item allotted per attendance. Therefore the total item required is  $5,798 \times 6$  minutes or 580 hours of a doctor's time per annum.

*Infant Welfare.*—15,092 attendances would be made and 60 per cent. of these—or 9,055 attendances—would require to be seen by the whole-time medical staff. 6 minutes is the time allotted per attendance. Therefore the total time required is  $9,055 \times 6$  minutes or 905 hours of a doctor's time per annum.

*Note.*—*Nursing Mothers and Infant Welfare.*—In the two preceding paragraphs 6 minutes is allowed per patient. This will enable a doctor to see an average of 30 patients in an afternoon of 3 hours. The following table shows the work actually done by each doctor in 1937 from which it will be seen that 39.9 patients were seen on the average at each session and that  $4\frac{1}{2}$  minutes was the time given. This number of patients is too many for a doctor to deal with adequately and the time allowed is too short.

*Nursing Mothers and Infant Welfare Cases personally seen by Doctor.*

	Actual Sessions held (3-hr. sessions).	Nursing Mothers seen.	Average per session.	0-5 seen.	Average per session.	Total N.M. & 0-5 seen.	Average per session.	Average minutes per case counting N.M.I., 0-5 1. & a 3-hr. session.
H.C.1. Dr. A. ...	209	2,566	12.3	3,906	18.7	6,472	31.0	5.8 min. per case.
H.C.1. Dr. B. ...	221	3,883	17.6	6,412	29.0	10,295	46.6	3.9 min. per case.
H.C.2. Dr. C. ...	217	3,178	14.6	5,010	23.1	8,188	37.7	4.8 min. per case.
H.C.3. Dr. D. ...	223	3,459	15.5	4,801	21.5	8,260	37.0	4.9 min. per case.
H.C.3. Dr. E. ...	225	4,148	18.4	6,396	28.4	10,544	46.9	3.8 min. per case.
Total ... ..	1,095	17,234	15.7	26,525	24.2	43,759	39.9	4.5 min. per case.

The following additional medical work requires to be provided for in accordance with the Council's scheme :—

*Post-natal examination of the mother.*—This would apply mainly to women confined in the Willesden Maternity Hospital and by the Municipal Midwives. It is estimated that 353 would come for examination to Health Centre (2) and that each examination on the average would occupy 15 minutes. The total time would be  $353 \times 15$  minutes or 88 hours of a doctor's time per annum.

*Routine medical inspections of toddlers (1-5 years).*—Approximately 2,160 toddlers would be attached to this clinic and 66 per cent. or 1,426 would attend for routine medical inspection. The time allowed for such routine medical inspection is 10 minutes per inspection. The total time required, therefore, would be  $1,426 \times 10$  minutes or 237 hours of a doctor's time per annum.

*Diphtheria immunisation.*—It is estimated that 660 births per annum would be attached to Health Centre (2) and that one-half of the births would accept diphtheria immunisation. Five attendances are required for diphtheria immunisation or 1,650 in all. The time taken per attendance would be about  $1\frac{1}{2}$  minutes. Therefore the total per annum would be  $1,650 \times 1\frac{1}{2}$  minutes or, say, 41 hours of a doctor's time per annum.

*Medical and Vocational Examinations in the Schools.*—In addition to the foregoing, 2 sessions per week in the public elementary and secondary schools are required for statutory medical inspections and vocational medical inspections and one hour per day per doctor will be given up to office work and the supervision of the district health visitor's work.

Having regard to the foregoing figures the total time required per annum for the work set out above is as follows :—

Cleansing, throat, nose and ear conditions and minor ailments ... ..	371 hours.
Expectant mothers ... ..	689 ..
Nursing mothers ... ..	580 ..
Infant Welfare ... ..	905 ..
Post-natal examinations of mothers ... ..	88 ..
Medical inspection of toddlers 1-5 years ... ..	237 ..
Diphtheria immunisation ... ..	41 ..
	2,911 ..

A doctor works 1,702 hours per annum.

A doctor spends one session a week in the schools, or 120 hours per annum and one hour per day on 5 days a week for the supervision of health visitors' work, infectious diseases, exclusion from school and correspondence or 230 hours per annum. A doctor is thus left with 1,352 hours available for all the clinic work mentioned above.

The number of full-time doctors required at new Health Centre (2) is  $\frac{2911}{1352}$  or 2.15.

It will be appreciated by the Committee that the estimated provision has been arrived at on the theoretical assumption that every available minute is utilisable which hardly works out this way in practice.



## NEW HEALTH CENTRE (5).

The estimated total attendances at new Health Centre (5) are 43,358. This figure has been arrived at on the same basis as for clinics generally. In this case, however, the Maternity and Child Welfare attendances are already 65 per cent. and 59 per cent. from the Braintcroft and Wykeham-Neasden areas, respectively. An attendance of 66 per cent. from these areas with a clinic in their midst will occur as soon as the Health Centre is opened.

Mora Road area, however, already gives at existing Health Centre (2) an attendance of 55 per cent. and it is doubtful if the inhabitants from this area will attend Health Centre (5) in greater numbers. Nevertheless taking all these factors into consideration the general rise to 66 per cent. is probably near the mark.

The 43,358 attendances at Health Centre (5) has been analysed in the same way as for new Health Centre 2. 30,633 will require the attention of the full-time medical staff, and 12,725 the attention of other staff. The time required therefore for the clinic work to be done by full-time medical officers is shown in the following table:—

Cleansing, throat, nose and ear conditions and minor ailments ... ..	278 hours.
Expectant mothers ... ..	465 ..
Nursing mothers ... ..	391 ..
Infant welfare ... ..	611 ..
Post-natal examinations of mothers ... ..	60 ..
Medical inspection of toddlers 1-5 years ... ..	158 ..
Diphtheria Immunisation ... ..	28 ..
	1,991 ..

The number of full-time doctors required would be  $\frac{1,991}{1,352} = 1.47$ .

Health Centre (5) requires to be planned-built on a two-doctor basis.

## DENTAL WORK.

In Willesden at the present time four Dentists are employed to deal with 18,995 elementary school children including nursery classes and some 2,600 secondary school children and mothers and children under 5 years. The percentage of acceptances for treatment amongst the elementary school children is 37 per cent. and the percentage of acceptances for treatment amongst secondary school children is 34 per cent. The low percentage of acceptances amongst school children is very unsatisfactory and should at least be doubled. When the percentage of routine acceptances is doubled one Dentist will be required for every three thousand school children. In addition the Dentists of the Authority will be engaged in work in connection with mothers and children under five including the provision of dentures and orthodontic work.

Having regard to these factors the following table shows the number of Dentists required at each of the proposed five Centres:—

Health Centre.	School Roll.			M. & C. W. cases under visitation by Health Visitors at end of 1937.	Number of Dentists required.
	Elementary.	Secondary.	Total.		
1	2,790	1,314	4,104	2,688	2
2	4,125	488	4,613	3,137	2
3	6,035	811	6,846	4,098	3
4	2,891	0	2,891	2,148	1 with provision for 2.
5	3,154	0	3,154	2,137	1 with provision for 2.
Totals	18,995	2,613	21,608	14,208	

Note.—The raising of the school age to 15 years in September, 1939, is not taken into account in the above figures of scholars.

## M. &amp; C.W. and S.M.S. ALLOCATIONS FOR NEW HEALTH CENTRE (2).

The Ministry of Health in their letter dated 20th October, 1938, have asked for the proposed allocation of the work of the centre as between Maternity and Child Welfare and School Medical Service.

In previous reports to the Council this allocation has been 2/3rds Maternity and Child Welfare and 1/3rd School Medical Service.

On revised figures the attendances allocated to the services are as follows :—

*Attendances as Estimated.*

	M. & C.W.	School.	Public Health.
Cleansing ... ..	—	96	
Throat, Nose and Ear ... ..	444	2,424	
Minor Ailments ... ..	1,692	10,187	
Expectant Mothers ... ..	4,136	—	
Nursing Mothers ... ..	9,664	—	
	15,936	12,707	
Infant Welfare ... ..	15,092	—	
	31,028	12,707	
Eye Conditions ... ..	267	1,274	
Skin Conditions ... ..	194	160	
Artificial Sunlight ... ..	1,232	1,310	
School for Mothers ... ..	1,327	—	
Nursery ... ..	1,275	—	
Miscellaneous ... ..	7,263	3,718	
	11,558	6,462	
Post-Natal ... ..	353	—	
Routine medical inspection of Toddlers ... ..	1,426	—	
Diphtheria Immunisation ... ..	—	—	1,650
Medical Inspections in School—but these require office and staff accommodation at Health Centre ... ..	—	2,077	
	1,779	2,077	1,650
<b>TOTALS ... ..</b>	<b>44,365</b>	<b>21,246</b>	<b>1,650</b>

Squint Clinic and X-Ray work and skin surgery work carried out at this Health Centre would not be likely to alter the above proportions as all of these are available for both services.

Dental work is heavier on School Medical Service side as compared with the Maternity and Child Welfare side.

On the whole, therefore, the previous allocation by the Council of the Clinic as between Maternity and Child Welfare and School Medical Service of 2/3rds and 1/3rd does not require any alteration. After experience of working, adjustments are from time to time made between the two services and such reviews would continue.

**ESTIMATED COST OF ERECTION OF HEALTH CENTRE (5).**

The Engineer's estimate of the cost of building, excluding cost of land, is £24,750.

**GEORGE F. BUCHAN,**  
*Medical Officer of Health.*



## APPENDIX T.

6th December, 1938

## FOOD AND DRUGS ACT, 1938.

## MEMORANDUM BY THE MEDICAL OFFICER OF HEALTH.

This Act received the Royal Assent on the 29th January, 1938, and comes into operation on the first day of October, 1939. This is one of a series of Acts designed to consolidate Public Health Law and Administration. The first of these was the Local Government Act of 1933; the second, the Public Health Act of 1936 and now the Food and Drugs Act of 1938. This last Act is based on the recommendations of the Third Interim Report of the Local Government and Public Health Consolidation Committee which was presented by the Minister of Health to Parliament in December, 1937.

*Extent of the Act.*

The Food and Drugs Act, 1938, consolidates and simplifies and in some degree extends existing provisions in various Acts of Parliament relating to Food and Drugs. It also seeks to secure simplicity of administration in Willesden and similar areas by placing the whole local control of food and drugs under the local authority which, in the case of Willesden, is the Willesden Borough Council.

The Act deals with the composition of food and drugs; regulations as to food; unsound food; precautions against contamination of food; food poisoning; meat from knackers' yards; milk and dairies; artificial cream; bread and flour; margarine, margarine-cheese, butter and milk-blended butter; ice-cream; horseflesh; shell-fish; provisions as to importation; markets; slaughter-houses and knackers' yards; cold-air stores and refrigerators; general and miscellaneous provisions referring to administration, including entry, obstruction, etc., legal proceedings, compensation, appeals, interpretation, repeals, etc.

*New Duties.*

The following is a summarised list of the principal new duties which the Act imposes upon the Willesden Borough Council:—

- (1) The enforcement of any regulations made by the Minister as to food. (Section 8.)
- (2) The enforcement of the provisions as to unsound food offered as prizes, etc. (Section 11.)
- (3) The registration of premises used in connection with the manufacture or sale of ice-cream or preserved food, etc. (Section 14.)
- (4) The making of bye-laws as may be determined by the Local Authority with respect to the handling, wrapping, etc., of food and the sale of food in the open air. (Section 15.)
- (5) The enforcement of the display of notices showing the name and address of the vendor of ice-cream, etc., from stalls, carts, baskets, etc. (Section 16.)
- (6) The notification by medical practitioners of all suspected cases of food poisoning. (Section 17.)
- (7) Power to deal with any person who sells any part of an animal slaughtered in a knacker's yard for human consumption. (Section 19.)
- (8) Power to deal with ice-cream likely to cause milk-borne disease. (Section 37.)
- (9) The licensing of premises either as a slaughter-house or knacker's yard and not as heretofore as a slaughter-house only. (Section 57.)
- (10) The enforcement of the provisions of the Act relating to food and drugs so that generally speaking it may be secured that foodstuffs and drugs are of the substance, nature and quality demanded and that they have not been interfered with so as to render the food injurious to health or affect injuriously the quality or potency of the drug. (Section 65.)

Although the foregoing all represents new work placed upon the Local Authority the main amount of this new work is contained in the last paragraph (10) above relating to food and drugs. In connection with these matters sampling has to be done and analyses undertaken.

*Sampling.*

For purposes of sampling there is no need to add to the existing staff of sanitary inspectors, all of whom are qualified by examination as Food Inspectors, but from time to time agents for purchasing would have to be employed in order that vendors may not be apprised that the sample is being taken on behalf of the Council.

*Analysis.*

Analysis has to be considered from the point of view of informal samples and formal samples. It is generally estimated that 3 such samples per 1,000 of the population should be taken annually or some 600 samples in all for Willesden in any one year—450 of these would be informal samples and 150 formal samples.

Formal samples would require to be analysed by a recognised chemist having the necessary qualifications as public analyst duly appointed by the Council for this purpose. The cost of analysis is usually 15s. per sample. I would recommend that the necessary steps be taken to make this appointment.

Informal samples can be analysed at the Municipal Laboratory. At the present time, Mr. Burman, B.Sc., London, is employed as Laboratory Assistant in connection with bacteriological work and with additional equipment he could carry out the necessary chemical analyses of informal samples. His salary in April, 1939, will be £3 10s. per week and appropriate recognition should be given for the additional responsible work which would devolve upon him under this Act. It should be noted that this work is of an entirely different character to that which Mr. Burman has previously undertaken. I would recommend that he be put on a scale of £200—£15—£260 per annum as from 1st October, 1939.

*Summary of Cost.*

The estimated annual cost, therefore, of the administration of the Food and Drugs Act, 1938, would be as follows:—

Equipment, including bottles, jars, bags, etc. ... ..	£40
Agents' remuneration ... ..	£30
Travelling expenses ... ..	£10
Printing, Stationery and Postage ... ..	£15
Purchase of samples ... ..	£10
Analyst's fees—150 samples at 15s. per sample ... ..	£112 10s.
	<hr/>
	£217 10s.

*Authorisation of Inspectors.*—It would appear desirable that each Sanitary Inspector should have added to the Acts pursuant to which he is authorised by the Authority and which appear on his Certificate of Appointment the "Food and Drugs Act, 1938."

GEORGE F. BUCHAN,  
*Medical Officer of Health.*



## APPENDIX U.

6th December, 1938

PUBLIC HEALTH ACT, 1936, SECTION 343.

CIRCULAR 1600.

## MEMORANDUM BY THE MEDICAL OFFICER OF HEALTH.

The preliminary survey of the district has revealed that there are about 400 offices in Willesden, 250 of which are in connection with factories and the remainder in connection with Municipal Offices, Banks and premises occupied by Solicitors, Surveyors and Estate Agents. The size of these offices varies considerably—from an office for 1 or 2 persons to various offices in different parts of one concern employing a staff of 193 clerks.

*Sanitary Accommodation.*—In the majority of cases the sanitary accommodation is suitable and sufficient and where both sexes are employed separate accommodation is provided.

In some instances there is only one watercloset for the use of the employer and one or two female clerks, but it is not unreasonable to consider one w.c. sufficient where not more than four persons of mixed sexes are employed and where the watercloset compartment is provided with adequate fastenings to ensure privacy.

*Ventilation.*—Some 12 premises were found to be without sufficient ventilation. These are mostly private offices divided off from a main office and so are without external ventilation. Informal action will be taken to remedy this condition, but should this be ineffective the premises will be reported to the Health Committee for the service of Statutory Notices as may be required.

*Cleanliness.*—With the exception of one office which badly needs redecorating, the survey has not revealed any offices in an unclean condition.

*Obnoxious effluvia.*—With two exceptions there was no nuisance from effluvia.

One office was found where odours from a process (cellulose spraying) was being carried out and the odours entered the office. A new office with external light and ventilation has been constructed and the old office is now used as a store. At another works the fumes from acids used in cleansing metals previous to the process of chromium plating penetrated into the office. Steps are being taken to seal off the adjacent windows and make a new window on an external wall.

*Overcrowding.*—The Public Health Act does not lay down any standard for overcrowding. In these circumstances the standard laid down by the Factories Act, 1937 (Section 2 (2) and (3)), has been taken as a guide.

Until 30th July, 1942, 250 cubic feet per person is to be accepted; from 30th July, 1942, to 30th July, 1947, 250 cubic feet per person where suitable mechanical ventilation is provided and maintained or 400 cubic feet per person where no suitable mechanical ventilation is provided, will be the standards.

The majority of the offices inspected have not been measured as the amount of free air space even on the 400 cubic feet basis was obvious.

A number of offices which appeared to be overcrowded were measured, but all proved to have 400 cubic feet per person with the exception of one office where the cubic capacity was 265 cubic feet per person.

GEORGE F. BUCHAN,

*Medical Officer of Health.*

APPENDIX B

14 December 1952

James H. Easton, Director, FBI

Washington, D.C.

Re: [Illegible]

The undersigned is the Director of the Federal Bureau of Investigation in the Department of Justice and the undersigned is in communication with you regarding the matter mentioned in your letter of the 11th instant. The undersigned is in communication with you regarding the matter mentioned in your letter of the 11th instant. The undersigned is in communication with you regarding the matter mentioned in your letter of the 11th instant.

Very truly yours,  
[Illegible Signature]

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GEORGE N. BROWN  
Special Agent in Charge