[Report of the Medical Officer of Health for East Ham].

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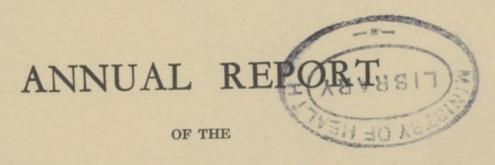
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COUNTY BOROUGH OF EAST HAM



Medical Officer of Health

AND

School Medical Officer

For the Year 1949

MALCOLM E. BARKER, M.R.C.S. (Eng.), L.R.C.P., D.P.H. (Lond.)

Medical Officer of Health; School Medical Officer; General Medical

Superintendent; Medical Officer to the Maternity and Child Welfare

Committee and the Statutory Committee for Mental Health; Chief

Tuberculosis Officer.





COUNTY BOROUGH OF EAST HAM

ANNUAL REPORT

OF THE

Medical Officer of Health

AND

School Medical Officer

For the Year 1949

Inspection and Supervision

MALCOLM E. BARKER, M.R.C.S. (Eng.), L.R.C.P., D.P.H. (Lond.)
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Tuberculosis Officer.

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EAST HAM CORPORATION.

COUNCIL (shewing Chairmen and Vice-Chairmen of Health, M. & C. W., Mental Health, After-Care and Education Committees).

> The Mayor: Mrs. Councillor ETHEL MAUD CHARLOTTE BRACE, J.P.

The Deputy Mayor: Councillor WILLIAM INNES JACKSON, J.P.

Aldermen:

CHARLES WILLIAM BRADING, J.P., C.R.P. CHARLES WILLIAM DIXON.

(1) SYDNEY ARNOLD ELSON.

- (4) RICHARD JOHN FELL.
 JOHN ALBERT HART, J.P.
 WALTER EDWIN HURFORD.
 HERBERT PERCY JACKSON.
 (6) THOMAS IRWIN LETHABY, J.P.
 - FREDERICK WELCH, J.P.
 (7) ERNEST ALBERT WOOD, J.P.

Councillors:

ROBERT CECIL BEADLE. WILLIAM HENRY WHITTOCK BEECHAM. LESLIE ALFRED VICTOR BENNETT.

- (2) Joseph John Gillard Bishop.
 Agnes Ann Bradshaw (Mrs.).
 Charles Frederick Chapman. FREDERICK GEORGE PRYER CLAYTON. Daisy May Davey (Mrs.). Edwin John Davey.
 ELsie Mary Devenay (Mrs.).
 Eric Edward Thomas Digby.

 (5) Eleanor Mary Fell (Mrs.).
- FRANCIS WILLIAM FRENCH. JAMES FENNER.

(3) FLORENCE MATILDA GOODCHILD (Mrs.). LEONARD LEWIS GRIFFITHS. HENRY JOSEPH HOOPER. FRANK HERBERT HOWARD.
THOMAS ALFRED JENKINSON. JOHN ALFRED KEMP. WINIFRED MAY KNIGHT (Mrs.) J.P. ARTHUR GEORGE MURRELL OAKES. FRANK OWEN REYNOLDS. REUBEN FREDERICK RICKETTS. LILY SUTTON (Mrs.).
JAMES ERNEST TAYLOR. RALPH REGINALD TURVILLE.

Co-opted Members of the Maternity and Child Welfare and Mental Health Committees :-

Mrs. M. E. BENNETT Mrs. A. M. Burrell, E.C.C. Maternity Mrs. C. Boar Coun. Mrs. S. Candy and Child Welfare Mrs. N. Griffiths Health Mrs. N. GRIFFITHS Mrs. S. Jackson

- (1) Chairman of Health Committee.
 (2) Vice-Chairman of Health Committee.
 (3) Chairman, Maternity and Child Welfare Committee.
 (4) Chairman of Mental Health Committee.
 (5) Chairman of After-Care Committee.
 (6) Chairman of Education Committee.
 (7) Vice Chairman of Education Committee.
- Vice-Chairman of Education Committee.

Public Health Officers of the Authority.

A. Medical-whole-time.

MALCOLM E. BARKER, M.R.C.S., L.R.C.P., D.P.H., Medical Officer of Health, General Medical Superintendent, School Medical Officer.

J. S. COLEMAN, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H., Deputy Medical Officer of Health and Senior Assistant School Medical Officer.

tJessie A. MacLaren, M.B., Ch.B., D.P.H., Assistant Medical Officer for M. & C.W. and Supervisor of Midwives.

J. TWELLY REES, M.R.C.S., L.R.C.P., Assistant Medical Officer.

G. H. R. Curnock, M.B., B.S., M.R.C.S., L.R.C.P., D.R.C.O.G., D.C.H., Obstetrical Officer to Aldersbrook Maternity Hospital and Assistant Medical Officer for M. & C.W.

*Katherine H. Foley, M.R.C.S., L.R.C.P., Temporary Medical Officer, Aldersbrook Maternity Hospital and Children's Homes.

STELLA MARGARET BERYL PERRY, M.B., Ch.B., D.P.H., Assistant Medical Officer.

†FREDA GASKELL, M.R.C.S., L.R.C.P., Assistant Medical Officer.

Medical-part-time.

OS. C. REEVE-FLAXMAN, M.R.C.S., L.R.C.P., Ophthalmic Surgeon.

R. SAVEGE, M.B., Ch.B., F.R.C.S. (Edin.), Aural Surgeon.

H. Bevan Jones, M.R.C.S., L.R.C.P., Psychiatrist. †W. H. CRAIKE, M.R.C.S., L.R.C.P., Psychiatrist.

B. Dental Surgeons :-

HILDA T. SMITH, L.D.S., R.C.S., Senior Dental Officer. C. E. MAYTUM, L.D.S., R.C.S. †PAULINE OSIS, D.D.D. University of Latvia (temporary).

C. Sanitary and Food Inspectors :-

R. A. Baskett, B.E.M., M.S.I.A., Chief Sanitary Inspector, Food and Shops Act Inspector.

tw. H. Thurston, M.S.I.A., A.R.S.I., R.P.

D. G. TONKIN, M.S.I.A.

W. J. Worley, M.S.I.A., A.R.S.I.

L. PINGUEY, M.S.I.A.

R. DAW, M.S.I.A.

*J. A. Dawson, M.S.I.A.

E. A. BLOOMFIELD, M.S.I.A., A.R.S.I.

†J. H. RILEY, M.S.I.A.

F. W. REEVE, M.S.I.A.

†H. F. WILLIAMS, M.S.I.A., M.R.S.I.

Shop Acts Inspectors :-

‡C. H. PURSALL, A.R.S.I.

†T. GILBERT.

D. Nursing Staff :-

Superintendent Health Visitor :-

†B. L. MARYON, S.R.N., S.C.M., H.V..'s Cert. (R.S.I.).

Unified Nursing Service (Health Visitors and School Nurses) :-

M. PRESTON, S.R.N., S.C.M., H.V.'s Cert. (R.S.I.). M. K. Pressey, S.R.N., S.C.M., H.V.'s Cert. (R.S.I.).

B. Walters, S.R.N., S.C.M. (H.V.'s Cert.). M. GOLDEN, S.R.N., S.C.M. (H.V.'s Cert.).

P. Cullis, S.R.N., S.C.M. (H.V.'s Cert.).

*D. M. SISMAN, S.R.N., S.C.M. (H.V.'s Cert.).
†S. GOLDEN, S.R.N., C.M.B. (Part 1), H.V.'s Cert. (R.S.I.).
†E. G. SLENNETT, S.R.N., S.C.M., H.V.'s Cert. (R.S.I.).
†M. J. Pye, S.R.N., C.M.B. (Part 1), H.V.'s Cert. (R.S.I.).
†M. LARNER, S.R.N., S.C.M., R.F.N., H.V.'s Cert. (R.S.I.).

M. H. NUNN, S.C.M.

C. G. CASE, R.F.N., A.R.S.I.

V. OLIFENT, R.F.N.

C. M. STRACHAN.

Physiotherapist and Light Sister:-

E. B. BROOME, S.R.N., C.S.M., L.E.T., M.S.R. G. O. Sainsbury, C.F.P., D.P.T., R.I.P.H. & H.

Tuberculosis Nurses :-

F. M. WILLIAMS, S.R.N., T.A. (Cert.). M. STOKES, S.R.N., S.C.M., T.A. (Cert.).

H. O. FORD, S.R.N., T.A. (Cert.). *E. I. SAYERS, S.R.N., T.A. (Cert.). †G. M. GRANT, S.R.N., T.A. (Cert.).

Municipal Midwives :-

M. LAW, S.C.M.

M. E. KINSELLA, S.R.N., S.C.M. S. J. MILLER, S.C.M. (temporary).

E. LLOYD-OWEN, S.C.M.

M. F. Brady, S.R.N., S.C.M. (temporary). M. A. Reynolds, S.R.N., S.C.M.

E. Mental Health :-

Duly Authorised Officers :-W. R. ELLEDGE. J. H. WICKENS. Mrs. M. A. Pearce. †R. C. HOAD. J. C. HILLIER.

F. Other Staff :-

A. H. Bleaden, Supervising Officer, M.D. Training Centre.

W. L. NARBOROUGH, Dispenser (temporary).

A. W. Lywood, Guide and Assistant (temporary), M.D. Training Centre.

†I. Allott, Assistant Supervisor, M.D. Training Centre. †H. H. L. Webber, Care and After-Care Assistant.

*F. J. H. Jackson, Home Help Organiser.

†D. H. Belle-Vue, Home Help Organiser.

G. Child Guidance :-

H. J. Wright, B.Sc., Educational Psychologist †Miss P. N. GLOVER, L.C.S.T. Speech Therapist. †Mrs. K. Barker, Play Therapist.

H. Clerical Staff :-

Chief Administrative Clerk, T. B. CLARK. Senior Clerk, B.E.R. HARTLEY, A.C.I.S.

Male Clerks :-

E. J. STEADMAN (Petitions Officer). C. J. HAYES.
H. J. HORSNELL.
B. G. BOAR.
D. E. ROSS.
B. J. CURLING.
R. C. THOROGOOD.
J. F. J. THOMAS.
and Temporary Clerks.

Shorthand Typists:—
D. GORDON, Senior.
D. G. CANNELL.
E. R. A. PADDON.
G. C. CROXSON.
†T. CANTY.

And Temporary Staff.

Female Clerks:—

M. A. R. GASTER.

F. C. WELLS

F. C. Wells.

F. C. Wells.

*B. Clandillon.

J. Mackintosh.

B. H. White.

F. M. Clark.

L. L. Cundall.

S. A. Moss.

S. A. Moss.

- A. Moss.
 And Temporary Staff.

 † Commenced during year.

 † Retired during year.
- ‡ Retired during year.
- * Terminated during year.
 - 0 Deceased during year.

COUNTY BOROUGH OF EAST HAM

Public Health Department,
Town Hall Annexe, E.6.

July, 1950.

To the Worshipful the Mayor, the Aldermen and Councillors of the County Borough of East Ham.

MR. MAYOR, LADIES AND GENTLEMEN,

I have the honour to present my Annual Report as Medical Officer of Health and School Medical Officer for the year 1949.

The Minister requests that the annual report be prepared on the lines of that for 1948, and besides dealing generally with the Medical Officer of Health's responsibilities regarding public health and preventive medicine, the report should, as appropriate, deal specifically with matters indicated below and applicable to this County Borough.

As regards the National Health Service Act, 1946, information is requested in respect of local health services under Part III. The report includes a review of the working arrangements for the care of expectant and nursing mothers and young children and describes developments or changes in these arrangements during the year. Similar information is given regarding the domiciliary midwifery service; the health visiting service; the home nursing service; arrangements for vaccination and immunisation; the ambulance service; arrangements for the prevention of illness, care and after-care; and the home help service. The report also includes in a separate section, details submitted by the Senior Dental Officer on the dental treatment provided for expectant and nursing mothers and young children.

The mental health section includes details of administration and an account of work undertaken in the community.

Reference is also made to Section 47 of the National Assistance Act regarding removal to suitable premises of persons in need of care and attention. Information concerning food, clean food campaigns and any food poisoning outbreaks are contained in the report.

The Registrar-General's mid-year estimate of the population was 121,900, which shews a slight increase over that for last year.

The number of inhabited houses is 34,285, an increase of 1,597 houses. The birth rate has still further decreased and was 15.8 per 1,000 of the population as compared with 18.1 for last year. The death rate for the borough at 11.55 was slightly higher than for the corresponding period.

The infantile mortality figure, i.e., the deaths of infants under one year—shews a still further reduction from 26 to 24—again the lowest infantile mortality rate in the history of East Ham.

The deaths of children under one month total 29—a neo-natal mortality rate of 14.9, approximately the same as last year.

The diagram on page 18 gives an indication of the causes of death which occurred in the borough, and that heart, circulatory diseases and cancer accounts for a large proportion of the deaths.

In respect of treatment of infectious diseases, it will be seen that cases are admitted to hospitals within a wide radius of the borough and more patients are treated at home.

This brings into focus an aspect of "Regionalisation" which is causing the Council some concern.

Complaints are being received from residents who object to the removal of their children to Infectious Diseases Hospitals remote from East Ham. Considerable travelling expenses to the parents in visiting are incurred and the consequent curtailment in the frequency of the visits distresses the parents and further increases the feelings of abandonment, and loss of affection experienced by the sick child. In this matter regionalisation tends to ignore modern paediatric teaching and, in addition, the charges of the ambulance service tend to swell the overall high cost of the hospital administration.

Another facet of the same problem is turned to the strong light of professional and public criticism, in the long waiting list for admission to sanatorium of early acute and active cases of pulmonary tuberculosis. Since the 'appointed day' the waiting time has grown from four weeks to ten months and, in many instances, the living conditions have considerably worsened and the possibility of the spread of infection markedly enhanced by delay in sanatorium treatment.

As an alleviating and social measure, the local authority is asked to remove from the home all children who may be contacts of such infected persons, and place them in foster homes or institutions at a distance, until such time as it is safe to restore them to their families. Meanwhile, treatment is instituted for the tuberculous subject in the home, a complete reversal of established procedure which is basically at fault, for no-one can ensure rigid isolation and antisepsis under such crowded conditions of living as exist in the borough, and disruption of home life, especially for the children should be avoided. There is never the complete assurance that other children or adults will not visit the infected subject and receive from him, in a few moments contact, a heavy dose of virulent tuberculosis germs which may alter, tragically, the whole tenor of their lives.

It would appear that for a circumscribed county borough, of a dormitory nature such as East Ham, a strong case could be made out for the return of its Sanatorium and Isolation Hospital. Regionalisation can best exert a beneficial action in geographically large rural and semi-urban populations, where it is manifestly uneconomic to create numerous small centres for treatment which are expensive to run and maintain.

In like fashion, the specialist clinics of the local authority will henceforth be staffed by medical graded personnel from the Regional Hospital Board. Here also repercussions are to be felt in that the somewhat onerous terms of engagement asked of the individuals concerned has resulted in contractions of the services rendered to the Council.

The "Dental Extraction under Anaesthesia" clinic and the Ophthalmic clinic have already suffered in this way and it is likely that the future work of the Child Guidance clinic will be affected also. It would appear that the problem must be faced, either of accepting a lower standard of professional service in some of our clinics, or the Council themselves maintaining the high level standard over the years by employing and remunerating specialists.

Dual control of such services cannot make for efficiency and the social aspect of the work generally and the integrity of the School Health Service in particular, point to the great desirability of direction and control being vested in the Health Authority through the Medical Officer of Health. A great forward surge is being witnessed in the field of social medicine. The development of the Home Help Service and the expansion of the Domiciliary Nursing activities have contributed not a little to the comfort of sick and ailing persons of all ages in the home and afforded some degree of respite to harassed parents and relatives. So also the continuance of the Day Nurseries has made it possible in many families to solve social and domestic problems which, without their help, would have precipitated breakdowns and upheavals in a number of individuals and families—a marked contribution to the achievement of positive personal and community health and well-being.

Furthermore, a drive has been inaugurated under the auspices of the Council towards the attainment of clean food, clean shops and hygienic food handling in the borough. There is a resurgence of public conscience, and residents in every station of life are increasingly aware of the not inconsiderable illness and disability resulting from the contamination of food, at its source, during storage and in the preparation and distribution. A great medicosocial effort also is gathering momentum to master one of the 'Captains of the men of Death'—Cancer—responsible for untold misery and suffering to numerous individuals and their families.

It will be seen that the Medical Officer of Health and his staff must play an increasingly active role in the elucidation of problems which have baffled scientists and sociologists for centuries and, with the reduction of infantile mortality, safe labour, the practical elimination of smallpox and other infectious illness, we can look forward with confidence to the conquest of this dread disease.

The care of old people also presents an ever expanding problem. All the help which can be given by the medico-social agencies under our control often does not suffice to procure for them a reasonable standard of living and personal comfort and recourse must be had to institutional care or placement in a hostel.

With the greater average expectation of life for every individual now an established fact, increased co-operation will be sought with the Regional Hospital Board and the Welfare Services to ensure to all aged persons that degree of comfort and companionship which should be every man's heritage in a civilised community.

Viewing all this effort in synoptic contemplation, it would appear that the home is being made more fitting for the reception

of the sick and ailing and little, if anything at all, is planned for the comfort and well-being of the normal burgesses and especially the children and young persons.

This vital factor, in my opinion, is the one which should never be lost sight of in the battle against juvenile delinquency now being joined between the slowly mobilising forces of the local authority and the recalcitrant youngsters who have never known real homes. After all, the home should be the abiding bastion against numerous individual and social evils, but its atmosphere must be clean, culturally wholesome and satisfying and, above all, peace and love must reign therein and radiate from the parents to the hearts and minds of the children.

Only by education in the home will this victory be won: by the Health Department through its Health Visitors and Mental Health services closing their ranks with all the moral and educational forces available, all directing their concerted effort towards the achievement of health, peace and joy in the home.

Comparison with previous reports gives an indication of the progress attained in recent years and the use made of the various new services. In this, my final report as Medical Officer of Health, I am happy to think that the Council's endeavours over many years have been extolled by the Regional Hospital Board and by Hospital Management Committees and that hospital and other services which have now passed to them have elicited such praise and admiration.

It is with deep regret that I record the death of Mr. Reeve-Flaxman, M.R.C.S. Eng., L.R.C.P., Ophthalmic Specialist to the Education Committee for over twenty years. An appreciation of his eminent services is contained in the school report.

Reference must also be made to the long and meritorious service of Dr. Jessie A. MacLaren, Assistant Medical Officer for Maternity and Child Welfare, and Mrs. A. A. Woodman, M.B.E., Superintendent Health Visitor, who, in the course of the year, retired on superannuation.

I desire to record my sincere regard for my deputy and successor, Dr. J. S. Coleman, and for Mr. T. B. Clark, Chief Administrative Clerk. I am very appreciative of the loyal and devoted service of all sections of the Health and School Medical

Departments and also wish to express my gratitude to members of the staff individually for the conscientious, willing and able manner in which they have carried out their duties and maintained the status of this department. I am indebted to my colleagues of other departments for their co-operation throughout the year.

My thanks are due to the Chairman and Members of the Health Committee and to those of Sub-Committees for their confidence in me and help on all occasions, and to other members of the Council for their friendship and generous consideration at all times.

I conclude this report with every good wish for the health, happiness and progress of the people of East Ham.

I have the honour to be, Mr. Mayor, Ladies and Gentlemen,

Your obedient Servant,

Malcolm Barker,

Medical Officer of Health.

Statistical and Social Conditions of the Area

Still Births.

The number of still births registered was 48 compared with 46 for the previous year. The rate per 1,000 total (live and still) births was 24.2, the figure for 1948 being 20.5.

The still birth mortality rates for England and Wales and East Ham are shewn in the following table:—

Burn	Still births per 1,000 population.								
58 Mandania 64	1944	1945	1946	1947	1948	1949			
England and Wales	0.50	0.46 0.53	0.53 0.56	0.50 0.51	0.42 0.38	0.39 0.39			

The rates for East Ham per 1,000 total (live and still) births for the past five years are indicated below:—

	1945	1946	1947	1948	1949
No. of still births	 51	64	61	46	48
Rate per 1,000 total births	28.4	24.2	21.06	20.5	24.2

Births.

The number of live births registered was 1,984, as compared with 2,194 for the year 1948, equivalent to a birth rate of 15.8 per 1,000 of the civilian population—the figure for the previous year—18.1.

A comparison of the statistics for the period since 1945 is appended below:—

	1945	1946	1947	1948	1949
No. of Births (East Ham) Birth rate (East Ham) ,, ,, (England & Wales)	 1,742 18.2 16.1	2,577 22.69 19.1	2,835 23.8 20.5	2,194 18.1 17.9	1,934 15.8 16.7

Deaths.

The number of deaths of residents dying within or without the district was 1,342, as compared with 1,172 for the year 1948. The death rate per 1,000 of the civilian population was 11.0, that for the previous year being 9.67. Of the total deaths, 569 or 42 per cent. died in institutions. The number of residents who died outside the area and whose deaths were assigned to the Borough was 550. The number of deaths of persons non-resident in the area was 64. The number of deaths in various age groups was as follows:—

Under M. 29	1 year F. 19	1-5 y M. 4	F. 6	5-15 M. 3	years F.	15-25 M. 9	years F. 8	25-35 M. 18	years F. 9	35–45 M. 27	years F. 20
45-55 M. 63	years F.	55-65 M. 126	years F. 91	65-75 M. 199	years F. 168	75–85 M. 186	years F. 198	85-95 M. 44	years F. 67	95 and M. —	over F.

The crude death rate was 11.0. The Registrar-General has now again supplied an area comparability factor and that for East Ham is 1.05. The corrected death rate is, therefore, the crude death rate (11.0) multiplied by 1.05—11.55.

For the period 1945—1949 the death rates for England and Wales and East Ham are compared:—

		1945	1946	1947	1948	1949
England and Wales	 	11.4	11.5	12.0	10.8	11.7
East Ham	 	12.9	10.6	11.79	9.67	11.55

Infantile Mortality.

Deaths of infants under one year numbered 48—equivalent to an infant mortality rate of 24 per 1,000 live births, the rate for the previous year was 26.

The rate for England and Wales for 1949 was 32.

The number of deaths of illegitimate children under one year of age was two out of a total of 65 illegitimate live births, giving a mortality rate of 30 as compared with a figure of 15 per 1,000 illegitimate live births for the year 1948.

The infantile mortality rates since 1945 are as follows:-

		1945	1946	1947	1948	1949
England and Wales	 	46	43	41	34	32
East Ham	 	36	30	30	26	24

Illegitimate births and mortality rates for the Borough since 1945 are tabulated below:—

	1945	1946	1947	1948	1949
No. of illegitimate births	105	108	102	65	65
Mortality rate per 1,000 illegitimate live births	38	18	49	15	30

Neo-Natal Mortality.

Children dying under the age of one month totalled 29, equal to a neo-natal mortality rate of 14.9 per 1,000 live births.

These rates from 1945-1949 are compared below:-

1945	1946	1947	1948	1949
19.5	19.4	17.6	14.5	14.9

The causes of death of these children under one month of age were as follows:—

Cause.						No.	of Deaths
Pneumonia			***			satt of f	3
Diarrhoea and Enteritis					***		-
Premature Births			100			Jane Di	9
Congenital Malformations,	Birth	Injury.	Infanti	le Dis	eases		16
Other causes							1
							DI TOTAL BOX
			Total	***	***		29

Maternal Mortality.

The number of maternal deaths was 3, the maternal mortality rate per 1,000 live and still births for 1949 was 1.513.

Population.

The Registrar-General's estimate of the population at the 30th June, 1949, was 122,000 total, and a civilian population of 121,900, an increase of 800 compared with that for the previous year. The rates per 1,000 of the population mentioned in this report are based on the estimate for the civilian population.

The Registrar-General published in 1949, "Estimates of the sex and age distribution of the civilian population in regions and administrative areas of England and Wales at 31st December, 1947."

An extract from this volume, appended below, relates to East Ham.

TABLE 1.

Age		Males	Females	Total	
All ages			56,588	61,612	118,200
0-4			5,559	5,284	10,843
5—14			7,394	6,884	14,278
15-17			2,147	2,167	4,314
18-19	***		584	1,593	2,177
20-24			3,319	4,271	7,590
25-34			10,161	10,288	20,449
35-44			9,777	9,506	19,283
45-54			6,901	8,050	14,951
55-64		Time	5,577	6,686	12,263
65-74		32.0	3,619	4,735	8,354
75-84			1,418	1,883	3,301
85 and ov		20110	132	265	397

NOTE.—For females, the age group 55-64 has been sub-divided as follows:—

55—59 3,486 60—64 3,200

The percentage of the total population (East Ham) divided into age-groups as on 31/12/47, was as follows:—

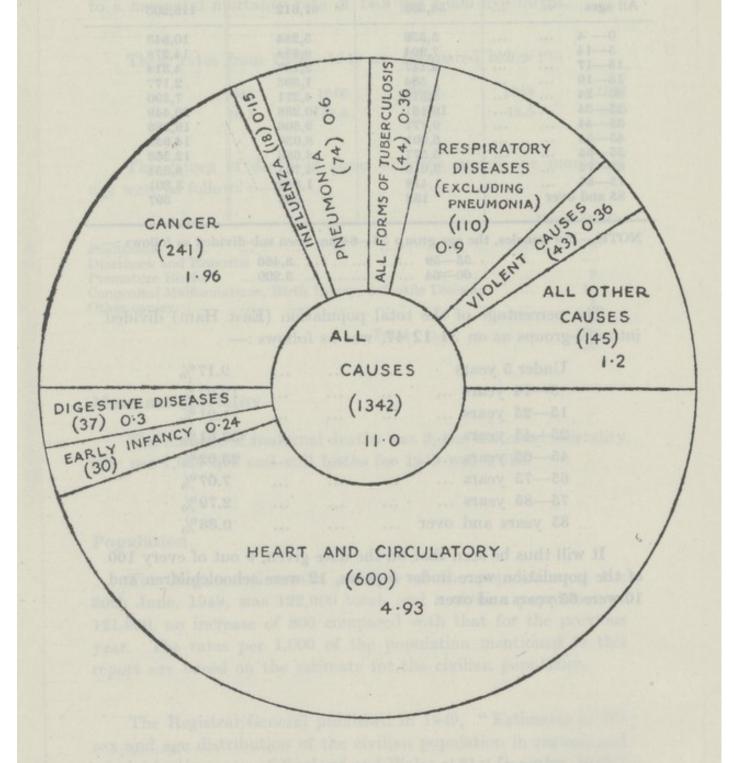
Under 5 years	CAUSES		9.17%
5—14 years			12.07%
15—25 years	(5081)		11.91%
25—45 years	0.11	_ /	33.61%
45—65 years		/	23.02%
65—75 years			7.07%
75—85 years	/		2.79%
85 years and over	r		0.33%

It will thus be seen that on the date given, 9 out of every 100 of the population were under 5 years, 12 were schoolchildren and 10 were 65 years and over.

TABLE 2.

DEATHS 1949

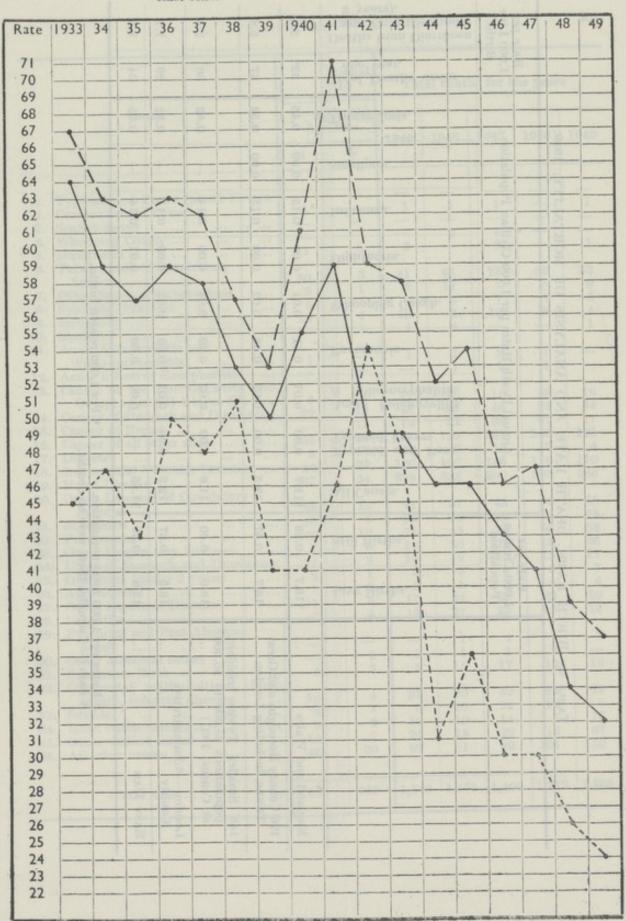
CRUDE DEATH RATES—VARIOUS CAUSES.



NOTE.—The figures in brackets shew the number of deaths from each stated cause.

INFANTILE MORTALITY RATES (per 1,000 live births) 1933-1949

England and Wales
County Boroughs and Great Towns
East Ham



20

TABLE 3.—BIRTH RATE, DEATH RATE AND ANALYSIS OF MORTALITY, 1949.

	1,000 (e per Civilian lation	TV	Annua	al Deatl	Rates	per 1,0	00 Civi	lian Po	pulation	1	1,00	te per 0 Live irths	
	Live Births.	Still Births.	All Causes.	Typhoid and Para- Typhoid Fevers.	Acute Poliomyelitis & Polioencephalitis.	Pneumonia.	Whooping Cough.	Diphtheria.	Influenza.	Smallpox.	Tuberculosis.	Total Deaths under one year.	Deaths from Diarrhoea and Enteritis (under 2 years).	
England and Wales	†16.7	†0.39	†11.7	0.00	0.01	0.51	0.01	0.00	0.15	0.00	0.45	32*	3.0	
126 County Boroughs and Great Towns, including London	18.7	0.47	12.5	0.00	0.02	0.56	0.02	0.00	0.15	0,00	0.52	37	3.8	
148 Smaller Towns (resident populations 25,000 to 50,000 at Census, 1931)	18.0	0.40	11.6	0.00	0.02	0.49	0.01	0.00	0.14		0.42	30	2.4	
London—Administrative County	18.5	0.37	12.2	0.00	0.01	0.59	0.01	0.00	0.11		0.52	29	1.7	
EAST HAM	15.8	0.39	11.55		0.00	0.60	-	0.01	0.14	74	0.36	24	1.5	

† Rates per 1,000 total population. A dash (—) signifies there were no deaths.

^{*} Per 1,000 related births.

TABLE 4.—CAUSES OF DEATH IN AGE GROUPS, 1949, AND TOTAL DEATHS FOR 1945-1940.

21 2		Dea	aths at	differe	nt perio	ds of li	fe of re	sidents at the d	(civilia istrict.	ns) whe	ther occ	curring			Institut		Tota	Total deaths for the year					
Cause.	All Age		Unde Yea		1— Yea		5—Xea		15— Yea		45— Yea		65 at Upwa		Total d		1949	1948	1947	1946	1943		
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	М	F							
m 1 11 1 D - to-hold Ferrors				_				_	_	_	-	_	-	_	-	-	- 1	-	- 1	_	-		
. Typhoid and Para-typhoid Fevers . Cerebro-Spinal Fever	1	_	1	_	_	-	_	_	-	-	-	-	-		1	=	_	_	_	_	_		
	_	_	_	_	-	-			-	-	-	-	-	_	100	_		2	8	_	_		
	_	-		_	-	-	-	-	-	-		-	_		1	1	2	_	8	_	1		
. Whooping Cough	1	1	-	-	1	1	-		-	-	-	-				*	-						
Tuberculosis of Respiratory									9	8	18	3	3		11	8	41	61	75	62	52		
System	30	11	-	-	-		-	-	1	1	1	0	_		2	1	3	11	7	8	9		
. Other forms of Tuberculosis	2	1	-	-	-	-	-	_	1	1	2	1	3	_	2	1	6	8	7	8	5		
. Syphilitic Diseases	5	1	-	-	-	-	=		1	1	4		5	. 7	2	1	18	2	12	8	4		
. Influenza	10	8	-	-		-	_		_			_	-	_	-	1	1	2	-	-	1		
. Measles	-	1	-	1	-	-															-		
. Acute Poliomyelitis and					_		1		-	1	-	-	-	-	1	-	1	1	2	1			
Polio-encephalitis	1		1772			100	_	-	-	-	_	-	-	-	-	-	-	1	1	1			
2. Acute infective Encephalitis	-	-					1		1000									10	10	26	16		
3. Cancer of the Buccal Cavity and	0	11	_	-	_	_	_	_	_	_	2	5	4	6	3	4	17	13	15 46	36	44		
Oesophagus (M) Uterus (F)	6 29	19					_	_	1	-	10	8	18	11	16	12	48	38 22	22	21	17		
4. Cancer of Stomach and Duodenum	29	19				_	-	_	_	1	-	8	-	10	-	11	19 157	129	153	142	129		
5. Cancer of Breast	102	55		_		-		-	8	5	38	24	56	26	56	29	11	7	15	7	4		
6. Cancer of all other sites	3	8	_	-		_	-	-		-	1	2	2	6	2 24	4 25	130	107	146	116	110		
7. Diabetes	54	76	_	_	_	_	-	-	-	-	8	15	46	61	62	54	399	338	860	303	286		
	207	192	_	-	_	-	1	-	9	7	42	34	155	151	02	0.0	000	000	000	000	-		
9. Heart Disease O. Other Diseases of Circulatory	20.	102									7.0		70	37	14	15	71	57	43	54	5		
System	29	42	_	-	-	-		-	-	1	10	4	19	32	8	8	92	66	115	74	7.		
1. Bronchitis	56	36	_	1	-	-		-	1	-	10	3	22	24	27	19	74	45	70	68	6		
2. Pneumonia	42	32	7	2	_	2		-	3	1	10	1	2	3	5	3	18	20	22	19	2		
3. Other Respiratory Diseases	8	10	-	1	-	-	-	-	-	5		1	4	2	10	3	14	12	15	15	1		
4. Ulcer of Stomach and Duodenum	11	3	-	-	-	-		-	1	-	6	1			2	1	8	3	9	8			
5. Diarrhoea (under 2 years)	2	1	2	1	-	-	-	-	-	333			1	1	1	2	3	1	7	6	1 33		
6. Appendicitis	1	2	-	-	-	1	-	-	1	1	2	2	8	3	10	5	17	32	39	22	3		
7. Other Digestive Diseases	11	6	-	-	-	-		-	1	1	2	2	3	4	1	4	13	27	23	19	1		
8. Nephritis	5	8	-	1	-	-	-	-	-	1	-	-							10000				
9. Puerperal and Post-Abortive	1			1000	200		1000			_			-	-	-	-	-	1	1	-	1		
Sepsis	-	-	-	-	-		-			3	_	_	-	-	-	8	3	1	1	2	1		
0. Other Maternal causes	-	3	-	-	-				_	_	_	_	_	_	4	5	9	15	17	16	1		
1. Premature Birth	4	5	4	5	-			1										-	00	0.4	1		
2. Congenital malformations, birth	1 70	3.0	14	7	1	1	_	1	1	_	_	5	-	1	11	4	81	30	32	34	1 2		
injury, infantile diseases	16	15	14	-	1	1		_	î	-	2	3	1	1	2	1	8	10	10	12	1		
3. Suicide	4	3					_	_	4	1	2	1	1	1	6	2	10	10	14 22	16	1		
4. Road traffic accidents		10	1		1		_		5	1	7	-	1	9	10	7	25	18 81	92	101	13		
5. Other violent causes	15	51	1	1 15 15	1	1	1	2	8	-	6	10	30	38	26	20	97	91	82	101	1		
36. All other causes	46	91		123	1	1				1000				I de la									
							-		-	-			100	404	200	0.40	1 9/0	1,172	1.400	1.212	1.		
			100000	19	4	6	3	8	54	37	189	135	429	434	320	249	14,022	1.164	14,700	Thursday.	- 31		

						Age and Sex.													
Cause of Death.	Total deaths.	-	der eek.		–2 eks.		–3 eks.		eks.		-3 nths.		-6		-9 nths.		-12 oths.	un	der ear.
		M	F	M	F	M	F	M	F	M	F	М	F	M	F	М	F	M	F
Cerebro-Spinal Fever	1		-			To los		- No.	Total St		. Le	_	F	Teh	Tipli.	1		1	-
Bronchitis	1	-	-	-	-		-	-	-	-	-	-	1	-	-		-	-	1
Pneumonia	9	2	-	1	-	-		-	-	3	2	1	-	-	-	-	-	7	2
Diarrhoea and Enteritis	3	-	-	-		-		-	-	1	-	1	2			-	1	2	1
Measles	1	-	-	-	-		-	-	-	-	-	-	-		1	_	-	-	1
Premature Births	9	3	4	1	1	-	-	-	-	_	-	-	2-	-	-	-	-	4	5
Congenital Malformations, Birth Injury, Infantile Diseases	21	10	5	1	_			The state of		1	1				1	2		14	7
Other Causes	3	-		-	1	-	-	-		-	-	1	-	_	1	-	-	1	2
Totals	48	15	9	3	2					5	3	3	1		3	3	1	29	19

General Provision of Health Services.

Midwives Acts, 1902-1936.

The number of midwives who notified their intention to practise in East Ham during 1949 was 32—of these 11 also indicated that they would act as Maternity Nurses. Of the 32, 9 worked in connection with the Maternity Hospital and District Nurses' Home, Plaistow, and its branches—2 at Sir Henry Tate Nurses' Home, Silvertown—13 at East Ham Memorial Hospital—and 8 practised independently, including 6 Municipal Midwives.

Plaistow Maternity Hospital and District Nurses' Home.

Summary of cases, 1949 :-

Midwifery 171 Monthly 88 Hospital 131

Silvertown & North Woolwich District Nursing Association.

Midwifery 6

Clinics and Treatment Centres.

These are all provided by the Council. The sessions at the Centres (as on 31/12/49) were as follows:—

TABLE 6.—CLINICS AND TREATMENT CENTRES.

Situation	Purpose used	Sessions
Town Hall Annexe	General Clinic (Minor Ailment cases)	Monday, Wednesday and Saturday 9.30 a.m. Tuesday 2 p.m.
STATE STATE OF STATE	Immunization Clinic	Friday 2 p.m. (School Health), Wednesday 10 a.m. (M. & C.W.).
resident to develop	Infant Welfare Clinic	Monday, Thursday and Friday 2 p.m.
ter the baby know	Physiotherapy Clinic Eye Clinic	Continuous. Tuesday and Friday 9.80 a.m. Alternate Thurs-
gagnal values 88	Toddlers' Clinic	days 9.30 a.m. Tuesday 10 a.m. and Wed- nesday 2 p.m.
DOL THE STREET STREET	Ante-Natal Clinic (and Post-Natal)	Friday 2 p.m. Monday 9 a.m., Tuesday 2 p.m., Thursday 10 a.m. and Friday 10 a.m.
TABLE SURFISH SURFIS	Scabies Clinic Dental Clinic	Tuesday 5 p.m. By appointment.
Church Road, Manor Park	General Clinic (Minor Ailment cases)	Tuesday and Friday 9.30 a.m. and Wednesday 2 p.m.
when one consequenting	Immunization Clinic	Wednesday 2 p.m. (School Health), Thursday 10 a.m. (M. & C.W.).
	Infant Welfare Clinic	Monday and Thursday 2 p.m.
	Physiotherapy Clinic	Monday, Tuesday, Thursday and Friday 9.80 a.m. and Wednesday 2 p.m.
	Toddlers' Clinic Ante-Natal Clinic (and Post-Natal)	Friday 2 p.m. Monday 9 a.m., Tuesday 2 p.m. Wednesday 9.30 a.m. (double session).
	Dental Clinic	By appointment.
†North Woolwich—Fernhill Street Baths	General Clinic (Minor Ailment cases)	Friday 2 p.m.
	Infant Welfare Clinic Ante-Natal Clinic	Tuesday 10 a.m. Alternate Tuesdays 10 a.m
Shrewsbury Road School, Forest Gate.	Child Guidance Clinic	Psychiatrist Present: Tuesday a.m. and p.m Thursday a.m.
	Speech Therapy	Continuous.
Durban House, Katherine Road.	Treatment Centre (Baths)	Wednesday 9.0 a.m. and 2 p.m. Saturday 9 a.m

Venereal Diseases.

The following statistics have been abstracted from copies of form V.D. (R) (1949), which have been received from the Hospitals named and total figures for 1948 and 1947 are also shewn:—

Patients	dealt	with	for 194		first	time	during
----------	-------	------	------------	--	-------	------	--------

		1949	Other	
	Syphilis	Gonorrhoea	Conditions	Total
Whitechapel Clinic, London Hospital	22	23	118	163
Queen Mary's Hospital, Stratford, E.15		6	30	45
St. Thomas' Hospital, S.E.1	Character of	Calland	1	1
Albert Dock Hospital		3	7	10
Albert Dock Hospital St. Paul's Hospital, W.C.2		1	2	3
Totals	. 31	33	158	222
Totals for 1948	. 20	40	145	205
Totals for 1947	. 19	40	170	229
	to be a second of the second of	and the second s		

Aldersbrook Homes and Scattered Homes.

The statistics for the year 1949 are appended :-

1	Average number in homes throughout the year	 468
9	No. chargeable to East Ham on 1/1/49	 84
3	No. chargeable to East Ham on 31/12/49	 110
	Average weekly admissions	 10
5.	Average weekly discharges	 11

The agreed policy in regard to the use of the facilities in the Children's Homes by the county borough of West Ham and the county council of Essex has had little effect on the general medical services and the conduct of the homes.

For the greater part of the year, Dr. Curnock, with the assistance of another medical officer, was able to attend to the routine visits and emergency calls. Close co-operation with the paediatric units of neighbouring hospitals enabled a high standard of medical and surgical care to be given at all times to the children under our care and the staff.

There has been a low incidence of infectious diseases and by reason of the vigilance and industry of the charge nurses the importing of infestation has been practically negligible. Clothing, diet, welfare and well-being of our charges have all received the maximum of attention from the Children Committee and their officers and the tendency has been towards the solution of individual problems, by special case study, placement in foster homes, nurseries and special schools.

The nursery still remains a model of its kind and stress is laid on individual nursing care wherever possible with the young babies, and on more freedom, play and nursery school type education with 'toddlers' to develop their inborn potential.

Let the baby know someone he can feel wants and loves him and let the toddler explore the possibilities of physical 'skills' and social values.

Home Office inspectors have proffered advice and guidance and the officers have received continuous support and encouragement from the visits and deliberations of the committee.

Greater stress is now laid on the individual happiness of the children, rather than on physical well-being or mass discipline, and when one considers that many of these boys and girls come under our care only for a relatively short span in their lives, this is probably the best method of approach to a perennially difficult problem.

One of the objects of recent legislation was undoubtedly to detach the 'Care of Children' from the stigma of the old 'Institutional Poor Law regime' and to replace this as far as possible by 'home life.' How far we have proceeded along this road and the benefits which have accrued on this enlightened journey we are not yet able fairly to assess, but this much can be said, it is improbable that we will ever fully retrace our steps.

Scabies and Treatment Centre.

The following statistics are appended for the year under review:—

Number of new	cases	attending-			
	1945	1946	1947	1948	1949
	268	237	77	67	46

Infectious Diseases.

The quarterly returns to the Registrar-General were as follows:—

Disease			Qtr. ending 31/3/49	Qtr. ending 30/6/49	Qtr. ending 30/9/49	Qtr. ending 31/12/49	Total.
Scarlet Fever			43	40	69	137	289
Whooping Cough			227	215	46	10	498
Acute Poliomyelitis	1	100	ROC GOY	1	n vni5m	7	13
Measles			712	341	39	6	1,098
Diphtheria			1	Frum Ann	Phuonas	1	2
Pneumonia			55	14	00 30	16	88
Food Poisoning			_	1	3		4
Erysipelas			4	2	9	9	24
Cerebro-Spinal Fever			1	2	1	2	6
Puerperal Pyrexia			nlichean	or of Land	ako walb	bot 1	2
Ophthalmia Neonator	um		2	1	1	-	4
Dysentery			-	_	-	1	1

The deaths from the seven principal zymotic diseases (Small-pox, Whooping Cough, Measles, Diphtheria, Diarrhoea, Scarlet Fever and Enteric Fever) numbered 6, as compared with 7 for the previous year and 15 for 1947.

The zymotic death rate was 0.049 per 1,000 population as compared with a rate of 0.05 for 1948.

No cases of smallpox were reported.

In the following table the notification rates for 1949 per 1,000 civilian population are shewn:—

TABLE 7.

Notifications	England and Wales	County Boroughs & Great Towns including London	148 Smaller Towns Resident Population 25,000–50,000 at 1931 Census	London Adm. County	East Ham
Scarlet Fever	1.63	1.72	1.83	1.46	2.36
Whooping Cough	1.39	2.44	2.39	1.70	4.09
Acute Poliomyelitis	0.13	0.13	0.12	0.18	0.10
Acute Polio-			2	Same made	
encephalitis	0.01	0.01	0.02	0.01	GROW
Measles	8.95	8.91	9.18	8.54	9.00
Diphtheria	0.04	0.05	0.04	0.07	0.01
Pneumonia	0.80	0.91	0.65	0.55	0.72
Typhoid Fever	0.01	0.01	0.01	0.01	10 DEC
Paratyphoid Fever	0.01	0.02	0.01	0.01	-
Erysipelas	0.19	0.20	0.19	0.17	0.18
Smallpox	0.00	0.00	0.00	0.00	-
Cerebro-Spinal Fever	0.02	0.03	0.02	0.02	0.04
Food Poisoning	0.14	0.16	0.14	0.19	0.08

TABLE 8.—TOTAL CASES OF NOTIFIABLE DISEASES, 1926-1949.

DISEASE.	1926	1927	1928	1929	1930	1931	1932	1933	1934	1935	1936	1937	1938	1939	1940	1941	1942	1943	1944	1945	1946	1947	1948	1949
Small Pox	-	-	17	25	70	51	13	1	1	-	-	-	-	-	-	-	-	-	_	_	-	-	_	_
Scarlet Fever	350	798	832	743	484	245	779	701	979	411	359	387	287	196	77	68	210	271	132	153	193	179	222	289
Diphtheria	337	464	669	578	473	196	157	180	379	254	134	149	141	91	47	45	49	59	33	31	19	46	14	2
Enteric Fever	7	2	7	2	3	8	7	5	-	2	2	13	15	8	10	3	-	4	_	_	-	_	1	_
Erysipelas	41	38	60	49	63	54	55	69	74	55	59	53	71	41	33	23	37	28	18	14	25	23	21	24
Puerperal Fever	5	5	4	8	9	10	4	4	7	12	7	5*	†	†	†	†	†	†	†	Ť	†	†	†	†
Puerperal Pyrexia	Notif Notif	11	11	12	14	6	23	10	11	14	7	7	18	16	8	6	15	8	8	2	8	5	4	2
Meningococcal Meningitis	1	4	1	1	3	8	5	1	3	8	-	2	3	3	11	5	12	4	3	1	8	1	5	6
Encephalitis Lethargica	1	2	3	1	-	-	-	1	1	1	_	1	1	_	-	-	_	_	-	-	_	_	-	_
Ophthalmia Neonatorum	10	12	3	8	6	6	6	9	5	5	6	7	9	7	3	4	1	1	4	2	1	2	-	4
Acute Poliomyelitis	-	5	-	2	_	1	7	2	5	13	2	4	-	2	1	-	_	_	-	1	-	7	8	13
Acute Polio Encephalitis	-	-	-	-	-	-	3	2	1	-	_	-	-	_	-	-	-	-	-	-	_	1	_	_
Dysentery	-	_	-	_	-	-	_	-	1	-	_	3	18	_	_	-	-	6	5	7	5	2	_	1
Malaria	-	-	-	-	-	-	1	1‡	-	-	_	_	-	_	-	-	_	-	-	1‡	3a	-	_	_
Measles						Not	Notif	iable			,			3	36	460	1091	917	258	1,498	815	964	1,559	1,09
Whooping Cough			1 161			Not	Notif	iable						_	19	262	227	241	293	67	258	430	578	49
Food Poisoning											No	ot No	tifial	ole										4
Typhus Fever	-	_	-	_	-	-	_	_	_	-	-	-	-	-	-	-	_	-	_	-	_	_	_	_
Pneumonia	70	114	82	102	59	75	77	148	100	88	101	111	85	59	42	33	37	72	50	55	97	143	111	88
Totals	822	1,455	1,689	1,531	1,184	660	1,137	1,134	1,567	858	677	742	648	426	287	909	1,679	1,611	804	1,832	1,432	1,803	2,523	2,02

^{*} Notifiable as Puerperal Pyrexia as from 1/10/37.

[†] Notifiable as Puerperal Pyrexia.

^{‡ 1} Induced in an Institution.

a 1 Induced for the rapeutic purposes; 2 Contracted abroad.

Infectious Diseases.

The quarterly returns to the Registrar George were as follows:--

| District | Percent | Per

A class (-- Laignilles no notification

Table 9.—PREVALENCE OF, AND CONTROL OVER, INFECTIOUS DISEASE. Notified Cases for Year ended 31/12/49.

	Cases notified in whole district.										Ward Distribution of Cases.											
DISEASE.	At all ages—years.										35-63			4	-80		T.	1-11	T A		Case ed to tal.	é
	At all ages	Un- der 1	1 to 5	5 to 10	10 to 15	15 to 20	20 to 35	35 to 45	45 to 65	65 and Up	Manor Park.	Little Ilford.	Wood- grange.	Plashet.	Kensing- ton.	Castle.	Central.	Wall End.	Great-field.	South.	No. of Cases removed to Hospital.	Total
Scarlet Fever	289		90	146	37	8	7	1	_	_	34	72	24	26	23	18	15	21	8	48	179	_
Diphtheria	2	1	1	-	-50	1			_	_	-	_	1	15	- 1	16_	-	-	1	-	2	2
Erysipelas	24	_	_	_	_	_	2	10	8	4	3	3	2		1	18-	2	2	6	5	6	1
Puerperal Pyrexia	2				-18	1	1	_	_	_	1	-	1+1		1	2+1	1	V E	1	3-30	1	-
Cerebro Spinal Fever	6	1	3	1	1	-	+		-	_	1	3	1	-	3-1	き 発	1	-	-	1	5	1
Pneumonia	88	6	10	4	3	1	9	12	20	23	12	9	7	9	12	10	4	4	10	11	42	74
Acute Poliomyelitis	13	-	9	2	1	-	1	-	-	_	-	-	3	2	1	3	2	178	2	2	12	1
Ophthalmia Neonatorum	4	4	-		_	Į.	B	Harris	104	+	1	I Real		No.	100	TO SERVICE		1	1	1	_	
Dysentery	1	-8	1		-	1		-	=	1	-	-5	100	E E	1	1-48	-	201	100	1	1	_
Food Poisoning	4	H	1	F	1	1	1	1	1	-	1	1	18 8 8	10 A 10	1	200	1	1 1 3	-	272	2	-
Measles	1,098	42	639	401	4	4	7	-	-	1	137	102	151	100	173	77	40	47	94	117	38	1
Whooping Cough	498	52	282	158	1	_	4	_	1		59	107	30	29	57	11	35	97	25	48	16	-

The hospitals to which the 304 cases of notifiable infectious disease were admitted are named below:—

Name of Hospi	tal					of cases mitted
Plaistow Fever Hospital, San	nson Stre	et. E.13				147
Whipps Cross Hospital, Leyt				3500		40
Chingford Isolation Hospital				100.00		32
Eastern Fever Hospital, Hon						16
Ilford Isolation Hospital, Cha						17
North Eastern Hospital, St.				Centra		12
Brook Hospital, Shooters Hi						11
Rush Green Hospital, Romfo						5
Park Hospital, Hither Green				v. mens		8
South Lodge Hospital, World		Enfield 1	N.21			3
Waltham Abbey Isolation H	oenital V	Valtham	Cross			3
		, entitient		3000		3
Bow Arrow Hospital, Dartfo		Imeford				2
Baddow Road Isolation Hos						2
Hornsey Hospital, Hornsey,						ĩ
Coppetts Wood Hospital, N.				Limens		1
Southend Isolation Hospital,		α				1
Isolation Hospital, Billericay					***	1
Finchley Memorial Hospital,				***		1 8
Lambeth Hospital, Lambeth	, S.E.11			My ood-		1 6
London Hospital, E.1				***		
East Ham Memorial Hospita	d, E.7			***	***	1 0
Children's Hospital, Holborn	, W.C.1			***		1 5
	1				-	004
	Total					304
						1 8
-						
Cancer.						
Deaths, 1949 :						
Total deaths	8			.0.8 2		241
Total deaths		1				. 13
M-1 1-41-						137
Male deaths						101
						701
Female deaths				- 55 2 17		104
CT 10 -1		1040	1040	1040	1946	1945
Classification :—		1949	1948	1947		
Carconima		222	181	214	209	191
Sarcoma		8	3	2	2	3
Rodent Ulcer		1	_	_	-	BIL
Epithelioma		1	2	2	2	4
Endothelioma			_	_	-	1
Glio-blastoma		1	- 1	1	3	-
Chloroma		_	_	1	_	2 -
Hyponephroma		_	1	1	-	-
Papilloma		_	1	1	-	-
Myeloma			1	_	_	1.00
Seminoma			1	-	_	_
		_				
Melanoma	=	THE	1	257	_	10
Melanoma		- 3		-	=	1
Glioma	=	3 5	1	<u>-</u>	<u>-</u>	-7
	=	- 3 5		14	9	7
Glioma Unstated		5	10			-
Glioma	=		1	14 236	9 225	7 206

29

TABLE 10.—CANCER DEATHS—PARTS OF BODY AFFECTED.

	Ages	15–25		25–35		35–45		45–55		55-65		65-75		75 and upwards		TOTAL	
Body Affected	Sex	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Buccal Cavity and Pharynx		The same	-	of Po	2		-	-	-	-	+	1	-	2		3	-
Digestive Organs and Peritoneu	m		-	-3	1	1	2	7	7	14	12	23	13	20	18	65	52
Respiratory Organs		_	1	-8	-	2	-	8	1	16	5	12	1	3		41	7
Uterus		-	-		-	-	-	-	1	-	4	-	6	-		-	11
Other Female Genital Organs		-	-	-8	1	-	1	-	1	-	1	-	1	_	2		7
Breast		-	-		1	-	-		4	-	4	-	8	-	2		19
Male Genital Organs		-	-	-	_	_	-	-	-	1	-	6	-	5		12	-
Urinary Organs		-	-	1	-	_	-	-	2	2	-	1	-	3	-	7	2
Skin		7	-	1	2	1	-	-	-	-	1	-	-	1	100	3	_
Brain and other parts of New System	rvous	State	-	1	10 m	1	1	Support	-	1	The second	-	-	- Port	1	3	2
Other or Unspecified Organs		one.	-	1	-1	_		1	1	1	2	1	1	-	-	3	4
TOTALS		Ador	-	4	2	5	4	16	17	84	28	44	30	34	23	137	10

National Assistance Act, 1948—Section 47.

The above section of the National Assistance Act, 1948, deals with the removal to suitable premises of persons in need of care and attention. I am informed by the Chief Officer of Welfare Services it has not been found necessary for action to be taken under this section during the year.

East Ham Chest Clinic.

The following i	nforma	tion ha	s been	obtair	ned	from	this	clin	ic:-
No. of attenda	nces at	clinic		.71.			·	1	2,905
No. of visits	to hon	nes of	patient	s by	tuk	percul	osis		
nurses							×		6,105
No. of tubercul	ous per	sons or	n registe	er on-	-	1/1/4	19	31/	12/49
Adults						1,01	4		1,000
Children						27	0		283
No. of persons	under	observ	vation o	on—					
Adults						7	9		109
Children						5	55		32

From table No. 11 it will be noted that the notifications received during the year under review total—pulmonary 92 males, 72 females, a total of 164 and non-pulmonary 5 males and 11 females, a total of 16. The rate per 1000 of the population was 1.47 for all forms of tuberculosis.

The number of deaths assigned to all forms of tuberculosis for the year (see table No. 4) was 44 and the death rate was 0.36 per 1,000 population.

B.C.G. Vaccination.

I am informed by Dr. P. Ellman, Consultant, East Ham Chest Clinic, that it was considered inadvisable to commence vaccination in 1949, until it was certain a regular supply was available. Now that technical difficulties have been overcome, it is proposed to offer vaccination to contacts of known cases of pulmonary tuberculosis. A reference to B.C.G. vaccine was contained in my annual report for 1947.

TABLE 11.—PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1930. SUMMARY OF NOTIFICATIONS DURING THE PERIOD FROM 1ST JANUARY, 1949, TO THE 31ST DECEMBER, 1949.

						For	mal Not	ification	ns	28 8				2 4
	30	II	Nu	mber o	f Prima	ary Not	ification	s of ne	w cases	of tube	erculosi	s		
Age Periods	0—	1—	2—	5—	10—	15—	20—	25—	35—	45—	55—	65—	75—	Total (all ages
Respiratory, Males	 1	2	1	8	1	8	6	18	16	10	11	2	_	84
Respiratory, Females	 -	2	9	3	1	10	11	19	5	2	-	1	1	64
Non-Respiratory, Males	 -	-	2	1	1	9-3	-	-	_	=	1	-	_	5
Non-Respiratory, Females	 -	-	-	2	2	-	1	1	_	=	_	-	-	6

PART II.—New cases of Tuberculosis coming to the knowledge of the Medical Officer of Health during the above-mentioned period, otherwise than by formal notification.

Source		E		5 5		N	umber	of cas	ses in	age G	roups				4.5	
Information		0-	1—	2—	5	10-	15—	20—	25—	35—	45—	55—	65 —	75—	Тота	L
1 2411	M	-	-	-		_	-	-	-	-	-	-	1	-	1	(A)
Death Returns from	Respiratory	-	-	-	-	-	1-3	-	-	-	-	-	-	-	-	(B)
Local Registrars	M	_	_	_	_	-	_	_	-	-	-	-	-	-	-	(C)
	Non-Respiratory F	_	_	_	-	-	_	-	-	-	-	-	-	-	-	(D)
	M	_	_	_	-	_	-	-	-	-	-	-	-	-	-	(A)
Death Returns from Registrar-General	Respiratory F	_	_	-	_	_	_	_	_	-	-	-	-	-	-	(B)
(Transferable deaths)	M	_	-	_	_	-		-	_	-	-	-	-	-	-	(C)
	Non-Respiratory F	_	_	-	-	-	1	-	_	-	-	1	-	-	2	(D)
	M	_	-	-	-	-	-	_	_	-	-	-	-	_	-	(A
eath Returns from Local Registrars Respiratory Eath Returns from Registrar-General (Transferable deaths) Costhumous Notifications Transfers'' from Other Areas (excluding transferable deaths) MRespiratory Respiratory MRespiratory F MRespiratory MRespiratory F MRespiratory MRespiratory	_	-	_	-	-	_	-	-	-	_	_	_	-	-	(B	
	M	-	-	-	-	_	-	_	-	-	-	-	_	-	_	(C
eath Returns from Local Registrars Respiratory Respiratory Registrar-General (Transferable deaths) Costhumous Notifications Transfers' from Other Areas (excluding transferable deaths) Respiratory Respiratory Respiratory Respiratory Respiratory F M Non-Respiratory F M Respiratory F	_	-	-	_	_	_	_	-	-	-	-	-	-	-	(D	
	Respiratory Respiratory M Non-Respiratory F Respiratory F Respiratory F M Non-Respiratory F M Non-Respiratory F M Non-Respiratory F Respiratory F M Non-Respiratory F M Non-Respiratory F Respiratory F M Non-Respiratory F M Respiratory F M Non-Respiratory F	_	-	-	-	-	1	1	5	-	-	-	-	-	7	(A
Other Areas	Respiratory Registrar-General Transferable deaths) Respiratory F M Non-Respiratory F Respiratory F Respiratory F Respiratory F M Non-Respiratory F Respiratory F Respiratory F Respiratory F Respiratory F M Non-Respiratory F M Non-Respiratory F M Non-Respiratory F	-	_	_	-	-	_	3	5	-	-	-	-	-	8	(B
Registrar-General (Transferable deaths)	_	-	-	-	-	-	_	-	-	-	-	-	-	_	(C	
	Non-Respiratory F	_	_	-	1	1	-	-	_	-	-	-	1	-	3	(D
		-	-	_	_	-	-	-	-	-	-	-	-	-	-	(A
	Respiratory F	-	-	-	_	-	-	-	-	-	-	-	-	-	-	(B
Other Sources		-	-	-	-	_	-	-	-	-	-	-	-	-	_	(0
		-	-	-	-	-	-	-	-	-	-	-	-	-	-	(D
	1	1							,			,	TOTALS	(A)	8	
														(B)	8	
														(C)	_	
														(D)	5	-

											4		
								- Gorda					
								print dissorted					

Civic Week-17th to 22nd October, 1949.

The part played by the health services in the life of the community was amply exemplified in the various stands arranged by the health department at the Civic Week Exhibition. Posters in simple design and attractive colourings pointed to the continual need for good standards of personal hygiene in the clean food campaign now being launched.

Charts, drawings and photographs made public the achievements of the health department in the various fields of epidemiology and medico-social services, including the reduction of infantile mortality, safe childbirth, victory over diphtheria and the value of the ambulance service.

On the stands were colourful and attractive exhibits of the work of the mental health occupation therapy centre, a symbolic representation of the activities of the home help and home nursing services and arrangements of prepared foods illustrating ideal meals for growing children at various ages. The maternity and child welfare department made very instructive displays of baby clothes including the furnishings of a simple baby-cot and other exhibits alluded to the work of the domiciliary midwives and the school health service.

An opportunity was taken to achieve some education of all sections of the public in health matters by distribution of leaflets, personal talks by members of the staff and the use of a strip film projector.

The wonderful attendance testified to the success of the exhibition generally and we feel that the health department's display made a fair contribution in bringing before the people a comprehensive presentation of their own services.

Film Shows.

Daily film shows over a limited period of two weeks were held at the Town Hall Annexe and the Church Road Clinic. Attendance was invited from all schools of children over 10 years of age, parents generally and interested members of the staffs of all council departments.

The subject matter covered the work of district nurses and safety in the home.

There is little doubt that this is a useful method of education to bring home the dangers which lurk in badly planned kitchens and/or unlighted staircases, but above all it points the lesson of 'awareness' and handiness which many children never properly master, leading them into adult life to swell the numbers of accident-prone individuals in industry and of inadequate citizens, unable to make their full contribution to the home or the community.

A body of well-informed opinion hold that the film possesses little value as a vehicle of propaganda and health education. There is undoubtedly the danger that the beauty of the films steals away the senses so that little is ultimately grasped by the mind of the lesson it was intended to impart.

However, thanks are due to the Insurance Company who loaned their apparatus and films and realising the difficulties alluded to supplied highly trained personnel to add verbal instruction and advice at each showing.

FILM SHOW ATTENDANCES (approx.).

Town Hall mencing 24			-week	com-	MANOR PARK (mencing 31/10		-week	
meneng 2	120	a.m.	p.m.	Totals	A 10 XMM ANT. C.	a.m.	p.m.	Totals
Mon. 24th		50	40	90	Mon., 31st Oct.	30	150	180
Tues. 25th		70	220	290	Tues., 1st Nov.	60	60	120
Wed. 26th	10	40	40	80	Wed., 2nd Nov.	80	120	200
Thurs. 27th		40	40	80	Thurs., 3rd Nov.	70	70	140
Fri. 28th		200	40	240	Fri., 4th Nov	70	70	140
	8 1	400	380	780	one to wisoment.	310	470	780

Water Supply. and gainered at nottuderthos tial a sham yalquib

- (i) The water supply of the Borough in its several parts has been satisfactory both in quality and quantity.
- (ii) All houses in the area have water services laid on from the Metropolitan Water Board's mains. No bacteriological or chemical analyses were made by this Authority of the raw water going into supply.
- (iii) The water supply of this district from the Metropolitan Water Board does not give rise to plumbo-solvent action.
- (iv) There were no contamination areas.

Meat and Other Foods.

As will be seen in the Report no slaughterhouse in this Borough was in operation during the year. With regard to meat inspection and other foods see report of the Chief Sanitary Inspector.

Food Poisoning.

In accordance with Ministry of Health Circular 46/49, the following information was supplied:—

(1)	Food Poisoning	Notifica	tions (Co	rrecte	d) Ketui	n to Ite	egistrar	-Genera	
	1st Quarter				2.4	B		1	Nil
	2nd ,,					5		9 ***	1
	3rd ,,		***				***	m	NIII
	4th ,,					-3		F 3.	Nil
			Total	g	4.0	100		18.	4
(2)	Outbreaks due to				a the	Tonn			
	There were	no ou	toreaks	durm	ig the	year.			
(3)	Outbreaks of un	discover	red caus	e ;					
	There were	no ou	breaks	during	the y	ear.		Stag-	
(4)	Single cases :-								
	Agent iden								3
	Unknown	cause	25.21	18.	1.0		1	9 %.	1
			Total	9	9.1		3	B B.	4

Clean Food Campaign.

Having regard to the attention which has recently been focussed upon the subject of food hygiene through the public press and otherwise, it is proposed to place before the Council, at an early date, plans for a clean food campaign in the Borough—a campaign which it is hoped will receive not only the full support of the burgesses, but the active and enthusiastic co-operation of all classes of food traders in the Borough.

Factories Acts, 1937 and 1948.

In accordance with the Factories Act, 1937, and at the request of the Minister of Labour and National Service, the following information is included in this report. (See Table 13.)

TABLE 12. METEOROLOGICAL RECORD—YEAR 1949.

Rain Gauge 5 in. in diameter, placed 1 foot above ground, 15 feet above sea level. Temperature taken in the shade of a Stevenson's Screen, 5 feet from the ground.

		Temper	ature of Air	during the	Month.	Mean	1 4 8 1		Rainfall.		
Months		Highest	Lowest	Mea	n of	Tempera-	No. of Days on which	Amount	Mean	Greatest	Date
To the last of the	-	Maxi- mum†	Mini- mum	All Highest	All Lowest	Air.	Rain fell. 0.01 and over	collected in inches	rate of fall for Rainy Days	fall in 24 hours	Date of greatest fall
January		1 1 1	23		32.9	41.35	10	0.77	0.08	0.50	24th
February		F	17	-	31.0	41.15	6	0.75	0.75	0.23	8th
March		A THE	23	_	30.6	40.95	7	0.70	0.10	0.25	4th/14th
April	***		28	-	39.2	51.50	11	1.33	0.12	0.41	28th
May		1 P-7 b	30	_	40.1	57.88	11	1.62	0.15	0.71	23rd
June		5-0 H	39	_	46.9	61.15	5	0.59	0.12	0.28	3rd
July		88	43	77.4	51.5	66.64	4	0.27	0.07	0.17	16th
August		87	41	75.9	51.9	64.98	7	1.26	0.18	0.50	1st
September		89	44	73.4	52.7	63.76	5	1.15	0.23	0.57	15th
October	2	76	25	63.5	43.3	53.50	15	5.00	0.33	1.02	25th
November		58	21	50.5	35.8	43.30	17	2.01	0.12	0.26	8th
December		57	30	49.9	39.6	42.95	16	1.46	0.09	0.34	13th
Means & To		To de la constante de la const	30	8-10 B	41.3	52.44	114	16.93	0.19	1.02	25th Oct

[†] The Highest Maximum Thermometer was stolen at the beginning of 1948 and was replaced by the Meterological Office in June, 1949.

FACTORIES ACTS, 1937 AND 1948.

PART I OF THE ACT

1.—INSPECTIONS for purposes of provisions as to health (including inspections made by Sanitary Inspectors)

1981 1981 1981	Number	1 2 5 5 5 1	Number of	
Premises	on Register	Inspections	Written notices	Occupiers prosecuted
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	88	92	4	_
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	331	320	15	_
iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	6	4		_
TOTAL	425	416	19	_

2.—Cases in which DEFECTS were found

(If defects are discovered at the premises on two, three or more separate occasions they should be reckoned as two, three or more "cases")

			2	Numb	per of cases in wh	ich defects were	found	Number of
Particulars			10.	Found	Remedied	To H.M. Inspector	By H.M. Inspector	cases in which prosecutions were instituted
Want of cleanliness (S.1)				6	12	_	1	_
Overcrowding (S.2)				_	-	_	-	-
Unreasonable temperature (S.3)				2	2	-	-	_
Inadequate ventilation (S.4)				_	2	-	_	-
Ineffective drainage of floors (S.6)			***	2	2	-	-	-
Sanitary Conveniences (S.7) (a) insufficient				5	4	_	_	_
(b) Unsuitable or defective	***			22	35	-	5	_
(c) Not separate for sexes				7	18	-	-	_
Other offences against the Act offences relating to Outwork)		inelu 	ding	4	14	2	2	_
TOTAL				48	89	2	8	_

PART VIII OF THE ACT OUTWORK

(Sections 110 and 111)

		Section 110			Section 111	
Nature of Work	No. of out-workers in August list required by Sect. 110 (1) (c)	No. of cases of default in sending lists to the Council	No. of prosecu- tions for failure to supply lists	No. of instances of work in unwholesome premises	Notices served	Prosecutions
Wearing Making, etc	215	5	_	_	_	-
apparel Cleaning and washing	_	-	_	_	_	_
Baskets, making	4	1	_	_	_	_
Christmas crackers	22	1	-	-	-	-
TOTAL	241	7	_	_	_	_

NATIONAL HEALTH SERVICE ACT, 1946

Sections 22, 23, 24, 25, 26, 27, 28, 29 and 51.

Full details of the Council's proposals approved by the Minister of Health, as indicated in my report for 1948, have been published in booklet form and are available for reference. The modifications since the original proposals were approved are as follows:—

Section 27—Ambulance Services.

Revised plans for the new ambulance station sited in Wellington Road are still under consideration by the Ministry's officers. The proposed garage will house all our vehicles and provide working accommodation for all members of the staff engaged in this day and night service.

Section 28-Prevention of Illness, Care and After-Care.

(a) B.C.G. vaccine.

See comments on page 30.

(b) Deletion of number of tuberculosis visitors (four).

In the course of the year, approval was obtained to the increase in establishment to five. The additional visitor has been appointed and her value to this service greatly appreciated.

Section 29—Domestic Help.

Establishment of Home Helps amended from 24 to 60 fulltime or their equivalent in part-time service.

NOTE.—Above amendment is indicated on page 64, 2nd para, of 1948 report,

Section 22—Care of Mothers and Young Children.

There were no changes during 1949 and the duties have been accomplished as far as possible by the existing staff.

Unmarried mothers have been admitted to the following hostels for periods of 4—6 weeks before their confinements:—

"Ardmore," Loughton, Essex (Essex C.C.). St. Agatha's, Stratford, E.15 (Voluntary).

The Senior Dental Officer submits the following report in respect of the dental treatment provided for expectant and nursing mothers and young children during the year under review:—

Two sessions per week are devoted to the dental treatment of patients under the M. & C. W. Scheme. The year just ended has seen a great increase in the demand for treatment under the M. & C.W. Scheme. This is particularly noticeable with regard to the children.

The number of children examined was almost twice that of the previous year, i.e., 658 as compared with 335. It must be remembered that these children do not have a routine dental inspection. They are referred for advice and possible treatment by the Medical Officers in the M. & C.W. Clinics. It follows, therefore, that almost all the children attending for treatment have had some pain. It would appear that the teeth of the children born in 1944 and later years are not as good as those of the children born in earlier years. This opinion is based upon the fact that of the 658 children examined, 511 required treatment and 1,133 teeth were extracted, an average of over two extractions per child. As almost all these teeth were molars of which there are eight, in the deciduous dentition this means that there is an average loss of efficiency of 25 per cent. in each child, which is a high percentage in such young children.

In the ante-natal clinics, mothers are advised on the dental conditions which may occur during pregnancy. In the dental clinics, mothers are instructed in the proper way to look after their children's teeth, and instructive booklets are given to those who are interested.

TABLE 14. NUMBERS PROVIDED WITH DENTAL CARE, 1949.

Tarrie	NYT.	mprod	dissol	1100	IOLEGOS/		Made
Institu- tional Confige-	Domi- officey Conting-	-oritent famult -confirme	interior district	Examined	Needing treatment	Treated	dentally fit
	ant & Nu	irsing Mot	hers	374	340	319	220
Childre	en under f	ive		658	511	507	507

TABLE 15. FORMS OF DENTAL TREATMENT PROVIDED, 1949.

Expectant and Nursing Mothers	Ex-	Anaes	thetics	Fill-	Scalings or scaling	Silver Nitrate treat-	Dress-	Radio- graphs		tures
	trac- tions	Local	General	ings	and gum treat- ment	ment	lond	grapus	Com- plete	Par- tial
Nursing }	624	21	90	248	(I) 9191 (21 10)	in the state of	100	eurao a	The	8.
Children under five	1,133	20	241	37	-	125	135	_	-	_

Number of births notified during the period 1/1/49 to 31/12/49, under Section 203 of the Public Health Act, 1936, as adjusted by transferred notifications-live births 1,934 still-births 48, total 1,982.

Number of premature infants notified \() (1) born at home during the year (including transferred notifications) whose mothers normally reside in the area :-

31

(2) born in hospital or nursing home

TABLE 16

Premature babies born in area (whether their mothers normally reside in area or not) excluding those born in maternity homes and hospitals in the National Health Service :-

8			В	orn at Hom	e		
	1.689		Nurse	d entirely at	home	roinite in	Antenni
	Trans- ferred to hospital	Died in first 24 hours	Died on 2nd to 7th day	Died on 8th to 28th day	Survived 28 days	Total	Grand Total
Under 3 lbs 3—4 lbs 4—5\(\frac{1}{2}\) lbs Total	_ - 6 6	- 1 - 1	- - 1	Jen. E.m.	23 23 23	1 24 25	1 30 31

Notes :- There are no maternity homes (not in the National Health Service) or Mother and Baby Homes in the Borough. Those shewn in table 21 (born outside the area) are additional to the above.

TABLE 17.

. Elpere were no	Ophthalmia Neonatorum		Pemp Neona		Puer		
and the state of t	Domi- ciliary Confine- ments	Institu- tional Confine- ments	Domi- ciliary Confine- ments	Institu- tional Confine- ments	Domi- ciliary Confine- ments	Institu- tional Confine- ments	
No. of cases notified during the year	4	ordis_SAT	Tre Line	eonfure	Tebau a	Childre	
Officers of the Authority No. of cases for whom home nursing was pro-	4	Ah Than	Take	CEL	1	1*	
vided No. of cases removed to hospital	TORS T	CHATAI	ET LATE	ad go	PORMS	1	

* After discharge from hospital.

† District Nurse.

The four cases of Ophthalmia Neonatorum recovered with vision unimpaired.

The number of maternal deaths occurring during the year was 3. The causes of death were (1) from sepsis, nil; (2) from other causes, 3. All of these deaths occurred in hospital.

TABLE 18.

ANTE-NATAL AND POST-NATAL CLINICS, 1949.

difficult destroyments and	and a second	No	Total	
ipspection. They as the second to make the by the Medical Off therefore, that show therefore that show have had some party to the second to make the second to make the second to the se	No. of clinics provided at end of year	No. whom attended during the year	No. of new cases included in previous column who had not previously attended any clinic during current pregnancy and for post-natal clinics women who had not previously attended any post-natal clinic after last confinement	No. of attendances made during the year
Local Health Authority Clinics : Ante-natal clinics Post-natal clinics	2	1,945 323	1,457 317	8,850 876
Clinic belonging to another L.H.A.†: Ante-natal clinic Post-natal clinie*	1_	36 5	31 5	128 8
Totals: Ante-natal clinics Post-natal clinics	3	1,981 328	1,488 322	8,978 384

^{*} Post-natal patients seen at ante-natal clinics.

† By arrangement with L.C.C. ante-natal clinic held every fortnight at L.C.C. Clinic, Fernhill Street Baths, North Woolwich, E.16.

No ante-natal or post-natal examinations were carried out by General Practitioners at the mother's home or the practioner's surgery under arrangements made with the Local Health Authority.

TABLE 19.
INFANT WELFARE CENTRES, 1949.

	No. of centres provided at end of year	No. of children who attended during	who fi tended t tres dur year and on the their fi	children rst at- the cen- ring the d whom date of irst at- e were:	in attenthe end	children dance at l of the ho were n:—	made l dren du	No. of dances by chil- ring the
		year	Under 1 year of age	Over 1 year of age	Under 1 Year of age	Between the ages of 1 and 5	Under 1 year of age	Over 1 year of age
Local Health Authority Centres Centre belonging to another L.H.A.†	2	3,115 73	1,370 26	223	1,192	1,841	15,798 370	5,760 173
Totals	3	3,188	1,396	228	1,213	1,891	16,168	5,933

[†] By arrangement with L.C.C. centre held weekly at L.C.C. Clinic, Fernhill Street Baths, North Woolwich, E.16.

TABLE 20.

DAY NURSERIES, 1949.

Provided by	Number		pproved	the regist	er at the		daily at- during the
	part of	0—2 years	2—5 years	0—2 years	2—5 years	0—2 years	2—5 years
Maintained by the Council	4	132	161	82	195	84	171
Maintained by Vol. Organisations	-	of Carlotte	Inda No	patralist .	-	-	-

The total attendances at the nurseries during 1949 are appended below:—

Nursery			Te	otal Attendani	ces
School Road				12,050	
Roman Road	Jania	goll vi	invotel	19,092	
St. Stephen's Road				18,517	
Wall End/Caledon Road	nugend	y din ma	mitt. post	13,913	
Total	2	40.10	BULLAN.	63,572	

NOTE:—The Nurseries are closed on Saturdays.

Nursery and Child-Minders Regulation Act, 1948.

There were no daily minders provided by the Council at the 31st December, 1949, and there were no premises or daily minders registered under the above Act at 31/12/49.

Mother and Baby Homes.

During the year under review, 3 unmarried mothers and their babies and 1 unmarried mother (expectant mother) were sent to homes or hostels. Two of these were admitted to "Ardmore" Hostel, Buckhurst Hill, and two to St. Agatha's Home, Stratford, E.15.

Maternity Hospitals.

East Ham mothers were admitted for their confinements to the institutions named below during the year 1949:—

Institution			O No	o. of Patients
	laternity Hospit morial Hospital	al		463 366
Forest Gate H	Market Street St			194
	Total			1,023

Registration of Nursing Homes.

Under Sections 187 to 194 of the Public Health Act, 1936, there were no homes registered during the year 1949 and there were no homes on the register at the end of the year.

Aldersbrook Maternity Hospital.

The need for maternity hospital accommodation for East Ham patients has continued without diminishing. Slightly more mothers were admitted for delivery and for ante-natal treatment during this third year than in 1948. The effect of family planning is being seen in that Springtime has become very much the busiest part of the maternity year: it is not easy to ensure an even flow in the use of the beds, but on an average, each mother has stayed a little over 12 days which has given fair time for rest after childbirth, and has allowed breast-feeding to be fully established.

The Nursing Staff has remained appreciably unchanged since my last report and has continued to earn the admiration and gratitude of the patients. The policy of close collaboration with our maternity and child welfare clinics and with all departments of East Ham Memorial and Forest Gate Hospitals has continued to be most successful, and since the Borough Council has carried on the administration of this hospital it is still able to offer a complete unified maternity service.

ned mac	armicy service. On I R no which because were the Domicillary Midwifes and Service and Ser		M	lersbrook aternity Iospital
Number	of cases admitted for delivery	****		463
,,	" " " ante-natal treatment			56
,,	patients delivered by— (a) midwives			452
	(b) doctors			11
,,	patients admitted after delivery			2
Average	duration of stay in lying-in wards (days)			12.4
Number	of cases notified as Puerperal Pyrexia			2
,,	,, of Pemphigus Neonatorum			-
,,	,, of Ophthalmia Neonatorum	1.4.	igene e	Midneye
Totals	maternal deaths			Organi
,,	still-births			6
,,	infant deaths within 10 days of birth		THE COL	5
,,	infants who received a supplementary of mentary feed whilst in hospital (excl 3-4 days while breast feeding is being ex-	uding	first	41
,,	infants wholly breast fed on leaving the	nospita	al	420
,,	births during the year— (a) live (b) still	100	461 }	467
Total be	d complement at 31/12/49			20
	daily number of beds occupied over the ye	ar		17
Highest	daily occupation in the year shewing dates ech, 14th May, 19th June)		14th	25
	daily occupation in the year shewing dates	(10th	and	9

TABLE 21.

PREMATURE INFANTS BORN.

ALDERSBROOK MATERNITY HOSPITAL, 1949.

Weight in lbs.	Died in first 24 hours	Died between 2nd & 8th day	Died between 8th & 28th day	Survived 28 days	Total
unchanged since	opreciably	in bemane	taff bas re	Varsing S	The
Under 3 lbs	Hernes	-	noo Test B	1	1
3—4 lbs	3	b) paner	1 mars oou	5	8
1—5½ lbs	1000	wolled; ad	Hara Wineil	30	32
Total	atth4 had	1	MINE WATER	36	41

Section 23-Midwifery Service.

Miss Newman-Pilkington, S.R.N., S.C.M., H.V. Cert., and Midwife Teachers Cert., has been appointed Superintendent Nursing Officer and commenced duty on 2/1/50. Her endeavours will be extended to supervise the Domiciliary Midwifery and District Nursing Services and to co-ordinate these services with the general nursing, ancillary and the unified health visiting services.

Table 22. MIDWIVES ACTS, 1902—1936.

	Number of midwives practising in the area at 31st December, 1949.				
wanla (days) 12,4 d Pyrogia 2	Domiciliary Midwives	Midwives in Institutions	Total		
Midwives employed by the Council Midwives employed by Voluntary Organisations—	bibal 8 la Neo	of Po — of Op maternal d	6		
(a) Under arrangements made with the L.H.A. in pursuance of Section 23 of the N.H.S.	of aldiverse	admid-like book applois	Act, 3286;		
(b) Otherwise (including hospitals not transferred to the Minister under the N.H.S.			Marie Marie		
Act) Midwives employed by Hospital Management Committees or Boards of Governors under the	og the year-	The state of the s	-		
N.H.S. Act Midwives in private practice	01/2 1	6	6		
Totals	11	6	17		

NOTE.—Aldersbrook Maternity Hospital has not been included in above table as it is not situated in the area. The 6 institutional midwives mentioned are employed at the East Ham Memorial Hospital.

TABLE 28. MATERNITY CASES ATTENDED.

education of the same		er of mate					
tandried and and an analysis of the control of the		iciliary		es in utions.	To	otal.	
Others, will care him	As Mid- wives.	As Mater- nity Nurses.	As Mid- wives.	As Mater- nity Nurses.	As Mid- wives.	As Mater- nity Nurses.	
Midwives employed by the Authority	316	34	nen sond	Mandage I	316	34	
Midwives employed by Voluntary Organisa- tions:— (a) under arrangements with Council in pur- suance of Section 23 of the N.H.S. Act (b) otherwise (including hospitals not trans- ferred to the Minis-	176	91	ho Mrs.	to the control of the	176	91	
ter under the N.H.S. Act)	_	_100	100 <u>01</u> 700	ugaing it	in <u>v</u> in	- de ile	
Midwives employed by Hospital Management Committees or Boards of Governors under the		or gare		algrain		No. of	
N.H.S. Act		Lami Tile	349†	65†	349	65	
Midwives in private prac- tice	3	Vicinities of	State of the state	o de la company	3	Ny Vi	
Totals	495	125	349	65	844	190	

† East Ham Memorial Hospital. Aldersbrook Maternity Hospital figures not included in above table.

Number of cases in which medical aid was summoned during the year under Section 14 (1) of the Midwives Act, 1918, by a midwife:—

(a)	(i)	domicilia where t				tioner	had ar	ranged	to pro	vide	
		the pat	ient	with 1	matern	ity me	dical s	ervices	under	the	
		N.H.S.	Act		11444					***	1
	(ii)	others .									179
					Total	al					180
(b)	for	cases in	insti	tution	s		R.16	Semior	10. n		*65

TABLE 24. GAS AND AIR ANALGESIA. Domiciliary Midwives.

gene coded Blathants gene gene gene gene gene gene gene ge	Domiciliary Midwives employed directly by Council	Domiciliary Midwives employed under Sec. 23 by voluntary organisa- tions as agents of Council	Domiciliary Midwives employed under Sec. 23 by hospital authorities as agents of Council	Domiciliary Midwives in private practice	Total
No. of domiciliary midwives practising in the area at 31/12/49, who were qualified to administer gas and air analgesia in accordance with the requirements of the C.M. Board	6	4	10	seciones a	10
No. of sets of apparatus in use by domiciliary midwives em- ployed in the Authority's service at 31/12/49	6	2	S.C.W.	ovolume summer	8
No. of cases in which gas and air was administered by domiciliary midwives during the period 1/1/49 to 31/12/49:— (a) when acting as a midwife (b) when acting as a maternity	250	57	Mar exam	THE RESERVED TO THE PARTY OF TH	307

	East Ham Memorial Hospital	Aldersbrook Hospital
No. of midwives qualified on 31/12/49 to administer gas and air analgesia	0	7
No. of sets of apparatus used by the above as on $31/12/49$	**	2
administered during the year 1949:— (a) when acting as a midwife (b) when acting as a maternity nurse	349	450 11

Section 24—Health Visiting Service.

The retirement of Mrs. A. A. Woodman M.B.E., S.R.N., S.C.M., M.R.S.I. (H.V's Cert.), and the appointment of Miss Maryon, S.R.N., S.C.M., H.V. Cert., as Superintendent Health Visitor, establishes a landmark in the story of the health visitors' services of East Ham.

For the first time the health visitors service functioning as a unified whole, has become possible. The Council in their wisdom have adopted the scheme of sponsoring trainees from among selected candidates to attain through a course of study and examination full health visitor status, with the proviso that two years' service as a health visitor is given to the borough. This will have the effect, in the course of a few years, of enabling us to complete our establishment with fully trained staff to serve the needs of the

school health and maternity and child welfare services and implement fully the provisions of the National Health Service Act.

The unified service should make a signal contribution in the education of the people in their homes towards the goal of positive health and the full enjoyment of life within the potential of every citizen.

Miss B. Newman-Pilkington, the Superintendent Nursing Officer, will co-ordinate the activities of this unified health visiting service with the general nursing service, the domiciliary maternity service and the other ancillary services, so that a great surge forward in the care of parturient women and sick persons of every age within the home will be achieved.

A debt of gratitude is owed to Mrs. Woodman, for her untiring efforts to raise the status of nurses everywhere and to establish the health visitor in her rightful place as the friend and adviser of the family.

Table 25. HEALTH VISITING, 1949.

	Numb Hea Visit	dth tors Equivalent		the year								
Direction to	emple at e of y	nd	Health Visitor Services	Expe		Chile und 1 y	ler ear	Child between the s	veen ages		her sses	
Provided by	Whole- time on Health Visiting	Part- time on Health Visiting	provided under Col. (3) (all classes including attendance at Infant Welfare Centres)	First Visits	Total Visits	First Visits	Total Visits	First Visits	Total Visits	First Visits	Total Visits	
(1)	(2)	(8)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	
Local Health Authority Voluntary Or- ganisations	10	7	2	185	216	2,079	6,056	OCTUBE COTTON	8,362	onehi sa-sa chares	574	

Section 25-Home Nursing.

So far the internal organisation and administration of this service has been little affected. The employment of a male nurse is noted and appreciations of his service by residents have already been expressed.

Generally the need for home nursing has increased partly due to the continued shortage of accommodation available in hospitals to sufferers from acute and chronic diseases. Negotiations are going forward concerning the acquisition of the premises now used as the Nurses Home and District Headquarters together with another property suitable for expansion of the service.

TABLE 26. HOME NURSING, 1949.

led health visiting		me nurses at 31/12/49	Equivalent of whole- time service	No. of cases attended	No. of visits paid by	
Provided by	Whole- time on home nursing	Part- time on home nursing	provided by part-time home nurses	by home nurses during the year	home nurses during the year	
Local Health Authority Voluntary Organisations by	-	.heventsina	ad Iliw as	nod arls a	geneth	
agreement with the Auth- ority	8	8	4	1,745	41,262	

TABLE 27. HOME NURSING.

the paid to the product of the paid of the	East Ham District Nursing Association	Silvertown and North Woolwich District Nursing Association	Totals
Patients on books on 1/1/49	206	3	209
New patients from 1/1/49 to		santin and	
31/12/49	1,468	68	1,536
Patients on books on 31/12/49	272	6	278
Total visits from 1/1/49 to 31/12/49	40,647	615	41,262
Summary of new cases :—			101
Bronchitis, Pneumonia & Pleurisy	132	2	134
Cardiac	127	5	132
Fuberculosis	44	1	45
Rheumatism, Arthritis, etc	32	3	35
Cerebral	82	The same of the sa	82
Diabetes	55	-	55
Burns and Scalds	15		15
Cancer	102	9	111
Senility	100	2	102
Erysipelas	2		2
Prolapse	-	16	16
Other medical	453	20	473
Various surgical	292	10	302
Ante-Natal			4
Post-Natal		lo,ton - ko	10
Miscarriage	18	A PROPERTY OF	18
Totals	1,468	68	1,536

Section 26-Vaccination and Immunisation.

The Minister has decided that this work rightly falls within the duty of the general practitioner to the family under his terms of contract in the National Health Service Act. However, as the result of negotiation, the local authorities are empowered to pay a fee of 5s. 0d. for every case of vaccination and immunisation for which duly completed records are submitted to the Medical Officer of Health.

Whooping cough vaccine may be continued with diphtheria immunising prophylactic for use in individual cases but no fee is yet authorised in respect of pertussis immunisation alone.

TABLE 28. DIPHTHERIA IMMUNISATION, 1949.

	course of pr	lren who comprimary immun porary residen	Total number of children who were given a second-			
	Age at	date of final i	ary or re-inforcing in- jection (i.e., subsequent			
into To his malbidge as a same	Under 5	5—14	Total	to complete full course		
3 months ending 30/6/49* 3 months ending 31/12/49†	987 866	184 149	1,121 1,015	167 129		
Totals	1,803	/ 333	2,136	296		
Of above totals No. of children immunised by :— (a) Council staff (b) General Practitioners	1,292 511	293 40	1,585 551	286 10		

Note:—The 121 children mentioned at the foot of table 29 are included in the above figures. * Includes supplementary figures for 6 months ending 31/12/48 and 30/6/49. † Includes supplementary figures for 6 months ending 31/12/49.

Table 29.

WHOOPING COUGH. PROPHYLAXIS WITH PERTUSSIS VACCINES FOR YEAR ENDING 31/12/49.

No. of children who pertussis vaccines (in vaccines combined wi	cluding alum-precipit	ated vaccines and	Total
Age	at date of final inject	ion.	nation.
Under 1 year	1—4 years	5—14 years	daione
34	106	23	163

Of the above figures, 42 children received the whooping cough vaccine only and 121 the combined whooping cough and diphtheria prophylactic.

TABLE 30.

DIPHTHERIA IMMUNISATION.

Number of Children at 31st December, 1949, who had completed a course of Immunisation at any time before that date (i.e. at any time since 1st January, 1935)

year child population 1949	with a		10,960			14,	770	25,730
Estimated mid-		Chil	dren und	er five			n 5—14	
No. Immunised	89	1,203	1,723	1,625	1,051	5,174	4,475	15,340
Age at 31/12/49 i.e. Born in Year	Under 1 1949	1 1948	2 1947	3 1946	4 1945	5 to 9 1940–1944	10 to 14 1935–1939	Total under 15

TABLE 31. SMALLPOX VACCINATION.

	No. of persons vaccinated or re-vaccinated during 1949.						
Age at $31/12/49$, i.e. born in years.	Under 1 1949	1—4 1945 to 1948	5—14 1935 to 1944	15 or over before 1935	Total		
No. vaccinated* No. re-vaccinated*	235	17	14 5	37 37	303 45		
Totals	238	17	19	74	348		

* Includes supplementary figures for 1948 and 1949.

There were no cases specially reported during the period under review of :—

- (a) Generalised vaccinia.
- (b) Post-vaccinal encephalomyelitis.
- (c) Death from complications of vaccination other than (a) and (b).

Reference again is made to the pressing and continuing need for the vaccination of all infants and young children in this riparian borough.

Our close proximity to the docks, port of entry for ocean-going vessels from all corners of the earth, brings the ever-present menace of the introduction of the dreaded disease, small-pox, into the homes of the burgesses.

In spite of the vigilance of the Port Sanitary Authorities, the contagion has on occasion passed from ship to shore and thereafter rapid dissemination is possible by a hundred different routes through our crowded cities.

Outbreaks have occurred and the death rate in each would indicate that we are drifting towards a phase when an unvaccinated and highly susceptible population may easily fall a prey to the ravages of this highly contagious disease possibly in a virulent form.

East Ham must therefore be regarded as one of the first lines of defence and it is no less than a moral obligation for every parent to ensure that his children are vaccinated as a shield against contracting and spreading small-pox.

Section 27-Ambulance Services.

This service, working practically to full capacity, is hampered by several old vehicles which will be replaced as the exigencies of the supply position and the stringency of finance allow.

The plans for the proposed new ambulance station, foreshadowed in my last report, have been submitted to the Ministry, and after considerable discussion, agreed.

Difficulties in the steel allocation and supply position and other factors arising from the need for national economy and overriding defence measures have militated against the opportunity for rapid new construction and no progress has been made.

Meanwhile, valuable ambulances are inadequately housed, exposed to the vagaries of our climate and subject to rapid deterioration in fabric and equipment. Nor must it be forgotten that the staff in a service which demands a high degree of physical fitness, merit at least a modicum of comfort in their operational headquarters.

Throughout the year the closest co-operation has been obtained from hospitals, clinics and general practitioners so that very few calls were made which did not entail a genuine demand for ambulance services. This close liaison has also effected a considerable saving in daily mileage and costs. Alarm has been expressed in the press at isolated instances of the employment of the ambulance service in trivial and unjustifiable circumstances. The assurance is given to the Council and the public that with the system of 'call-out' employed and careful scrutiny, abuse of the service has been negligible.

TABLE 32.

AMBULANCE SERVICES.

		No. of vehicles at 31st December 1949	Total No. of journeys during the year	Total No. of patients carried during the year	No. of accident and other emergency journeys included in total No. of journeys during the year	Total mileage during the year	No. of paid whole-time staff at 31/12/49
Directly pro- vided by Council	Ambulances Cars	5 5	6,559 4,845	10,200 12,292	801 117	61,900 63,066	} 26
Totals		10	11,404	22,492	918	124,966	26

TABLE 33.

AMBULANCE SERVICES.

JOURNEYS AND MILEAGE ANALYSIS, 1949.

N. I	CT			Ambul	lances	Cars		
Nature	01 Jot	irney	bina bina	No. of journeys	Mileage	No. of journeys	Mileage	
Accidents	10 341	1120	Man S	801	3,016	117	571	
Sickness*	MIL TO	od si	n ass	4,273	47,479	3,676	45,939	
Maternity				880	5,180	37	367	
Tuberculosis				264	2,014	299	2,998	
Mental				21	1,145	119	5,645	
Midwives				35	138	199	735	
Hospital trans	sfers			70	798	24	531	
Ministry of Po				5	290	91	3,173	
Maintenance		B	10.0	62	227	65	263	
Other				85	1,018	204	2,743	
For Essex C.C				34	340	11	84	
For West Har				29	255	3	17	
	Totals			6,559	61,900	4,845	63,066	

^{*} Including infectious diseases.

NOTE.—In addition to the above, it was necessary during the year under review for cars to be hired from a private hire firm in the district on 167 occasions involving 277 patients.

The Council have no arrangements with the Hospital Car Service.

Mutual assistance arrangements existed throughout the year between the Authority and the L.C.C., West Ham and the Essex C.C., and particulars are as follows:—

L.C.C.

Removal by L.C.C. of typhus and smallpox patients within a radius of 25 miles. During 1949, these ambulances were used to remove 11 contacts of Smallpox from the S.S. "Mooltan."

West Ham and Essex C.C.		Cars.	Ambulances.	Total.
†East Ham for Essex		 11	34	45
†East Ham for West Ham		 3	29	32
*Essex for East Ham		 2	24	26
*West Ham for East Ham	***	 5	114	119

† Journeys and mileage included in tables 32 and 33.

Section 28-Prevention of Illness, Care and After-Care.

Under Sections 22 and 28 of the Act, the Council (vide Minute No. 256) approved the establishment of loan cupboards and the Ministry of Health signified their approval of the articles to be provided therein. These functioned as from 1/1/50.

These cupboards are sited at :-

Town Hall Annexe.

Church Road Clinic.

East Ham Chest Clinic (for tuberculous patients only). East Ham District Nursing Home.

The articles stocked are as follows :-

Air bed; Bed pans, adults' (assorted sizes), children's; Bed rings (air), adults', children's; Urinals, male, female; Rubber sheets; Bed linen—sheets, pillow slips, mattress covers, blankets; Sets divided mattresses; Mattress; Feeding cups; Sputum mugs; Douche cans; Higginson's syringes; Steam kettles; Inhalers; Bed cradles; Bed rests (assorted sizes); Water bed; Sand bags (assorted); Sets of 4 bed blocks (assorted); Commode—stools, chairs; Pairs crutches (assorted sizes); Walking sticks; Wheel chairs; Hot water bottles—rubber, stone; Ice bag; Thermometers; Camp bed; Wheel bed; Garden shelter; Electric heater blanket; Premature baby outfit.

The steady demand for nursing equipment and surgical and medical comforts from the loan cupboards is a sure index of the wisdom of their inception.

It is certain that this aspect of 'social medicine' will play a not inconsiderable part in alleviating the distress of sufferers who cannot now be hospitalised owing to the shortage of beds for chronic sick and tuberculous persons.

^{*} Journeys and mileage not included in tables 32 and 33.

TABLE 34. TUBERCULOSIS, 1949.

No. of visits to homes of pa- tients by nurses during 1949		notified c Ham Chest ster on 31/1		free e	occasions oxtra nouris to patient the year	No. of occasions financial help given for pur- chase of bedding	
	Adults	Children	Total	Milk	Food	Total	and clothing
6,105	1,000	283	1,283	710	56	766	42

TABLE 35. CONVALESCENT HOME TREATMENT. Number Treated, 1949.

Name of Home	Chile 0—5		School- Children		Adults		Total	
.88 box 88 solder or f	M.	F	M.	F.	M.	F.	M.	F.
Cities Comba Davidatela			10	15			19	15
Cliffe Combe, Broadstairs	-0	0	19	16	175		12	18
St. Mary's Broadstairs	2	2	16	6	773	100	16	6
The House Beautiful, Bournemouth	100	11930	14	6			14	6
Hunstanton Convalescent Home		7	1.9	12	-	7		20
st. Michaels Convent, Clacton-on-Sea	7	1 3	5	1000	CETTO	77.91	12	7
Bethany," Bournemouth	-	0		4	-	-		10
Stamford Hill Home, Thorpe Bay	THUM!	THE OWNER OF	5 5	10	1777	OBY	5	
Darrington House, Camberley	-	-	5	9		-	5	9
t. Michael's, Southbourne	10	5	T	12		1	7	18
apley Park, Instowe	6	9	1	1	-			
hildren's Seaside Home, Exmouth	TOO	netan	1	13	1777/1		-	18
Home for Invalid Children, Hove	-		6	6		-	6	6
Manor House, Burgh Castle, Gt. Yarmouth	1	3	7	1		-	8	4
Burtt Home, Bognor	-	-	5	5		-70	5	5
st. Helen's Nursery, Letchworth	2	8		-	-	100	2	8
'rincess Christian's Home, Englefield Green		7	10	1	Marin III	17.15	10	-
Beach Court, Lancing-on-Sea	3	6	-	-		-	3	6
Belgrave House, Littlehampton	-	Marie	9	1000	100	1177	9	-
Bunce Court, Otterden, Faversham	-	1	6	2	-	-	6	. 5
North Devon Convalescent Home, Lynton	-	-	4	4	11/20	000	4	4
Bell Memorial Home, Lancing-on-Sea	-		-	-	2	5	2	1
All Saints' Home, Eastbourne	1 -	1000	1	150	6	100	6	-
Assex Convalescent Home, Clacton-on-Sea	-			-	1	4	1	4
National Institute Blind Home, St.		h	HORBE.		TO BOUND		The second	
Leonard's-on-Sea	-	-	-	-	2	1	2	1
Regional Hospital Boards' Homes	5	4	3	1	-		8	1
Others	11	16	46	32	7	13	64	61

† No cost to Council.

TABLE 36. CONVALESCENT HOME TREATMENT. Period of Treatment, 1949.

Age Group	Sex	Up to 1 week	1-2 wks.	2-3 wks.	3-4 wks.	4-5 wks.	5-6 wks.	6-7 wks.	7-8 wks.	8-9 wks.	9-10 wks.	10-11 wks.	11-12 wks.	Over 12 wks.	Total
Under	M.	F.	1	1	3	2	6	5	5	4	3	1	1	5	37
5 years	F.	3	4	2	4	2	5	4	16	5	oski i	19-11	1	3	49
School-	M.	1	6	6	48	15	72	10	9	1	2		1	-	171
children	F.	4	6	6	30	6	85	3	5	4	2	2	1	1	155
	M.	1	6	4	7	-	-	-	-	1	- N	- J	-	No.	18
Adults	F.	_	9	8	14		_		-		1	_		100	31

The recommendations for this form of treatment were submitted by:—

TABLE 87.

Referred by	Children 0—5	School Children	Adults	Total
Hospitals	7 13 8 58	14 23 15 274	26 20 3 —	47 56 26 274 58
M-4-1-	86	326	49	461

The period for which free extra nourishment (see table 34) is granted to tuberculous patients is 13 weeks and in the case of milk this can be continued by renewal after such periods. In regard to food this is only granted for a total period of 26 weeks, to such patients on discharge from sanatoria. All applications where the income is above the Council's scale are submitted, before any grant is made, to the Chairman for approval.

In addition, no bedding or clothing is supplied without the Chairman's approval.

Convalescent home treatment for all children is provided free of cost. Adults or their relatives are assessed in accordance with the Council's scale and where necessary free treatment is provided with the Chairman's consent.

The cost (including fares where granted) of convalescent treatment, as provided under the Authority's scheme, for the period 1/1/49 to 31/12/49, is as follows:—

			£	S.	d.
Children under five y	rears		1,945	9	6
Schoolchildren			4,826	15	81/2
Adults	possible	med	460	5	7
Tota	1	Hiue a	£7,232	10	91

In addition, the parents of 12 children received financial aid (£24 14s. 2d.), in providing clothing before the admission of their children to Homes.

During the year under review, the Council accepted financial responsibility for after-care treatment for ex-mental patients in After-Care Homes, as follows:—

Six patients were admitted to homes belonging to the Mental After-Care Association, for varying periods—3 were resident for the whole of year, 1 for 5 months, 1 for 3½ months, and 1 for 5 weeks. The cost of this treatment to the Council was £317 13s. 7d.

Park View Therapeutic Club.

The activities of this club have continued under the auspices of the Council and staffed by a psychiatrist and psychiatric social worker of the Regional Hospital Board. Ex-patients from mental hospital selected by the medical staff form the majority of the members and regular attendance is made by our duly authorised officers to effect the closest possible personal contact in order the better to play their part in social rehabilitation. Discussions with the Regional Hospital Board to widen the scope of the club have been in progress, but so far it has been decided not to jeopardise the good chance of progress which can be achieved by introduction of a heterogeneous group of unselected cases, many of whom, in the opinion of the Regional Psychiatrist, can better be rehabilitated through the normal social channels in the community.

The line between pure therapy (the concern of the Regional Hospital Board) and after-care (afforded by the Local Authority) is so difficult of definition that it is better to conjoin the effort and share the cost, in the best interests of the patients concerned. Their journey along the road to recovery is hazardous even under the best conditions and nothing should be done to bar their progress.

Sections 28 and 51.

No advance in the provision of a second Occupation Centre for mental defectives has been possible owing to the difficulties of finding and acquiring a suitable site within the borough.

(i) Administration.

(a) A mental health sub-committee, properly constituted, composed of all the members of the Health Committee, has functioned throughout the year. This sub-committee meets as and when required.

- (b) Details of staff employed on mental health duties—see detailed list of public health staff at beginning of Report.
- (c) Co-ordination with the staffs and management committees of Regional Hospitals is maintained to ensure the best treatment, after-care and rehabilitation in appropriate cases. Discussions on problems and methods of supervision in mental cases and mentally defective individuals are frequent and most valuable. Reports are promptly rendered on home conditions and progress whenever asked for by the hospitals or institutions for cases on licence or where fresh action is anticipated or visiting required.
- (d) The National Association of Mental Health have been most helpful in finding suitable accommodation and guardians, supervising and visiting defectives and arranging holidays and transfers, and it is proposed to continue soliciting their aid whenever practicable.
- (e) Since the N.H.S. Act came into operation, the Petitions Officer and three of the Duly Authorised Officers have attended courses of training.
- (ii) Account of work undertaken in the community.
- (a) A considerable volume of evidence is accumulating of the helpful work carried out by the Duly Authorised Officers and psychiatric workers, with whom close liaison is effected, in connection with the prevention of onset and recrudescence of mental illness.

Sufferers are helped through the stresses and strains of individual problems and domestic difficulties by the tact, understanding and guidance of these officers. They are assisted to manage their affairs and to obtain such financial aid as is possible.

Suitable cases are encouraged to attend the therapeutic club and appointments are made for them whenever necessary to attend hospital out-patient departments for psychiatric investigation and re-assessment.

Every assistance is given in facilitating admission and transportation of cases to hospital or institution.

Hostels are found for individuals where this kind of placement is considered appropriate.

A certain amount of mental health education is also undertaken by the duly authorised officers when occasion offers. (b) Under the Lunacy and Mental Treatment Acts 1890–1930, by Duly Authorised Officers.

See (ii) (a) and tables 38 and 42.

- (c) Under Mental Deficiency Acts, 1913-1938.
- (i) The ascertainment of defectives is carried out by the mental health section of the Health Department, and the number of defectives awaiting vacancies in institutions at the end of the year was 9 (see table 38).
- (ii) All guardianship cases are supervised either directly or indirectly by the department.

Number supervised by National Association for Mental Health	6
Number of Orders discharged by Board of Control	27
Number provided with financial assistance by National Assistance Board	26
Number of cases visited by members of Mental Health Committee, on rota	11

Details of cases under supervision who are regularly visited by the duly authorised officers are shewn in table 38.

(iii) Training of selected defectives is carried out at the Council's Occupation Centre, open for 5 days in the week, at the Labour Hall, Katherine Road, E.6. For details see table 40.

TABLE 38.

MENTAL PATIENTS—LUNACY AND MENTAL TREATMENT ACTS.

Type of patient		Number on register on 1/1/49	Admissions to institutions during the year 1949	Discharges from institutions during the year 1949	Deaths in institutions during the year 1949	Number on register on 31/12/49
Certified —Males Females	1	161 207	23 39	16 33	8 5	165 208
Total		368	62	49	8	373
Temporary—Males		3	1	4		-
Females		to difficulty	4	3	TRUE TO THE	1
Total		3	5	7	_	1
Voluntary —Males		83	58	51	6	84
Females		68	62	61	7	62
Total		151	120	112	13	146
Grand Totals		522	187	168	21	520

No. of patients released on trial during 1949—7 Males, 21 Females, Total 28. No. of patients returned from trial during 1949—1 Female.

Of the above cases, on 1/1/49, 508 were inmates at Runwell Hospital and 14 in other institutions. During the year, 180 were admitted to Runwell and 7 to other hospitals, 165 were discharged from Runwell and 3 from other institutions, 20 of the deaths occurred in Runwell and one elsewhere and on 31/12/49, the cases were accommodated as follows:—503, Runwell, 17 other institutions.

TABLE 39.

MENTAL DEFICIENCY ACTS, 1913-1938.

PARTICULARS OF MENTAL DEFECTIVES AS ON 1/1/50.

	Males	Fe- males	Tota
. No. of ascertained mental defectives found "Subject to be dealt with":—	secretair secretair	A (u) decensor	2 00
(a) In institutions (including) Under 16 years of age	9	9	18
cases on licence therefrom) Aged 16 years and over	79	84	163
(b)†Under guardianship (in-) Under 16 years of age	1 1	-	1
cluding cases on licence Aged 16 years and over	5	10	15
(c) In "places of safety"	2	No. of	2
(d) Under statutory supervi-	20	15	35
sion (excluding cases on Aged 16 years and over	76	65	141
(e) Action not yet taken under any one of the above	HI BONG		Service .
headings		_	_
Total ascertained cases found to be "Subject to be dealt with"	192	183	375
No. of cases included in (b) to (e) M. F. Total above waiting removal to an	I I go	afety	
institution 5 4 9	d of b	conse	3
2. No. of mental defectives not at present "Subject to be dealt with" but over whom some form of voluntary supervision is maintained:— Under 16 years of age	remove that No.	i) Died, if the to (i) No. 1	o w
Aged 16 years and over	25	23	48
Total No. of mental defectives (1) and (2)	217	206	423
No. of mental defectives receiving training :-	-	NOTE THE PERSON NAMED IN	METAPOLISES.
	7	8	15
(a) In day training centres Under 16 years of age	9	9	18
∫ Aged 16 years and over			
(a) In day training centres Under 16 years of age Aged 16 years and over (b) At home	70-0	1	1075

[†] No defectives under guardianship were dealt with during the year under the provisions of Section 8 or 9.

TABLE 40.

PARTICULARS OF MENTAL DEFECTIVES REPORTED DURING 1949.

well and 7 to other lidspinist run were dischinged and 830 from Athernication ions and 200 of the sleaths	Males	Fe- males	Total
and of the section of the section of the section is a section of the section of t	Baim		acida
II. Particulars of cases reported during the year 1949:	الاستعادة		Alleria.
(1) Ascertainment—	omnuc		DED W
(a) Cases reported by Local Education Authorities	to one		ASTON I
(Section 57, Education Act, 1944)—	5	5	10
(i) Under Section 57 (3)	9	0	10
(ii) Under Section 57 (5):—	3	2	5
On leaving special schools	0	-	0
On leaving ordinary schools			
(b) Other ascertained defectives reported during		1	
1949 and found to be "Subject to be dealt	4	2	0
with "	*	-	6
(c) Other reported cases ascertained during 1949	1		
who are not at present "Subject to be dealt	Trol.	7	-
with "	10	1 10	1
Total No. of cases reported during the year	12	10	22
(2) Disposal of cases reported during the year :-			2/65
(a) Ascertained defectives found to be "Subject to			
be dealt with "—	ALUTA SER	HE TO A	13 -1
(i) Admitted to institutions	2	- Bullon	2
(ii) Placed under guardianship	1 October	TOP DI	100
(iii) Taken to "places of safety"	1	1000	1
(iv) Placed under statutory supervision	8	6	14
(v) Died or removed from area	1	HEED .	1
(vi) Action not yet taken	THE O	The same	_
(vii) Awaiting admission to institution	10,000	3	3
Total ascertained defectives found to be "Sub-	STUCKE	Industria.	19
ject to be dealt with "	12	9	21
(b) Cases not at present "Subject to be dealt		dolingly	
with "—	E 2 30E	Hobbon	(0)
(i) Placed under voluntary supervision	_ 23	1	1
ag of loofong, ag on paner and			
III. No. of cases in institutions, under community care			1
including voluntary supervision or in "places of	ica frich	100 700	N/A
safety" on 1/1/49, who have ceased to be under any	Walter !	SVOCA	
of these forms of care during 1949—	- TOOR	TO THE REAL PROPERTY.	
(a) Ceased to be under care	10000	T	
(b) Died, removed from area, or lost sight of	Hely Tiles	m To	NOT THE
IV. Of the total No. of defectives known to the L.H.A.—	A COLUMN	Bru H	600
(a) No. who have given birth to children during 1949:	Desir Hill	phylicin	CES
(i) After marriage —	erasour 84	mobile 13	1
(ii) While unmarried 1		bough	-
(b) No. who have married during 1949	2	1	3

During 1949, the number of guardianship orders discharged with the approval of the Board of Control in accordance with Circular 177/48 (Ministry of Health) and the financial provisions transferred to the National Assistance Board, was 6 males and 21 females.

The number of mental defectives on the register of the Occupation Centre on 31/12/49, was 33 (16 males, 17 females). With the exception of 2 females who attend afternoons only, all attend for the whole day.

TABLE 41.

MENTAL DEFECTIVE OCCUPATION CENTRE.

SESSIONS AND ATTENDANCES, 1949.

	Mo	rning	Afternoon		
No. of sessions held during the year	dulo 12	233	233		
Total attendances Average attendances per session	Male 2,802 12.02	Female 2,639 11.33	Male 2,753 11.8	Female 3,029 13.0	

Total attendances, males 5,555, females 5,668, total 11,223.

There were no defectives awaiting admission to the Centre on 31/12/49.

During the year under review, the defectives attending the Centre made the following articles, which were sold for the sum of £128 8s. 0d.—2 settee backs, 1 needle case, 3 knitting bags, 6 teapot stands, 13 soft toys, 2 pair gloves, 1 scarf, 1 canvas bag, 3 string bags, 2 oak stools, 7 small mats, 7 piano runners, 3 peg bags, 17 chair backs, 12 tea cosies, 6 shopping bags, 44 cushion covers, 17 wool rugs, 1 rag rug, repairs to rugs and baskets.

Table 42.
DULY AUTHORISED OFFICERS.

DETAILS OF VISITS, ETC., 1949.

51190 310	Mental Deficiency Acts 1913-38							Lunacy and Mental Treatment Acts			
COT THE PARTY OF T	Guardianship	Statutory Supervision	Friendly Care	Home reports for patients detained in institutions	Occupation	Total visits or attendances	Patients reported to be in need of treatment	After-Care	Park View Thera- peutic Social Club	Total visits or attendances	Grand Total of visits and attend ances
No. of visits and attendances	160	1,148	124	169	69	1,670	1,159	576	44	1,779	3,449

Section 29—Home Help Service.

An effort has been made during the year to effect economies in this rather costly service. By careful scrutiny and revision of the case histories, the hours of service rendered to individuals and families have been reduced without causing hardship.

The establishment has not been exceeded and it has been found advisable to employ casual helps rather than to appoint women in a full-time permanent capacity as vacancies occur. By this means the danger of employing staff who are not continuously engaged for the hours for which payment has to be made is obviated.

A home helps social club (run privately) has been formed with the object of bringing the personnel closer together and increasing the spirit of camaraderie within the service.

As I stated in my report for 1948, the demand for services of home helps continued to grow rapidly and during the period (1949), which this report reviews, there was no falling off of applications.

It was anticipated at the beginning of the year that applications would materially decrease in the summer months—this, however, did not eventuate and the demand continued throughout the year.

From the "appointed day" (4/7/48) to 31/12/48, the number of cases dealt with was 37 maternity and 66 sickness patients, a total of 103, whereas for the year 1949, 575 families received such help.

On 31/12/49, the establishment of home helps approved by the Ministry of Health, was 60 full-time or their equivalent in part-time service and on the same date the number employed was:—10 permanent (7 whole-time and 3 part-time) and 79 casual.

TABLE 43.

HOME HELP SERVICE.

TABULATION OF CASES, 1949.

	Period of service provided									
Illness or other cause for which help provided	Under 1 week	1—2 weeks	2—3 weeks	3-4 weeks	1—3 months	3—6 months	6—9 months	9—12 months	Total	
Maternity Tuberculosis Cancer Old age Other sickness	2 3 - 9 12	1 - 5 4	93 2 14 25	4 1 2 12 12	11 2 59 56	9 1 68 38	7 	2 3 37 15	100 33 10 248 184	
Totals	26	10	134	31	128	116	73	57	575	

Of the 248 cases of old age as shewn in the preceding table, this figure includes chronic sick (e.g., aged, suffering from arthritis, rheumatism, cardiac, diabetes, etc.) and the aged and blind—very few of these old people are serviced on grounds of senility only.

Of the 575 applicants, with the prior approval of the Chairman and subsequent confirmation by the Health Committee, in 269 cases home helps were provided free of cost.

SANITARY SECTION.

Mr. R. A. Baskett, B.E.M., M.S.I.A., has compiled this section of the report relating to sanitary circumstances, housing and the statistics in regard to food inspection.

During the past year, except for the retirement of one District Inspector—Mr. W. Thurston, and the Shops Act Inspector—Mr. C. Pursall, the Department has been particularly fortunate in maintaining its full complement of inspectorate. It has in consequence been possible to continue and follow up the improvement effected last year in environmental hygiene and to devote more detailed attention to the hygiene of food premises.

The work of general sanitary administration however, continues to be hampered by two main factors (a) Protracted negotiations by owners with the War Damage Commission, and (b) The reluctance of owners, in receipt of controlled rents, to carry out repairs at present costs. These matters necessitated vigilant attention to the work of re-inspection, and a more frequent resort to statutory action and legal proceedings. In order to expedite statutory action under the Public Health Act, 1936, the Council has delegated its powers with regard to the abatement of nuisances to the Health Committee.

The number of inspections carried out during the year totalled 35,106 including 8,700 under the Public Health Act, 17,277 re-inspections and 2,255 inspections under the Housing Act as compared with last year's figures of 33,201—8,034—17,518—1,808 respectively. The number of sanitary notices complied was 3,591.

Close co-operation with the Council's Housing Department was maintained during the year, particularly in regard to housing investigations and the issue of building licences for the compliance of sanitary notices. The establishment of the Sanitary Section consisted of one Shops Inspector, seven District Inspectors, a Deputy and a Chief Sanitary Inspector, together with one disinfector, one lorry driver, one mortuary attendant, one rodent operator, one drain cleaner, one clerk and two typists.

Talks to local organisations on the work of the Sanitary Section have been continued during the year, and full advantage was taken of the opportunity afforded by the Civic Exhibition to stress the importance of personal and environmental hygiene.

SANITARY CIRCUMSTANCES.

Sanitary Inspection.

Details of the work of the inspectors in general sanitary administration are contained in the following statements:—

(a) Inspections.

The number of inspections of all classes	111	35,106
(i) Housing.		
Under Public Health Act	200	8,700
Re-inspections		17,277
Housing Act, 1936		2,255
(ii) Sanitary Circumstances.		
Yards and Passages		254
Drainage and Sanitary Accommoda	tion	2,203
Factories (excluding Bakehouses)		416
Workplaces and Outworkers	***	165
Caravans		4
Re Offensive Fumes		20
Miscellaneous	dame	486
(iii) Food Supply.		
Slaughterhouses	***	3
Dairies	1100	51
Food Premises		1,683
Bakehouses		62
Re Sampling		484
(iv) Infectious Disease.		
Visits		1,048

(b) Notices.—The number of notices served during the year totalled 5,219, of which 909 were statutory notices. The number of notices complied within the same period was 3,591.

Complaints made to the Department with regard to sanitary circumstances, disrepair, infestations, obstructed drains, etc., totalled 3,519.

(c) Rat Extermination.—During the year some 294 complaints were received of the presence of rats and mice, for which the rodent operator made 3,516 visits to premises affected. Notwithstanding the Council's systematic maintenance treatment, the sewer rat showed considerable activity towards the end of the year. In almost every instance the source of rat infestation was found to be due to defective drains. In addition to those destroyed at the Council's Sewage and Refuse Disposal Works and in the maintenance treatment of the public sewers, it is estimated that some 1,674 rats were caught or poisoned.

Infestations of mice in private dwelling houses present their own peculiar problems, both in time and treatment. Particularly is this so when the active co-operation of the occupier is not readily forthcoming. The necessity for protecting all foodstuffs against the ravages of these vermin is often not appreciated. Furthermore, the presence of children and pets in the household restrict and determine the type of treatment to be employed.

(d) Disinfection and Disinfestation.—Disinfection of rooms and their contents was carried out to 420 premises and 445 library books were disinfected. The steam disinfector was in operation on 131 days during the year.

The use of smoke or spray D.D.T. insecticide was satisfactorily and successfully employed in the disinfestation of 103 verminous premises. This method of disinfesting has not only simplified treatment but effected considerable saving in time and labour. In addition the Department has been called upon to deal with nuisances arising from ants, beetles, fleas, flies, cockroaches, etc.

Woodworm infestation and the presence of dry rot in timber floors continue to be the source of many complaints from both owners and occupiers. Advice is given and remedial measures prescribed.

The cause and effect of dry rot and the necessity for prompt and drastic treatment is often not realised by owners or workmen engaged in the renewal of affected floors, etc.

(e) Legal Proceedings.—It was necessary to institute legal proceedings as under:—

Public Health Act, 1936—Section 94		131
Food and Drugs Act, 1938—Section 3	Loward	1
Rag Flock Act, 1911	source	1

- (f) Drainage.—The number of complaints relative to choked or defective drains totalled 533. Knowledge of the construction and capacity of drains on the part of the general public would appear to be almost negligible. Many of the unsatisfactory conditions complained of could have been avoided by proper use and elementary cleansing. Requests after normal office hours and during week-ends for the services of a drain cleaner have shown a marked increase during the year.
- (g) Factories, Workplaces and Outworkers.—581 inspections were made during the year and improvements effected during the past two years have been well maintained. The number of outworkers actually employed in the Borough at any given time fluctuates considerably and appears to be influenced by trade seasonal demands and of course the desire to augment the family exchequer from time to time.
- (h) Mosquito Control.—Effective treatment of the ditches and low-lying land in the Borough was carried out and no complaints of a serious nature arose. Complaints, however, with regard to fly nuisances were more numerous, and unfortunately more difficult and less effectively dealt with. The prolonged spell of warm dry weather was generally

accepted as a contributory factor, but this was poor consolation for the irritated and naturally irate householder. Many activities and sources were suspect, but in the absence of positive proof, remedial measures, often only partially successful, were of necessity restricted to local application.

- (i) Places of Public Entertainment.—Systematic inspection has been carried out both in regard to the sanitary condition of these premises and their use in conformity with the Council's Regulations. A considerable amount of work in the repair of war damage has been completed, but cleansing and redecoration generally has by no means reached pre-war standards.
- Applications for certificates in respect of the sanitary condition of houses were fewer than in the previous year.

 There were in fact only 24 applications and certificates granted totalled 17. It was, however, necessary to issue 7 other certificates in respect of applications made at the end of last year.
- (k) Shops Acts, 1912-1936.—Particulars as to shop premises in the Borough, inspections, etc., are summarised as follows:—

Visits re Closing Hours				1,213
" " Shops Act, 1934				4,240
(arrangements for Health	and C	comfort	of	
Shop Workers, Records	etc.)			

Total ... 5,458

During the year the Shops' Register was maintained and kept under constant revision. At the close of the year there were 2,393 shops in the register including 297 shop premises closed. The number of shop assistants employed in the Borough totalled 3,814, comprising 1,504 males, 1,843 females, young persons (male) 170 (female) 297.

Shop premises classified in trades are set out below :-

Bakers			***		52
Butchers	2907110	2 Dina is	DIVIDE!	Attient	88
Catering	Inthom	oof, res	tive. pr	sog, lo	97
Chemists	diagon	re of me	dolwe	SUCCES	40
Confectioners					193
Corn chandlers		Me. Kente	of Pub	Plans	19
Domestic Stores		Control of	o besture	been c	40
Drapers		A			86
Fishmongers					51
Footwear	0	anon A	HORS	1133	79
Furniture	meed	ge has	amab	IBW. 10	55
Grocers	and y	(Introde)	npitm	redecor	242
Greengrocers			ebs	standa	106
Hairdressers					94
Licensed Victua	llers	I woodt	tolk. bu	Rent. a	82
Tailors	10.00	maen]	amit	nil	75
Miscellaneous					697
THE WATER OF W	11.17.19				NO.
		Total	2004		2,096

- (l) Pharmacy and Poisons Act, 1933.—The number of persons in the Council's list entitled to sell poisons included in Part II of the Poisons List was 180. (142 renewals and 38 new applications.) In the enforcement of this Act, 446 inspections were made.
 - (m) Explosives Act, 1875.—170 visits were made in connection with the storage of mixed explosives (fireworks). There were 74 applications for the renewal of registration and 29 new applications.
- (n) Fertilisers and Feeding Stuffs.—7 samples of fertiliser and 3 of feeding stuffs were taken during the year. Only one sample of fertiliser was reported by the Council's Agricultural Analyst to be unsatisfactory, namely—a blood and bone fertiliser which was 1.15 per cent. below the statutory statement of 13.5 per cent. This sample was sold as a prepacked article and the manufacturers were cautioned with regard to the deficiency.

(o) Rag Flock Act, 1911 .- Of 7 samples of rag flock, the Analyst reported adversely upon two of them. One contained 65 parts of chlorine, and the other 200 parts of chlorine to 100,000 parts of flock. The vendor of the latter sample was prosecuted.

HOUSING.

Survey of premises for the Housing Department was continued and during the year 2,255 premises were visited and reports submitted to that Department on the housing circumstances of applicants for rehousing.

Housing Statistics.	
I. Inspection of dwelling houses during the year :-	
(1) (a) Total number of dwelling-houses inspected for defects (under Public Health or Housing Acts)	11,671
(b) Number of inspections made for the purpose	28,948
(2) (a) Number of dwelling houses (included under subhead (1) above) which were inspected and recorded under the Housing	
Consolidation Regulations, 1925	185 —
(b) Number of inspections made for the purpose	384
(3) Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	_
(4) Number of dwelling houses (exclusive of those referred to under the preceding subhead) found not to be in all respects reasonably fit for human habitation	6,187
II. 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	2,941

III. Act	ion 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 —
	(2) Number of dwelling houses which were rendered fit after service of formal notices:— (i) By owners — (ii) By Local Authority in default of
(b)	owners — Proceedings under Public Health Acts:— (1) Number of dwelling houses in respect of
	which Notices were served requiring defects to be remedied 909 (2) Number of dwelling houses in which defects were remedied after service of
	formal notices :— (i) By owners 650 (ii) By Local Authority in default of owners
(c)	Proceedings under Sections 11 and 13 of the Housing Act, 1936:— (1) Number of dwelling houses in respect of which Demolition Orders were made — (2) Number of dwelling houses demolished in pursuance of Demolition Orders —
(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 (2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit

The following statistics have been supplied by the Council's Chief Housing Officer, Mr. J. E. Austin, M.B.E.

Housing Statistics-Position at 31st December, 1949.

1.	Accom	modation made av	railable—fa	mily units :-	
500	(i)	By repair of war		J	6,233*
	(ii)	By requisitioned	NAME OF TAXABLE PARTY.		1,299
	(iii)	By new housing		384 cost of w	orks
	er red	rebuilds)	- Openiove	smarso smor	1,801
	(iv)	By emergency h	utments		A SANGER AND THE PARTY OF THE P
					9,888
	No de	This figure include	les 3,307 he	ouses classified	l Cb
	(War Damage) and	d rebuilt by	Local Author	ority.
2.	Famili	es rehoused since	August, 194	5	2,840
3.	Cases	of overcrowding by rehousing s	under He	ousing Act, t, 1945 (incl	1936, uded
	in 2)			Particular Marie	749
4.	Total	of current applica	tions for re	housing	6,543
5.	New F	Iousing :—			
			Dwellin	Maria de la companya della companya	III DE LOUIS DE LA CONTRACTION
				ed Constructi	
	Tempo	orary	934	lengentary bic	934
	Perma	nent	677	122	483
	Cost-o	f-Works Rebuilds	507*	67	384
			2,118	189	

^{*} After adjustment by Primary Education Plan.

INSPECTION AND SUPERVISION OF FOOD.

(a) Milk Supply.

Graded Milk.—Licences in force on the 30th September, 1949, were as follows:—

Tuberculin Tested Milk—			
Dealers' Licences		 o di Min	 10
Supplementary Licences	***	 	 3

Pasteurised Milk—			
Establishment Licence			1
Dealers' Licences		O IN	19
Supplementary Licences	Similaria y	9(8)	3
The Milk and Dairies Regulations and ion) Regulations became operative on the From this date until the end of the year the for licences to use special designations in regulations were received:—	ne 1st O	ctober, 194 g application	9. ns
Milk (Special Designation) (Pasteurised Regulations.	and Sta		k)
Pasteurised Milk—			~0
Dealer's Licence	hostoria		73
Supplementary Licence			10
Dealer's (Pasteuriser's) Licence			1
Sterilised Milk—		abated by	
Dealer's Licence		in 2)	81
Supplementary Licence			10
Dealer's (Steriliser's) Licence			1
Milk (Special Designation) (Raw Milk) R Tuberculin Tested Milk—	egulation	s. oli wold	
Dealer's Licence			18
Supplementary Licence		Permanen	10
Milk samples submitted for bacteriolosummarised as follows:—			
		Unsatisfacto	ry
Pasteurised	47	6	
Tuberculin Tested	7		
Sterilised	4	-	
Heat Treated	36	5	
Ungraded	2	-	
AND SUPERVISION OF FOOD.	HOLT	INSPEC	
	96	11	
Charles were milities	-clas	DE MINI (10)
All the unsatisfactory samples failed to	satisfy	the methyle	ne

All the unsatisfactory samples failed to satisfy the methylene blue test. Investigations were made in respect of each of these unsatisfactory samples but as far as could be ascertained this failure to satisfy the test for keeping quality could only be attributed to some of the high atmospheric temperatures encountered during last summer.

(b) Meat and Other Foods.

- (1) Meat Inspection.—Inspections of butchers' shops in the Borough were maintained during the year and improvements effected, particularly in regard to certain manufactory premises. Fewer complaints were received of poor quality meat and in no instance was it necessary to seize any unsound meat. Some 908 lbs. of meat were, however, surrendered as unfit for human consumption. Towards the end of the year special attention was directed to the transport and delivery of meat in the Borough. Improvements in the cleanliness of the vans and porters' overalls were effected. This matter is being followed up and further progress in the type of vehicle used, overalls worn and methods of handling meat are aimed at.
- (2) Food Premises.—The number of inspections made to food premises included 51 dairies, 62 bakehouses and 1,683 other premises. Generally, it was observed that the standard of cleanliness was much improved, due in all probability to the publicity given in the Press to the necessity for practising the principles of food hygiene and to the easing of the supply position in regard to materials and equipment.

It is, however, in the failure of the food-handlers to understand and apply these principles that the greatest dangers lie. These difficulties can only be overcome by continuous education and publicity in such matters.

As a practical contribution, the Council, in March, adopted a scheme by which all outdoor food-handlers in the Borough could avail themselves of free washing facilities at the public conveniences. Notwithstanding the limitations of such a scheme due to the location of these conveniences, the response so far leaves much to be desired.

(3) Slaughterhouses.—There is only one licensed slaughter-house in the Borough which was not in use during the year.

Under the Slaughter of Animals Act, 1933, six licences were applied for and granted to slaughtermen.

(4) Bacteriological Sampling.—In addition to 96 samples of milk the following were submitted for examination: 73 ice-cream, 1 bread, 1 custard tart, 1 drinking water, 1 of subsoil water and 8 samples of water from the public swimming baths.

The 73 samples of ice-cream were obtained from 37 different sources of supply including places of public entertainment and

were graded by the Council's bacteriologist in accordance with the Ministry of Health's Provisional Grading as follows:—

				To	otal	Sprinkle	Te mpi	73
								REEDEL
Grade	IV	andra	n Ann	25,000	V. T. Pa	angu. li	A.M. 29	5
Grade	III	Lun.	1000.		939	W	Remons	16
Grade	II			il busy	in, re	quilled	rang .be	24
Grade	I	(Party B	uidip	tained	main o	down the	28

The fat content of the samples varied from 3 to 13 per cent. and averaged 8 per cent.

The sample of bread was suspected to contain rodent excreta.

The custard tart was found to be contaminated with rodent excreta, but as the source of contamination could not be traced, legal proceedings were not instituted.

The water samples, with the exception of one taken from the vapour plunge bath, were satisfactory.

(5) Ice-Cream.—Strict attention to the sale and manufacture of ice-cream has been continued throughout the year. Applications for the sale or manufacture of ice-cream numbered 39. Two of the applications were refused and one registration cancelled.

There were 152 premises in the Borough registered for the sale of ice-cream, exclusive of Clubs, Hotels, Restaurants, Theatres, etc. 22 of these are registered for the manufacture of ice-cream.

In most cases the sale of ice-cream is incidental to the main business carried on at the registered premises, which comprise the following trades:—

Tobacconists and Confect	ioners			beri	94
Grocery and Provisions	There	. 23231	ollg	mel2. (1	25
Catering Establishments					21
Multiple Stores					5
Fruiterers					3
Peripatetic Vendors					3
Amusement Arcade				200	1
					A Service

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Seven of the Tobacconists and Confectioners also carried on the business of a lending library, but relinquished this side of their business for the more profitable sale of ice-cream. The Council has in fact decided that except under special circumstances the sale of such a vulnerable foodstuff as ice-cream shall not be carried on in conjunction with the business of a lending library.

The manufacture of ice-cream in the Borough although in every case carried on as a separate activity is in fact associated with the following trades:—

Tobacconists and Confectioners		and the		15
Catering Establishments		migni		4
Ice-Cream Manufacturers only	ub 1	ones. 8		2
Fruiterers		0.4	012	ninol
				1
				22

With the exception of one or two small confectioners where a "complete cold mix" is used, the remainder of the manufacturers submit their ingredients to heat treatment as prescribed in the Ice-Cream (Heat Treatment, etc.) Regulations, 1947/48. No great difficulty generally is experienced in complying with these regulations, although some of the operations involved are less automatic than one would desire. This, of course, is largely dependant upon the type of machinery installed, which can be both costly and complicated.

Through registration, effective control is exercised over premises used for the sale or manufacture of ice-cream, but the itinerant vendor in this Borough escapes such registration, and in consequence supervision of sales by this type of trader is rendered difficult. Registration of such traders in ice-cream or any food-stuffs should be obligatory.

(6) Other Foods.—The quality of foodstuffs sold in the Borough was generally well maintained. This is in no small measure due to the co-operation of the local food traders in seeking the help and advice of the Department when in doubt, and to the prompt manner in which foodstuffs, unfit for human consumption, are surrendered.

The following canned foodstuffs were condemned as unfit for human food:—

Meat and meat products, 449 tins, fruit 283, fish 669 milk 1,587, and 4,333 tins or packages of other foods.

In addition, the following foodstuffs were condemned—fish 4,029 lbs., fruit 236 lbs., fats 68 lbs., eggs 81, cheese 113 lbs., confectionery 6,838 lbs., other foodstuffs 1,500 lbs.

(c) Adulteration.

Whilst restricting sampling to the number falling within the estimate, efforts were directed to cover a wider range of foodstuffs, consistent with the gradual improvement in the supply position.

Of the samples reported by the Public Analyst as being unsatisfactory, 6 were due to deficiencies, 4 to some form of contamination, 4 to the presence of preservative, which although permitted had not been notified to the customer, 2 were unsound and unfit for human consumption and only one adulterated.

Gelatine was examined for the presence of arsenic, and potato crisps for the presence of linseed, horse or mineral oil.

As a matter of interest the Analyst reports that analysis of cooking fats, frying oils, etc., now involves examination for the presence of mineral oil, for of recent years the use of mineral oil both liquid and solid for baking purposes has become somewhat frequent. The Ministry of Food has in fact issued an Order prohibiting the use of mineral oil in foods, such prohibition is said to be based upon physiological grounds.

The number of samples taken and the Public Analyst's findings are set forth in the following Table:—

TABLE 44.

shoot was to mean -	Numbe	er of Samples	Percentage
Tobacconists a	Examined	Found adulterated or below standard	of samples unsatisfactory
costually measure due	off telepholic	well maintained.	
Beverages (non-alcoholic)	8	ration of the local	equ-qu (1) al
Confectionery	21	1	4.8
Drugs	18	The latest of th	D. MANAGE DIN
Fats	8	bich formattathe in	W. O. TENDING
Fish and Fish Products	4	1	25.0
Meat and Meat Products	79	7	8.8
Milk	101	1	1.0
Preserves	7	shool benlise gare	14.3
Wines and Spirits	15	_	book start
Others	75	6	8.1
Total	336	17	5.0

Details of samples adulterated or below standard are described as follows, together with resultant action:—

TABLE 45.

No.	Informal or Formal	Article	Adulteration or Deficiency	Action taken
5683	F	Potato Crisps	Fat in an acid and rancid condition.	Withdrawn from sale Letter of caution.
5694	I	Gelatine	Contained 4 parts per million of ar- senic.	No further supplies available. Letter of caution.
5707	I	Sherbet	Not an effervescing preparation.	Vendor cautioned.
5806	I	Pork Sausages	Contained 25% meat instead of 50%.	Formal sample taken
5819	F	Pork Sausages	31% deficient in	Vendor prosecuted.
5824	I	Pork Sausages	meat. 8% deficient in meat	Formal sample satisfactory.
5851	F	Milk	Added water at least 2 parts per cent.	Letter of caution.
5868	I	Jam	Presence of beetle	Contamination sub- sequent to manu- facture. No action
5910	I	Bread	Presence of foreign body.	Vendor cautioned.
5911	1	Pie Crust and	Incipient rancidity.	Withdrawn from sale
5913	I	Pastry Mix Fruit Preserv- ing tablets	Deficient in sulphur dioxide 20%	Old stock — with- drawn from sale.
5920	I mod	Beef Sausages	Contained sulphur dioxide to extent	Letter of caution.
	f remuner	ds in respect o	of 240 parts per million.	acgis of the Regi
5934	. I	Tinned Fish	Contaminated by tin	for human con- sumption.
5935	F	Beef Sausages	Contained sulphur dioxide to extent	Letter of caution.
	ion Author	Library Education	of 200 parts per million.	and it is housed
5958	I	Macaroon Tart		Vendor prosecuted (1950).
5968	I	Pork Sausage	Contained preserva- tive.	Vendor cautioned.
5985	I	Salad Cream	Deficient in oil to the extent of 1.6%	Vendor cautioned— withdrawn from sale.

County Borough of East Ham Education Committee

To the Chairman and Members of the Education Committee.

Mr. Chairman, Ladies and Gentlemen,

I beg to present my annual report on the School Health Service. In view of the increasing number of scholars on the registered rolls of the schools and the avowed difficulty experienced by general practitioners in giving adequate attention to children on their lists, the integrity and continuity of this service at a high level of efficiency remains a paramount necessity to the community.

The policy of medical inspection and follow-up treatment established since the Education Act, 1944, has been steadily pursued and in order to give the family doctor every opportunity of taking the initiative in referring children to hospitals, close contact has been established to ensure that general practitioners are made aware of the need for investigation or treatment of school children on their lists.

The medical staffs of the specialist clinics now come under the aegis of the Regional Hospital Boards in respect of remuneration and terms of service.

For the time being these clinics will continue to function as heretofore in premises provided by the Local Education Authorities and it is hoped that the wisdom of this practice will prove so abundantly manifest that no attempt will be made to split off these specialist clinics from the School Health Service. The saving in "schooling time" to the scholars and "working time" to their attendant parents alone would be the strongest possible argument in favour of the retention of this system, whilst the integration of these clinics with the school medical work as a whole has proved of the greatest value to the children concerned. Dichotomy in this direction must be avoided, and our whole effort concentrated on maintaining the service as a unified whole under the School Medical Officer.

School milk, school meals, and school health should be regarded as a medico-social triad on which the well-being of the scholars has been truly founded; to strike away any one of them might well cause the whole edifice built up by patient local authority effort over four decades, to crumble and decay.

It is with feelings of great personal loss and deep regret that reference is made to the death of Dr. Reeve Flaxman who for twenty years carried out the duties of Ophthalmic Consultant to the Council. His work was stamped with a uniform excellence and his relation with colleagues and patients always cordial yet dignified. The children and nurses adored him for his gentleness and kindness under all circumstances, and his passing will create a gap in our School Health Service. His post may be filled, but he can never be replaced.

I wish to express my sincere thanks to the Chairman and Members of the Education Committee and to those of the Sub-Committees, for their courtesy and kindness and their assistance on all occasions.

I have the honour to be, Ladies and Gentlemen,

Your obedient Servant,

Malcolm Barker,

School Medical Officer.

GENERAL INFORMATION.

Schools and Numbers on Roll (mid 1949).

TABLE 46.

Type.	Number of Schools.	Number on Roll.
Maintained Primary: Infant Junior Maintained Secondary Voluntary (Infant and Junior)	17 15 11 4	} 9,759 4,909 807
Totals	*44	15,475

^{* (3} maintained schools are combined Infant and Junior).

Estimated number of children aged 5-14 inclusive (mid 1949) 14,770 School Clinic premises and purposes served :—

Types of Clinic. Address. School Health Town Hall Annexe, Diphtheria and Pertussis Barking Road. Immunisation Aural Ophthalmic Physiotherapy and Sunlight Dental Manor Park Clinic, School Health Diphtheria and Pertussis Church Road. Immunisation Physiotherapy and Sunlight Dental School Health North Woolwich, Fernhill Street. Child Guidance Shrewsbury Road Speech Therapy School

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TUESDAY THURSDAY FRIDAY SATURDAY MONDAY WEDNESDAY Shrewsbury Rd. Child Guidance Shrewsbury Rd. Child Guidance School Health School Health School Health Physiotherapy Ophthalmic Physiotherapy Ophthalmic Physiotherapy Ophthalmic ANNEXE Physiotherapy Physiotherapy (alternate weeks) Dental Dental (general anaes-thetics) Dental Dental Dental Dental MORNING School Health Physiotherapy Dental School Health Physiotherapy Dental MANOR Physiotherapy Dental Physiotherapy Dental Dental (general anaes-thetics alternate weeks) North Woolwich School Health Shrewsbury Rd. Child Guidance ANNEXE Physiotherapy Sunlight Sunlight School Health Immunisation AFTERNOON Aural Dental Aural Dental Dental Dental Dental School Health MANOR Immunisation Physiotherapy Dental Dental Dental

TABLE 47.—SCHOOL CLINICS.

School Health Clinics.

As indicated in the foreword to this section, these clinics have continued fully staffed and well attended throughout the year. It is felt that nothing in the N.H.S. Act has yet altered the requirements of the Education Act, 1944, that a comprehensive medical service (other than domiciliary treatment) shall be provided for school children.

It is better to examine and if possible treat a child in the environment of the School Health Clinic than to thrust him into the atmosphere of the hospital or the crowded waiting room of the general practitioner's surgery.

Hospital staffs are well aware of the advantages offered by our Clinics and increasing use is made by them of the facilities offered in conjunction with their own periodic supervision.

Our chief difficulty is to retain good medical staff owing to the low salaries School Health posts command, but it is hoped that some adjustment may be made as a result of negotiations now proceeding which will have the effect of obviating this drawback and once more attract the best type of young and vigorous doctor into this interesting and important work.

COMPARATIVE STATISTICS.

The following table indicates briefly the work of the School Health Service during the year 1949, and shows the comparative statistics for previous years.

TABLE 48.

Manuel Paris Climber	1945	1946	1947	1948	1949
Routine and Special Inspections at			and Pa		
School: *Maintained Secondary Schools	969	1,404	2,614	1,932	2,331
*Maintained Primary Schools	1,741	4,034	3,600	4,941	6,272
†Secondary Schools	125		_	2-2	
†Elementary Schools	640		30	1	1 1
Re-inspections at School	1,795	2,834	3,209	2,675	3,145
Inspections and Re-inspections at	,				
Clinics	14,628	11,571	11,141	10,748	9,686
General cleanliness visits to schools	223	256	281	284	287
Examinations for cleanliness	25,448	30,077	48,514	38,561	42,040
Nurses' visits to homes	1,859	1,404	1,212	3,691	8,012

SCHOOL MEDICAL INSPECTIONS.

The reader is referred back to this section of the report in previous years and to contemplate the question raised in certain quarters that school medical inspections are both unnecessary and a waste of time.

My own experience after many long years of this work lead me strongly to repudiate and refute this imputation and to state categorically that these inspections have a great value to the school, the parent and the family, and have contributed not a little to the better physique and increase in height and weight, in comparable age groups of children of pre-war years. I am sure the imputation is based largely on the knowledge that the work in some areas is indifferently accomplished by inferior personnel. In no branch of medical survey is the personal factor of the examiner more important and obviously the more highly trained he is, the keener his clinical acumen and the better the standard demanded of him by the School Health Officer, the greater will be the value of his findings and the educative effect of his contact with the parent and pupil.

The presence of parents at these inspections is cordially welcomed and it is satisfactory to report that despite the large number who are in employment, 73.5 per cent. of parents attended in all age groups and 90.9 per cent. in the first group. These figures compare with 71.6 per cent. and 93.5 per cent. for 1948.

In addition, special surveys have been carried out to demonstrate speech defects, the remedying of which must play an enormous part in the personal, psychological and social development of affected scholars.

A highly technical group audiometric survey is being conducted throughout the schools to discover hearing defects which likewise would have a profound retarding effect on individual education should they remain untreated and uncorrected by appropriate measures. The great volume of remedial work that is undertaken by the School Health Service as a result of the demonstration of individual defects in scholars discovered at routine inspection, extends into every field of medicine, surgery and physiotherapy. Such remedial and corrective therapy would often be applied too late but for this service, for under existing circumstances in no other way would the parent be made aware that there exists in the child a potential handicap to his normal growth, future happiness and chance of attaining useful citizenship.

Summary of Inspections and Re-inspections.

Periodic Inspections: 8,483 At Schools ... Special Inspections: At Schools ... 120 At School Health Clinics ... 4.170 148 Handicapped Pupils 39 For Employment ... For Special Courses, etc. ... 113 3,142 Re-inspections at Schools 5,516 Re-inspections at Clinics

Medical Inspection and Re-inspection at Schools.

TABLE 49

		Infant	FOILE	J	unior		Sec	ondary	7
School	I	R	S	I	R	S	I	R	S
A CONTRACTOR	A KHE	arres.	577.0	000	5 00.5	100	THE PARTY.		
a) Maintained Primary	y	1377	120	788		57	2051		
and Secondary	68.1	007	17.5	200		26]	1351		
Schools:	82.6	0.002	18.0	120:		re i	846		
Altmore		138	4	880	DAMES B	200	1011	-6-	-
Avenue		94	2007	1000		25	S. THE	-	15
Brampton	. 289	183	-	161	48	-	318	264	-
Central Park	. 194	50	2	- Date of	0.00	-	322	224	22
Cornwell		_		262	50	-	147		8
Dersingham	. 207	126	2	0200	1	1000	BOOKS.	-	-
	. 276	136	7	1-	1	-	188	96	2
Hartley	700	131	3	SET S	Later 1	-	2000	-	-
	. 130	75	-	-	Comm. I	-	10000	-	-
Y All		_		445	93	2	-	_	-
	. 294	119	5	-		-	282	-	2
** .	. 107	63	- 3	0-0	-	-	98	2]
n n 1	. 37	UZ		48	MATO	_	_	_	-
0.11.1	. 224	68	6	571	3 -45	3	-	-	-
	. 202	94	5		77 7501	_			_
C12 01 2	. 373	157	1	424	90	4	Degral I	THE	
	. 53	29	_	111	50	1		W. 3.	1
***		70	5	309	59	_	408	123	MI
7777	00	39		101	31	6	100	120	100
				101	01	0	240	98	1
Boys' Grammar . Girls' Grammar .	01 5.7	THE PERSON	1000	DOMESTIC STREET	8620/10		239	123	1
		nies m	APP 1	TV NOT	mite	OF OTE	200	120	B T
Technical School	"					1	44	34	1
Building		NET !	1	1 111-3	11000	1	22	0.4	100
b) Voluntary Schoo	IS	Se bourse	- 150	Section 63		directions	the		1 (0)4
(R.C.):	10	01	4	72	14	10	1		100
Commence of the contract of th	49	24	1	12	14	10		10000	100
	47	-	2	100	700	-		A STEEL	-
	83	17	-	195	106	3	1		-
Silvertown	34	5	-	56	19				
Totals .	3,442	1,618	46	2,755	560	29	2,286	964	4.

I.—Periodic inspection.

R.—Re-inspection.

S.—Special inspection.

Age Groups, General Condition, Co-operation of Parents.

TABLE 50.

Group	Takal.		Parents		Requiring treatment		General Condition.					
	Total inspected	present		treat			A		В		C	
		No.	%	No.	%	No.	%	No.	%	No.	%	
I.	2797	2645	90.9	700	25.0	1114	39.8	1616	57.8	67	2.4	
II	1051	766	72.8	237	22.5	315	30.0	713	67.8	23	2.2	
III	1271	323	25.4	225	17.7	700	55.1	562	44.2	9	0.7	
Age 6-7	645	614	95.1	120	18.6	205	31,8	427	66.2	13	2.0	
Age 7-8	1704	1433	84.0	388	22.7	563	33.0	1095	64.3	46	2.7	
Age 12–13	1015	458	45.1	195	19.2	452	44.5	528	52.0	35	3.5	
Totals 1949	8483	6239	73.5	1865	21.9	3349	39.5	4941	58.2	193	2.3	
1948	6665	4769	71.6	1232	18.5	1697	25.5	4840	72.6	128	1.9	
1947	6033	3670	60.8	1101	18.3	709	11.7	5252	87.1	72	1.2	
1946	5438	3487	64.1	1158	21.3	772	14.2	4436	81.6	230	4.2	
1945	3604	2178	60.4	706	19.6	412	12.3	2894	86.4	44	1.3	

HANDICAPPED PUPILS.

No special schools for the treatment of handicapped pupils are maintained by the Authority. Arrangements are made by the Chief Education Officer with schools outside the area for the admission of children as recommended.

Under the provisions of Section 34 of the Education Act, 1944, *148 special examinations have been carried out by approved medical officers, as a result of which, 122 children, ascertained to be within the various categories, were recommended for special educational treatment as indicated in the following table:—

TABLE 51.

					Number	R	ecommenda	tion
Category				ascertained	Day Special School	Boarding Special School	Ordinary School with special treatment	
Blind					_	_	_	_
Partially S	ighted				_		_	_
Deaf	Burea				8	3	_	_
Partially I					_	_	_	_
Delicate					20	_	20	_
D: 1 .:						_	_	-
Education		b-nor			30	14	2	14
77 - 17 - 41					1 1	_	1	_
Maladjuste					3		2	1
Physically					10	6	4	_
*Suffering					55	_	_	55

^{*} Examinations of children with suspected speech defects are not included in the special examinations under this paragraph, but those requiring speech therapy are classified as Handicapped Pupils.

Sixteen cases were found to be subject to be dealt with under the provisions of Section 57 of the Act:—

Recommended for report to the Mental Health Committee under the provisions of:

Section	57	(3)	 	 	 	11
Section	57	(5)	 	 	 make bo	5

MEDICAL TREATMENT.

Summary of Defects treated at School Health Clinics.

Skin:

Ringworm							12
Scabies							0
Impetigo	1	Institute	T referri	boulance	n daldw		34
Other Dise	ases						424
Eye Disease							122
Ear Defects							95
Other Defects							200
				[otal			896
Total attendand	es at	School	Health	h Clinic	s	Direct l	14,150

NOTE:—Defects treated (see Table 38) refer to cases treated "under the Authority's scheme and otherwise."

Aural Clinic.

Mr. R. M. Savege, F.R.C.S., M.B., Ch.B., D.L.O., who was for many years the Authority's Ear Nose and Throat Surgeon, continues to attend the Aural Clinic by arrangements with the Regional Hospital Board. Mr. Savege attends one session weekly. The following are the statistical details:—

Number of clinic sessions		olejeje s	didita le	Tollar.	50
Number of children attendi	ng	neg, att	blide to	redan	467
Number of attendances		adapte:	of atther	radon	1,206
Number of children dischar	ged	rep, dis	blide to	radim	520

Defects and treatment:

TABLE 52.

Group	Defect	present	The second	Number observed	Number treated	Referred for operation	Discharged after treatment
Tonsils an	d Adenoids			248	47	201	240
Other thro	oat condition	S		20	20		20
Deafness		***		54	54	-	42
Otitis Med	dia and discl	narging	ears	43	43	-	39
	conditions			72	68	4	88
Nasal defe				10	9	1	8
Rhinitis				16	16	1000	14
Catarrh				26	26	-	26
Other nos	e conditions	Election !	The st	46	46	III I- viii	49
	10000	Totals		535	329	206	526

Note:—Included in figures "Discharged after treatment" are some defects which remained under treatment at the end of 1948.

Of the cases referred for operative treatment, 201 were for the removal of tonsils and adenoids, two for mastoidectomy and two for removal of polypi in the ear. The operations were performed by Mr. Savege at the Children's Hospital, Balaam Street.

Ophthalmic Clinic.

Mr. S. C. Reeve Flaxman, M.R.C.S., L.R.C.P., continued to attend the Ophthalmic Clinic on five sessions per fortnight until his illness at the end of October.

Miss C. M. Fitzpatrick, M.B., B.Ch., B.A.O., is continuing the work of the clinic in a temporary capacity until arrangements are concluded with the Regional Hospital Board.

The Clinic is at present organised in accordance with the interim arrangements outlined in Circular 179/48.

Statistics are as follows :-

Number of clinic sessions		olesses of	1.0	Tall.	120
Number of children attending		the world	fish 1	10000	1,398
Number of attendances		e webo	1.1.	1.000	2,051
Number of children discharge	d	lrossdis.	Hat, lo	144.00	143

Defective Vision and Squi	int	Eye Disease
New cases	350	Treated at clinic 108
Re-examinations	939	Referred to hospital 11
Glasses prescribed	966	
*Glasses obtained	597	
Glasses not required	48	
Referred to hospital	38	

^{*} Information from Local Executive Committee.

The following cases were referred to hospital for treatment:—

Squint					 38
Conjunctivitis				•••	 3
Cyst					 2
Foreign body					 1
Other conditio	ns for inv	restigat	ion		 4

Diphtheria Immunisation Clinic.

Immunisation clinics are held weekly at the Town Hall Annexe and Manor Park. Every opportunity is taken during medical inspection at schools and in the course of School Health clinics, to impress upon the parents the efficacy of immunisation. The need for re-inoculation of children admitted to school for the first time is stressed by teachers and by the use of posters, leaflets, etc.

The work of the clinics is shewn in the following	owing	summa	ry:-
Number of clinic sessions			141
Number of children completely immunised			328
Number of children re-inoculated			296
Percentage of children of school age complet	ely in	nmunise	d 65.3

Chest Clinic.

As in previous years a considerable number of children have been referred to the Tuberculosis and Chest Clinic for full pathological and radiological investigation of doubtful chest conditions. The number of tuberculosis notifications received during the year for children of school age was:—

Pulmonary	 	 	 	18
Non-pulmonary	 	 	 bear old	7

Physiotherapy and Light Clinic.

Attendances continue to increase. Many forms of radiation and electrical treatment are now given for diverse conditions, together with massage, corrective and developmental exercise.

			Cases.	Treatments.
Artificial sunlight (General)	88.	Jatie	437	4,345
Local light	hosten	on and	403	4,553
777			88	1,267
Remedial exercises			850	5,698
Total attend	ances-	-9,48	7.	

The appointment of an Orthopaedic Consultant has not yet been made and, when necessary, cases are referred to general hospitals.

Child Guidance Clinic.

Dr. H. Bevan Jones reports as follows:-

At the close of 1948 the Child Guidance Clinic was working in the Town Hall Annexe with a staff of two; a Psychiatrist and an Educational Psychologist who each put in two days a week on this work. The team had to operate without a Psychiatric Social Worker in spite of repeated attempts to secure one.

At the beginning of 1949, two Psychiatrists were employed, each giving one day a week and except for this change, the service continued as in 1948 until mid-summer when the Clinic moved to the Child Guidance Centre at Shrewsbury Road School. A part of this school had been converted for the purpose so that there were four consulting rooms, a conference room, waiting room and office. The Speech Therapist took over the use of one of the consulting rooms for the Speech Clinic; a happy arrangement that is proving valuable to both clinics. One of the Psychiatrists had to reduce his clinical sessions, after mid-summer, but the Clinic was fortunate at the time to secure the services of a play therapist for a day a week. By the end of the year, the Clinic had obtained the services of a full-time Psychiatric Social Worker and was looking forward to functioning with a full team for the first time since its inception.

A trend that is becoming evident in the work of the Clinic is for children to be referred at a younger age. This is a most desirable tendency as it is found that greater help can be given to the younger child than to the older. A secondary school child showing a marked tendency towards delinquency is a difficult case to handle on a "once weekly" treatment basis and in many such cases a Clinic can act only in a diagnostic and advisory capacity. With younger children, however, not only is treatment more effective but advice and help to parents is much more efficacious often leading to a good adjustment before an otherwise almost irremediable situation is created.

At the end of 1948, there were 28 cases that had not been seen. During the year 125 new cases were referred and 35 cases discharged. This resulted in the gradual building up of a long waiting list and by the end of the year, the average waiting time between referral and being taken on for treatment was at least six months. In addition to this, the rate of referral itself was showing signs of increase. It seemed, therefore, that for 1950, the waiting time would still be long unless there were special grounds for giving priority.

Dr. Bevan Jones attends on two sessions weekly and in addition the Authority has secured the part-time services of Dr. W. H. Craike, M.R.C.S., L.R.C.P., D.P.M., D.C.H., who commenced in February for two sessions weekly and since September has attended once each week.

The appointment of Miss J. van Gorder, psychiatric social worker, who commenced duty early in the new year, and of Mrs. K. Barker, play therapist, who has attended for two sessions weekly since September, complete the staff team.

1.	No. of sessions attended by Dr. H. Bevan Jones during 1949 99
2.	No. of sessions attended by Dr. W. H. Craike during 1949 65
	(Of the above total (164) two sessions were allocated to Mental Health and the remainder to Child Guidance.)
3.	No. of cases under treatment on 1/1/49 55
4.	No. of cases referred for treatment during 1949 125

5.	No. in (4) who received treatment during 19	949	Surrey	85
6.	No. of cases discharged or not requiring removals, etc., during the year	treatm	nent,	60
7.	No. of cases under treatment on 31/12/49	do	more.	80
8.	Total attendance of C.G. cases at sessions a Psychiatrist during 1949	ttende	d by	862
9.	No. of cases seen by Psychologist Attendances	8 bins		98 206
10.	No. of visits to schools by Psychologist No. of pupils concerned	alayy of their	bey a	24 36
11.	No. of sessions attended by Play Therapist Attendances		admor	14 86
Spe	eech Therapy.			
	Miss P. N. Glover, L.C.S.T., has been ap	pointed	l as S _l	peech
The	rapist and commenced duty in September.	Followi	ng a st	ırvey
of a	ll schools, 232 children were examined by the	Assist	ant Me	edical
Offi	cers and 155 referred to attend the Clinic.	Up to	the en	nd of
the	year, the number of attendances at the Cli	inic wa	s 264.	
1.	No. of Cases referred to Speech Therapist			155
2.	No. of cases treated during 1949	16.00		52
3.	No. of cases discharged during 1949	die ver	193	6
4.	No. of cases waiting treatment on 31/12/49			149

HOSPITAL TREATMENT.

Apart from the financial implications the change in administration of the hospitals has made little difference to the treatment of East Ham pupils. Cases requiring specialist services are referred to an appropriate hospital and the provision of all forms of treatment is thus maintained.

Operative treatment of tonsils and adenoids has been carried out as follows:—

Children's Hospital, Balaam Street	.W. o	der, th	ur.ate	378
Queen Mary's Hospital, Stratford	West			9
St. Mary's Hospital, Plaistow				30

GENERAL CLEANLINESS.

Routine visits have been paid to all schools by the school nurses for examination of the persons and clothing of the pupils. Willing co-operation of the parents in the treatment of children found to be verminous has obviated the necessity for formal proceedings.

On the whole, a high standard of personal hygiene has been noted in the schools.

Number of visits paid to schools				287
Number of examinations				42,040
Number of pupils found unclean		Mil. 10	I Bires	1,053
Number of cleansing notices (Section	54 (2	2))	1	56
Number of cleansing orders (Section :	54 (3)))		mpid=

Very few cases requiring more than simple hygienic measures plus the use of a modern larvical preparation, have been encountered and the vigilance of the staff has resulted in a great overall reduction of head infestation in the school population.

The follow-up system is being pursued and in certain instances effective treatment has been possible at the School Health Clinics.

HOME VISITS BY SCHOOL NURSES.

The nurses paid 8,012 visits to homes during the year to give advice on cases of infectious disease and post-operative tonsils and adenoids cases and for routine investigation in connection with the clinics.

DENTAL INSPECTION AND TREATMENT.

Miss H. T. Smith, L.D.S., R.C.S., has submitted the following report on the Dental Service:—

I have the honour to present my report on the work carried out in the Dental Clinics during the year 1949. During the first six months of the year, there were only two dental officers affording treatment for the school children and patients under the M. & C.W. Scheme. This resulted in the conservative treatment of teeth being relegated to second place while efforts were made to cope with pain and oral sepsis. The minimum number of dental officers required to carry out dental treatment efficiently in a Borough with approximately 15,000 school children is four. For nearly twelve months, therefore, the dental service was only 50 per cent. efficient. A new Dental Officer, Mrs. P. Osis, D.D.D. was appointed on 9th June, 1949.

However, in spite of the many difficulties encountered during the year, 18,040 school children were inspected, of whom 7,777 were found to require treatment. The number actually treated was 6,057, an increase on the previous year. We have endeavoured to abide by the ideal of inspecting adolescent children twice during the year, as at that age they need constant dental attention. The demand for fillings increases year by year, as parents are now appreciating the value of this type of treatment. The number of permanent teeth filled was 2,539 and 155 fillings were inserted in temporary teeth. These figures show a slight decrease on the previous year, owing to the shortage of staff.

Those parents interested in orthodontic treatment were advised on the correct method of treating the condition, and the more difficult cases were referred to hospital. During the year 70 permanent teeth were extracted to facilitate treatment.

Many children have accidents involving damage to upper front permanent teeth. These teeth can be restored to full function and the appearance made normal again by crowning. Twenty of these cases were referred to hospital for this type of treatment.

Details of all figures may be found in Table IV returns to the Ministry of Education (see Table 57).

The School Dental Service has achieved some prominence recently owing to the drift of dental officers into private practice. In some areas the service has completely collapsed. East Ham may be considered fortunate that they have been able to carry on the service, although in a reduced capacity.

MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS.

TABLE 53.

A.—Periodic Medical Inspections.

B.-

Number	of	Inspections	in	the	prescribed	Groups	; :
--------	----	-------------	----	-----	------------	--------	-----

Number of Inspections	in the	preser	ibed G	roups	-	
Entrants	Designation of the last of the					2,797
Second age group						1,051
Third age group						1,271
						P. d
		Total				5,119
Number of other Perio	die Ins	pection	ıs			3,364
			Total			8,483
						Mood CEN
-Other Inspections.						
Number of Special Ins	pection	S				4,590
Number of Re-inspecti	ons		•••			8,658
		Total				13,248

C .- Pupils found to Require Treatment.

Number of individual pupils found at periodic medical inspections to require treatment (excluding dental diseases and infestation with vermin).

TABLE 54

Group	For defective vision (excluding squint)	For any of the other conditions recorded in Table 55A	Total individua pupils	
Entrants	13	690	700	
Second age group	52	196	237	
Third age group	78	158	225	
Total (prescribed groups)	138	1,044	1,162	
Other periodic inspections	184	584	703	
Grand Total	322	1,578	1,865	

TABLE 55.
A.—Return of Defects found by Medical Inspection in the year ended 31st December 1949.

	Periodic Inspections				
	No. o	f defects	No. of defects		
Defect or Disease	Requiring treatment	Requiring to be kept under observation, but not requiring treatment	Requiring treatment	Requiring to be kept under observation, but not requiring treatment	
uguer, ibe. P. de		ayes shooding		STATE OF THE PARTY	
Skin	151	17	564	27	
Eyes—a. Vision	322	117	188	138	
b. Squint	52	28	41	43	
c. Other	74	. 10	231	27	
Ears—a. Hearing	26	12	32	11	
b. Otitis Media	22	12	26	7	
c. Other	20	7	107	18	
Nose or Throat	425	528	491	266	
Speech	22	24	49	27	
Cervical Glands	14	49	34	29	
Heart and Circulation	28	20	9	37	
Lungs	91	86	17	66	
Developmental—		and a supplied			
a. Ĥernia	9	3	4	8	
b. Other Orthopaedic—	32	26	9	82	
a Docture	82	37	18	44	
h Flat Foot	210	50	90	52	
a Other	203	87	79	64	
Nervous system—	200	01	10	04	
a Unilaness	12	6	8	7	
h Othon	23	25	55	29	
Psychological—	20	20	99	29	
	7	13	13	14	
h Ctability	9	11	23	14	
Other				15	
Other	309	171	1,330	882	

B.—Classification of the General Condition of Pupils Inspected during the year in the Age Groups.

Age Groups	Number	A (Good)		B (Fair)		C (Poor)	
alliquigential is supply	Pupils Inspected	No.	%	No.	%	No.	%
Entrants	2,797	1,114	39.8	1,616	57.8	67	2.4
Second age group	1,051	315	30.0	718	67.8	23	2.2
Third age group	1,271	700	55.1	562	44.2	9	0.7
Other Periodic Inspections	3,364	1,220	36.3	2,050	60.9	94	2.8
Total	8,483	3,349	39.5	4,941	58.2	193	2.3

TABLE 56.

TREATMENT TABLES.

GROUP I.—Minor Ailments (excluding Uncleanliness).

(a)

	Number of Defects treated or under treatment during the year
Skin—Ringworm—Scalp:	and we are us
(i) X-Ray treatment	_
(ii) Other treatment	2
Ringworm—Body	16
Scabies	20
Impetigo	34 476
Other skin diseases	410
refraction, squint and cases admitted to hospital	347
Ear Defects—excluding treatment for serious diseases (opera-	LIL TI GITOGO
tive treatment in hospital) which are recorded in the body	my Lucian
of the Report	164
Miscellaneous (minor injuries, bruises, sores, chilblains, etc.)	245
Other conditions not classifiable under the above headings	2,544
STREET, STREET	2 Telling and .
(b) Total number of attendances at Authminor ailment clinics	3,848 nority's 14,150
(b) Total number of attendances at Authorized minor ailment clinics GROUP II.—Defective Vision and Squint (exclude	ority's 14,150
(b) Total number of attendances at Authminor ailment clinics	nority's 14,150 ing Eye Disease
(b) Total number of attendances at Authorized minor ailment clinics GROUP II.—Defective Vision and Squint (excluded)	nority's 14,150 ing Eye Disease
(b) Total number of attendances at Authorized minor ailment clinics GROUP II.—Defective Vision and Squint (excluded)	nority's 14,150 ing Eye Disease No. of Defect
(b) Total number of attendances at Authorized minor ailment clinics GROUP II.—Defective Vision and Squint (exclude treated as Minor Ailments—Group I.) Errors of Refraction (including squint)	nority's 14,150 ing Eye Disease No. of Defect dealt with 1,416
(b) Total number of attendances at Authorized minor ailment clinics GROUP II.—Defective Vision and Squint (exclude treated as Minor Ailments—Group I.) Errors of Refraction (including squint) Other defect or disease of the eyes (excluding	No. of Defect dealt with 1,416 those
(b) Total number of attendances at Authorized minor ailment clinics GROUP II.—Defective Vision and Squint (exclude treated as Minor Ailments—Group I.) Errors of Refraction (including squint) Other defect or disease of the eyes (excluding recorded in Group I)	No. of Defect dealt with 1,416 those 108
(b) Total number of attendances at Authorized ailment clinics GROUP II.—Defective Vision and Squint (exclude treated as Minor Ailments—Group I.) Errors of Refraction (including squint) Other defect or disease of the eyes (excluding recorded in Group I) Total	No. of Defect dealt with 1,416 those 108 1,524
(b) Total number of attendances at Authorized minor ailment clinics GROUP II.—Defective Vision and Squint (exclude treated as Minor Ailments—Group I.) Errors of Refraction (including squint) Other defect or disease of the eyes (excluding recorded in Group I) Total	No. of Defect dealt with 1,416 those 108 1,524
(b) Total number of attendances at Authorized ailment clinics GROUP II.—Defective Vision and Squint (exclude treated as Minor Ailments—Group I.) Errors of Refraction (including squint) Other defect or disease of the eyes (excluding recorded in Group I) Total	No. of Defect dealt with 1,416 those 108 1,524
(b) Total number of attendances at Authminor ailment clinics GROUP II.—Defective Vision and Squint (exclud treated as Minor Ailments—Group I.) Errors of Refraction (including squint) Other defect or disease of the eyes (excluding recorded in Group I) Total Number of Pupils for whom spectacles were:	No. of Defect dealt with 1,416 those 108 1,524
(b) Total number of attendances at Authorized minor ailment clinics GROUP II.—Defective Vision and Squint (exclude treated as Minor Ailments—Group I.) Errors of Refraction (including squint) Other defect or disease of the eyes (excluding recorded in Group I) Total	No. of Defect dealt with 1,416 those 108 1,524 966

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

	1	Total numbe treated.
Received operative treatment: (a) for adenoids and chronic tonsillitis (b) for other nose and throat conditions Received other forms of treatment		417 3 175
Total	require realize	595
GROUP IV.—Orthopaedic and Postural Defection (a) Number treated as in-patients in hothospital schools (b) Number treated otherwise, e.g. in clinical contents of the c	spitals or cs or out-	Youbles Timpeting Other six
patients departments GROUP V.—Child Guidance Treatment and Sp	bad selling	462 capy.
Number of pupils treated:		
(a) under Child Guidance arrangements(b) under Speech Therapy arrangements		148 55
TABLE 57. DENTAL INSPECTION AND TRE	ATMEN	T (8)
(1) Number of pupils inspected by the Authority Officers:—	y's Dental	
(a) Periodic age groups (b) Specials (c) TOTAL (Periodic and Specials)	Man Minn	18,040 1,634 19,674
(2) Number found to require treatment		7,777
(3) Number actually treated	pytte at be	6,057
(4) Attendances made by pupils for treatment		8,208
	A. Model.	133 945

(6)	Fillings:	Permanent Temporary				2,589 155
		Total				2,694
(7)	Extractions:	Permanent Temporary				863 7,801
		Total				8,664
(8)	Administration of gener	ral anaesthet	ics for	extract	tion	1,183
(9)	Other Operations: (a)	Permanent	teeth			946
	7	Temporary				1,147
		Total	(a) and	(b)		2,093
	7	TABLE 58.				
	INFESTATI	ON WITH	VERM	IIN.		
(i)					the	
	school nurses or other					42,040
(ii)	Total number of indi				be	1,053
(iii)	Number of individual cleansing notices we		respect			1,000
(iv)	Education Act, 1944) Number of individual	pupils in	 respect	of wh	 nom	56
	cleansing orders wer Education Act, 1944)		Section		(3),	-

(6) Fillinger III - Trestmane and I Special Section of The Section (8)
INFESTATION WITH VERNING (6)



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