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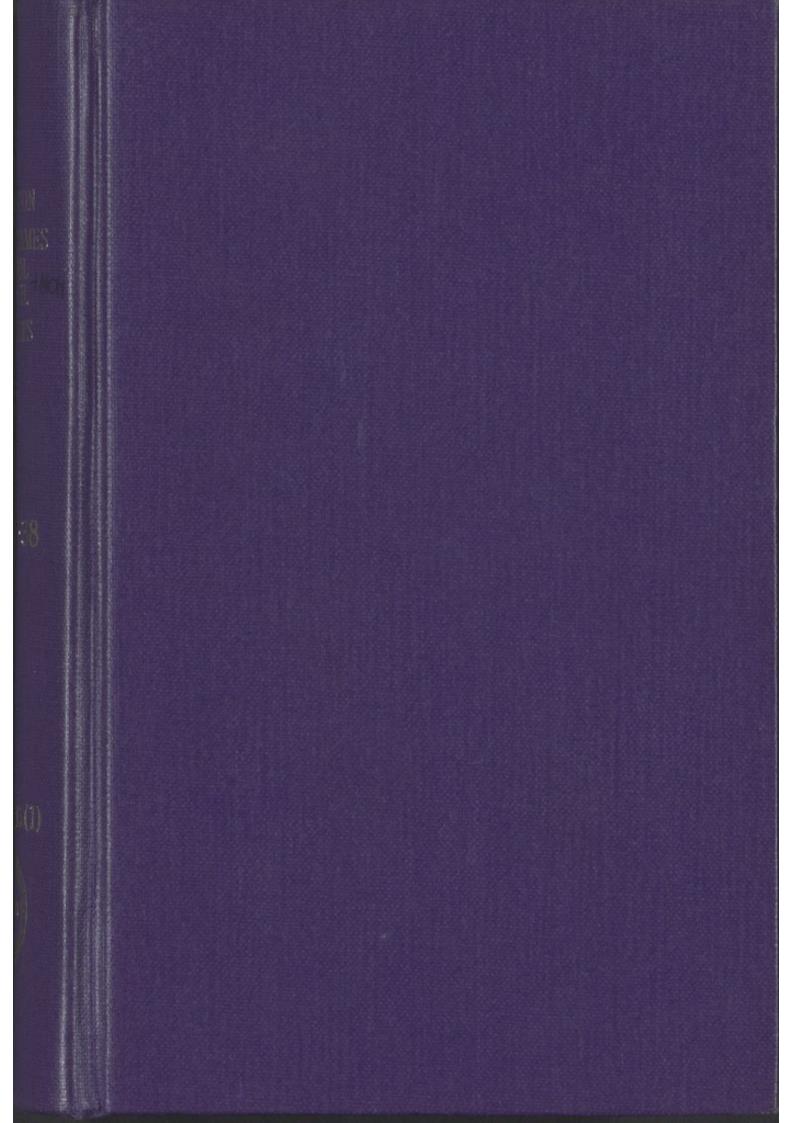
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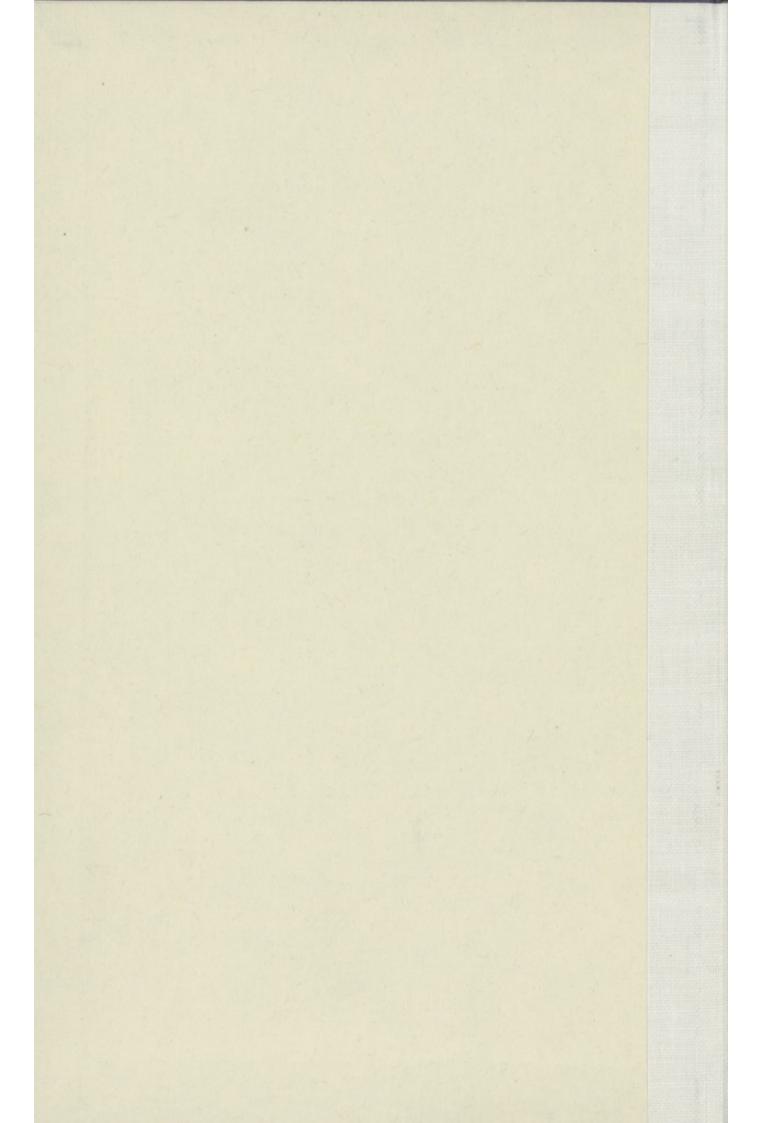
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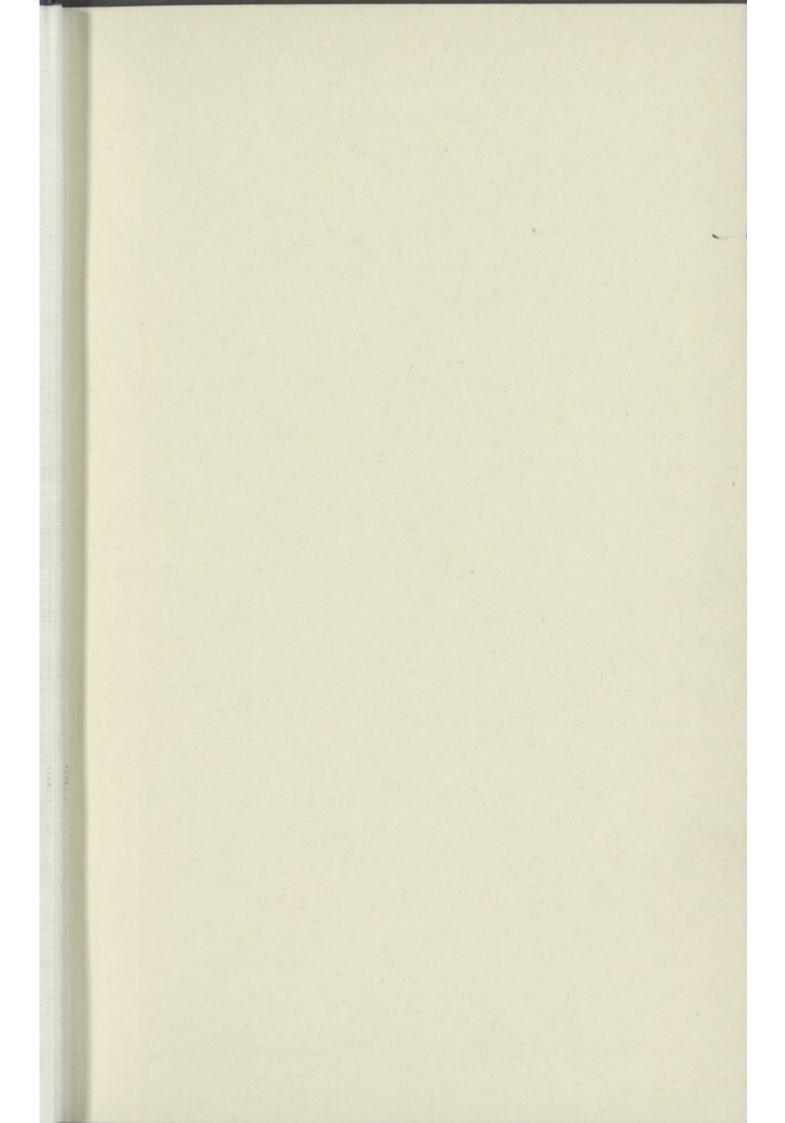
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The Royal Borough of Kingston-upon-Thames

Annual Reports

FOR

1932 -

OF THE

MEDICAL OFFICER OF HEALTH

AND

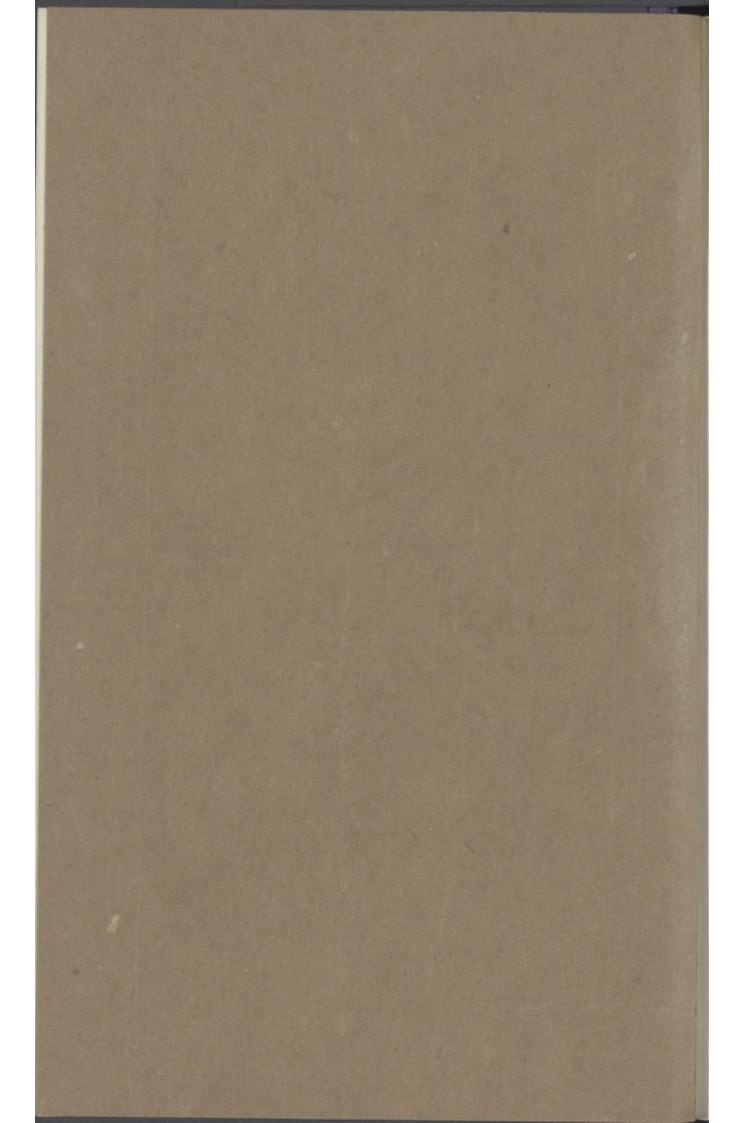
SCHOOL MEDICAL OFFICER

INCLUDING THE

Annual Report

OF THE

SANITARY INSPECTOR







The Royal Borough of Kingston-upon-Thames

Annual Reports

FOR

1932

OF THE

MEDICAL OFFICER OF HEALTH

AND

SCHOOL MEDICAL OFFICER

INCLUDING THE

Annual Report

OF THE

SANITARY INSPECTOR

Staff of the Public Health Department

on

31st December, 1932.

Medical Officer of Health:

E. W. MATTHEWS, M.B., B.S.Lond., M.R.C.S., L.R.C.P., D.P.H.

Maternity and Child Welfare: OLIVE G. AUBREY, B.A., M.D., B.Ch.

Ante-natal:

RUTH C. TOWNSHEND, M.B., B.S.Lond., M.R.C.S., L.R.C.P., D.P.H.

Sanitary Inspector:

H. T. PERRY, M.R.S.I., Cert.R.S.I. as Sanitary Inspector. and Meat and Foods Inspector.

Additional Sanitary Inspectors:

F. D. HARVEY, A.R.S.I., Cert.R.S.I., as Sanitary Inspector, and Meat and Foods Inspector.
G. H. COCKELL, A.R.S.I., Cert.R.S.I., and S.I.E.J.B., as Sanitary Inspector, and Meat and Foods Inspector.

Health Visitors:

*||†Miss A. GILL, (Senior), 1/2 time.

*||†Miss C. A. HOOKWAY, 1/2 time.

*||Miss L. G. SALWAY, 1/2 time.

*||†Miss E. G. COUZENS, 1/2 time.

Clerks:

Miss T. P. DILLIWAY, R. H. FELGATE.

Disinfector and Ambulance Driver: C. BENSON.

*Certificate of the Central Midwives Board.
†New Health Visitors' Certificate
| General Hospital Training

Report of the Medical Officer of Health

HEALTH DEPARTMENT,
GRANGE ROAD,

KINGSTON-UPON-THAMES,

April, 1933.

TO THE CORPORATION OF KINGSTON-UPON-THAMES.

LADIES AND GENTLEMEN,

I have the honour to present my Annual Report for the year 1932.

Circular 1269 (Ministry of Health) as to the contents and arrangement of the Annual Reports of Medical Officers of Health for 1932 requests that the Council will direct the Annual Report of the Medical Officer of Health for 1932 to be drawn up on the lines indicated therein, and that the Annual Report shall be an Ordinary Report.

The Circular also states that the Annual Report for 1932 should contain, as a minimum, information in regard to the matters specified in Appendix I, set out as far as possible in the order there given, under the main heads:—

Section A.—Statistics and Social Conditions.

Section B.—General Provision of Health Services.

Section C.—Sanitary Circumstances.

Section D .- Housing.

Section E.—Inspection and Supervision of Food.

Section F.—Prevalence of, and control over, Infectious and other Diseases.

For reasons of economy I have made the Report as brief as possible.

The incidence of notifiable infectious diseases was low, but a number of cases of diphtheria were of a very virulent type.

This has been a "measles year," which was only to be expected after the complete absence of this disease last year.

The work in connection with Maternity and Child Welfare continues to increase, and with the additional duties under the Children Act, the Health Visitors have been hard pressed, so, in order that home visiting should be strictly kept up-to-date, two nurses have voluntarily utilized their own bicycles for this purpose.

During my illness in the Spring, Dr. O. Aubrey, your part-time Medical Officer for Maternity and Child Welfare, took over my responsibilities, and later was nominated to act during my absence from duty for any reason.

There have been some important improvements in Main Drainage, to which reference is made in the body of the Report.

The work of the Sanitary Inspectors in connection with Housing, Meat and Foods, and General Sanitation, has been well maintained.

The year has been a very strenuous one, and I thank the Staff for their hard work and the support they have given me.

> I am, Ladies and Gentlemen, Your obedient servant,

> > E. W. MATTHEWS,

Medical Officer of Health.

SECTION A.

STATISTICS AND SOCIAL CONDITIONS.

(i) General S	Statistic	cs.					
Area Populat Number Rateable Va Sum represe Amount of F	of inhalue—G	eneral y a Pe	houses Rate nny Rat	 te)	£	3 acres. 38,250 8,700 382,965 £1,538 £3,488
(ii) Extracts Live Births-		Vital S	Statistics	of the	Year	of mi	
Legitimate Illegitimate	Total. 414	219	Female 195 24	Birth R	ate 00 pc	(R.G.	on 11.8
	450	231	219				
Still Births- Legitimate Illegitimate	15		Female 10 10				
Deaths—	Total.		Female 271	Death I	Rate	(R.G	.) on 12.5
chi Fron Fron	ld-birtl Sepsi other	s causes	lying in der one	, or in c			
				To			Female.
	gitimat egitima			2	3	13	11 2
				3	27	14	13

To De De	aths of Legitimate Infants u Legitimate births aths of Illegitimate Infants 1,000 Illegitimate births tal Deaths of Infants under 1,000 births aths from Measles (all ages) aths from Whooping Cough aths from Diarrhæa (under te	s unde	year o	year f age	58 per 83 per 60 7
		Birth Rate		iarrhœa T	1000 Births otal Deaths Inder 1year
En	gland and Wales 1	5.3	12.0	6.6	
		5.4	10.8		
		4.2	12.3		
	· · · · · · · · · · · · · · · · · · ·	1.8	12.5		
1111	ig ston-upon-rhames	1.0	14.5	11.0	00
(;;;)	Causes of Death				
(111)	Causes of Death.			Mala 1	Female.
	All Causes				
1.		F		209	271
2.	Typhoid and Paratyphoid I Measles	revers		1	9
3.			***	4	3
					1
4.	Whooping Cough	2		1	$\frac{1}{2}$
5.	Diphtheria			3	
6.	Influenza		***	5	14
7.	Encephalitis Lethargica				1
	Cerebro-spinal Fever				-
9.	Tuberculosis of the R				7.0
	System			8	13
10.	Other Tuberculous Diseases	5		1	2
11.	. 1			-	-
12.	General Paralysis of the	Insai		To and the	
	tabes dorsalis			1	
13.				18	35
14.	Diabetes			-	9
15.	Cerebral Hæmorrhage, etc.			14	26
16.	Heart Disease			42	
17.	Aneurysm			_	1
18.	Other Circulatory Diseases			3	7
19.	Bronchitis		97600		18
20.	Pneumonia (all forms)			22	17
21.	Other Respiratory Diseases			2	2
22,	Peptic Ulcer			7	1

23.	Diarrhœa, etc. (under two y	ears)	2	3	2
24.	Appendicitis			3	2
25.	Cirrhosis of Liver			1	
26.	Other Diseases of Liver, et			1	_
27.	Other Digestive Diseases			4	4
28.	Acute and Chronic Nephrit			2	4
29.	Puerperal Sepsis			Man of	1
30.	Other Puerperal Causes			or 3 3 .	-
31.	Congenital Debility, Premate		rth,		
	Malformations, etc.			4	3
32.	Senility			15	19
33.	Suicide			4	1
	Other Violence			10	12
	Other Defined Diseases			20	15
	Causes Ill-defined or Unknown			_	-
	cial Causes (included in		35		
-1	above):—				
	Smallpox			_	-
	Poliomyelitis			_	_
	Polioencephalitis			-	-

(iv) Social Conditions.

Natural and Social Conditions were described in the Annual Report for 1925.

METEOROLOGY, 1932.

			Temperature of Air					
January		Highest 59	Lowest 27	Mean Max.	Mean Min.	Inches 1.46		
February		52	26	43	32	0.11		
March		65	20	51	31	1.19		
April		68	29	56	39	1.94		
May		78	32	65	45	4.31		
June		83	39	74	50	0.83		
July		88	44	76	55	1.96		
August		93	48	76	55	0.64		
September		82	40	65	49	1.93		
October		67	30	59	43	4.85		
November		60	28	50	40	1.02		
December		56	24	47	36	0.20		
	,					20.44		

The average annual rainfall (Greenwich) for the hundred years, 1821-1920, was 24.39 inches,

SECTION B.

GENERAL PROVISION OF HEALTH SERVICES.

(i) Public Health Officers.

The Staff of the Public Health Department is set out at the beginning of the Report.

- (ii) Nursing in the Home.
- (a) GENERAL.—This is carried out by District Nurses from the Kingston Nursing Association, and in necessitous cases the fees are defrayed by the Council.
- (b) INFECTIOUS DISEASES.—In Measles, Whooping Cough, and Epidemic Diarrhœa, the Health Visitors are under instructions to visit the cases and give practical advice as to the best methods of nursing them.

If attended by District Nurses the fees may be paid by the Corporation.

(iii) Laboratory Facilities.

Arrangements are made with the Clinical Research Association for the examination or analysis of clinical material, water, milk, etc.

(iv) Legislation in force.

A list of adoptive Acts and Bye-Laws in force in the Borough was given in last year's Annual Report.

- (v) Hospitals.
- (a) Fever.—Arrangements are made whereby Wimbledon and Molesey Isolation Hospitals accept cases occurring in the Borough, and payment is made for the maintenance of patients by the Corporation.
- (b) SMALLPOX.—The Surrey Smallpox Hospital, East Clandon, Surrey, is subsidised by the Council.
- (c) OTHER.—Other Hospitals situated in the Borough available for the District are:—

The Kingston and District Hospital (Surrey C.C.). The Kingston Victoria Hospital, supported by voluntary contributions.

The Corporation made a contribution of £50 to the Kingston Victoria Hospital.

A number of the inhabitants of the Borough attend the Royal Hospital, Richmond, and the Corporation made a contribution of £50 to its funds.

(vi) Ambulance Facilities.

(a) For infectious cases:

Those cases removed to Wimbledon or Molesey Isolation Hospitals are transported by the Motor Ambulances attached to those Hospitals.

The Corporation has a light Ford motor ambulance which is used for removing bedding to the steam disinfector, and for transporting patients in emergencies.

(b) For non-infectious and accident cases:

A motor ambulance for non-infectious and accident cases is provided by the Corporation.

Accident cases are removed free, but a charge is made for its use in private cases.

During the year 261 accident cases and 122 private cases were removed by this ambulance.

(vii) Clinics and Treatment Centres.

A list of Clinics and Centres, giving their situation and accommodation, was set out in last year's Annual Report. There have been no alterations or additions during the year.

MATERNITY AND CHILD WELFARE.

(i) Midwives.

The Midwives are under the administrative control of the Surrey County Council.

There were ten registered as practising in the Borough at the end of the year.

The Kingston Nursing Association, 33, Birkenhead Avenue, undertake District Midwifery work.

(ii) Maternal Mortality.

The investigation into maternal deaths is carried out by the Medical Officer of Health, who addresses confidential reports to the Senior Medical Officer, Ministry of Health, in the form specified by the Ministry. One investigation was made during the year.

During the year 13 cases were notified as Puerperal Pyrexia under the Public Health (Notification of Puerperal Fever and Puerperal Pyrexia) Regulations, 1926.

Immediate investigation was made into the circumstances of each case, and a copy of the notification sent to the County Medical Officer of Health.

Of the 13 cases notified as Puerperal Pyrexia, 9 were either admitted to or already in-patients at the Kingston and District Hospital, and one died, which was a case from outside the Borough.

The consultant, Dr. Andrew McAllister, was not summoned during the year.

(iii) Ante-Natal Services.

- 1. The Ante-Natal Centre is held fortnightly and serves not only the purpose of an examination clinic, but also as a centre of education for mothers and midwives.
- 2. An increasing use of the Centre is being made by midwives for the ante-natal supervision of cases for which they are booked to attend.
- 3. The presiding doctor at the Ante-Natal Centre has the special experience and qualifications necessary, and has been approved by the Ministry of Health.
- 4. The supply of midwives for the Borough appears to be adequate.
- 5. The services of a consulting obstetric surgeon are available to all medical practitioners for cases of Puerperal Sepsis.
- 6. No hospital beds are subsidised or provided by the Council. No difficulty has arisen in respect of application for admission of such patients to the Kingston and District Hospital, which is situated in the Borough.
- 7. The Council does not provide sterilized maternity outfits, nor arrange for the supply of home helps.

Dried milk may be obtained by expectant mothers at the Centre at cost price, and fresh milk is supplied at a reduced cost or free in necessitous cases, in accordance with the income scale in force. Bateriological facilities can be provided through the Clinical Research Association.

8. The Medical Officers and Health Visitors have always the value of the educational side in mind, and that their efforts have had effect is clearly seen by the growth of attendances at the Ante-Natal Clinic.

Co-operation with the Kingston Nursing Association, the Kingston Day Nursery, Central Aid Society and other voluntary bodies has been secured.

- 9. Many women from the Borough elect to enter the Kingston and District Hospital for their confinements. These cases attend the Ante-Natal Clinic of the Hospital, a procedure which complies with the recommendations of the Ministry's Memorandum.
- 10. During the year 148 expectant mothers attended, making 340 visits to the Clinic, which is an average of 14 per session as compared with 12 per session in the previous year.

(iv) The Centre.

The Centre is held at the School Clinic in Grange Road,

which was described in last year's Annual Report.

As before, the meetings are held on Tuesdays and Fridays, when Dr. Olive Aubrey attends, and much valuable help is given by many voluntary workers.

During the year there were the following number of attendances:—

			Attenaa	nces.
		Meetings.	New Cases.	Total.
Tuesday	 	51	152	2,161
Friday	 	52	143	2,782

In necessitous cases, babies and nursing mothers are provided with free milk on the recommendation of the presiding medical officer.

Careful investigation is made into the circumstances of each case to ascertain whether it falls within the approved scale, and when recommended it is endorsed by the Medical Officer of Health and approved by the Committee.

Dried milk is supplied at cost price.

There is an excellent Clothing Stall at which 33 mothers have purchased 76 garments during the year.

The sale of National Savings Certificates at the Centre has been continued, with the result that 46 mothers have invested £18 during the year.

Baby Week was held during the week commencing Sunday, June 26th, when special announcements were made in the local Churches and Sunday Schools.

The Centre was open to visitors on Tuesday and Friday, when the Medical Officer of Health gave "talks," entitled "Common Sense."

On Wednesday, a Garden Party was given at St. Peter's Vicarage, the prizes for Mothercraft being distributed by Miss Darke.

The Day Nursery in Canbury Park Road was open daily to visitors.

(v) Health Visiting.

The Health Visitors paid the following number of home visits:—

F	First Visits.	Total Visits.
Expectant Mothers	81	125
Infants under one year	510	2,636
Children, one to five years	A STORY	3,955
Incidental and Infectious	The state of the s	545

As a routine procedure the Health Visitors make their first visits at the end of ten days in midwives' cases, and at the end of the first month in doctors' cases.

Subsequent visits are paid every two months up to the age of six months, then every quarter up to the age of two years, and finally every six months up to the age of five.

These arrangements have been satisfactory.

There are now very few unnotified births.

A letter, embodying an extract of the Act, asking for an explanation of failure to notify the birth is sent to the father of the child in every instance of an unnotified birth.

(vi) Children Act, 1908.

The duties imposed by the Children Act are entrusted to the Maternity and Child Welfare Sub-Committee of the Public Health Committee.

The general procedure adopted was fully described in the Annual Report for 1930.

On January 1st, 1932, there were 25 foster mothers on the Register in charge of 33 infants.

During the year 5 new registrations were approved and 7 foster mothers either removed from the Borough or ceased to have charge of infants, so there remained at the end of the year 23 foster mothers in charge of 29 infants. Two applications for registration were disapproved.

It is the routine duty of an Infant Life Protection Visitor to visit every foster mother at least once a month, and more frequently when found necessary.

During the year 530 visits were paid, this work being most satisfactorily carried out by the Health Visitors.

(vii) Orthopædic Treatment.

The scheme for the Orthopædic Treatment of children under school age at the Kingston, Surbiton and District Red Cross Curative Post, Norbiton, worked satisfactorily, and during the year 7 infants received out-patient treatment, making 272 attendances.

The cost of out-patient treatment was £27 5s. 0d., and the contributions paid by parents towards this expenditure amounted to £7 7s. 0d.

On attaining the age of five years, infants undergoing Orthopædic Treatment continue such treatment through the School Medical Service.

(viii) The Unmarried Mother.

The care of unmarried mothers and their illegitimate children is undertaken by the Kingston, Surbiton and District Voluntary Society, which is affiliated to the Southwark Diocesan Association for Rescue and Preventive Work.

The Local Branch Shelter is at No. 18, Richmond Park Road.

(ix) Maternity and Nursing Homes.

- 1. Maternity Home at 197, Park Road. Six beds. Kept by Miss Rowan.
- 2. Nursing Home at 24, Albany Park Road. Twelve beds. Kept by Miss Roe. This Home accommodates chronic and senile patients.

3. The Maternity and Nursing Home at 9/11, Minerva Road. Eight beds. Kept by Mrs. Burns, was voluntarily closed in July.

Under the Nursing Homes Registration Act, 1927, powers of inspection (but not of registration) are delegated by the Surrey County Council to the Corporation.

Under this arrangement the above Maternity and Nursing Homes have been visited by me from time to time during the year.

SECTION C.

SANITARY CIRCUMSTANCES.

(i) Water.

The Water Supply of the town is furnished by the Metropolitan Water Board.

There are still some shallow wells, and the policy is to advise owners to have their property connected to the Main Supply of the Metropolitan Water Board.

The use of well water was discontinued at one house during the year.

The number of premises known to be supplied with water from wells at the end of 1932 was 49, which compares with 271 in 1919.

A position has now been reached when difficulty is experienced in persuading the comparatively few remaining owners to close their wells, in cases where the Analyst reports that the samples are usable drinking waters.

The occupiers point out that they have used the supply for many years, and usually state that it is a "beautiful water."

Further, they are not particularly impressed when told that shallow wells are liable to pollution and therefore are a potential source of danger.

Under these circumstances the closure of the remaining shallow wells will necessarily be a slow process.

Samples were chemically examined by Mr. P. G. Lloyd during the year.

Suspicious waters are sent to the Clinical Research Association for bacteriological examination.

(ii) Drainage and Sewerage.

With regard to the sewerage and drainage of the Borough, several schemes have been carried out during the year for the improvement of both surface water and foul water sewers, and the relief of flooding due to storm water. This has been done by using two methods:—

- (1) To divert all surface water drainage which used to flow into the foul water system.
- (2) By providing overflow foul water sewers where necessary.

The following briefly summarises the schemes carried out during the year:—

FOUL WATER DRAINAGE.

Surbiton Crescent Cambridge Road				170ft. 90ft.	in length.
St. Luke's Passage Elm Crescent		,,	,,	355ft. 80ft.	"

SURFACE WATER DRAINAGE.

Cambridge Road	9in.	Surface	Water	Sewer,	400ft.
Coombe Road			"	,,	405ft.
King's Road	24in.	,,	,,	,,	270ft.
Shortlands Road	12in.	,,	,,	"	500ft.
Elm Road	9in.	,,	,,,	,,,	240ft.

The Latchmere Ditch was piped in a 36in. concrete tube, approximately 1,400ft. in length.

(iii) Rivers and Streams.

The effluent from the Corporation's Sewage Works discharges into the River Thames, and complies with the standard fixed by the Thames Conservancy.

A Joint Scheme is under consideration with regard to the Hogg's Mill Stream, which receives the sewage effluents from Malden, Epsom and Ewell, before traversing the Borough to flow into the Thames. The Corporation during the year have installed a Venturi-flume Recorded on the Hogg's Mill Stream, so that its flow can now be measured and the amount of dilution at any time determined.

(iv) Closet Accommodation.

The closets in the Borough are on the water-carriage system.

(v) Public Cleansing.

The removal and disposal of house refuse is undertaken by the Borough Surveyor's Department.

Refuse is partly tipped, and the remainder is burnt in the Destructor.

There is one cesspool, which the owner has emptied regularly by a contractor.

(vi) Sanitary Inspection of the Area.

A classified statement of the number of premises visited, the defects or nuisances discovered, and the action and result of action taken in regard to these, appears in the Report of the Sanitary Inspector, which follows the Main Report. Also included in his Report are particulars of action taken with regard to Smoke Abatement, Special Classes of Premises and Occupations subject to control of the Local Authority, and under the Rag Flock Acts, 1911 and 1928.

(vii) Factories, Workshops and Workplaces.

The work carried out in connection with the inspection of factories and workshops is summarised in tabular form below.

I—INSPECTION OF FACTORIES, WORKSHOPS AND WORKPLACES.

	Number of	
Inspections 218	Written Notices.	Occupiers prosecuted Nil
d demonstrate	and The state of the last	111
218	ni v ini oz	Nil
	218	Inspections Written Notices.

II _DEFECTS FOUND IN FACTORIES, WORKSHOPS AND WORKPLACES.

		N	umber of De	efects	Number of offences in		
Particular	anisyed to	Found.	Remedied.	Referred to H.M. Inspector.	which Prose- cutions were instituted.		
Nuisances under the Acts*—	Public Health			in gath			
Want of Cleanl	iness	8	8	_	2-02/10/1		
Want of Ventila	ation	1	-	_	_		
Overcrowding		-	son—ab	-	on-si		
Want of draina	ige of floors	-	or, Lotai	ny withy	0101-10		
Other nuisance	s	3	3	_	OFFICE OF		
Sanitary	Insufficient Unsuitable	1	2	purchase	bast so		
Accommo- dation	or Defective Not separate		3	and And	eoenrod		
	for sexes	1	30-0	DEL TEN	-		
Offences under Facto Workshop							
Other Offences offences rela work and off the Sections in the Sche Ministry of I tories and Transfer of P	house (s. 101) —(Excluding ting to outfences under mentioned dule to the Health (Fac-	-		may (a) move (b) move (c) move (c) move (d)			
1921		2	2		_		
	Total	19	18	_	(a)		

^{*}Including those specified in sections 2, 3, 7 and 8 of the Factory and Work shop Act, 1901, as remediable under the Public Health Acts.

III.—OUTWORK IN UNWHOLESOME PREMISES, SECTION 108.

No action was found to be necessary in connection with the above.

SECTION D.

HOUSING.

The general standard of housing throughout the Borough is good, and there are no areas which come within the meaning of "Clearance Areas" (Housing Act, 1930).

Under the Housing Consolidated Regulations, 1925, house-to-house inspection has resulted in 144 dwelling-houses being recorded during the year.

With regard to overcrowding, it may be said that there is very little in the Borough, only 12 cases where serious overcrowding existed were on the books at the end of the year.

The Corporation erected 40 new houses during the year on land purchased in New Malden.

Since March, 1924, the Corporation have erected 702 houses for the working classes, only 182 of such houses being within the Borough boundary.

HOUSING STATISTICS.

HOUSING STATISTICS.	
1. Inspection of Dwelling-houses during the year :-	
(1) (a) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	473
(b) Number of inspections made for the pur-	
(2) (a) Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925	563 144
(b) Number of inspections made for the purpose	207
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	16
(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	407

2. Remedy of Defects during the Year without Service of Formal Notices:—

385	Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers
	3. Action Under Statutory Powers during the Year :-
	A.—Proceedings under sections 17, 18 and 23 of Housing Act, 1930:—
12	(1) Number of dwelling-houses in respect of which notices were served requiring repairs
4	(2) Number of dwelling-houses which were rendered fit after service of formal notices:—
Nil	(a) By Owners (b) By Local Authority in default of Owners
	B.—Proceedings under Public Health Acts:—
57	(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied
	(2) Number of dwelling-houses in which defects were remedied after service of formal notices:—
58	(a) By Owners
1	• (b) By Local Authority in default of Owners
	*C.—Proceedings under sections 19 and 21 of the Housing Act, 1930:—
17	(1) Number of dwelling-houses in respect of which Demolition Orders were made
12	(2) Number of dwelling-houses demolished in pursuance of Demolition Orders
	D.—Proceedings under section 20 of the Housing Act, 1930:—
1	(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made
	(2) Number of separate tenements or under- ground rooms in respect of which Closing Orders were determined, the tenement or
Nil	room having been rendered fit

E.—Proceedings under section 3 of the Housing Act, 1925:—	
(1) Number of dwelling-houses in respect of which notices were served requiring repairs	Ni
(2) Number of dwelling-houses which were ren- dered fit after service of formal notices:—	
(b) By Local Authority in default of	Ni
(3) Number of dwelling-houses in respect of which Closing Orders became operative in	
pursuance of declarations by owners of intention to close N	Vil
F.—Proceedings under sections 11, 14 and 15 of the Housing Act, 1925:—	
(1) Number of dwelling-houses in respect of which Closing Orders became operative N	Jil
(2) Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses having been rendered fit N	Til
(3) Number of dwelling-houses in respect of which Demolition Orders became operative N	Til
(4) Number of dwelling-houses demolished in	il
* In addition to Demolition Orders, there were dwelling-houses in respect of which "an undertaking" was given.	4 as

It should be noted that under Section 3 (Statutory Action taken) of the above statistical statement, action taken does not necessarily refer only to houses inspected during the year under review. It refers also to houses under consideration at the end of 1931. Similarly, some of the houses inspected during 1932 were not completely dealt with until 1933.

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It should also be mentioned that only houses requiring substantial repairs have been inspected and recorded under the Housing Acts, other houses being dealt with under the Public Health Acts.

SECTION E.

INSPECTION AND SUPERVISION OF FOOD.

(i) Adulteration.

The following table shows the action taken by the Surrey County Council in the Borough during the year under the Food and Drugs (Adulteration) Act, 1928:—

ARTICLES	A!	NALYSE	D		ORATE ERORIA	PROSE- CUTIONS	CONVIC	
	Formal	In- formal	Total	Formal	In- formal	Total		
Milk	69	-	69	4	_	4	2	I
Cream	3	-	3	-	-	-	-	-
Butter	4	2	3 6	-	_	-	-	-
Meat	6	-	6	_	_	-	_	-
Теа	I	I	2	I	_	I	-	-
Sugar	-	I	I	_	I	I	- 20	-
Sausages	2	_	2	_	_	-		-
Spirits	2	1	2	-	_	_	-	
Other Articles	2	2	4	-	-		_	_
TOTALS	89	5	95	5	ī	6	2	I

(ii) Nutrition.

No special work has been done on this subject. Information and knowledge on this matter is disseminated by the Medical Officers presiding at the Centre, and good work in this direction is done by the Nurses when home visiting.

(iii) Milk Supply, Meat and Other Foods.

Particulars of action taken with regard to milk, meat, and other foods, including inspection of meat, slaughter-houses, shops, and places where food is prepared are given in the Report of the Sanitary Inspector, which is included at the end of the Main Report,

SECTION F.

INFECTIOUS AND OTHER DISEASES.

The following table gives a comparative statement of notifications received during the last fourteen years:—

Year	Scarlet Fever	Diphtheria	Enteric Fever (including Paratyphoid
1919	98	142	1
1920	139	82	2
1921	302	79	4
1922	238	74	1
1923	118	17	1
1924	143	20	6
1925	213	25	7
1926	82	27	7
1927	87	65	2
1928	135	152	7
1929	7.4	113	1
1930	78	100	5
1931	61	53	1
1932	56	47	1

SCARLET FEVER.

The incidence of Scarlet Fever continues to be low, in fact, the number of cases notified, as seen from the above table, is the smallest since the War.

The type of case has been mild. No deaths.

DIPHTHERIA.

From the above table it will be seen that the number of cases notified is lower than last year and there has been a steady decrease since the peak year of 1928.

The type has varied from mild bacteriological cases to those of extreme virulence. Five deaths have occurred among the latter class.

Notifiable Diseases during the Year.

								-																			
	Cases.							Deaths.																			
	Under I year,	1-2	2—3	3-4	45	5—10	10-15	15-20	20-35	35-45	45-65	65 & over.	Total Cases Votified	Cases admitted to Hospital	Under 1 year.	1-2	2-3	3-4	4-5	5-10		15-20	20-35	4	50	Total Deaths	
Scarlet Fever Diphtheria Smallpox Enteric Fever including Paratyphoid	=	2 2 -	7	4 2		15 14		3 2	8 11 1				56 47 I	50 44 I					2	2						5	
Pneumonia Erysipelas Puerperal Pyrexia Anterior Poliomyelitis		4	2 	3 - 1	2 	3 —	1 - -	3 	4 2 10 —	3 1 3	6	4 1 -	43 10 13 2	11 2 3 2										1	7	2 I2 — I — I	22
				1	Ne	w	Ca	se	s.						Deaths.												
Tuberculosis	Under I year.	1-5	5—10	10-15	15-20	20-25	25-35	35-45	45-55	55-65	65 & over.		Total.		Under I vear.	1-5	5—10	10-15	15-20	20-25	25-35	35-45	45-55	5565	65 & over.	Total.	
(a) Pulmonary M F Tota					2 5 7	2 5 7	7 3 10 I	9 3 2	2 I - 3	I	I 		24 17 41				=	=	I	4 4	3 5	2 2	1 3 4	1 2 3	2 - 2	8 13 21	
(b) Non-Pulmonary M F Tota		2	I I 2	1 3 4	I I	_	I -			I -			4 7 11		111	- 1	T		I		=					1 2 3	

Medical aid is frequently not sought at the earliest opportunity, and it is not every doctor who gives antitoxin immediately in doubtful and suspected cases. Diphtheria antitoxin can be obtained from two chemists and is available at all times.

In May four cases occurred in a private day school. The school was closed temporarily, disinfected, and redrained. All the pupils were followed up until two negative swabs had been taken. The Principal of the school agreed to reduce the number of pupils per classroom to meet my requirements.

In October an outbreak occurred in a class at Bonner Hill Road Infants' School, and was limited to six infants and six family contacts who contracted the disease.

The class was closely watched and swabbed, and four positive infants were isolated. The outbreak then ceased abruptly.

No infant was permitted to return to school until at least two negative results were received, and they had been declared free from infection by the School Medical Officer.

The infection in this outbreak was extremely virulent and resulted in the deaths of one infant and one of the family cases.

The origin of the outbreak was attributable to an infant who returned to school after a brief illness for which no doctor had been summoned, but which was subsequently proved to have been an attack of Diphtheria.

Artificial immunization has not been employed.

ENTERIC FEVER (including Paratyphoid).

Only one case of Paratyphoid B. was notified. This occurred in a man, aged 23, who was admitted to the Kingston Victoria Hospital on August 17th, and made an uneventful recovery. Inquiries made in an effort to trace the source of infection proved wholly negative.

SMALLPOX.

One case was notified from the Kingston and District Hospital. It occurred in a woman who was admitted to the Hospital on January 21st in labour and was confined the same day. The rash appeared on January 24th, when she

was removed to the Surrey Smallpox Hospital at East Clandon.

Vaccination and the usual precautions among the staff and patients at the Hospital were undertaken by the Medical Superintendent, with the result that no contact contracted the disease.

ANTERIOR POLIOMYELITIS.

Two cases were notified during the year. The first was a baby girl of 8 months, admitted in June to the Kingston and District Hospital, on the same day as notified. Upon enquiries the Medical Superintendent reported that the baby was admitted suffering from Pneumonia and died in two days. The condition as to paralysis was not definite. The second case was notified in November, in a boy of 3 years, who was admitted to the Kingston and District Hospital, where he remained for some months. On discharge he was followed up and shortly afterwards he was admitted to St. Vincent's Orthorpædic Hospital, Pinner.

Any case of Anterior Poliomyelitis is followed up in order that the earliest supervision and treatment under the Orthopædic Schemes of the School or Maternity and Child Welfare Services may be obtained.

PNEUMONIA.

The number of cases notified was 43, compared with 28 and 29 for the last two years, the increase being due to the prevalence of influenza during the early part and at the end of this year.

PUERPERAL FEVER AND PUERPERAL PYREXIA.

Comment on these diseases will be found under the Maternity and Child Welfare Section of this Report.

OPHTHALMIA NEONATORUM.

There were no cases of Ophthalmia Neonatorum notified during the year.

TUBERCULOSIS.

Cases of Tuberculosis notified in the Borough come under the administrative control of the Surrey County Council.

Every effort is made to assist the County Medical Officer and Tuberculosis Officer in their activities in the area.

The efficiency of notification of Tuberculosis is good, and there have been no cases of wilful neglect or refusal to notify.

No cases have arisen during the year in which any action became necessary under the Public Health (Prevention of Tuberculosis) Regulations, 1925, or the Public Health Act, 1925, Section 62.

Disinfection of premises is carried out in all cases of death, or when patients are admitted to hospital or sanatorium.

NON-NOTIFIABLE ACUTE INFECTIOUS DISEASE.

Information with regard to these diseases is furnished by the School Nurses, Health Visitors, School Attendance Officers and Teachers.

The Medical Practitioners in the Borough also supply much valuable data on occasions.

Influenza was prevalent in the Borough, both at the beginning and again at the end of the year. Nineteen deaths were attributed to this disease.

Measles was prevalent during March, April and May, and seven deaths resulted. There was no school closure, as it is doubtful whether it is of any value in a closely populated area such as the Borough.

Much home visiting was undertaken by the Health Visitors and School Nurses.

There was a comparatively slight rise in the incidence of Whooping Cough during the Measles epidemic.

The Sanitary Inspector, Mr. H. T. Perry, reports as follows:—

Report of the Chief Sanitary Inspector

To the Mayor, Aldermen and Councillors. Ladies and Gentlemen,

I have the honour to present my fourteenth Annual Report on the work carried out by your Sanitary Inspectors during the year 1932 in connection with the various Statutes and Byelaws relating to Public Health in force within the Borough.

The total number of inspections made during the year was 7,251, as compared with 8,133 during the year 1931.

On 500 premises sanitary defects to the number of 5,619 were discovered. Arising out of these defects, it was found necessary to serve 405 "preliminary" and 26 "verbal" notices. In 71 instances the informal action did not have the desired effect, and it was necessary to serve "statutory" notices.

During the year under review, 544 fresh entries were added to the Register of Sanitary Defects. In 590 cases entries were cancelled following completion of necessary works. On December 31st, 1932, 295 separate entries remained under review, compared with 341 at the end of 1931.

This brief introductory statement provides summarised results of the year's work in a limited form only and does not include housing inspections. It is difficult to show by statistics the very considerable amount of time which is allocated year by year to interviews with members of the public and owners of property. Nevertheless, this time may be acknowledged to be well spent, if only because it has produced a very desirable feeling of confidence between ratepayers or property owners and your Corporation. It is all to the good, especially having regard to present conditions, that Sanitary Officers should have as complete an understanding as possible of the difficulties which have to

be overcome by property owners and business firms. The proportion of property owners who do not respond to this desire for co-operation is small, and during 1932 it was not necessary to take legal proceedings to obtain compliance with sanitary notices served, and neither was any substantial work of repair carried out by the Corporation in default, although in a few cases tenders were actually invited before the works were commenced by the owners concerned.

During 1932, 288 enquiries under the Land Charges Act, 1925, respecting property in the Borough, were received from the Town Clerk's Department and replied to.

For convenience and reference the inspections and visits are set out in the following tabular form:—

INSPECTIONS AND VISITS.

The following list shows the number of Inspections made in regard to each section of the work, and the total of all inspections.

Rent Restrictions Ac	t Inspe	ction	15			4
Re-inspections after	Order o	or N	otice			1,102
Visits to Works in Pr	ogress					1,285
Factories and Worksl	nons	,				218
Cowsheds, Dairies ar	nd Milk					97
Ice Cream Premises						70
Foodshops and Food						487
Infectious Disease Er	nauiries	8	21001113			233
Markets	-quiiios	A COL	tra jugiy			156
Special Inspections			***			1,166
Slaughter-houses						1,249
Offensive Trades						38
Sanitary Conveniences				***		87
Common Lodging-Ho				122	***	37
Canal Boats				****		33
Theatres, Cinemas, et						21
House to house				***	10.21	207
Bakehouses					100	41
Smoke Observations			WO	***	A P.	26
Stables and Vand			***	dilla.	0	42
Enquiries re Housing					7.40	102
Well Water Enquiries	rippire	ants		1100	11.	
on acci Bilquiries	111111		20000	***	***	57

Shops Acts	*	 	 		188
Schools		 	 		48
Miscellaneous	Visits	 	 		257
				Total	7,251

SUMMARY OF SANITARY IMPROVEMENTS.

During 1931, a Circular, No. 1202A, was received from the Government, asking the Corporation, in common with other local authorities, to expedite, as far as possible, the carrying out of repairs to house property, in order to relieve unemployment in the building trades.

The successful efforts made during 1931 were continued during 1932, and local unemployment in the jobbing branch of the building trades has been maintained at a comparatively low figure. Although prices of materials and labour have dropped considerably during the last few years, the cost of house repairs is still very high, and probably not less than 60 per cent. above pre-war level.

The undermentioned tabulated list of works carried out show that very considerable expenditure has been incurred to comply with notices served. No account is taken in these lists, of works which were carried out voluntarily by owners, apart from the Corporation's requirements, and, therefore, the total expenditure in respect of repairs and re-decorations to property in the Borough must have been much higher than is indicated by the undermentioned works.

DRAINAGE.

Number of Houses and Premises re-draine	ed		53
Number of Drains repaired or amended			8
Drains or Gullies unstopped or cleansed			29
New Manholes provided			61
Existing Manholes altered or repaired			5
Intercepting Traps fixed			16
Fresh-air Inlet Shafts repaired or renewed			20
New Gully Traps fixed			125
Gully Curbs renewed or repaired			7
New Soil Pipes and/or Ventilating Shafts			37
0			2
1			1
Miscellaneous	111	111	3

WATER CLOSETS AND SANITARY FITTINGS.

New W.C. Basins fixed			93
W.C. Flushing Tanks repaired or renewed			56
W.C. Apartments lighted, repaired or vent	ilated		48
W.C. Apartments cleansed and limewashed			48
W.C. Apartments separated from Workroom	om		2
W.C. Seats renewed or repaired			10
New W.C. Apartment and Urinal		6	15
W.C. Pans cleansed			24
New Baths provided			6
New Impervious Sinks provided			22
New Lavatory Basins fixed			15
New Trapped Waste Pipes fixed			43
Existing Waste Pipes trapped or repaired			19
New Urinals constructed			4
Urinals cleansed or repaired			14
Miscellaneous			20
			20
made in second of the least production			
GENERAL REPAIRS.			
Roofs renewed			2
Roofs repaired, new fillets, soakers, etc.	1	111	69
New Gutters and Stack Pipes provided to	roofs		5
Eaves Gutters renewed or repaired	10015	***	35
Stack Pipes renewed or repaired	111	9" 810	28
Stack Pipes disconnected from drains		1.00	37
Dampness abated	in soil	m. a	51
Defective Walls repaired, re-pointed, etc.			124
Chimney Stacks rendered, rebuilt or repai	red		37
N Cl. D C .	red		2
Ventilation provided beneath floors	Since 1	0 736	23
**	dillo.	10 20	16
Staircases lighted or stairs repaired	· · · · · · · ·	Will I	31
Handrails to staircases provided or refixed	***	. Yanis	
		111100	12
Sites of houses cleansed	3.00[0]	710-d	2
Yards paved	***	***	39
Yard Paving repaired and yards cleansed		1555	
Paving of Passagement repaired			20
Paving of Passageways repaired			6
Floors of Rooms repaired			
New Floors of rooms			17

Rooms repaired, cleansed and distempered	[]	385
Larders ventilated and cleansed		4
Food Store provided		10
		10
New Cennigs		16
Premises limewashed		224
Door and Window Sills renewed or repaired		76
Door and Window Sills Tellewed of repaired		39
Doors renewed or repaired		32
Frame joints re-made		45
Door locks repaired or renewed		149
New Portable Ashbins provided		4
Accumulations of manure and refuse removed		22
Nuisance from overcrowding abated		17
Water Supply provided direct from rising main	nnly	
Use of Well-Water discontinued and M.W.B. sur	bbry	1
laid on		83
Stoves and Filegrates repaired of re-		17
Fireplace surrounds or hearths repaired		5
Flues repaired		28
Coppers repaired or renewed		1
Dilapidated Sheds demolished		2
Nuisance from animals abated	***	5
Illegal use of basement rooms discontinued	***	
Houses repainted externally		26
New boundary fences		21
New Geysers provided		3
New Hot-Water Tanks provided		2
Insanitary Houses demolished (Housing Act)	***	12
Miscellaneous	•••	46

SMOKE ABATEMENT.

The number of complaints received during 1932 in respect of alleged nuisance from smoke or grit was two. Twenty-six observations of chimneys were made.

The Borough is free from serious emanations of smoke, but occasionally dense smoke is observed for longer periods than the permitted two minutes in any consecutive thirty minutes. The owners of the offending chimneys are communicated with, either by telephone or personal visit, or both, immediately excessive smoke is observed. The engineers and stokers also are interviewed as soon as

possible in order that the cause for the smoke might be ascertained and a remedy discussed.

The printed plates, specially designed and issued by the Greater London Smoke Abatement Committee to provided in a concise and clear manner hints for stokers and engineers, have proved very useful.

The arrangement whereby those who are responsible may telephone to the office in case of temporary breakdown of steam raising plant, with consequent excessive emission of smoke, has been continued and has been appreciated.

COMMON LODGING HOUSES.

There are only two registered common lodging houses in the Borough, viz. :-

Nos. 8 and 10, Vicarage Road (Othen's)-50 beds for men only.

No. 52, Canbury Passage (Marsh's)—35 beds for men only.

As will be seen, there is no accommodation for married couples or for children in the registered lodging houses.

There are other premises in the town where lodgers are taken for short periods, but in these cases the beds are not let for one night only and there is no common room for the use of the lodgers. Buildings of this class are not subject to the Byelaws respecting Common Lodging Houses. The lodging houses are inspected frequently, and I am glad to report that the registered occupiers show willingness to comply with your Council's requirements at all times, and there is much less need for official action nowadays compared with some years ago.

Thirty-seven visits were made to the lodging houses during the year.

OFFENSIVE TRADES.

There are but three trades within the Borough which may be described legally as "Offensive" trades. They are:

Leather Tanning and Fellmongering. Rag and Bone Yards. Fish Frying.

Each of these trades require to be carried on with particular care to prevent annoyance or nuisance. It is doubtful if more than a small percentage of passers-by realize that a tannery is situated so close to the business centre of the town, so seldom can its presence be detected. No complaints have been received in respect of the tannery for several years, but one complaint was received during the year regarding each of the other trades.

There has been no change in the number of rag and bone yards in the Borough. Frequent visits are necessary to these premises to see that all possible steps are taken to prevent the occurrence of nuisances.

The odour which is usually associated with fried fish premises is often the cause for complaint, but during 1932 only one such complaint was received. When one considers the design of modern fish frying apparatus and the ease with which any escape of steam and fumes can be prevented, one may be pardoned for harbouring a suspicion that the occasional escape of the well-known odour may not be without advantage to the traders, and not altogether unintentional.

Early in 1932, permission (granted during 1931) to commence the trade of fish frying at certain premises was withdrawn as the business was not established within a reasonable time of the sanction being granted.

Three other applications for permission to commence the trade of fish frying were received, but in each case the application was refused on the ground that sufficient facilities for the trade were already in existence in the particular districts referred to.

Whilst it only applies in part to fried fish shops, mention should be made of a very satisfactory arrangement which has been introduced in the Borough for the daily removal of fish offal. The co-operation of all the fish traders was invited, so that one contractor could be engaged to collect the offal daily throughout the Borough, in lieu of the usual twice-weekly trade refuse collection. Almost all the fish traders accepted the terms offered and so far

the scheme has worked exceedingly well. The contractor brings clean bins of heavy gauge metal with flat, tight-fitting lids each evening when he removes the full ones. By this means there is no spilling of the offal, which is removed before decomposition can occur.

Thirty-eight visits were made to offensive trade premises during 1932. These visits were in addition to re-inspections after notices or warnings.

COMPLAINTS.

One hundred and seventy-nine complaints were received during the year, as follows:—

Drains and sanitary arrangements				30
Overcrowding				5
Condition of premises				57
Absence of ashbins				5
Accumulations of manure and non-co	llecti	on of h	ouse	
refuse				16
Defective rain-water pipes				1
Dampness and defective roofs, gut	ters,	etc.	h 11	18
Smoke nuisance from chimneys				2
Defective stoves and coppers				8
Rats				8
Defective service water pipe				1
Keeping of animals and fowls				4
Unpaved yards and passages				2
Nuisance from flies				2
Condition of roadway				4
Defective geyser				1
Improper manufacture of Ice Cream				1
Offensive Trade premises				2
Smells from Fish Smoke Hole				1
Infestation by crickets				1
Caravans				1
Non-removal of Fish Offal				3
Miscellaneous				6
				08

Total

179

The complaints were investigated as early as possible and, where the Corporation possessed powers to intervene, immediate steps were taken to remove the cause of the complaint.

The number of complaints during 1931 was 195.

HOUSE DRAINAGE.

Fifty-three premises were completely redrained during the year as compared with 68 during 1931. The number dealt with during 1932 was much higher than the average per annum but lower than that of the previous year, when nearly the whole of one side of a road was redrained.

Final tests are applied to all new drains after the ground has been filled in and any new plumbing work is also tested and examined at the same time.

The following list gives the situation and numbers of premises redrained during the year:—

				-
Acre Road	 	 		8
Anglesea Road	 	 		1
Cambridge Grove Road	 	 		10
Canbury Avenue	 	 	***	1
Canbury Park Road	 	 	***	2
Clifton Road	 	 		1
Gloucester Road	 	 		2
King's Road	 	 		8
Kingston Hill)	 		2
Norbiton Avenue	 	 	***	1
Richmond Road	 	 		3
St. James' Road	 	 		1
Vincent Road	 	 		13

HOUSING.

The statistical statement relating to Housing, which is set out in accordance with the directions of the Ministry of Health, is set out on pages 18, 19 and 20.

It will be seen that 144 houses were inspected and recorded under the Housing Consolidated Regulations, 1925. The majority of these houses are situate in Cambridge Road (24), Canbury Passage (46) and Fairfield Place (30).

These housing records contain, in addition to details of the structure of the houses, the requisite information regarding general conditions, tenancy, ownership, etc., and are invaluable for future reference.

Sixteen of the houses were found to be so dangerous or injurious to health as to be unfit for human habitation. Their situation, and action taken by December 31st, 1932, are shown below:—

Situation.	Number.	Action Taken.
Cambridge Road	9 houses	Demolished
Denmark Road	2 ,,	Awaiting demolition
The Bittoms	1 ,,	,, ,,
Oaklea Passage	2 ,,	",
St. James Road (part of	of house)	Vacated
Ashdown Road ,,	,,	Closing Order made

The twelve unfit houses found during the year 1931 were dealt with during 1932 as below:—

dean with during	1002 as below.	
Situation.	Number.	Action Taken.
The Bittoms	2 houses	Demolished
Acre Road	1 ,,	,,
The Bittoms	4 ,,	Vacated and "Under-
Control of the control		taking '' given by
,,	2 ,,	Demolition Order made
Oaklea Passage	1 ,,	"
The Bittoms	2 ,,	Vacated pending fur- ther action

OVERCROWDING.

The position so far as serious overcrowding is concerned may be regarded as satisfactory. It is true that considerably more cases were discovered during 1932, compared with 1931, but nevertheless the amount of overcrowding is far below the average for similar districts. This may be due to several causes, but no doubt the chief reason is the comparatively small area of the Borough and the opportunity for acquiring a really intimate knowledge of the district and its inhabitants.

The following figures are interesting	g:	POROR	
Cases on records January 1st, 1932		1	2
Cases added during 1932		10.75	32
		Total	34
Cases abated during 1932			22
Cases outstanding December 31st,	1932		12

Periodically a house-to-house visit is made in Asylum Road, which is practically composed of houses let in lodgings. This road was inspected during 1932, and accounted for no less than 17 of the 32 new cases. Nine others were discovered during housing inspections, leaving six others in various situations.

It should be noted that the above figures relate to separate families and not to houses. The number of houses affected by the 32 cases was only 24.

Housing accommodation is not yet easily obtainable by persons of small means, and accordingly statutory action to abate overcrowding is only resorted to when all other means have failed. By constantly revisiting overcrowded premises, and not accepting overcrowding as an inevitable condition, there is little doubt that this great evil can be regulated. The completeness or otherwise of the "regulation" depends, however, upon factors such as unemployment, wages, etc., all of which are outside the control of the local authority.

Among a certain class of tenant there is what one can almost describe as a hereditary "herding" instinct. They prefer to share accommodation with other families, and do not desire structurally separate tenements. This characteristic is a difficult one to understand, and most housing reformers will deny its existence. The people themselves will not openly acknowledge their preference for a communal life, but they are often reluctant to leave their old surroundings for more spacious premises, and still more often do not make a success of the change. One has no desire to be charged with pessimism, but after many years' experience I am more convinced than ever that slums will not be abolished by housing legislation alone. Education of the inhabitants of these houses is necessary to produce the desire for and the appreciation of better things.

ASH RECEPTACLES AND REFUSE COLLECTION.

An arrangement has existed for many years whereby the dust collectors make records of all premises which have defective or insufficient ashbins. Particulars of the premises are then handed on by the Borough Surveyor, and necessary action is taken to require suitable receptacles to be provided. This arrangement works very satisfactorily, and in conjunction with ordinary routine inspections, it ensures the maintenance of a high standard of ashbin accommodation.

In order to assist the Borough Surveyor in the reorganisation of the collection of refuse, the use of a standard size ashbin is recommended when notices are served. The suggested size is 30 inches by 18 inches.

INCREASE OF RENT AND MORTGAGE INTEREST ACTS.

Four applications only were received during the year from tenants for certificates under Section 2, Sub-section 2, of the above Act, compared with 5 during 1931.

The premises were subjected to a careful inspection, and a specification of any necessary repairs was prepared in each case and forwarded to the owner, together with a suitable covering letter. This informal action had the desired effect, and it was unnecessary to issue any formal certificates to any of the applicants.

Whether it is because the public are unaware of the provisions of these Acts or not it is difficult to say, but the number of applications for certificates is very small, having regard to the large number of houses subject to the Acts.

INSPECTION AND SUPERVISION OF FOOD SUPPLY.

(a) Milk Supply.

During 1932 five names were removed from the Register of Dairymen for the following causes:—

Business discontinued ... 3 Change of ownership ... 2 Ten fresh entries were added to the register, leaving a total at the end of the year of 46. There is only one cowkeeper in the Borough.

Graded Milks.

There is no licensed graded milk producer in the Borough, but no less than 26 licences for the sale of graded milk were issued during the year, compared with 20 for the year 1931. There is not a great remand for the higher grades of milk, and this fact discourages milk producers from applying for the necessary licences. It does seem somewhat paradoxical that a dairyman who desires to produce and sell the best grade of milk should be expected to pay £5 for a licence permitting him to do so, whilst another man can produce and sell an article which is simply described as "milk" without any charge whatever. must be remembered that, apart from the annual licence fee, the producer of "Certified" or "Grade A (T.T.)" milk has to pay fees for the periodical examination of his herd. It has been suggested, and there is good reason to believe it is true, that cows which have been excluded from " Certified " or " Grade A (T.T.) " herds may be found amongst the herds which produce ordinary every-day "milk."

Two other matters, which have been referred to in previous reports, remain in an unsatisfactory state. I refer to the very confusing designations by which graded milks continue to be known, and secondly, to the persistent lack of care of milk bottles. The present designations of milk have existed since 1923, and even after the lapse of 10 years it is doubtful if more than a small percentage of the public realise that Grade "A" milk is not the best milk, but is actually third on the list. Milk bottles are subjected to possible contamination very frequently, and the placing of empty bottles on footpaths outside houses at least should be strictly prohibited.

Samples of milk were taken from time to time and sent to the Clinical Research Association for bacteriological examination. Immediately an unsatisfactory result was received, the dairyman concerned was interviewed and the premises and processes were subjected to a careful inspection to ascertain the cause. Further samples were then taken to ascertain what improvement (if any) had been effected.

The highest bacteriological counts were obtained, as might be expected, from samples obtained from retailers who sell milk chiefly from churns and hand-cans. This method of retailing milk is discouraged as far as possible.

(b) Meat and Other Foods.

The number of animals slaughtered in the Borough during 1932 was 10,181, showing a slight increase of 552 over the number for 1931. This is definitely only a temporary increase, and it will be seen at the end of the present year that the number will be much lower.

The following figures show the number of animals killed in the private slaughterhouses during each of the past six years:—

1927	 	8,350
1928	 	11,093
1929	 	11,704
1930	 	11,821
1931	 	9,629
1932	 	10,181

The Meat Regulations, 1924, require notice of intended slaughter of animals to be sent to the Meat Inspector, and for carcases and organs to be retained for a prescribed period of hours in order to enable an examination of the meat to be made.

The proper use of these Regulations has permitted accurate data regarding meat inspection work to be collected.

Other food premises, such as restaurant and hotel kitchens, sausage and cooked food rooms, ice cream premises, bakehouses, are all visited from time to time and at irregular periods. The total visits to food premises during 1932 was 2,100.

During the year an attempt was made to inaugurate a scheme for the daily collection of waste bones and fats from butchers' shops in a similar manner to that which had been arranged for fish offal (see page 33). Unfortunately, the attempt did not prove successful, but further enquiries will be made at the first favourable opportunity.

The following table shows the number of slaughter notices received, the number and variety of animals referred to, etc. More than two-thirds of the total visits to slaughter-houses are made during the evenings or during week-ends. Having regard to this, it may be considered very satisfactory that practically 100 per cent. of the animals were inspected.

MEAT REGULATIONS 1924

Summary for year ended December 31st, 1933

Number			Number of Animals Slaughtered				
Notice Receive		Beasts	Pigs	Calves	Sheep	Goats	Total
778		26	6788	1132	2235		10,181
Carca	ses no	ot Examined		Percentage of Total Animals		. registr	A COURS
Pigs	Sh	пеер	Calves	Examined			
9		65	2	99*25			

ARTICLES OF FOOD CONDEMNED.

The following list shows the various amounts of food-stuffs condemned during the year. Where the action taken is stated to be "inspected and condemned" it is an indication that the articles referred to were inspected at the slaughterhouses at the time of killing. In the remaining cases a request for inspection was made by the owner. Apart from being a mere record, the list is interesting as it demonstrates the variety of causes for condemnation. Amongst those not associated with the work it is quite commonly thought that the only examination made is in order to detect the presence of Tuberculosis, but this is, of course, incorrect,

Articles of food.	Reason for cond	lemnation.	A	ction taken.
PORK.—				
20 Carcases & organs	Tuberculosis	Inspected	&	Condemned
2 Carcases & organs	Fevered	,,	,,	,,
2 Carcases & organs	Acute Peritonitis	,,	"	
121 Heads & necks	Tuberculosis	,,	"	
2 Half Heads	Abscess in Jaw	,,	"	,,
5 Pairs Lungs	Congestion	,,	"	,,
3 Pairs Lungs	Pneumonia	,,	,,	"
1 Pair Lungs	Pleurisy	,,	,,	,,
35 Plucks & 3 pairs lung		,,	"	,,
5 Plucks	Inflammation	,,	"	,,
7 Livers	Cirrhosis	,,	"	,,
5 Livers	Fatty Degeneration	n "	,,	,,
3 Livers	Necrosis	,,	"	"
1 Liver	Tuberculosis	"	"	,,
2 Hind Quarters	Tuberculosis	,,	"	,,
2 Fore Quarters	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,	,,	,,
1 Heart	Pericarditis	,,	11	"
91 lbs. of Pork	Tuberculosis	.,	"	
17 Mesenteries	Tuberculosis		"	"
18 Spleens		"		"
25lbs. Kidney	Putrefaction	Voluntaril	17 51	irrendered.
1 Liver	Putrefaction	Voidillaili	y St	irrendered.
175lbs. Liver		,,	"	"
170103. 21701	"	"	2.3	11
BOVINES.—				
5 Ox Heads & Tongue	sTuberculosis	Inspected	8, (Condemned
7 Pairs Lungs				
2 Livers	Distomatosis	11	17	"
6 Livers	Tuberculosis	"	"	"
1 Liver	Echinococcus Cyst	"	"	"
3 Mesenteries	Tuberculosis		"	"
1 Spleen		"	"	"
26 lbs. Ox Kidney	Putrefaction	Voluntarily	v su	rrendered.
7 lbs. Fat	"			
1403 lbs. Beef	"	"	"	"
57 lbs. Beef	Necrosis	,,	"	"
37 lbs. Ox Liver	Putrefaction	,,	"	,,
1 Tin Preserved Ox			"	
Tongue.	Putrefaction	.,	;;	in in goods
made viscos sur Aq	permon, was made			n s assess .
VEAL.—				
3 Carcases & organs	Tuberculosis	Inspected	& (Condemned
	Fevered	,,	22	,,
2 Pairs Lungs	Tuberculosis	,,	"	,,
4 Plucks	1)	"	11	,,
1 Liver	Abscess	,,00	"	

MUTTON .-

32 Livers 9 Pairs Lungs 77 lbs. Livers 40 lbs. Lambs' Livers 28½ lbs. Mutton 1 Carcase	Distomatosis Strongylus Rufese Putrefaction " Putrefaction	cens "	surrendered.
FISH.— 34 Boxes White Fillett 5 Boxes Haddock 1 Box Pollock 1 Box Whiting 4 Bags Whelks 2 Bags Winkles))))))))))))))))))))))))))))))))))))))))))
POULTRY.— 4 Geese 2 Turkeys	"	"	"

PRIVATE SLAUGHTERHOUSES.

On December 31st, 1932, there were five private slaughterhouses in the Borough, all of which had been in use during the year. The premises situated in Acre Road were purchased by the Corporation during the year and were not used after December 31st.

The slaughterhouses are situated as follows:-

Adjoining No. 76, Cambridge Road. No. 45, Cambridge Grove Road. No. 120, London Road. Rear of No. 34, Richmond Road. No. 90, Acre Road.

There is no alteration in the structure of the slaughterhouses to report.

It is pleasing to be able to report that the bye-law requiring all animals to be stunned by a mechanically-operated instrument previous to slaughter has been closely observed by the trade, and there have been no complaints of resultant harmful effects on the meat. After several years' experience of the use of the "humane killer" the theory advanced by those in opposition, that meat is adversely affected by the use of the gun, is completely exploded.

The spare gun kindly loaned to the Borough by the R.S.P.C.A. has been used on several occasions when guns belonging to butchers have been temporarily out of action.

One thousand, two hundred and forty-nine visits were made to slaughterhouses during the year.

FACTORIES AND WORKPLACES.

Two hundred and eighteen visits were made to factories and workplaces during 1932 as compared with 192 in 1931. Other details with respect to these premises are contained in the tables on pages 16 and 17.

Factories are subject to inspection by H.M. Inspector of Factories, but it is the duty of the Local Authority to inspect the sanitary accommodation and to see that any sanitary defects are remedied. H.M. Inspector sends notification of any defects he has discovered so that appropriate action may be taken.

For some years now a spirit of helpful co-operation has existed between H.M. Inspector for the district and your Officers. Notes are compared at convenient intervals, and overlapping is avoided.

New sanitary conveniences and baths, etc., were provided at the Gas Works during the past year. The new accommodation is a great improvement and is very much appreciated by the employees.

DISINFECTION AND INFECTIOUS DISEASE.

The amount of work in connection with disinfection was slightly more in 1932, compared with 1931.

There were 189 rooms in 158 houses sprayed and fumigated with formalin; 1,488 articles were passed through the steam disinfector.

Disinfection of premises is not only carried out after notifiable infectious disease, but also at the request of the public. In such cases a charge, sufficient to cover the cost of the work, is made.

The Infectious Motor Ambulance is constructed for the dual purpose of removing patients to Hospital and for the conveying of bedding to and from the Disinfecting Station.

Each house where infectious disease occurred was visited and enquiries were made into the history of the case. The results of the investigations were passed on to the Medical Officer of Health.

SANITARY CONDITIONS OF MUSIC HALLS, CINEMAS, ETC.

Twenty-one formal visits were made to places of public entertainment during the year. The inspections are made to ascertain the condition of dressing rooms, sanitary accommodation and other parts of the premises, such as under the stage where accumulations of rubbish are likely to be found. Visits are also made at irregular times when the premises are in use to ensure that the ventilation apparatus is not only in order but is in use.

No complaints were received during the year regarding places of entertainment, and all the premises were maintained in satisfactory condition when visited.

CANAL BOAT ACTS.

In accordance with Section 3 of the Canal Boats Act, 1884, I beg to report as follows:—

During the year 1932, 21 visits were made in connection with the Canal Boats Acts. The wharves are seldom free from barges but very few of the boats have living quarters. The boats are worked in short stages and the crews usually come ashore each night. It was found necessary to serve one notice on an owner during 1932.

SANITARY CONVENIENCES.

The conveniences attached to licensed premises in this Borough compare very favourably with similar places in all other towns I have visited. Practically all the premises now have glazed slabs or stalls, and the minimum of labour is required to keep the conveniences in clean condition. Comparatively few of the licensees have failed to keep the premises in order.

A report upon the sanitary conveniences is usually supplied to the Licensing Bench annually, and the very satisfactory conditions which now exist are due in no small measure to the support and co-operation afforded by the Bench to your Council.

RAG FLOCK ACTS, 1911 AND 1928.

There are no known work-places in the town where Rag Flock, or materials coming within the legal definition of Rag Flock, are used. No samples of material were taken for analysis.

SHOP ACTS, 1912 TO 1931.

One hundred and eighty-eight visits were made in respect of the administration of the Shops Acts.

There appears to be a general desire on the part of the shopkeepers to comply with the Acts, and but few complaints were received during the year. Advice has been given to shopkeepers respecting the various provisions of the Acts and especially with regard to the proper notices which should be exhibited in the shops regarding the halfday closing and the half-holiday for assistants.

In cases where a shop is not closed at the proper time the occupier is interviewed. This is followed up by a letter giving particulars of the closing times and a warning that any further contravention will be reported to the appropriate Committee. This procedure usually has the desired effect.

CONCLUSION.

I desire to thank you, Mr. Chairman, and the Members of the Public Health Committee and Corporation generally, for your continued consideration and support, and your other

Officers and Staffs who have afforded me assistance and information on numerous occasions.

I am, Ladies and Gentlemen,
Your obedient servant,
HAROLD T. PERRY, F.S.I.A., M.R.S.I.,
Chief Sanitary Inspector.

Grange Road,
Kingston-upon-Thames.
May, 1933.

Report of the School Medical Officer-

March, 1933.

To the Chairman and Members of the Education Committee of the Royal Borough of Kingston-upon-Thames.

MR. CHAIRMAN, LADIES AND GENTLEMEN,

I have the honour to present my Annual Report for the year 1932.

The average number of children on the school register for the year was 3,832.

Medical inspection was carried out on the same lines as before, and no objection to medical examination of a child was received from any parent.

The Scheme for Orthopædic treatment of crippled children was carried on as before, out-patients receiving treatment at the Red Cross Post, Norbiton, and in-patients at St. Vincent's Orthopædic Hospital, Pinner.

The Eye Clinic met on Wednesday afternoons during the School terms, 21 meetings in all being necessary during the year.

The Scheme for the operative treatment of tonsils and adenoids at the Kingston Victoria Hospital worked satisfactorily, 42 children receiving treatment under the Scheme.

Five half-days a week were devoted to Dental work, affording treatment of children of all ages. Remarks on the extension of this service to include children in the leaver groups, without increasing the number of dental sessions, will be found under the section of the Report dealing with the School Clinic.

Special reference is made in the body of the Report to uncleanliness with regard to the speeding up of action taken in obstinate cases.

I thank all members of the Staff of the School Medical Service for their co-operation and loyal support throughout the year.

I am, Mr. Chairman, Ladies and Gentlemen,

Your obedient servant,

E. W. MATTHEWS,

School Medical Officer.

Staff of the School Medical Service

on

31st DECEMBER, 1932.

School Medical Officer:

E. W. MATTHEWS, M.B., B.S.(LOND.), M.R.C.S., L.R.C.P., D.P.H.

Oculist:

IVOR AUBREY, M.C., M.R.C.S., L.R.C.P.

Dental Surgeon:

H. A. L. MORRIS, M.C., L.D.S., R.C.S. (ENG.).

Anæsthetist:

OLIVE G. AUBREY, B.A., M.D., B.CH.

School Nurses:

MISS A. GILL (SENIOR)	1/2 time.
Miss C. A. HOOKWAY	1/2 time.
Miss L. G. SALWAY	1/2 time.
Miss E. G. COUZENS,	1/2 time.

Miss E. G. Couzens took up her duties on January 4th, having been appointed School Nurse to fill the vacancy caused by the resignation of Miss A. Gumbleton, who left at the end of 1931.

Clerk:

Miss P. M. INGILLSON.

CO-ORDINATION.

The School Medical Officer is also Medical Officer of Health.

The School Nurses are also Health Visitors, and each carries out Maternity, Child Welfare, Infant Life Protection and School work.

Records of infants are transferred to the School Medical Service as soon as these infants attain the age of five.

The Offices of the School Medical Service, Elementary Education, and Public Health Department together with the Clinics and Open Air School are all centralised at the building in Grange Road, which makes co-ordination and co-operation between the Health Services easy and complete.

SCHOOL HYGIENE.

Bonner Hill Road School.

Internal decorations to four class rooms were carried out during the Summer vacation.

The hut formerly used for Manual Training was occupied as a class room for the Central Girls' Department upon reorganisation of the Council Schools. The roof was rendered waterproof, a central partition was erected, and an internal lining was provided as a ceiling.

Wire fencing was erected to separate the Infants' and Girls' playgrounds.

Richmond Road School.

The Infants' School was painted outside and drainage works were carried out.

St. Agatha's School.

Internal repairs and re-decorations.

St. Paul's School.

Alterations and improvements in construction were carried out resulting in better lighting and a teachers' room. The School was re-decorated internally.

School Towels.

An allowance of 3 roller towels for each 100 pupils, to be changed twice a week, was considered adequate.

Floor Cleaning.

A contract has been entered into with the Dusmo Company, the work being carried out by the Cleaners under the direction of a representative of the Company.

MEDICAL INSPECTION.

All Departments of every School are visited by the School Medical Officer each term for the purpose of carrying out Routine, Special and Re-inspections.

A full description of the methods employed at these inspections was set out in the Annual Report for 1930.

Parents are always warned beforehand as to the hour their children are to be medically examined at Routine Inspections, and during the year attended as follows:—

	No	o. of Children	No. of Pare	ents Per
		Examined.	Present.	centage.
Entrants:	Boys	201	166	83
	Girls	179	147	82
Intermediates:	Boys	209	141	68
	Girls	193	136	71
Leavers:	Boys	285	107	38
	Girls	284	134	47

In no instance did any parent object to Medical Examination of a child,

FINDINGS OF MEDICAL INSPECTION.

(a) Uncleanliness.

In my Annual Report for 1923, I set out in detail the procedure adopted on discovery by a School Nurse at her inspections that a child has an unclean head, and drew attention to the fact that in cases where legal proceedings were eventually taken under the School Attendance Bye-Laws, some three or four months elapsed between the original action by the School Nurse and the appearance of the parent before the Justices.

I drew attention to this fact in subsequent Annual Reports, since it was evident that certain parents, whose children were frequently found unclean, were aware of the existing procedure and knew quite well that they would be given warning over a long period before a decision to prosecute was reached.

They took advantage of the circumstances to keep girls at home to "mind the baby," without attempting to cleanse them until the last moment before a Committee Meeting.

This Summer the procedure has been considerably shortened by the Education Committee authorising the Chairman and Vice-Chairman to act.

The following system is now adopted:-

On discovery that a child has an unclean head, a School Nurse sends the child home with a notice to the parent calling attention to the fact with instructions for the child to report at the Clinic on the following morning.

If the verminous condition is not remedied forthwith, the child is brought before the School Medical Officer, who excludes her from School, when the Education Secretary sends a warning letter to the parent, stating that unless the child reports clean within seven days, legal proceedings will be taken for contravention of the School Attendance Bye-Laws.

This System was commenced after the Summer holidays with the result that six prosecutions were made in the early Autumn and fines were imposed in every case.

The moral effect of this action was immediately reflected in an improved standard of cleanliness among many of those children who are constantly sent home by a School Nurse.

It is only necessary to prosecute the hardened and habitual offender, and to have effect, no delay beyond a reasonable period in which to cleanse the child should be allowed. When parents realize that proceedings are instituted without delay, I anticipate there will be very few habitual offenders.

It remains a fact that many children return to School after the holidays in an unsatisfactory condition, so the School Nurses inspect every child in the Schools within the first fortnight of each term.

There is no doubt that the only way to cure verminous heads is by frequent and regular inspection by the School Nurses of every scholar in the Schools.

It is gratifying to note that there has been a very marked improvement in the standard of cleanliness during the past ten or twelve years due to the persistent and tactful work of the School Nurses in this somewhat unsavoury duty.

Parents are advised to have their girls' hair kept short during School life.

Legal proceedings were taken under the School Attendance Bye-Laws in ten cases during the year.

(b) Tonsils and Adenoids.

There were 113 children suffering from enlarged tonsils and adenoids referred for treatment during the year.

(c) Tuberculosis.

Any children suspected by the School Medical Officer are referred to the Surrey County Council Tuberculosis Officer, Dr. Cameron Renwick, for his opinion, observation and treatment, if necessary.

(d) Skin Disease.

Impetigo and ringworm of the body and scalp are the skin diseases chiefly met with among the children.

There were 16 cases of ringworm of the scalp referred

for treatment during the year.

(e) Vision.

During the year 51 children were found requiring treatment for defective vision, and 21 for squint.

(f) Dental Defects.

At his inspection the School Dentist found 2,048 children needing treatment.

MEDICAL TREATMENT.

(a) Minor Ailments.

The treatment of Minor Ailments was undertaken daily at the Clinic during School Terms, 6,015 attendances being registered during the year.

(b) Tonsils and Adenoids.

The Scheme for the operative treatment of tonsils and adenoids at the Kingston Victoria Hospital has worked satisfactorily.

Every case is examined by the School Medical Officer

after it has been discharged from Hospital.

Forty-two cases were treated under this Scheme during the year at a cost of £47 16s., towards which the parents contributed £18 12s. 6d.

(c) Skin Diseases.

The treatment of impetigo, ringworm and other skin diseases has been undertaken at the Minor Ailments Clinic.

Children suffering from ringworm of the scalp were treated by X-Rays at various London Hospitals.

(d) Vision.

Cases of defective vision are referred by the School Medical Officer to the Oculist, who has prescribed spectacles for 96 children during the year.

(e) Ear Disease and Hearing.

Minor ear defects in the cases of 20 children have been treated at the Clinic; other ear diseases and deafness were referred to private practitioners and hospitals.

(f) Dental Defects.

Of the 2,048 children requiring treatment found by the School Dentist, 923 were actually treated, 808 being rendered dentally fit before the end of the year.

Observations on dental work and the report of the School dentist are given under the paragraph on the Dental Clinic.

(g) Crippling Defects and Orthopædics.

During the year 15 individual children received electrical, massage, and other forms of treatment at the Red Cross Curative Post, Norbiton, making 341 total attendances.

The cost of the above out-patient treatment amounted to £35 9s., towards which the parents contributed £10 1s. 9d.

One case was admitted to Hospital and cost £37 19s. 5d. to which the parent contributed £7 13s. 3d.

Twenty-three physically defective children received hampers from the Treloar Childrens' Christmas Hamper Fund.

On December 23rd the distribution of the hampers was very kindly made by the Mayor, Sir Alfred Woodgate, C.B.E., J.P., at the Open Air School.

The children, who had previously been carefully selected, were most enthusiastic and delighted with the gifts.

INFECTIOUS DISEASE.

An outbreak of Measles occurred at Bonner Hill Road Infants' School in March, and as the disease became prevalent throughout the Borough, other Infant Schools were affected during April and May.

School closure was not resorted to as it is doubtful if such action is of any value in a closely populated area such as Kingston.

Much home visiting was undertaken by the School Nurses.

An outbreak of diphtheria occurred at Bonner Hill Road Infants' School in October, and was limited to six infants in one class and direct contacts of these cases. The class was closely watched and swabbed, with the result that four positive infants were isolated. The outbreak then ceased abruptly. No infant was allowed to return to School until at least two negative results were received, and they had been declared free from infection by the School Medical Officer.

The infection was extremely virulent and resulted in the death of one of the infants, and gave rise to six further cases among family contacts, one of which proved fatal.

The outbreak was definitely accounted for by the fact that an infant returned to School after a brief illness, no doctor having been summoned, which subsequently was proved to have been an attack of diphtheria.

FOLLOWING-UP.

The following-up of children suffering from defects is carried out by the School Medical Officer and School Nurses, aided in some instances by the Teachers and Attendance Officers.

The procedure adopted and the various duties of the School Nurses were set out in detail in the Annual Report for 1930.

The following table specifies some of the work carried out by the School Nurses during 1932:—

Number of children prepared for Routine Med	ical	
Inspection		1470
Number examined at Schools for uncleanliness		15216
Number of following-up home visits		780
		601
Total Number of Clinic Sessions		429

The Central Aid Society has helped in obtaining letters for hospitals, etc., in cases where the parents cannot afford to pay, and also in sending children away for convalescence to the seaside.

The National Society for Prevention of Cruelty to Children has aided in following up obstinate cases when notified by the School Medical Officer,

VACCINATION.

At Routine Medical Inspections an entry is made on the Medical Record Card of every child not exhibiting evidence of previous vaccination.

The percentage of entrant infants showing vaccination marks was 67.

SCHOOL CLINIC.

The School Clinic in Grange Road was described in detail in last years' Annual Report.

(a) Inspection Clinic.

The School Medical Officer holds his Inspection Clinic on Tuesday and Friday mornings during School terms, when he sees children referred to him by Nurses, Teachers, School Attendance Officers, etc., advising as to their treatment and disposal.

He also re-inspects children previously excluded from School by him, and also those under treatment for minor ailments.

(b) Minor Ailments Clinic.

The Clinic is open at 9.15 a.m. on week-days, when the School Nurses carry out the treatment of minor ailments under the direction of the School Medical Officer. No charge is made but a box is provided for voluntary contributions.

There were 6,015 attendances during the year.

(c) Ophthalmic Clinic.

Dr. Ivor Aubrey, the School Oculist, attends fortnightly on Wednesday afternoon during School terms to deal with cases referred to him by the School Medical Officer.

Those children who have errors of refraction attend the Clinic three times a day on the Monday and Tuesday preceding the meeting for the purpose of having atropine ointment applied by the School Nurse.

There were 392 attendances at the 21 sessions held during the year, 199 being new cases and 193 re-inspections.

Refractions numbered 107, and spectacles, were prescribed in 96 instances.

Parents are charged the cost price of spectacles, except in really necessitous cases, when the Committee is prepared to pay part or the whole cost.

Children for whom spectacles are prescribed are reinspected by the School Medical Officer when he visits the School each term.

The Head Teachers are periodically sent lists of those children who should have their glasses in constant wear

(d) Dental Clinic.

During the year five sessions per School Week were devoted to Dental Inspection and Treatment.

In all, 31 half-days were given to Inspection and 183 to Treatment.

There were 390 gas cases during the year.

By the end of the year 1931, it was found that all the arrears had been cleared off, so it was decided to extend the Service to cover all age groups, whereas up to this time routine inspection and treatment had not included those children over 12 years of age.

It was estimated that this extension could be undertaken without increasing the number of dental sessions, viz. five per School week.

This proved to be worth the attempt, since out of 968 children for whom consent to treatment was obtained actually 923 were treated during the year.

It was found that consent was given in 40% of those children referred by the School Dentist for treatment, so it must be borne in mind that should this percentage materially increase, either additional sessions will become necessary, or treatment of children in the leaver group of some Schools will be left undone.

It is hoped that neither of these courses will be found necessary, as the general improvement noted in the dental condition of the children should relatively decrease the number referred for treatment.

The system of refusing treatment to those patients whose parents consistently decline the Annual offer has in the main been adopted, with the hope that greater numbers will take advantage of the offer when parents realize that no treatment can be obtained unless they sign the consent form at or within a reasonable time after the Dentist's inspection.

One realizes that this procedure is open to criticism, but provided treatment is not refused in the case of any child in actual pain, in my opinion it is the only method by which we can educate parents to accept the Dentist's advice at his inspections at the Schools, particularly with regard to filling saveable teeth.

A demonstrator from the Dental Board visited the Schools and was most instructive, the teachers expressing their appreciation and remarking on the interest the children took in the demonstration.

The School Dentist always interests the children in what he is doing at the time of treatment, so gaining their confidence after which they are ready to spread the information and so aid in the educational campaign.

Mr. H. A. L. Morris, the School Dentist, reports as follows:—

"During the year 31 sessions were directed to Inspections at the various Schools, and 183 to treatment at the Clinic.

I stated in my report last year that the arrears had been cleared off, and the work was well in hand. In view of this, together with the decreased number of entrants it was decided to extend treatment to all the age groups, for the year, as an experiment, without increasing the number of sessions per week. I am pleased to report that it was completely successful, and a similiar programme can be carried out next year, namely, to inspect and treat where consent is obtained, children aged 5 to 14 and all the children in the Open Air School.

There was a decrease in the number of permanent teeth extracted, and I expect the extension of treatment to all age groups will further decrease the number of extractions in the course of time. We unfortunately, in common with other Clinics, still have children whose parents persistently ignore the advice to agree to treatment, and present them towards the end of their School life, with a number of unsaveable teeth. On the other hand there is a decided improvement in the condition of the mouths' generally.

A representative from the Dental Board visited various schools in the Borough and gave "talks" to the children on oral Hygiene etc., and displayed models and charts."

OPEN AIR DAY SCHOOL.

The Special School for Physically Defective and delicate children was fully described in last year's Annual Report.

No. on register December, 1931	 	43
No admitted during 1932	 	15
No. transferred to ordinary Schools	 	8
No. left School	 	5
No. on register December, 1932	 	45

It is satisfactory to note that as stated above eight children were rendered fit to return to ordinary Public Elementary Schools.

In three instances parents refused the offer to admit to the Special School, children recommended by the School Medical Officer.

A midday hot meal is provided at a charge of 4d., or less, and any financial loss has been met out of a voluntary fund raised by ladies of the Committee.

The great majority of the children stay to this meal, but there are a few who do not, which is to be regretted, since in my opinion the food and rest are important factors in the treatment of delicate children.

The children are under the supervision of the School Medical Officer, who, as a routine practice, examines them at least twice each term, and certain individual cases more frequently as circumstances require.

The fact that the school is situated at headquarters provides advantages to both Medical and Teaching Staffs, who are, therefore, so easily able to consult with regard to the care of the children.

The curriculum has been set out in consultation with the Education Secretary and Head Teacher.

Dental inspection and treatment was carried out during the year, and children needing orthopædic treatment attend the Red Cross Curative Post, Norbiton, under the visiting Orthopædic Specialist.

EMPLOYMENT OF CHILDREN.

The School Medical Officer examines all applicants and issues certificates as to their physical fitness.

During the year 49 school children over 12 years of age were issued with certificates under the Bye-laws permitting their employment on milk and paper rounds.

SCHOOL BATHS.

During the summer months 576 children from the Boys' and Girls' Departments of all the Schools attended the Corporation Baths during School hours for instruction in swimming.

GARDENING CENTRES.

Since the re-organisation of the Council Schools the Gardening Centres appear as follows:—

Richmond Road Central Boys' School at Tudor Road, Albert Road, and at Bonner Hill Road School.

St. Luke's Boys' School at the rear of St. John's School.

Open-Air School at the School.

St. Agatha's School is without a Gardening Centre.

DEFECTIVE CHILDREN.

Exceptional children are brought to the notice of the School Medical Officer by the School Nurses, Health Visitors and Attendance Officers.

The Teachers are invited to bring any children they consider defective before the School Medical Officer. If suffering from a physical defect, they are admitted to the Special Open-Air Day School if considered unsuitable to attend an ordinary Public Elementary School.

There is no Special Day School for mentally defective

Children.

There are special classes at Bonner Hill Road Infants' School, where instruction is based upon the Montessori System, at the Junior Mixed, and Central Girls' and also at Richmond Road Central Boys' School.

Very backward and feeble minded children in the Borough are transferred to these special classes on the re-

commendation of the School Medical Officer.

There is one feeble minded child at a Certified School

for Mentally Defective Children.

There are two deaf children at Certified Schools for the Deaf, and one under the age of seven at a Public Elementary School.

SUMMER CAMP.

St. Peter's Girls' School.

The Head Teacher, Miss A. Thompson, and the Assistants were able to raise funds to take a party of girls to Dovercourt for a week, June 17th to 24th.

Prior to departure all the girls were examined by the

School Medical Officer.

The party consisted of 27 girls, 6 of whom were taken for the holiday entirely free of cost, while 13 paid in full,

and 8 in part.

Similar Excursions have been made every year since 1922, with the exception of last year, and I think Miss Thompson is to be congratulated upon her effort which entails much work and responsibility, and is so beneficial to the Children.

It seems unlikely that the undertaking will be repeated in the future.

STATISTICAL TABLES.

TABLE 1.

RETURN OF MEDICAL INSPECTIONS.

A.—ROUTINE MEDICAL INSPECTIONS.

Number of Code Group	p Insp	pections	-		
Entrants			*****		380
Second Age Group				*****	402
Third Age Group	******	*****			569
		Tota			1,351
Number of other Routin	ne Ins	pection	S		119

B.—OTHER INSPECTIONS.

	Special Inspections Re-Inspections			******	1,208 5,996
	SCHOOL	Total	*****		7,204

TABLE II.

	THE YEAR ENDED 31St DE	2012	E INSPEC.		L INSPEC.
		No. of	Defects.	No. of	Defects.
Def	ECT OR DISEASE	Requiring Treatment.	Requiring to be kept under ob- servation, but not requiring Treatment.	Requiring Treatment.	Requiring to be kept under observation but not requiring Treatment.
Malnutrition		-	- 1	-	-
	(Ringworm, Scalp	-	-	16	-
	Body	-	-	15	_
Skin	Scabies	3		7	2
	Impetigo	4		118	24
	Other diseases (non Th)		1	197	24
	Blepharitis	2		6	
	Conjunctivitis Keratitis			15	_
Eye .	Corneal Opacities	1	_	_	
Lyc	Defect, vision exc. Squint	39	10	12	
	Squint	15	_	6	_
	Other Conditions	4	-	34	_
	(Defective Hearing	4	-	8	-
Ear	Otitis Media	1	-	8	-
	Other Ear Diseases	3	-	31	T and a
	(Enlarged Tonsils only	38	7	21	-
Nose and	Adenoids only	2	-	5	-
Throat	Enlarged Tonsils		100000		
	and Adenoids		001-011	21	_
Enlaured Con	Other Conditions	1		72	1
Defective Spe	vical Glands (non Tb)	16	5	22	Man M
	(Heart Disease—Organic	5 3	1	3 2	
Heart and	Functional	1	2	1	
Circulation	Anæmia	3	-		
T	(Bronchitis	3	1	9	
Lungs	Other non Tb. Diseases	6	_	8	_
	(Pulmonary-Definite	-	-		
	Suspected	-	2	1	-
	Non-Pulmonary-Glands	2	-	_	_
Tuberculosis	Spine	_	-	-	1
a doct culosis	Hip		-	-	-
	Other Bones & Joints	-		200	-
	Skin	1			-
	Other Forms	-	1	-	-
Nervous	Epilepsy	1	I I STEEL	2	-
System	Chorea Other Conditions	-		1	-
	(D:-1-4-	4	2	2	1
Deformities	Spinal Curvature	5	2	1	
Delotimities	Other Forms	8	1	5	
Other Defects	and Diseases	49	12	207	1
	cleanliness and Dental			207	
	Diseases)				

TABLE II .- continued.

B. Number of Individual Children Found at Routine Medical Inspection to Require Treatment (excluding Uncleanliness and Dental Diseases).

		NUMBER OF CHILDREN.		Percentage of children found to require Treatment.	
GROUP.		Inspected.	Found to Require Treatment,		
Code Groups—Entrants		380	65	17.1	
Second Age Group		402	40	9.9	
Third Age Group	225	569	52	9.1	
Total Code Groups		1351	157	11.6	
Other Routine Inspections		119	22	18.5	

TABLE III.

RETURN OF ALL EXCEPTIONAL CHILDREN IN THE AREA

-		Total Company of the	Boys.	Girls.	Total
any combination	n of Total Blindness.	g types of Multiple Defect, i.e., Total Deafness, Mental Defect, ng or Heart Disease		-	1000
Blind (including partially blind) (ii.) Suitable for traing in a Sch		At Certified Schools for the Blind At Public Elementary Schools At other Institutions At no School or Institution		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	(ii.) Suitable for train- ing in a School for the partially	At Certified Schools for the Blind or partially blind At Public Elementary Schools At other Institutions At no School or Institution			
Deaf (including deaf and dumb	(i.) Suitable for training in a School for the totally deaf or deaf and dumb.	At Certified Schools for the Deaf At Public Elementary Schools At other Institutions At no School or Institution		1 	1 —
and partially deaf)	(ii.) Suitable for training in a School for the partially deaf.	At Certified Schools for the Deaf or partially Deaf At Public Elementary Schools At other Institutions At no School or Institution			
Mentally Defective	Feebleminded	At Certified Schools for Mentally Defective Children At Public Elementary Schools At other Institutions At no School or Institution	- 14 -	9 -	23 —

TABLE III.—Continued.

-	ST o Hissil	The state of the s	Boys.	Girls.	Total
Mentally Defective	Notified to the Local Mental Deficiency Authority during the year.		1	1	2
Epileptics	Suffering from severe epilepsy	At Certified Schools for Epileptics At Certified Residential Open Air Schools At Certified Day Open Air Schools At Public Elementary Schools At other Institutions At no School or Institution	1 1 1 11 11		_ _ _ _
	Suffering from epi- lepsy which is not severe.	At Public Elementary Schools At no School or Institution	7	3	10
	Active pulmonary tuberculosis (including pleura and intratheracic glands).	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board At Certified Residential Open Air Schools At Certified Day Open Air Schools At Public Elementary Schools At other Institutions At no School or Institution	11111		
Physically Defective	Quiescent or arrested pulmonary tuber- culosis (including pleura and in- trathoracic glands	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board At Certified Residential Open Air Schools At Certified Day Open Air Schools At Public Elementary Schools At other Institutions At no School or Institution			_ _ 3 4 _
	Tuberculosis of the peripheral glands	At Sanitoria or Sanatorium Schools approved by the Ministry of Health or the Board			- 3 4 1

TABLE III.—Continued

_	-	-	Boys.	Girls.	Total
	Abdominal tuberculosis.	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board At Certified Residential Open Air Schools At Certified Day Open Air Schools At Public Elementary Schools At other Institutions At no School or Institution			
	Tuberculosis of bones and joints (not in- cluding deformities due to old tuber- culosis).				==
Physically Defective continued	Tuberculosis of other organs (skin, etc.).	At Sanatoria or Hospital Schools approved by the Ministry of Health or the Board At Public Elementary Schools At other Institutions At no School or Institution			
	Delicate children (i.e., all children (except those included in other groups) whose general health renders it desirable that they should be specially selected for admission to an Open Air School.	At Certified Residential Cripple Schools At Certified Day Cripple Schools At Certified Residential Open Air Schools At Certified Day Open Air Schools At Public Elementary Schools At other Institutions At no School or Institution	- - - 17 6 - -	- - - 12 7 -	
	Crippled Children (other than those with active tuber-culous disease), who are suffering from a degree of crippling sufficiently severe to interfere materially with a child's normal mode of life.	At Certified Residential Cripple Schools At Certified Day Cripple Schools At Certified Residential Open Air Schools At Certified Residential Open Air Schools At Certified Day Open Air Schools At Public Elementary Schools At other Institutions At no School or Institution	- - - - 6 3 -		- - - 9 7 -
	Children with heart disease, i.e., children whose defect is so severe as to necessitate the provision of educational facilities other than those of the public elementary school.	At Certified Hospital Schools At Certified Residential Cripple Schools At Certified Day Cripple Schools At Certified Residential Open Air Schools At Certified Day Open Air Schools At Public Elementary Schools At other Institutions At no School or Institution	- - - - -	- - - - 3 - -	- - - - 4 -

TABLE IV.

RETURN OF DEFECTS TREATED DURING THE YEAR ENDED 31st DECEMBER, 1932.

TREATMENT TABLE

GROUP I.—MINOR AILMENTS (excluding Uncleanliness, for which see Group V.)

	Number under tre	of Defects trea	the year
Disease or Defect,	Under the Authority's Scheme.	Otherwise.	Total
Skin-Ringworm, Scalp	9	7	16
Ringworm, Body	13	2	15
Scabies	8	4	12
Impetigo	118	_	118
Other Skin Disease	172	6	178
Minor Eye Defects—(External and other, but excluding cases			
falling in Group II.)	22	12	34
Minor Ear Defects	20	9	29
Miscellaneous—e.g., minor injuries, bruises, sores, chilblains, etc.	143	19	162
Total	505	59	564

GROUP II.—DEFECTIVE VISION AND SQUINT (excluding minor Eye Defects treated as Minor Ailments - Group I.).

		No. of Defects deal	t with.	
Defect or Disease.	Under the Authority's Scheme,	Submitted to refraction by private practitioner or at hospital, apart from the Authority's Scheme.	Otherwise.	Total
Errors of refraction (i	n-			
	107	8	5	120
Other Defect or Disease				
the Eyes (exclud				
those recorded in Gro	oup I.)10	2	old Wax	12
		diss_nasqu	mas <u>1</u> .	
Total	117	10	5	132
Total number of childre	en for who	om spectacles we	ere presc	ribed
(a) Under the Au				96
(b) Otherwise				8
The Assessment of the Control of the				
Total number of childr	en who ol	btained or recei	ved spect	tacles
(a) Under the At	ithority's	Scheme		96
(b) Otherwise				- 8

GR	OUP III.—TREATMENT OF DEFECTS OF NO	SE AND TH	ROAT
	Number of Defects.		
1	Received operative treatment	0.5	
	Under the Authority's scheme, in Clinic Hospital	- 10	42
	By Private Practitioner or Hospital apar	t	72
	from the Authority's scheme		38
			_
	Received other forms of treatment		80
	Received other forms of treatment		27
	Total number treated		107
(3)	GROUP IV. DENTAL DEFECTS		
(1)	Number of Children who were:—		
Age	(a) Inspected by the Dentist: d 5 6 7 8 9 10 11 12	13 1	
	138 334 329 380 436 424 458 547	348 11	9
			3513
	Specials	• 1	21
	Ge	and Total	2524
	OI.	and Total	3334
	(b) Found to require treatment		2429
	(c) Actually treated		923
(2)	Half-days devoted to:		
	Inspection		31
	rreatment		183
		Total	214
(3)	Attendances made by children for treatm	ent	2121
(4)	Fillings:—	ient	2131
	Permanent teeth		1091
	Temporary teeth	onionlo	120
		712 4 7	
		Total	1211
(5)	Extractions: -		ends
	Permanent teeth		219
	Temporary teeth		
		m . 1	
		Total	2014
(6)	Administrations of general anæsthetics for	extraction	18 300
(7)	Other operations:	1	390
	Permanent teeth	robeit.	227
	Temporary teeth		203
		Total	1 420
		rota	1 430

GROUP	V.—Uncleanliness	AND	VERMINOUS	Conditions
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(i.)	Average number of visits per school made during the year by the School Nurses	14
(ii.)	Total number of examinations of children in the schools by School Nurses	15,261
(iii.)	Number of individual children found unclean	972
(1v.)	Number of children cleansed under arrangements made by the Local Education Authority	_
(v.)	Number of cases in which legal proceedings were taken:—	
	(a) Under the Education Act, 1921	_
	(b) Under School Attendance Bye-Laws	10

